

Chapter 7. Cost Reporting Requirements

§701. General Provisions

A. Effective July 1, 2012, the department shall implement mandatory cost reporting requirements for providers of home and community-based waiver services. The cost reports will be used to verify expenditures and to support rate setting for the services rendered to waiver recipients.

B. Providers of services in the following waiver programs shall be required to submit cost reports:

1. adult day health care waiver;
2. children's choice waiver;
3. community choices waiver;
4. new opportunities waiver;
5. residential options waiver; and
6. supports waiver.

C. Each provider shall complete the DHH approved cost report and submit the cost report(s) to the department no later than five months after the state fiscal year ends (June 30).

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:509 (March 2013).