LTSS Provider Go Live Update

September 2020



Disclaimer

Any information, support services or advice related to functionality of Therap Services' products is for general guidance only. Care providers are expected to know the procedures, practices and terminology required to provide care for the individuals they serve.

Using Therap should neither circumvent nor take precedence over required care, nor should it impede the human intervention of care providers in a manner that would have a negative impact on any individual's well being.

Seek professional advice on specific issues and their impact regarding any individual or entity. No liability can be accepted for any errors or omissions or for any person acting or refraining from acting on the information provided in these materials and/or presentations.

Any discussion of future functionality is intended for informational purposes only. It is not a commitment to deliver any material, code, or functionality, nor should it be relied upon in making purchasing decisions. The development, release, and timing of any features or functionality described is at the sole discretion of Therap.

Mandatory Start Date

As you know, the Division of Long Term Services and Supports (LTSS) has been working to transition to a new IT system, Therap, for administrative functions related to the provision of LTSS services, including EVV data collection and billing. Due to COVID-19 and other unforeseen technical issues, LTSS delayed the hard go live for EVV data collection and billing in Therap by several more months than originally anticipated. In order to remain on track with federal requirements, the time has come to implement a hard go live. Effective for dates of services October 1, 2020 and after, providers must collect EVV data (for applicable services) and submit claims billing for all State funded services in Therap.

State Funded Services

- State funded services (currently billed on a 522 Request for Payment) with dates of service on or after October 1, 2020 must be submitted through Therap. Any 522 Request for Payment forms submitted with dates of service on or after October 1, 2020 will not be processed and will be returned to the provider.
- State funded services with dates of service prior to October 1,
 2020 must be submitted on a 522 Request for Payment by April 30,
 2021 unless this requirement is waived due to extenuating circumstances as outlined below.

Timely Filing

- With the transition to Therap, six month timely filing rules will be effective October 1, 2020 for all services, including State funded services. The six month timely filing rules are as follows:
 - The provider must submit a claim for services within six months following the month the service was provided. This time limit may be waived or extended only if one or more of the following situations exist:
- The claim is an adjustment or void of a previously paid claim and is received within three months after the previously paid claim;
- The claim is received within six months after a retroactive initial eligibility determination was made as a result of an appeal;
- The claim is received within three months after a previously denied claim;
- The claim is received within six months after the provider receives payment from Medicare or private health insurance or receives a notice of denial from Medicare or private health insurance;
- To correct an error made by the Department.

Hope Waiver & Medicaid

Claims for HOPE Waiver and other LTSS approved Medicaid services (currently billed on a CMS 1500 form) are not required to be billed in Therap, although it is strongly encouraged as a time-saving opportunity for providers.

Still not Set Up?

Providers that do not have an account set up in Therap will need to do so IMMEDIATELY to avoid delays in reimbursement for State funded services. Please e-mail sdsupport@therapservices.net to initiate account set up. If you have not yet attended one of the provider webinar trainings regarding EVV and/or billing, please visit https://help.therapservices.net/app/south-dakota-ltss for training materials.

Services where EVV is required:

Homemaker	03003, 08068	S5130
Personal Care	03004, 08068	T1019
Nursing	08069, 08093, 10100	T1000
Adult Companion		S5135
Respite	08055, 08055	T1005
Chore Services	S5120	

As of OCTOBER 1, 2020...

EVV SERVICES

- All authorizations
- All EVV collected or uploaded
- All EVV data converted to Billing Data

State Funded Services

- All Authorizations
- All Service Documentation
 - All Billing Data
 - All Claims
 - All Payment Reports

In THERAP

Questions & Answers

How can we help??