#	Performance Measure/Standard	Protocol	Not Met Reasons
1	The provider maintains Daily Progress Notes/Service Logs covering services provided and billed during the period under review.	 CMS Assurance – Financial Accountability RECORD REVIEW Review Daily Progress Notes/Service Logs for the entire period of review. Determine that Daily Progress Notes/Service Logs include all required components. Daily Progress Notes/Service Logs should include the following content: Name of individual receiving services Date of service Time in/out Summary of services provided Review Daily Progress Notes/Service Logs against claims data to ensure accuracy in billing. This standard is subject to identification of a potential billing discrepancy 	 Daily Progress Notes/Service Logs were not present for one or more dates billed during the period under review. (B) Daily Progress Notes/Service Logs covering services provided and billed during the period under review did not include the individual's name. (B) Daily Progress Notes/Service Logs covering services provided and billed during the period under review did not include a time in/out. (B) Daily Progress Notes/Service Logs covering services provided and billed during the period under review did not include a time in/out. (B) Daily Progress Notes/Service Logs covering services provided and billed during the period under review did not include the date service was provided. (B) Daily Progress Notes/Service Logs covering services provided and billed during the period under review did not include a summary of the service provided. (B) Daily Progress Notes/Service Logs had discrepancies between units billed and units documented. (B)
2	An assessment report is in the record for assessments billed during the review period.	 CMS Assurance - Service Plan RECORD REVIEW Note: Score this standard N/A if original Behavior Assessment was not authorized and completed within the 12 month period of review by this provider. Review the record for the most recent Behavior Assessment. 	 Behavior Assessment was not in the record for review. (B)

#	Performance Measure/Standard	Protocol	Not Met Reasons
		 Note – the Behavior Assessment is usually a 1 time event and may have been done several years before. Review documentation and Service Authorization for evidence a Behavior Assessment was requested/approved. The Behavior Assessment is a document separate from the Behavior Analysis Service Plan. This standard is subject to identification of a potential billing discrepancy 	
3	The Behavior Assessment report was completed within the required timeframes.	 CMS Assurance – Financial Accountability RECORD REVIEW Note: Score this standard N/A if original Behavior Assessment was not authorized and completed within the 12 month period of review by this provider. Review the record for the most recent Behavior Assessment. Determine date the Behavior Assessment was completed. Compare date completed to the date service began. Determine if the Behavior Assessment was completed within 30 days of initially providing service. This standard is subject to identification of a potential billing discrepancy 	 Behavior Assessment was not completed within 30 days of initially providing service. (B) Unable to determine due to undocumented completion date. (B)
4	The current and complete Behavior Analysis Service Plan covering services provided and	CMS Assurance - Service Plan 65G-4 F.A.C. RECORD REVIEW	 Record did not contain a current Behavior Analysis Service Plan. (B) Behavior Analysis Service Plan did not include identifying information for the individual affected

#	Performance Measure/Standard	Protocol	Not Met Reasons
	billed during the period under review is in the record.	 Review the record to locate the current Behavior Analysis Service Plan. Look for the date on plan indicating date written or updated within past 12 months. The Behavior Analysis Service Plan shall include, either in text or by reference to appropriate documents: Identifying information for the individual affected by the plan. The name, signature and certification or licensure information of the individual who developed, supervises or approves the implementation of the procedures described in the plan. Objective statements of goals relative to behavior reduction and behavior acquisition resulting in program termination. Rationale for intervention being warranted, and selection of proposed interventions, consistent with assessment results. Medical, social and historical information including previous treatment programs relevant to the current problems being addressed. Identification of behaviors targeted for reduction. Identification of behaviors targeted for reduction and replacement behavior. Data collection methods for behaviors targeted for reduction and replacement behavior. Description of performance-based training for persons implementing procedures. Techniques for maintaining and generalizing 	 by the plan. (B) 3) Behavior Analysis Service Plan did not include intervention procedures for behaviors targeted for reduction. (B) 4) Behavior Analysis Service Plan did not include intervention procedures to be used for replacement behavior. (B) 5) Behavior Analysis Service Plan did not include name, signature and certification of individual who developed, supervises or approves the implementation of the procedures described in the plan. 6) Behavior Analysis Service Plan did not include objective statements of goals relative to behavior reduction/behavior acquisition resulting in program termination. 7) Behavior Analysis Service Plan did not contain rationale for intervention being warranted, and selection of proposed interventions, consistent with assessment results. 8) Behavior Analysis Service Plan did not include a description of medical, social and historical information including previous treatment programs relevant to current problems being addressed. 9) Behavior Analysis Service Plan did not include identification of behaviors targeted for reduction. 10) Behavior Analysis Service Plan did not include identification of behaviors targeted for acquisition or as replacement.

