

## CLAIMS FILING

### Billing and Claims

Payments/reimbursement for self-direction services will be made through claims submitted by the fiscal/-employer agent (F/EA) to the Medicaid fiscal intermediary (FI) in accordance with the below methodology.

Prior to submission to the Medicaid FI, claims must be submitted through a third party electronic visit verification (EVV) vendor that has a business relationship with the F/EA.

### Overlapping Dates of Services

Dates of service on the claim must match the dates approved on the plan of care (POC) and cannot overlap.

### Same Day Service When Hospitalized or in a Long-Term Care (LTC) Facility

In certain situations, home and community-based services (HCBS) approved on the POC and provided the same day a beneficiary is hospitalized or in a nursing facility may be allowed.

Situations are limited to:

1. HCBS provided the date of admission, if provided *prior* to beneficiary being admitted; and
2. HCBS provided the date of discharge, if provided *following* the beneficiary's discharge.