





Consumer Directed Attendant Care User Guide 2021



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Iowa Total Care: Guide for Consumer Directed Attendant Care and Consumer Choice Option Providers

What is Consumer Directed Attendant Care (CDAC)?

Consumer Directed Attendant Care (CDAC) allows members to choose their own provider to assist them with personal cares, housekeeping, and other tasks so they may remain living independently in the community.

Iowa Total Care provides coverage for CDAC services for members who are eligible for one of the following Home- and Community-Based Services (HCBS) Waivers:

- AIDS/HIV Waiver
- Brain Injury Waiver
- Elderly Waiver
- Health and Disability Waiver
- Intellectual Disability Waiver
- Physical Disability Waiver

Information on HCBS Waivers may be found on the Iowa Department of Human Services (DHS) website.

CDAC services may include skilled and unskilled services that require direct, "hands on" support. Certain tasks are not covered under CDAC, including but not limited to, supervision, parenting, wait times, and costs associated with those services. The following are examples of eligible skilled and unskilled CDAC services:

SKILLED SERVICES*

MonitoringIntravenous TherapyParenteral InjectionsMedicationsTube FeedingsTherapeutic DietsCatheter CareColostomy CareRecording Vital Signs

Post-Surgical Nursing Care

UNSKILLED SERVICES

Housekeeping Meal Preparation Shopping Running Errands Handling Money Dressing

Communicating with Others Bathing Getting in/out of bed

Scheduling Appointments

^{*}A licensed nurse or therapist under the direction of a physician must supervise skilled services.

Who Can Be a CDAC provider?

Members have a right to select the individual who provides their CDAC services. If a member elects to hire an individual to provide their care, that person must enroll as a provider with the lowa Medicaid Enterprise (IME) and be deemed as a provider with lowa Total Care. To provide unskilled services, a CDAC provider may be a family member, friend, or neighbor, as long as they are 18 years of age and pass a criminal and abuse background check. They must also have the experience and training necessary to perform the services outlined in the member's service plan. A spouse or parent/step-parent of a minor are not eligible to be CDAC providers for the member. If a CDAC provider provides a skilled service, a licensed nurse or therapist under the direction of a physician must supervise.

BECOMING AN INDIVIDUAL CDAC PROVIDER FOR AN IOWA TOTAL CARE MEMBER

Enrolling with IME

An individual interested in being a CDAC provider must complete the process to enroll with the IME and be deemed a provider with lowa Total Care. Once a CDAC provider is enrolled with the IME, they will be assigned a National Provider identification number (NPI). To enroll with the IME, the following IME process must be followed and forms completed:

- Contact the Iowa Medicaid Enterprises (IME) Provider Services to request the enrollment forms to apply to be a CDAC provider. The forms can also be accessed from the IME website.
 - o IME Provider Services Phone Number: 1-800-338-7909 option 2 or 515-256-4609 option 2
 - IME website link: https://dhs.iowa.gov/ime/Providers/enrollment/WaiverEnrollment
 - o Required forms to submit to the IME include:
 - Form 470-2917 HCBS Waiver Provider Application-section I & II (Send a copy of this form to lowa Total Care)
 - IRS Form W9 (Send a copy of this form to Iowa Total Care)
 - Form 470-2965 Provider Agreement
 - Form 470-4202 Electronic Funds Transfer
 - Form 470-4612 Individual CDAC Disclosure
 - Form 470-4457 Atypical Provider Declaration
 - Form 470-4227 Record Check Consent
 - Proof of age copy of driver's license, birth certificate, state issued ID, passport
 - Complete all forms and mail to the IME, along with proof of age to:

Iowa Medicaid Enterprise

Provider Services

PO Box 36450

Des Moines, IA 50315

IMEProviderEnrollment@dhs.state.ia.us

When submitting the above forms to the IME, the individual should also begin the process of becoming a provider with Iowa Total Care.

BECOMING AN APPROVED PROVIDER WITH ITC

When submitting the above forms to the IME, the individual should also begin the process of becoming a deemed provider with Iowa Total Care.