#	Performance Measure/Standard	Protocol	Not Met Reasons
		 behavioral improvements, as well as criteria for the reduction and fading of behavioral services. Methods of monitoring for programmatic fidelity and effectiveness, including but not limited to: a. Data analysis and interpretation. b. Direct observation in the setting(s) where the plan is implemented, including the observation of the implementation of procedures or simulated implementation. c. Discussions with supervisors, and observations of individuals who implement the behavior analysis procedures involved. d. Schedule or frequency of monitoring, and who, by function or assignment, will conduct monitoring. This standard is subject to identification of a potential billing discrepancy 	 11) Behavior Analysis Service Plan did not include data collection methods for behaviors targeted for reduction and replacement behavior. (B) 12) Behavior Analysis Service Plan did not include description of performance-based training for persons implementing procedures. 13) Behavior Analysis Service Plan did not include techniques for maintaining and generalizing behavioral improvements, as well as criteria for the reduction and fading of behavioral services. 14) Behavior Analysis Service Plan did not include methods of monitoring for programmatic fidelity and effectiveness.
5	A Behavior Analysis Service Plan with appropriate approvals and consent is in the record.	 CMS Assurance - Service Plan 65G-4 F.A.C. RECORD REVIEW Review the record to locate the current Behavior Analysis Service Plan. The Behavior Analysis Service Plan shall include, either in text or by reference to appropriate documents: Signatures of informed participants as may be required by law and individuals authorized to approve the procedures. Determine if the Behavior Analysis Service Plan has 	 Record did not contain a current Behavior Analysis Service Plan. Behavior Analysis Service Plan did not include signatures of informed participants as may be required by law and individuals authorized to approve the procedures. (B) Behavior Analysis Service Plan authored by a BCaBA or Level 3 provider was not counter- signed by a higher level Analyst.

#	Performance Measure/Standard	Protocol	Not Met Reasons
6	The Behavior Analysis Service Plan describes implementation in all relevant settings.	 been signed/approved by the appropriate level Analyst. If authored by a BCaBA or Level 3 provider the document should be counter-signed by a higher level Analyst. Note: If no Behavior Plan is in the record cite using reason #1. This standard is subject to identification of a potential billing discrepancy CMS Assurance - Service Plan 65G F.A.C. RECORD REVIEW Review the record to locate the current Behavior Analysis Service Plan. The Behavior Analysis Service Plan shall include, either in text or by reference to appropriate documents: How and where behavioral services will be integrated with daily routines and other relevant services. Note: If no Behavior Plan is in the record cite using reason 	 Record did not contain a current Behavior Analysis Service Plan. Behavior Analysis Service Plan did not include how and where behavioral services will be integrated with daily routines and other relevant services.
7	When the Behavior Analysis Service Plan identifies Behavior Assistants as implementers, the plan	 #1. CMS Assurance - Service Plan 65G-4 F.A.C. RECORD REVIEW If Behavior Assistants are not identified as implementers in 	 Record did not contain a current Behavior Analysis Service Plan. Behavior Analysis Service Plan did not include rationale for use of Behavior Assistant services. (B)

