

CHAPTER 38: RESIDENTIAL OPTIONS WAIVER

SECTION 38.9: REIMBURSEMENT

REIMBURSEMENT

Providers of Residential Options Waiver (ROW) services must utilize the Health Insurance Portability and Accountability Act (HIPAA) compliant billing procedure code and modifier, when applicable. Refer to Appendix E for information about procedure code, unit of service and current reimbursement rates.

The claim submission date cannot precede the date the service was rendered.

All claims for ROW services shall be filed by electronic claims submission 837P or on the CMS 1500 claim form.

Electronic Visit Verification

An Electronic Visit Verification (EVV) system has been implemented for some ROW services. The following services are required to be electronically clocked in/out of the LaSRS® system. Providers who have an existing EVV program that has been approved by the Office of Citizens with Developmental Disabilities (OCDD) and Bureau of Health Services Financing will be exempted from using the LaSRS® system for these services.

Providers who fail to use an approved EVV system for services may be subject to payment hold and/or denial of reimbursement.

<u>Services in LaSRS® for Electronic Clock In/Out</u>
<u>Day Habilitation Services (all services)</u>
Prevocational Services (all services)
<u>Supported Employment (all services)</u>
<u>Respite Care Services- Out of Home</u>
<u>Transportation for Day Habilitation and Supported Employment</u>
<u>Community Living Support (all services)</u>
<u>Professional Services - Physical Therapy</u>
Nursing Services
Adult Day Health Care Center Based Services (ADHC)