

---

## SECTION 16

# DOCUMENTATION

### Learning Objectives

1. Identify how long records must be kept.
2. Identify the contents of case management agency records.

NC DMA 10/2009

## HOW LONG RECORDS MUST BE KEPT

---

Providers must retain records for five years from the date of service.

It is a good idea, in case of legal actions, to retain records until the child's 23<sup>rd</sup> birthday.

NC DMA 10/2009

## AVAILABILITY OF RECORDS

---

CAP/C providers, including case management agencies, must furnish records regarding its Medicaid payments that is requested by:

- DMA and its agents
- The Office of the Attorney General
- The Department of Health and Human Services
- The Center for Medicare and Medicaid Services (CMS)
- Any other entities specified in the agency's Medicaid Provider Participation Agreement

NC DMA 10/2009

HIPAA Privacy regulations CFR Part 164.502 and .508 allow for disclosure of records without client authorization for payment activities including but not limited to review of health care services with respect to medical necessity, coverage under a health plan, appropriateness of care, or justification of charges.

## AVAILABILITY OF RECORDS

---

Provider agencies must allow the CAP/C Case Manager to review the documentation that supports a claim for CAP/C services.

NC DMA 10/2009

HIPAA Privacy regulations CFR Part 164.502 and .508 allow for disclosure of records without client authorization for payment activities including but not limited to review of health care services with respect to medical necessity, coverage under a health plan, appropriateness of care, or justification of charges.

## CONTENTS OF CASE MANAGEMENT AGENCY RECORDS

---

- All FL-2s
- CAP/C assessments and plans of care, plan of care revisions, and related correspondence
- DMA plan approval letter
- Physician's orders for Medicaid medical supplies provided by the case management agency and nutritional supplements provided as a component of waiver supplies
- Service authorizations

NC DMA 10/2009

## CONTENTS OF CASE MANAGEMENT AGENCY RECORDS, CONT'D.

---

- Participation agreements
- Case management notes
- Other correspondence related to the client's participation in CAP/C
- Copies of claims that it submits to Medicaid and third party payers as well as related correspondence

NC DMA 10/2009

## CONTENTS COMMON TO ALL CLIENT RECORDS

---

- Client's name
- Client's Medicaid ID number
- What service was provided
- The date the service was provided
- Where the service was provided
- The required documentation for the specific service

NC DMA 10/2009

**REQUIRED DOCUMENTATION FOR CASE  
MANAGEMENT AGENCY SERVICES –  
CASE MANAGEMENT**

Narrative of client assessment and ongoing case management activities

- Date
- The time (in minutes) involved in the activity
- A description of the activity

Include all contacts and activities related to your client's care.

Each entry must contain sufficient detail to support your claim for reimbursement

NC DMA 10/2009

Example of case management notes:

<b>Name:</b> Janie Smith		<b>MID/Record#:</b> 999-99-9999
A		
DATE	TIME	ACTIVITIES
5-12-00	9'	Telephoned Ralph Rampbuilder to request that ramp be built as soon as possible based on specifications and estimate previously agreed upon; will have it completed by 5/21 at latest.
5-12-00	4'	Received telephone call from Frank at Good Health Medical Supply to clarify directions to Janie's home. Tub bench and new wheelchair will be delivered tomorrow
TOTAL	13'	
5-18-00	9'	Received telephone call from Ralph Rampbuilder who advised that ramp is completed. Advised that I would visit client and inspect ramp tomorrow. Telephone call to Mrs. Smith; she is making arrangements to meet with me tomorrow at her home during her lunch hour.
TOTAL	9'	
<b>SIGNATURE</b> <i>Case Manager, RN</i>		<b>DATE</b> <u>5-18-00</u>

REQUIRED DOCUMENTATION FOR CASE MANAGEMET  
AGENCY SERVICES –  
CASE MANAGEMENT

---

Templates are available on the website for documentation of all case management activities. It is not necessary that you use these exact forms, but whatever you do use should contain the same information that is on those forms.

