

INSTRUCTIONS FOR COMPLETING IRA RES HAB DAILY CHECKLIST

AGENCY = Enter the name of the Agency providing the IRA Res Hab service.

CONSUMER NAME = Enter the name of the consumer who is receiving the IRA Res Hab service.

MEDICAID CIN NUMBER = Enter the consumers Medicaid client identification number (CIN). (e.g., AA12345B)

MONTH / YEAR OF SERVICE DELIVERY = Enter the month and year in which the IRA Res Hab service(s) was provided. (e.g., 10/02)

IRA ADDRESS = Enter the address of the IRA residence where the service was provided.

STAFF SERVICE OR ACTION = List key individualized services or actions by staff drawn from the Residential Habilitation Plan.

STAFF INITIALS ON THE DATE = For each day the described service or action is provided, the staff person providing the service or action should place his/her initials in the box corresponding to the day of the month the service was provided. (e.g., the service is provided on the 4th, 5th, 6th, 12th, 13th, 21st, 25th and 28th day of a given month. In the box for each one of those days, the staff member providing the service should place his/her initials to verify that the service or action was provided.)

KEY FOR INITIALS CODE = Each staff person who provided and initialed a service or action to the consumer during the month *must* be identified in the Initials' Key.

- **Initials** = The *initials* of the staff member providing a service or action during the month
- **Staff name** = The corresponding *name* of the staff member providing a service or action during the month
- **Title** = The *title* of the staff member providing a service or action
- **Signature** = The staff member providing a service or action should sign his or her name

INFORMATION FOR BILLING DEPARTMENT DATA:

- ✓ Check the appropriate unit of service box that corresponds to the consumer's "countable service days" during the month. *Countable service days are days on which at least one face-to-face Res Hab service/activity was provided and initialed by staff. For supportive IRA sites, the service/activity must be provided at the site or initiated or concluded there.*

When the individual resides in a supervised IRA, the monthly billing codes are to be used as follows:

FULL MONTH BILLING - Check this box when the individual has been enrolled in a **supervised IRA** for 22 or more days AND has received 22 or more countable service days during the month.

SEMI MONTHLY BILLING - You should bill for a half month of service when the individual has been enrolled in a **supervised IRA** for 11 or more days, but less than 22 days, AND has received at least 11 countable service days during the month. You should also bill for a half month of service when the individual has been enrolled in a supervised IRA for 22 or more days, and has received at least 11, but less than 22 countable service days during the month.

The guidelines for billing 1st half or 2nd half month are as follows:

- SEMI MONTHLY (1ST half) - Check this box if the consumer meets the enrollment and service provision criteria for half month billing **AND** after the last day you provided services to the consumer, there were 11 or more days left in a month.

[Note: Should a consumer change providers during the month, this would enable another service provider to bill for services they provided to the consumer during the remainder of the month]

- **SEMI MONTHLY (2nd half)** - Check this box if the consumer meets the enrollment and service provision criteria **AND** after the last day you provided services to the consumer, there were less than 11 days remaining in the month.

[Note: Should a consumer change providers during the month, this would enable another service provider to bill for services they provided to the consumer during the beginning of the month]

NO BILLING - Check this box when the individual has been enrolled in a **supervised IRA** less than 11 days AND/OR has received less than 11 countable services days during the month.

When the individual resides in a **supportive IRA**, the monthly billing codes to be used are:

FULL MONTH BILLING - Check this box when the individual has been enrolled in a **supportive IRA** 22 or more days AND has received 4 countable service days during the month. There may be no more than 2 countable service days in any week.

[note: countable service days in a supportive IRA are days on which the IRA staff provided at least one residential habilitation service or action at the IRA site. This includes services or actions initiated or concluded at the IRA site.]

SEMI MONTHLY BILLING - You should bill for a half month of service when the individual has been enrolled in a **supportive IRA** for 11 or more days, but less than 22 days, AND has received a minimum of 2 countable service days during the month. You should also bill for a half month of service when the individual has been enrolled in a supervised IRA for 22 or more days, and has received at least 2, but less than 4 countable service days during the month.

The guidelines for billing 1st half or 2nd half month are as follows:

- **SEMI MONTHLY (1ST half)** - Check this box if the consumer meets the enrollment and service provision criteria for half month billing **AND** after the last day you provided services to the consumer, there were 11 or more days left in a month.

[Note: Should a consumer change providers during the month, this would enable another service provider to bill for services they provided to the consumer during the remainder of the month]

- **SEMI MONTHLY (2ND half)** - Check this box if the consumer meets the enrollment and service provision criteria **AND** after the last day you provided services to the consumer, there were less than 11 days remaining in the month.

[Note: Should a consumer change providers during the month, this would enable another service provider to bill for services they provided to the consumer during the beginning of the month]

NO BILLING - Check this box when the individual has been enrolled in a **supportive IRA** less than 11 days AND/OR has received less than 2 countable service days during the month.

[note: countable service days in a supportive IRA are days on which the IRA staff provided at least one residential habilitation service or action at the IRA site. This includes services or actions initiated or concluded at the IRA site.]

CONSUMER ENROLLMENT DATA:

Check the box for the appropriate residential program type:

- ✓ **Supervised IRA** - staff onsite or proximately available at all times when the persons are present
- ✓ **Supportive IRA** - staff typically are not on site nor proximately available at all times when the persons are present

Check the box that indicates the appropriate enrollment status of consumer during the month:

- ✓ **Enrolled in program full month** - check this box if the consumer has been enrolled in the residential program for 22 or more days during the month.
- ✓ **Enrolled in program less than full month** - check this box if the consumer has been enrolled in the residential program for *less than 22 days of the month*. Enter the date the consumer was enrolled during the month OR enter the date the consumer was discharged during the month.