



Missouri Department of Health and Senior Services

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PM-13-01
VM-13-01

August 2, 2012

MEMORANDUM FOR ALL HOME AND COMMUNITY BASED CARE PROVIDERS

FROM: Celesta Hartgraves, Director *Celesta Hartgraves*
Division of Senior and Disability Services

SUBJECT: HCBS Providers Billing for Participant Reassessments and Training Updates

As noted in PM/VM-12-13 to receive payment for reassessments completed, providers shall electronically file their claim for the reassessments at www.emomed.com using procedure code T1028TS. In addition, providers must utilize the diagnosis code V6889 when submitting the reassessment claim to the MO HealthNet Division (MHD).

Please take notice that providers will only receive payment for reassessed participants that have met their spenddown at least once in the last three month period prior to the month of assessment. If you receive your list of participants from the Sharepoint site and realize that there is a participant on the list that is no longer eligible because they have not met their spenddown once in the last three months or have lost all MO HealthNet coverage, please notify your Regional Evaluation Team to request the case be closed.

There have been additional training dates added to the reassessment Train the Trainer registration site. The registration site can be found in PM/VM-12-12.

Any questions regarding this memorandum should be directed to the Bureau of Program Integrity via e-mail at programintegrity@health.mo.gov or by phone at 573-526-8557.

CH/ss

CC: Distribution Lists 3 & 4

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AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER: Services provided on a nondiscriminatory basis.