

**INFORMATIONAL LETTER NO. 2331-MC-FFS**

**DATE:** April 20, 2022

**TO:** Home Health Agencies, Home- and Community-Based Services (HCBS) Waiver and Habilitation Providers, Case Managers

**APPLIES TO:** Managed Care (MC), Fee-for-Service (FFS)

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid

**RE:** HCBS Waiver and Habilitation Billing Update

**EFFECTIVE:** April 1, 2022

**\*\*\*This informational letter (IL) updates [IL 2313-MC-FFS](#)<sup>1</sup>.\*\*\***

This IL is intended to provide additional guidance for billing of HCBS. In addition to the policy outlined in IL No. 2313-MC-FSS, the Department is reminding providers to submit the appropriate place of service (POS) for where the member was located at the time the service was rendered. This policy is applicable to both FFS and MC.

For HCBS providers using the [Claim for Targeted Medical Care form 470-2486](#)<sup>2</sup>, the appropriate POS code must be entered on line 14.

Assisted living facilities (ALF) delivering HCBS to waiver members residing in the ALF must use **POS 13** on the Claim for Targeted Medical Care form.

Residential Care Facilities (RCF) delivering HCBS to waiver members residing in the RCF must use **POS 33** on the Claim for Targeted Medical Care form.

For HCBS providers billing the Managed Care Organizations (MCOs) using the [CMS 1500](#)<sup>3</sup>, the appropriate POS code must be entered on line 24B.

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<sup>1</sup> <https://secureapp.dhs.state.ia.us/IMPA/Information/ViewDocument.aspx?viewdocument=69cdcd6-2b4c-4a16-9a8f-34bd3d334024>

<sup>2</sup> [470-2486 Claim for Targeted Medical Care \(iowa.gov\)](#)

<sup>3</sup> [CMS1500.02.12 Sample.pdf \(iowa.gov\)](#)

### Common POS Codes for HCBS

02	Telehealth Provided Other than in Member's Home	The location where health services and health related services are provided or received, through telecommunication technology. Member is not located in their home when receiving health services or health-related services through telecommunication technology.
03	School	A facility whose primary purpose is education.
04	Homeless Shelter	A facility or location whose primary purpose is to provide temporary housing to homeless individuals (e.g., emergency shelters, individual or family shelters).
10	Telehealth Provided to the Member in their Home	The location where health services and health-related services are provided or received, through telecommunication technology. Member is in their home (which is a location other than a hospital or other facility where the member receives care in a private residence) when receiving health services or health-related services through telecommunication technology.
12	Member's Home	Location, other than a hospital or other facility, where the member receives care in a private residence.
13	ALF	Congregate residential facility with self-contained living units providing assessment of each resident's needs and on-site support 24 hours a day, 7 days a week, with the capacity to deliver or arrange for services including some health care and other services.
14	Group Home	A residence, with shared living areas, where members receive supervision and other services such as social and/or behavioral services, custodial service, and minimal services (e.g., medication administration).
18	Place of Employment/Worksite	A location, not described by any other POS code, owned or operated by a public or private entity where the member is employed, and where a health professional provides ongoing or episodic occupational, medical, therapeutic, or rehabilitative services to the individual.
33	Custodial Care Facility (RCF)	A facility which provides room, board, and other personal assistance services, generally on a long-term basis, and which does not include a medical component.
99	Other Place of Service	Other place of service not identified above.

Additional guidance is available in the [Billing Iowa Medicaid](#)<sup>4</sup> manual.

If you have questions, please contact the Iowa Medicaid Provider Services Unit or the appropriate MCO:

**IME Provider Services for FFS members:**

- Provider Services: 1-800-338-7909
- Provider email: [imeproviderservices@dhs.state.ia.us](mailto:imeproviderservices@dhs.state.ia.us)

**Amerigroup Iowa, Inc.:**

- Provider Services: 1-800-454-3730
- Provider email: [iowamedicaid@amerigroup.com](mailto:iowamedicaid@amerigroup.com)
- Website: <https://providers.amerigroup.com/ia>

**Iowa Total Care:**

- Provider Services: 1-833-404-1061
- Provider email: [care\\_management@iowatotalcare.com](mailto:care_management@iowatotalcare.com)
- Website: <https://www.iowatotalcare.com>

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<sup>4</sup> [All Providers Chapter IV. Billing Iowa Medicaid](#)