#	Performance Measure/Standard	Protocol	Not Met Reasons
	includes detailed rationale and description for use of and monitoring of the Behavior Assistant.	 the current Behavior Analysis Service Plan, score as N/A. Review the record to locate the current Behavior Analysis Service Plan. The Behavior Analysis Service Plan shall include, either in text or by reference to appropriate documents: The rationale for use of these services. A description of how Behavior Assistants will be trained. A description of Behavior Analyst monitoring of Behavior Assistants. Outline of the Behavior Assistant's routine and/or duties. A plan for fading of Behavior Assistant services. Note: If no Behavior Plan is in the record cite using reason #1. 	 Behavior Analysis Service Plan did not include a description of how Behavior Assistants will be trained. Behavior Analysis Service Plan did not include a description of Behavior Analyst monitoring of Behavior Assistants. Behavior Analysis Service Plan did not include an outline of the Behavior Assistant's routine and/or duties. (B) Behavior Analysis Service Plan did not include a plan for fading of Behavior Assistant services.
8	New Behavior Analysis Service Plans meeting the requirements in 65G- 4.010 are submitted for an initial review and approval (when indicated) by the LRC within 5 working days of implementation.	 CMS Assurance - Service Plan RECORD REVIEW Review provider documents to determine if: The behavior plan was newly developed during the review period. Behavior Analysis Service Plans meet these criteria: use of restricted procedures, behaviors dangerous to self or others, creating a life threatening risk, major property damage or potential for arrest and confinement. (Only exception would be a reduction plan that does not meet 	 Behavior Analysis Service Plan meets criteria for submission to the LRC, but there is no documentation indicating it was reviewed by the LRC. Behavior Analysis Service Plan was implemented by the provider after the LRC denied approval. Changes recommended by the LRC were added to the Behavior Analysis Service Plan and approved by the LRC, but were not implemented by the provider.

#	Performance Measure/Standard	Protocol	Not Met Reasons
		 these criteria). On the Behavior Analysis Service Plan, look for evidence the LRC chairperson has signed the plan OR Evidence the LRC reviewed the plan. This may be on the plan, on a separate LRC document or may be in notes from the LRC meeting. Note – the LRC does not have to approve the plan –only review it and make recommendations. If upon reviewing the Behavior Analysis Service Plan the LRC made recommendations for changes there is evidence the recommendations have been addressed and the plan re-submitted for LRC review within 5 working days or within the time frame requested by the LRC. Look for recommendations from the LRC -or they might say "no recommendations". If the Behavior Analysis Service Plan was developed outside the period of review, score N/A. If the Behavior Analysis Service Plan is not in the record, score standard N/A. 	 4) Provider implemented the new Behavior Analysis Service Plan, but did not submit the plan to the LRC for review within 5 working days of implementation. 5) Behavior Analysis Service Plan has been submitted to the LRC but has not yet been reviewed. *****Not Met but not calculated into score
9	The provider maintains documentation of subsequent LRC reviews, recommendations and a review schedule for the Behavior Analysis Service Plan.	CMS Assurance - Service Plan RECORD REVIEW Applies to Behavior Analysis Service Plans that have been updated vs. brand new ones. Review provider documents to determine if: • Behavior Analysis Service Plans meet these criteria: use of restricted procedures, behaviors dangerous to self or	 Record did not include LRC review dates. Record did not include recommended changes by the LRC. (only applicable if the LRC recommended any changes) Record did not include a review schedule for the plan. Provider has not followed the LRC monitoring plan for review dates. Changes were made to the plan but the

#	Performance Measure/Standard	Protocol	Not Met Reasons
		 others, create a life threatening risk, major property damage or potential for arrest and confinement. (Only exception would be a reduction plan that does not meet these criteria). On the Behavior Analysis Service Plan, look for evidence the LRC chairperson has signed the plan OR Evidence the LRC reviewed the plan. This may be on the plan or may be in notes from the LRC meeting. Note – the LRC does not have to approve the plan – only review it and make recommendations. Look for recommendations from the LRC - or they might say "no recommendations". Look for evidence of a review schedule – when is the next time the LRC wants to review it? It may be a formal schedule or it may be in the LRC notes –"review in 6 months" If LRC did make recommendations, did the provider implement them? If changes were made to the plan they will be dated. Check for documentation the plan was submitted to LRC for review within one week of the changes being made (65G-4.009(10)(b)). Some Areas are using a form for feedback to providers, with conclusions from review, and signature of the LRC chairperson. In other cases, the plan itself, a face sheet or signature page will have a place for the signature of the LRC chairperson. 	 provider did not submit the plan to the LRC for review within 5 days of the implementation of those changes. 6) Changes were made to the plan but the revisions were not dated on the plan. 7) Behavior Analysis Service Plan has been submitted to the LRC but has not yet been reviewed. *****Not Met but not calculated into score

