



JULY 2020

KMAP HCBS BULLETIN 20156

REMINDER - HCBS Provider Qualifications Audit Process

Per KMAP Bulletin 19216, the State has delegated auditing of Home and Community Based Services (HCBS) provider qualifications to the Managed Care Organizations (MCO). This applies to all providers of HCBS. Auditing of HCBS provider qualifications will occur annually beginning January 2020. Providers will only be audited one time per year.

The three Managed Care Organization (MCO)s have contracted with a single company, Averifi, to complete the HCBS audits. Beginning Q1 2020, and using the process described below, Averifi will complete an annual audit of each HCBS provider and will provide the results to each MCO that has the provider in their network.

Each MCO will determine audit findings based upon its policy and will provide a separate response to the provider. The qualifications audited for each HCBS provider are based upon the waiver services the provider is enrolled in KMAP (Kansas Medical Assistance Program) to provide and the provider qualification requirements for each HCBS service as identified within each approved HCBS waiver.

Averifi will send a letter to each HCBS provider 30 days in advance of the audit date. The letter will include the date of the audit, whether the audit will be conducted on-site or will be a remote desk review of documentation, information the provider must submit in advance, and documentation the provider must have ready to provide on the day of the audit.

Most audits will be conducted on-site. For providers of direct services and Financial Management Services (FMS) providers, a list of current employees will be requested by Averifi in advance. This is to determine a random sample of direct care workers for whom Averifi will complete an employee file audit. For audits conducted remotely, Averifi will request the required documentation and will provide instructions for how to submit it via secure electronic submission.

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- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday

DXC Technology is the fiscal agent of KMAP.



REMINDER - HCBS Provider Qualifications Audit Process continued

Averifi will complete the audit on the date(s) scheduled. Additional documentation may be supplied by the provider during the dates of the scheduled audit, but may not be submitted after the fact, unless specifically requested by an MCO or Averifi through a plan of correction.

Upon completion of the audit, Averifi will submit the findings from the audit to each MCO which has the provider in their network.

Audit Determinations: Each MCO is required by the State to make a separate determination using the audit findings and based upon the MCO's individual policy for HCBS Provider Qualifications Audits. For providers who are found not to meet the qualifications requirements, the MCO may implement a corrective action plan or take other action including and up to termination of the provider from the MCO's network.

References:

KMAP HCBS Provider Qualifications Bulletin:

<https://www.kmap-state-ks.us/Documents/Content/Bulletins/19216%20-%20HCBS%20-%20Provider%20Qualifications.pdf>

KDADS HCBS Provider Qualification Policy:

https://www.kdads.ks.gov/docs/default-source/csp/hcbs/hcbs-policies/final-policies/general-policies/provider-qualification-policy.pdf?sfvrsn=814404ee_2

Currently Approved HCBS Waivers

[https://kdads.ks.gov/commissions/home-community-based-services-\(hcbs\)/hcbs-program-renewal-information](https://kdads.ks.gov/commissions/home-community-based-services-(hcbs)/hcbs-program-renewal-information)

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