



MRC guidance for documentation of services

1. Type of service
 - a. Documentation of the HPC service that is authorized in the ISP/CPT
2. Date of service
 - a. Date that the HPC service was allowable as a billable day with the individual being a resident of the home
3. Place of service
 - a. Documentation of the place that the service is/could have been delivered
4. Name of individual receiving service
 - a. Name of the individual
5. Medicaid # of the individual receiving service
 - a. Medicaid number
6. Name of provider
 - a. Name of the provider
7. Provider identifier/contract number
 - a. Provider ID or contract number
8. Written or electronic signature of the person delivering the service or initials of the person delivering the service
 - a. Documentation of the person delivering the service
9. Group size
 - a. Group size
10. Description and details of the services delivered that directly relate to the services specified in the approved ISP as the services to be provided
 - a. If the HPC service is being provided "on behalf of" the individual, the provider should document the details of that service
 - b. If a provider is billing for a date when no services were directly provided to or on behalf of, but the individual was still a resident of the home and not admitted into the ICF or Nursing home, the provider should document that no services were provided but billing can occur per rule 5123-9-31.
11. Number of units of the delivered service or continuous amount of uninterrupted time during which the service was provided
 - a. Number of unit (s) if HPC or on behalf of was provided
 - b. If services were not delivered for that day but it is a date that the individual was still a resident of the home then documentation of one unit is needed per rule 5123-9-31.
12. Times the delivered service started and stopped
 - a. Document times that HPC was delivered or on behalf of
 - b. For a date when an individual is not provided HPC or on behalf of services the provider should document that there are no times specific for the service as no service was provided but the day is billable based upon rule 5123-9-31 and the individual was not a resident of an ICF or NF