#	Performance Measure/Standard	Protocol	Not Met Reasons
10	The initial Behavior Analysis Service Plan was developed within the required timeframe.	 CMS Assurance – Financial Accountability RECORD REVIEW Review the record to locate the initial Behavior Analysis Service Plan. Determine if the Behavior Analysis Service Plan was developed within 90 days of initially providing service. Refer to Daily Progress Notes/Service Logs and/or claims data If the initial Behavior Analysis Service Plan was first implemented more than 12 months ago, score this standard N/A. If the initial Behavior Analysis Service Plan is not in the record, score this standard N/A. This standard is subject to identification of a potential billing discrepancy 	 Initial Behavior Analysis Service Plan was not completed within 90 days of initially providing services. (B) Unable to determine due to lack of completion date. (B)
11	The Behavior Analysis Service Plan is being implemented as written and approved.	 CMS Assurance - Service Plan RECORD REVIEW Compare Behavior Analysis Service Plan details to provider's documentation of services. Determine if documentation (Daily Progress Notes/Service Logs, Quarterly Summaries, data displays, plan updates, monitoring tools) demonstrates: The right behaviors are being addressed Identified intervention procedures are being utilized Data are being collected as indicated 	 Data being collected did not capture the data required in the Behavior Analysis Service Plan. Behavior Analysis Service Plan was not being monitored per the monitoring schedule.

#	Performance Measure/Standard	Protocol	Not Met Reasons
		 Identified monitoring schedule is being followed per the Behavior Analysis Service Plan description. Interview staff or caregivers to determine if staff is aware of appropriate procedures Do not score as Not Met if updates are unable to be completed each month due to data collection problems outside of the Analyst's control. Look for due diligence in resolving data collection barriers. If the Behavior Analysis Service Plan is not in the record, score this standard N/A. 	
12	A Quarterly Summary covering services provided and billed during the period under review is in the record.	 CMS Assurance – Financial Accountability RECORD REVIEW Determine Support Plan effective date to determine Quarterly Summary timeframes for each individual to be reviewed. Ask provider if they complete monthly summaries or Quarterly Summaries. Monthly Summaries in lieu of Quarterly Summaries are acceptable. Determine if the provider is aware of the person's recent progress towards or achievement of personal goals the person has recently achieved. Ask provider to describe goals/objectives met from the individual's Behavior Analysis Service Plan. Quarterly Summary should include the following content: If PCR, ask the individual what Support Plan goals have been achieved. 	 Quarterly/Monthly Summary covering services provided and billed during the period under review was not in the record. Some, but not all of the Quarterly/Monthly Summaries covering services provided and billed during the period under review were present. Quarterly Summaries covering services provided/billed during the period under review were completed but were not aligned with the Support Plan effective date.

#	Performance Measure/Standard	Protocol	Not Met Reasons
		If service has not been rendered long enough for a Quarterly Summary to be required, score N/A.	
13	The third Quarterly/Annual Report covering services provided and billed during the period under review is in the record.		 Third Quarterly/Annual Report covering services provided/billed during the period under review was not in the record. (B) Third Quarterly/Annual Report covering services provided/billed during the period under review did not contain a summary of the first three quarters of the Support Plan year. Third Quarterly/Annual Report covering services provided/billed during the period under review was completed, but not prior to the Support Plan effective date. (B)
14	The provider maintains accurate Service Authorization(s) covering services provided and billed during the period	CMS Assurance - Service Plan RECORD REVIEW Service Authorizations are provided quarterly or more frequently as changes dictate.	 No Service Authorizations were in the record covering services provided and billed during the period under review. One or more Service Authorizations covering services provided and billed during the period

#	Performance Measure/Standard	Protocol	Not Met Reasons
	under review.	 Review the Service Authorization for Behavior Analysis and ensure: A Service Authorization is available to cover all services provided and billed during the period under review; The Service Authorization(s) is in approved status; The Service Authorization(s) is for the correct rate (agency vs. solo – geographic vs. non-geographic, ratio). Refer to the current APD Provider rate table as needed. WSCs and service providers must verify the Service Authorization is correct according to the authorized amount of services in the iBudget system. If corrections are needed the service provider should immediately contact the WSC for resolution. Consider provider due diligence in securing corrected Service Authorizations when incorrect ones are received. 	 under review were not in the record. 3) One or more Service Authorizations covering services provided and billed during the period under review were not in approved status. 4) One or more Service Authorizations covering services provided and billed during the period under review did not indicate the correct rate.
15	The provider renders the service in accordance with the Handbook.	 CMS Assurance - Service Plan RECORD REVIEW Review provider records for Service Authorizations. Determine Service Authorization(s) are available covering services provided and billed during the period under review. Review data collection documentation and Daily Progress Notes/Service Logs for information that supports 	 Unable to determine due to absence of supporting documentation. Service is not being rendered in accordance with the Handbook. (B)