NC DMA 10/2009

## REQUIRED DOCUMENTATION FOR CASE MANAGEMENT AGENCY SERVICES – WAIVER SUPPLIES

---

- Invoice from the supplier that shows the
  - date the item was provided to the client
  - description of the item
  - the cost of the item including charges for delivery and taxes
- A signed physician's order, renewed at least annually

NC DMA 10/2009

## REQUIRED DOCUMENTATION FOR CASE MANAGEMENT AGENCY SERVICES – HOME MODIFICATIONS

---

- Invoice from the supplier/installer that shows the
  - date the item was provided to the client
  - description of the item
  - the cost of the item and related charges including charges for delivery, taxes, and installation
- For items that require permits for construction or installation, a receipt for the cost of the permit if that cost is to be claimed

NC DMA 10/2009

## REQUIRED DOCUMENTATION FOR CASE MANAGEMENT AGENCY SERVICES – MEDICAL SUPPLIES

---

- Invoice from the supplier that shows the
  - date the item was provided to the client
  - description of the item
  - the cost of the item including charges for delivery and taxes
- A signed physician order for all items billed, renewed annually as applicable

NC DMA 10/2009

## REQUIRED DOCUMENTATION FOR OTHER PROVIDER AGENCY SERVICES

---

- Client name and Medicaid ID number
- Date service provided
- Location of service provided
- Service authorizations including any attachments to those authorizations, and related correspondence
- Copies of claims submitted to Medicaid and other third party payers, as well as related correspondence
- Specific service documentation

NC DMA 10/2009

## SPECIFIC SERVICE DOCUMENTATION FOR NURSING SERVICES

---

- Where the care was provided
- All nursing interventions (time, activity, results)

The notes should substantiate that care was provided according to the physician's orders and the CAP/C service authorization

Nurses notes are also used to help determine the continuing need for CAP/C services as well as assisting in level of care determinations

NC DMA 10/2009

## SPECIFIC SERVICE DOCUMENTATION FOR NURSE AIDE SERVICES

---

Time log in daily or weekly format that includes

- Date of service
- Time that service begins and ends
- Tasks performed
- Nurse aide signature certifying that he/she worked the dates and times listed and performed the indicated tasks
- Client/responsible party signature certifying that the tasks were performed satisfactorily and the time is correct

NC DMA 10/2009

## SUMMARY

---

- Records must be kept for five years from the date of service, or for five years beyond age 18.
- All records must contain the client's name, Medicaid ID number, type of service provided, date service provided, and location of service provided
- Case management agency files should contain FL-2s, assessments, plans of care, revisions, approval letters, physician's orders for medical supplies and oral nutritional supplements provided by the case management agency, service authorizations, participation agreements, case management notes, other correspondence related to the client's care, and copies of claims and claims-related correspondence

NC DMA 10/2009

## SUMMARY, CONT'D.

---

- Nurse and Nurse Aide notes should substantiate that care was provided in accordance with the physician's orders and the CAP/C service authorization.

NC DMA 10/2009

## REVIEW QUESTIONS

Please make sure you can answer the following questions before proceeding to the next section.

1. Records must be kept
  - A. until the child turns 21 years of age.
  - B. for five years after CAP/C termination or withdrawal.
  - C. for five years from the date of service.
  - D. indefinitely.
  
2. True or False: Parents' authorization is needed to release case management notes to the DMA CAP/C Consultant.
  
3. True or False: The case manager must keep in her files a copy of all the nurses notes that she reviews.
  
4. List the three items that an invoice from a supplier should contain.

## REVIEW ANSWERS

1. C, 5 years from the date of service
2. False. HIPAA regulations allow for disclosure of information without client authorization for the purposes of determining medical necessity, coverage, appropriateness of care, or justification of charges.
3. False. Nurses notes originate with the nursing agency; they are responsible for keeping copies of those records.
4. The date the service/supply was provided to the client  
A description of the item  
The cost of the item and related charges