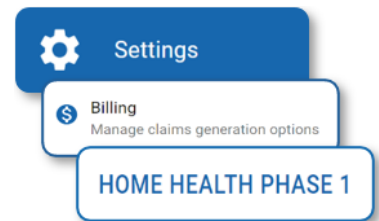


CAREBRIDGE PROVIDER PORTAL

IOWA HOME HEALTH BILLING DELAY GUIDE



All providers that bill for Home Health Services (HHS) that require Electronic Visit Verification (EVV) can select an optional **Billing Delay** for generating claims under each health plan. Claims are generated at the end of the currently designated billing period, but if this option is enabled, claims will be generated a minimum of one day *after* the current billing period has ended depending on the number of days selected.



Navigate to the **'Settings'** page, select the *Billing* tab, and click the *Home Health Phase 1* tab. For each health plan your agency provides services to, click the *Settings* drop-down menu(s) to view the billing delay option (Figure 1).

Figure 1. *Settings Drop-down Menu*

Billing Delay

Enable a billing delay of ▼ days beyond the end of the billing period for generating claims

You have unsaved changes. SAVE CHANGES

Click the check box to enable billing delay and select the number of days from the drop-down menu. Click *Save Changes* to finalize the selections. All settings will also apply to *Home Health Phase 2* services.