#	Performance Measure/Standard	Protocol	Not Met Reasons
		 frequency of service provision approved ratio. (days per week/month, Q/H per day/week, etc.) If service authorizations are not present for some or all of the period under review other documentation such as Daily Progress Notes/Service Logs, Behavior Plans, Support Plans, etc. can be used. If service is being routinely rendered at a frequency less than or more than the Service Authorization, score as Met and add a discovery. This standard is subject to identification of a potential 	
		billing discrepancy	
16	The provider is in compliance with billing procedures and the Medicaid provider agreement.	 CMS Assurance – Financial Accountability RECORD REVIEW Provider is not to bill for services prior to rendering service. Review Claims data for date billed. Review dates on Daily Progress Notes/Service Logs. Determine whether or not services were rendered prior to billing for each month in the review period. Provider bills the appropriate rate: Solo vs. Agency This standard is subject to identification of a potential 	 Provider billed for services prior to rendering services on one or more dates during the period under review. Provider is a solo provider but is billing at the agency rate. (B)
47		billing discrepancy	
17	Services are not billed in excess of 16 units of service per day.	CMS Assurance – Financial Accountability RECORD REVIEW	 Services were billed in excess of 16 units of service per day. (B)

#	Performance Measure/Standard	Protocol	Not Met Reasons
		Review Daily Progress Notes/Service Logs for the entire period of review against claims data to determine units of service billed each date of service.	
		This standard is subject to identification of a potential billing discrepancy	
18	Monthly updates to graphic displays of acquisition and reduction behaviors are in the record for each month of the period of review.	 CMS Assurance – Financial Accountability RECORD REVIEW 65G-4.009(9) F.A.C. The provider shall take reasonable steps to ensure data collection for behaviors targeted for increase and decrease during the entire period services are in effect. Graphic displays of weekly data for behaviors targeted for change shall be maintained and up-dated by the provider. Review record for graphic data displays for each month in the review period. Determine if graphic displays of acquisition and reduction behaviors are updated at least monthly. Monthly graphs should include at a minimum monthly data points for each behavior being graphed. Data collected to support each monthly graph must be present. Refer to applicable Behavior Analysis Service Plan to determine identified data collection method Do not score as Not Met if updates are unable to be completed each month due to periodic data collection problems outside of the Analyst's control. Look for due diligence in resolving data collection barriers. 	 One or more monthly updates to graphic displays of acquisition and reduction behaviors were not in the record. Supporting documentation for one or more monthly graph was not present.

#	Performance Measure/Standard	Protocol	Not Met Reasons
		Note: If provider switched to completing Quarterly summaries, Graphic Display Data must continue to be updated at least Monthly.	
19	Training for parents, caregivers and staff on the Behavior Analysis Service Plan is documented.	 CMS Assurance - Service Plan RECORD REVIEW/PROVIDER INTERVIEW Determine who is currently working with the person: staff, family, other caregivers Ask the provider to explain the method of documenting this training. Check for documentation to determine if individuals identified have been trained on the Behavior Analysis Service Plan Note: This standard pertains only to people integral to plan – the people who see the person. If the person lives at home with parents, it will include parents. If in a group home or day program, it will include residential and/or day program staff. If the person goes home on visits, it would include the family and the group home. Plan should indicate who should be trained and in what setting programs are implemented. 	 Documentation did not reflect training for parents/other caregivers on the Behavior Analysis Service Plan. Documentation did not reflect training for staff on the Behavior Analysis Service Plan. Documentation reflected training for some, but not all of the people integral to the plan.
20	The provider assists the individual/legal representative to know about rights.	 CMS Assurance - Service Plan RECORD REVIEW/PROVIDER INTERVIEW Ask the provider how they inform individuals and their families or guardians of their rights and responsibilities as related to this service and how frequently. Ask the provider for examples of how they have assisted individuals to fully exercise their rights and make informed choices. 	 Provider documentation did not reflect evidence of assisting the individual/legal representative to know about rights as related to this service. Provider was able to describe efforts to assist the individual/legal representative to know about rights as related to this service, but had not documented the information.