 Submit a copy of the IME form 470-2917 HCBS Waiver Provider Application and IRS Form W9 to Iowa Total Care (ITC) Rebecca Timmerman by fax, email or mail. These forms can also be accessed on the Iowa Total Care website at: https://www.iowatotalcare.com/providers.html.

o Fax: 1-833-208-1397

Email: NetworkManagement@lowaTotalCare.com

Mail: Iowa Total Care

Attn: Network Contracting/Attn: Becky Timmerman

1080 Jordan Creek Parkway West Des Moines, IA 50266

A copy of the IME form 470-2917 HCBS Waiver Provider Application and IRS Form W9 can be accessed on the Iowa Total Care (ITC) website at:

https://www.iowatotalcare.com/providers/contracting---credentialing/contracting---credentialing-forms.html.

Completed forms can be emailed to NetworkManagement@lowaTotalCare.com or Faxed to 833.208.1397.

If the enrolled CDAC has a change of address, please contact IME at 800-338-7909, submit a provider change form, and updated W-9 to ITC. The change form and W-9 can be found on the same webpage as stated above. Please submit using the same email or Fax listed above.

CareBridge Electronic Visit Verification (EVV) Training & Payment

After the required forms have been submitted to the IME and Iowa Total Care, the individual should begin training on how to use the CareBridge Electronic Visit Verification (EVV) system. EVV is used to verify that CDAC services were completed in the member's home and to document what tasks were completed during the visit. The CareBridge EVV system also submits claims to Iowa Total Care on behalf of the provider when successful visits are completed. To complete training on how to use the EVV system, the individual needs to contact CareBridge to sign up for training.

- Contact CareBridge to sign up for Electronic Visit Verification (EVV) training. Training should be completed when you apply to be a CDAC provider with the IME and Iowa Total Care.
 - o CareBridge Phone Number: 1-844-343-3653
 - o Email: IAEVV@CareBridgeHealth.com
 - Training website link: https://www.CareBridgehealth.com/trainingiaevv

When you receive your letter from IME with your NPI number, you should communicate with Iowa Total Care that they are enrolled with the IME.

- Notify the member's ITC waiver case manager when you become an IME enrolled provider and give them your NPI.
- Contact Rebecca Timmerman, ITC Network Management, to become an activated ITC provider.

o Phone number: 515-393-9096

o Email: rebecca.timmerman@iowatotalcare.com

The waiver case manager will set up a meeting with the member and CDAC provider to complete the member's Person Centered Service Plan and the CDAC Agreement form.

- The waiver case manager will submit the CDAC Agreement form and Person Centered Service Plan for review by the Iowa Total Care Utilization Management department.
- Utilization Management will review the member assessment to verify the services are needed.
- When services are approved, an authorization will be completed and sent to CareBridge.
- The waiver case manager will send the member and CDAC provider a copy of the Person Centered Service Plan and CDAC Agreement.
- After being notified of CDAC approval from the waiver case manager, the provider should contact CareBridge to receive their Provider Identification Number (this is different than the NPI). This number will be used to log into CareBridge system.
 - o CareBridge Phone Number: 1-844-343-3653
 - o Provider request provider login credentials. http://evv.carebridgehealth.com/loginrequest
 - Copy link and paste into browser.
- When the provider receives their CareBridge PIN, they can begin to provide services to the member.

CDAC SERVICES UNDER CONSUMER CHOICES OPTION

Members may choose to use the Consumer Choices Option (CCO) to receive CDAC services, which allows a qualified individual to become an employee of the member instead of an IME enrolled and Iowa Total Care approved provider.

Under this option, the member is the employer and hires the provider. The waiver case manager submits a budget to an Independent Support Broker that is based on the member's Person Centered Service Plan. The Independent Support Broker works with the member and employee to ensure all Consumer Choices Option forms are completed and approved services are part of the budget. The employee can complete the same CDAC services as a Medicaid CDAC provider under this option.

The CCO Consumer Directed Attendant Care employee will complete their visit documentation in the CareBridge EVV system. However, claims will be submitted to Veridian Fiscal Solutions, instead of Iowa Total Care. Veridian Fiscal Solutions manages the processing of timesheets, paying employees and employer withholding on behalf of the member.

Individuals delivering services to a member that is participating in the Consumer Choices Option can contact lowa Total Care Provider Services at 833-404-1061 and Veridian Fiscal Solutions at 866-226-4692 for additional details on program requirements.

Providing CDAC Services to an Iowa Total Care Member

When a member is approved to receive home and community-based services (HCBS) under a waiver, a case manager is assigned to develop a Person Centered Service Plan with the member and oversee the services. The case manager ensures the CDAC provider is part of the member's care team and has the appropriate training needed to provide services for the member. The Person Centered Service Plan describes the types of care and services required for the member to live independently in their home.

