Connecticut Medical Assistance Program Provider Bulletin 2018-45
Policy Transmittal 2018-23 July 2018

Effective Date: July 1, 2018
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TO: All Providers

RE: Proof of Delivery Receipts for Covered Medical Equipment, Devices and Supplies (MEDS) under the Connecticut Medical Assistance Program (CMAP)

Effective for dates of service July 1, 2018 and forward, the Department of Social Services' (DSS) interpretation of the requirements for delivery receipts for Medical Equipment, Devices and Supplies (MEDS), is being updated, as set forth in this policy transmittal, in order to be consistent with the audit provisions in Section 17b-99(d)(5) of the 2018 supplement to the Connecticut General Statutes, as recently amended by section 2 of Public Act 18-76.

> A receipt signed by the recipient of medical assistance or a nursing facility representative or, in the case of delivery of a covered item or service by a shipping or delivery service, a supplier's detailed shipping invoice and the delivery service tracking information substantiating delivery as sufficient proof of delivery of a covered item or service.

Delivery Receipts for MEDS Products

DSS's current documentation requirements within each of the applicable regulations for payment of MEDS products require a signed receipt for all deliveries of MEDS, documenting that the client or, if the client is unable to sign, a designated representative other than the MEDS provider or the MEDS provider's employees took delivery of the item.

Except as otherwise specifically superseded by the provisions of this policy transmittal, all existing regulations and previously issued policy transmittals and provider bulletins remain in full force and effect.

In order to be consistent with Section 17b-99(d)(5) of the 2018 supplement to the Connecticut General Statutes, as recently amended by section 2 of Public Act 18-76, DSS will accept:

As required by that statute, for providers using a third party shipping or delivery service, the provider must keep a copy of the documentation from the shipping or delivery service that includes: (1) the date, (2) the time and (3) the location of delivery in order to substantiate the delivery of the items. Therefore, simply retaining the tracking number and/or documentation that the item was submitted to the delivery service (but without documentation of the actual delivery) is not sufficient. In addition to keeping the documentation of delivery on file, providers must keep the detailed invoice on file that contains all of the required elements (described below). In order to show that the invoice relates to the delivery service tracking information, this invoice should cross reference the tracking information from the shipping or delivery service.

Therefore, as required by the statute and regulations cited above, providers must choose

either:

(1) to deliver the item(s) directly and retain a delivery receipt signed by the HUSKY Health client or a nursing facility representative if the client is unable to sign that contains all of the required elements detailed below, **or**

(2) to submit the item(s) for delivery by a third-party delivery service, if clinically appropriate and permissible for the item(s) being delivered, and then must retain tracking documentation from a third-party delivery service documenting the time, date, and location of delivery **plus** a detailed invoice that contains all of the required elements for a delivery receipt detailed below.

Elements Required on the Invoice or Delivery Receipt

Regardless of the method of delivery chosen, either the delivery receipt signed by the client (or nursing facility representative) **or** the detailed invoice (that must accompany the required third-party delivery service tracking information substantiating delivery) must contain the following elements required by the regulations cited above:

1. Provider's Name
2. Client's Name
3. Delivery Address
4. Date of Delivery
5. Itemization of the MEDS delivered including:
    a. product description;
    b. brand name;
    c. MED model name and number, if applicable;
    d. a serial number, if applicable;
    e. the quantity delivered; and
    f. amount billed per item/device or supply.

As provided in the statute, for any form of documentation: "The [DSS] commissioner, or any entity with which the commissioner contracts to conduct such audit, may seek additional documentation in circumstances, including, but not limited to:

(i) The proof provided is insufficiently legible,
(ii) the proof provided is contradicted by other sources of information reviewed in the audit, or
(iii) the Commissioner, or any entity with which the Commissioner contracts to conduct such an audit, makes a good faith determination that the provider may be engaging in vendor fraud."

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Distribution: This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program by DXC Technology.

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