#	Performance Measure/Standard	Protocol	Not Met Reasons
		 Ask the provider for documentation supporting discussion. Ask the provider for examples of how they observe the rights and responsibilities of individuals. One example may be a consent to services form signed by the individual. 	
21	The provider has a method in place to gather information about the individual's physical and behavioral/emotional health on an ongoing basis.	 CMS Assurance – Health and Welfare RECORD REVIEW/PROVIDER INTERVIEW Ask the provider for method of documenting historical physical and behavioral/emotional health. Ask the provider for method of collecting and documenting current information about the individual's physical and behavioral/emotional health. Review record for documentation supporting stated method. Documentation may include intake forms, stand-alone forms, or other available documentation. For Behavior Analysis a well written and updated Behavior Analysis Service Plan may meet this requirement. 	 Provider has no method in place to gather information about the individual's physical health. Provider has no method in place to gather information about the individual's behavioral/emotional health. The provider is knowledgeable of the individual's physical health but documentation does not demonstrate provider's efforts to gather information for their records. The provider is knowledgeable of the individual's behavioral/emotional health but documentation does not demonstrate provider's efforts to gather information for their records. Key/Critical pieces of physical health information were absent from the record. Key/Critical pieces of behavioral/emotional information were absent from the record.
22	The provider submits documents to the Waiver Support Coordinator as required.	 CMS Assurance - Service Plan RECORD REVIEW/PROVIDER INTERVIEW Ask the provider how required documents are submitted to the WSC. Documentation to be submitted: 	 Provider did not have evidence indicating submission of copies of Daily Progress Notes/Service Logs. Provider did not have evidence indicating submission of copies of assessment report within 30 days of initially providing services. Provider did have evidence indicating

 Daily Progress Notes/Service Logs for dates of service billed Graphic display of acquisition and reduction target behaviors Behavior Analysis Service Plan within 90 days of first billed date of service Evidence that the provider has submitted the Behavior Analysis Service Plan to the LRC as required by 656-4 within 5 days of implementation Quarterly or Monthly Summary for each quarter or month in which services were provided. The third Quarterly/Annual Summary at least 30 days prior to the Support Plan effective date Copy of assessment report (if completed and billed for during review period) Review available documentation for proof of submission to the WSC. Examples could include fax transmittal reports with cover sheet indicating gexact descriptions of a copy of updates to the intervention plan as it is modified. Provider did not have evidence indicating submission of a copy of updates to the intervention plan as it is modified. Provider did not have evidence indicating submission of a copy of updates to the intervention plan as it is modified. Provider did not have evidence indicating submission for proof of submission of a copy of updates to the intervention plan as it is modified. Provider did not have evidence indicating submission of copies of the third Quarterly/Annual Report at least 30 days prior to the Support Plan effective date. Provider did not have evidence indicating submission for proof of updates to the intervention plan as it is modified. 	#	Performance Measure/Standard	Protocol	Not Met Reasons
			 service billed Graphic display of acquisition and reduction target behaviors Behavior Analysis Service Plan within 90 days of first billed date of service Evidence that the provider has submitted the Behavior Analysis Service Plan to the LRC as required by 65G- 4 within 5 days of implementation Quarterly or Monthly Summary for each quarter or month in which services were provided. The third Quarterly/Annual Summary at least 30 days prior to the Support Plan effective date Copy of assessment report (if completed and billed for during review period) Review available documentation for proof of submission to the WSC. Examples could include fax transmittal reports with cover sheet indicating exact descriptions of what was faxed, submission tracking logs, date stamps, or indication of date of submission and method sent on the 	 not within 30 days of initially providing services. 4) Provider did not have evidence indicating submission of copies of Quarterly or Monthly Summaries. 5) Provider did not have evidence indicating submission of graphic displays. 6) Provider did not have evidence indicating submission of a copy of the Behavior Analysis Service Plan within 90 days of initially providing service. 7) Provider did have evidence indicating submission of the Behavior Analysis Service Plan, but not within 90 days of initially providing service. 8) Provider did not have evidence indicating submission of a copy of updates to the intervention plan as it is modified. 9) Provider did not have evidence indicating submission of copies of the third Quarterly/Annual Report at least 30 days prior to the Support Plan effective date. 10) Provider did have evidence indicating submission of copies of the third Quarterly/Annual Report but not at least 30