A CDAC agreement is completed in a collaboration between the member, provider and case manager. The CDAC agreement is part of the member's Person Centered Service Plan and must be approved by Iowa Total Care prior to beginning services. This agreement needs to be completed at least annually or whenever there is a change in the member's needs.

While providing services, it is important for the CDAC provider to keep accurate records to show that the care the member received was appropriate. Federal and State rules require that an Electronic Visit Verification (EVV) system be used by all CDAC providers. Iowa Total Care contracts with the CareBridge for EVV. Providers use this system to meet all required components for Medicaid service records. Billing from CareBridge will automatically be submitted to Iowa Total Care, as long as there are not any pre-billing errors that need to be corrected in the visit documentation.

Documentation of services must include certain information to be considered complete.

- The date of service
- The time of service, including AM/PM
- Location where the service was provided
- Tasks completed during service provision (Ex. Got member out of bed and dressed, made breakfast)
- Observed changes with the member
- Member response to services

Daily service records must be kept by the CDAC provider for a minimum of five years, as records may be audited at any time by the federal government, State government, or Iowa Total Care. If an audit finds records were not kept for the minimum of five years, the provider may have to repay Medicaid.

Iowa Total Care Members with a Client Participation

Some members may pay for portion of their waiver services, which is known as client participation. The Department of Human Services will notify the member if Client Participation applies when they verify financial eligibility for Medicaid. The Iowa Total Care case manager will assist the member with deciding which service(s) will have client participation applied. The provider must bill the member for the services they provided that are covered under client participation. A claim will also be submitted to Iowa Total Care through the CareBridge system. This claim will not be paid but will be used for tracking the member's compliance with meeting their Client Participation.

If a provider is considering discontinuing services due to a member's inability to pay the client participation portion, they must notify Iowa Total Care by calling their Provider Services line at 833-404-1061.

CareBridge Claims Submission

Claims are automatically generated from the visit documentation the provider completes in the CareBridge EVV system. Claims will be submitted to Iowa Total Care from CareBridge on a weekly basis. If there are any errors in the documentation, a claim will not be submitted until it is fixed.

- Questions on using the EVV system should be directed to CareBridge at 1-844-343-3653.
- Questions on approval for services or pre-billing errors should be directed to the case manager.
- Questions on claim payments should be directed to lowa Total Care Provider Services at 833-404-1061.

CDAC provider claims will be finalized as paid or denied based on the following timeframes:

- 90% within 30 Calendar Days of receipt
- 95% within 45 Calendar Days of receipt
- 99% within 90 Calendar Days of receipt

Payspan is an electronic transfer that enables claim payments to be directly deposited into a provider's bank account instead of mailed. It is recommended to use Payspan for direct deposit, as it is a faster way to receive your payment.

- You may register for Payspan on the website at: https://www.payspanhealth.com
 - o Call Payspan for a registration code at 1-877-331-7154, choose option 1.
 - o You will need your NPI and Tax ID Number (TIN).
- For questions and assistance, call lowa Total Care Provider Services at 1-833-404-1061.

CLAIM ADJUSTMENTS

If an error is made on a claim form at the time of submission, the claim may be corrected and resubmitted by completing and returning the Claim Dispute form located at https://www.iowatotalcare.com/providers/resources/forms-resources.html.

CLAIM DISPUTES

If a CDAC provider believes a claim was processed incorrectly, the provider can file a claim payment dispute by submitting a Claim Dispute form. The request must be submitted within 180 calendar days from the date of EOP (Explanation of Payment) or PRA (Provider Remittance Advice).

Iowa Total Care will work to have our review completed and a determination issued within 30 days from receipt of all information. Claim disputes should be mailed to:

Iowa Total Care
Attn: Claim Disputes
P.O. Box 8030
Farmington, MO 63640-0830

If the Claim Reconsideration does not result in payment of the claim, the provider can file an Appeal as the second step for payment consideration. Please refer to the ITC Billing Manual for details and timings associated with the Appeal process.

Providers can access the Provider Manual on the Iowa Total Care web site.

Iowa Total Care is here to support you in your efforts to serve our members. If you need additional assistance, please contact Provider Services at: 1-833-404-1061, Monday through Friday, from 7:30 a.m. to 6:00 p.m.



1080 Jordan Creek Parkway Suite 100 South West Des Moines, IA 50266

1-833-404-1061

IowaTotalCare.com