



Consumer Directed Attendant Care

User Guide 2019



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Iowa Total Care: Guide For Consumer Directed Attendant Care Providers And Consumer Choice Options

What is Consumer Directed Attendant Care (CDAC)?

Consumer Directed Attendant Care (CDAC) allows eligible members to obtain in-home assistance with personal care and activities of daily living (ADLs) so they may maintain or increase their independence 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

More information on HCBS Waivers may be found on the **Iowa Department of Human Services (DHS)** web site.

CDAC Services may include skilled and unskilled services related to activities of daily living, and requires 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*

Monitoring Medications

Catheter Care

Post-Surgical Nursing Care

Intravenous Therapy

Tube Feedings

Colostomy Care

Parenteral Injections

Therapeutic Diets

Recording Vital Signs

UNSKILLED SERVICES

Housekeeping

Running Errands

Communicating with Others

Going to the Doctor

Meal Preparation

Handling Money

Scheduling Appointments

Bathing

Shopping

Dressing

Getting in/out of bed

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

Who Can Be a CDAC provider?

Members have a right to select the individual or agency who provides their CDAC services. If a member elects an individual to provide care, they must be at least 18 years of age. They may be a family member, friend, or neighbor, as long as the individual is willing to enroll as a provider with the Iowa Medicaid Enterprise (IME), contract and credential with Iowa Total Care, and has the experience and training necessary to perform the services outlined in the member's service plan. A CDAC provider must also pass a background check prior to beginning care for the member. A spouse or parent/step-parent of a minor are not eligible to be CDAC providers for the member.

BECOMING A CDAC PROVIDER FOR AN IOWA TOTAL CARE MEMBER

Any individual or agency interested in providing CDAC services must first enroll with the IME. Once a CDAC provider is enrolled with the IME, if they have not registered for a National Provider ID (NPI), an atypical NPI will be issued. The CDAC provider must use this number to bill for services.

To enroll with the IME, an individual must complete the following IME forms, which may be accessed on the DHS web site.

- Individual CDAC Disclosure
- Provider Agreement Form
- W-9 Form (IRS Tax Form)
- Record Check Consent
- Atypical Provider Declaration (when applicable)
- Electronic Funds Transfer

Completed forms may be mailed to the IME at:

IME Provider Enrollment
PO Box 36450
Des Moines, Iowa 50315
IMEProviderEnrollment@dhs.state.ia.us

For additional assistance on becoming an enrolled CDAC provider, contact the IME at 800-338-7909.

Once the enrollment process is completed with IME, an individual or agency must be credentialed and contracted with Iowa Total Care. While a contract will be required, Iowa Total Care will offer a six-month period of "deemed credentialing," from _____ to for all individual CDAC providers enrolled with the IME. Deemed credentialing means that providers who are enrolled with the IME will be treated as in-network providers with Iowa Total Care. Providers who choose not to complete the contracting and credentialing process by the end of the six-month period will be terminated from the Iowa Total Care provider network.

The following information must be submitted to Iowa Total Care prior to providing services to members in order to be paid for services:

- Iowa Total Care Medicaid HCBS Waiver Provider Application
- Request to Contract for Services
- W-9 Tax ID Form

The above forms may be accessed on the Iowa Total Care website at:

<https://www.iowatotalcare.com/providers.html>.

Providing CDAC Services to an Iowa Total Care Member

When a member is approved to receive services under an HCBS Waiver, a Case Manager is assigned to oversee their care plan. To provide CDAC services, the Case Manager ensures the CDAC provider has the appropriate training needed to provide services and is included in the member's care plan, which describes the types of care required for the member to receive services in their home.

A CDAC agreement must also be completed and approved by the Case Manager and the member prior to beginning services. This agreement must be updated and approved at least annually and as often as necessary to ensure services meet the member's needs.

While providing services, it is important for the CDAC provider to keep accurate records that will help them bill for the services provided and show that the care the member received was appropriate. Federal and State rules require records to be complete and readable. The records must include the following:

- The date services were performed (MM/DD/YY)
- The time of service (including AM/PM)
- The services provided (Example- helped (member) get out of bed and dressed for the day, assisted with making breakfast)

CDAC provider must keep these records using the Consumer Directed Attendant Care Daily Service Record, which may be accessed and printed from the DHS web site [here](#).

It is important that the CDAC provider's claim form and daily service records match in order to support payment for the claim. Daily service records must be 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.

Serving Iowa Total Care Members with assigned Client Participation

Some members pay for a portion of their CDAC services, which is known as Client Participation. IME will mail the member and the CDAC provider information on the Client Participation amount owed by the member. Iowa Total Care will deduct the client participation amount owed by the member from the first claim received each month, and any claims thereafter until the total of the member's client participation amount is met.

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.

Billing CDAC Services to Iowa Total Care

Agency CDAC providers may submit claims to Iowa Total Care electronically and individual CDAC providers must submit claims on paper utilizing the Targeted Medical Care Claim form, which may be accessed on the

Electronic Claims Submission

Agency CDAC providers are encouraged to participate in Iowa Total Care's electronic claims/encounter filing program. Providers that bill electronically must submit claims within 180 days of the date of service. For additional detail on electronic billing requirements, please review the provider billing manual, located at www.iowatotalcare.com For questions or more information on electronic filing, contact:

Iowa Total Care

c/o Centene EDI Department
1-800-225-2573, extension 25525
Or by e-mail at EDIBA@centene.com

PAPER CLAIMS SUBMISSION

Paper claims may be submitted to Iowa Total Care utilizing the Targeted Medical Care Health Insurance Claim Form 470-2486 claim form and mailing it to the following address:

Iowa Total Care

Attn: Claims
PO Box 8030
Farmington MO 63640

For individual CDAC providers, claim form types other than the Targeted Medical Care Health Insurance Claim Form 470-2486 will be rejected and returned to the provider, which will delay payment.

CLAIM PAYMENT

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

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 RECONSIDERATION

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: 833-404-1061 Monday through Friday from 7:30 am- 6:00 pm.

CDAC SERVICES UNDER THE CONSUMER CHOICES OPTION

Certain members may choose to participate in the Consumer Choices Option, which is a program that allows members to manage their care by working closely with a Case Manager, independent support broker, and the CDAC provider. A care plan is established that outlines the services to be delivered, along with a budget for service payment.

Under this program, the member is considered an Employer of Record and hires an independent CDAC provider. The independent support broker will work with the member and CDAC provider to ensure all Consumer Choices Option required forms are completed and services are provided according to the care plan. Iowa Total Care has partnered with Veridian Fiscal Solutions to serve as the independent support broker to manage the processing and payment of services to the CDAC provider. The CDAC provider will submit billing forms directly to Veridian for payment.

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

Agency providers may contract directly with Iowa Total Care and would not need to work with Veridian Fiscal Solutions for service billing and payment.



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

IowaTotalCare.com