

# HCP/CDDO Policy

**Regarding:** Reimbursement

**Approval Date:** May 17, 2001

**Implementation Date:** July 1, 2001

**Revision:** April 26, 2004

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## Policy Language

1. Reimbursement Through the HCBS/MRDD waiver can be accessed only when:
  - a. The CDDO has a current fully executed contract with HCP/CSS, or
  - b. The Affiliate has signed an affiliation agreement with the CDDO responsible for the service areas where the Affiliate provides services.
  - c. For existing affiliate agreements, the CDDO will have executed an affiliate agreement forty-five (45) calendar days after the CDDO/SRS contract is fully executed or establish a schedule for dispute resolution in accordance with K.A.R. 30-64-32 that will resolve the issue within an additional forty-five (45) calendar days.
  - d. For new affiliate agreements, the CDDO will have executed an affiliate agreement within forty-five (45) calendar days from the day the requesting party has met the requirements for affiliation or establish a schedule for dispute resolution in accordance with K.A.R. 30-64-32 that will result in a ruling concerning the request for affiliation within an additional forty-five (45) calendar days from the day the requesting party has met the requirements for affiliation.
  - e. If agreement is not reached within fourteen (14) calendar days after the dispute resolution process described above, then the CDDO must follow K.A.R. 30-64-22.
  - f. If after all of the above steps have been completed, a conclusion has not been reached, either party has the right to request an administrative appeal, which must be submitted in writing within 30 days of the conclusion of the above steps. Requests for administrative appeals shall be sent to the following address:

Office of Administrative Hearings  
1020 S. Kansas Avenue  
Topeka, Kansas 66612
  - g. The CSP meets all requirements contained in its signed Medicaid Provider Agreement.
  - h. All parties who are responsible for entering plans of care for Prior Authorization must not enter any changes older than forty-five (45) days (commencing on the first day of the month following the month for which changes are being entered).
  - i. HCP/CSS provides Prior Authorization pursuant to an approved Plan of Care, Medicaid rules, and the Handbook-Services for Persons with Mental Retardation or Otherwise Developmentally Disabled MR-DD. (Note: Medicaid rules may change at various times during the year but the CDDOs and their HCBS/MRDD waiver enrolled affiliated CSPs will be provided written notice sixty (60) calendar days prior to any change.)
  - j. Nothing in this policy is to be interpreted as restricting the authority of a CDDO to terminate an affiliate agreement during the term of the agreement.

The CDDO will, through its affiliate agreement, specify that the affiliate will bill at least monthly for its program services.