

## Service Specific Record Review – Life Skills Development 2 (SEC)

#	Performance Measure/Standard	Protocol	Not Met Reasons	CMS Assurance
1	The provider has complete Service Logs covering services provided and billed during the period under review.	<p>CMS Assurance – Financial Accountability iBudget Handbook RECORD REVIEW</p> <ul style="list-style-type: none"> <li>• Review Services Log(s) for the entire period of review.</li> <li>• Determine that Service Log(s) include all required components. <ul style="list-style-type: none"> <li>▪ Name of the service rendered</li> <li>▪ Name of individual receiving service</li> <li>▪ Name of individual providing service</li> <li>▪ Date of service</li> <li>▪ Time in/out</li> <li>▪ Brief synopsis of the goal(s) addressed</li> </ul> </li> <li>• Review Service Log(s) against claims data to ensure accuracy in billing.</li> <li>• If necessary, request Remittance Vouchers to compare.</li> </ul> <p style="text-align: center;"><b>This standard is subject to identification of a potential billing discrepancy</b></p>	<ol style="list-style-type: none"> <li>1) Provider did not have Service Logs for some/all dates of services provided/billed during the period under review. (B)</li> <li>2) (New) Service Logs covering services provided and billed during the period under review did not contain the name of the service.</li> <li>3) Service Logs covering services provided/billed during the period under review did not contain the recipient's name. (B)</li> <li>4) Service Logs covering services provided/billed during the period under review did not contain the date service was rendered. (B)</li> <li>5) Service Logs covering services provided/billed during the period under review did not contain time in/out. (B)</li> <li>6) (New) Service Logs covering services provided/billed during the period under review did not contain name of individual providing the service.</li> <li>7) Service Logs covering services provided/billed during the period under review did not contain a brief synopsis of the goal(s) addressed. (B)</li> <li>8) Discrepancies were noted between units billed and services documented. (B)</li> </ol>	Service Plan
2	The Employment Stability Plan/Implementation Plan covering services provided and billed during the period under review	<p>CMS Assurance – Financial Accountability iBudget Handbook RECORD REVIEW</p> <ul style="list-style-type: none"> <li>• Review record to determine Support Plan(s) effective date and compare with Employment Stability Plan/Implementation Plan development</li> </ul>	<ol style="list-style-type: none"> <li>1) Employment Stability Plan/Implementation Plan covering services provided/billed during the period under review was not in the record for some or all period of review. (B)</li> <li>2) Employment Stability Plan/Implementation Plan was not completed within 30 days following the initiation of the new service. (B)</li> </ol>	Service Plan

## Service Specific Record Review – Life Skills Development 2 (SEC)

	<p>is in the record.</p>	<p>date.</p> <ul style="list-style-type: none"> <li>• Review record for Employment Stability Plan/Implementation Plan for the entire period of review (this may require review of 2 Employment Stability Plan/Implementation Plans).</li> <li>• Employment Stability Plan/Implementation Plan must be developed/completed within 30 days following the annual Support Plan effective date for continuation services</li> </ul> <p style="text-align: center;"><b>Or</b></p> <ul style="list-style-type: none"> <li>• Within 30 days following the initiation (Service Authorization effective date) of a new service.</li> </ul> <p style="text-align: center;"><b>And</b></p> <ul style="list-style-type: none"> <li>• At any time updates and changes are made before they are implemented and annually thereafter.</li> </ul> <p>If the provider has not rendered services more than 30 days, score N/A.</p> <p style="text-align: center;"><b>This standard is subject to identification of a potential billing discrepancy</b></p>	<ol style="list-style-type: none"> <li>3) Employment Stability Plan/Implementation Plan was not completed within 30 days following the Support Plan effective date. (B)</li> <li>4) Employment Stability Plan/Implementation Plan was not completed within 30 days when updates and changes were made.</li> </ol>	
3	<p>The current Employment Stability Plan/Implementation Plan covering services provided and billed during the period under review contains all required components.</p>	<p>CMS Assurance – Financial Accountability iBudget Handbook RECORD REVIEW</p> <p>NOTE: For the purposes of this standard, only the “current Employment Stability Plan/Implementation Plan” will be reviewed. This is defined as the Support Plan in effect at the time of the record review.</p> <ul style="list-style-type: none"> <li>• Review individual record for current Employment Stability Plan/Implementation Plan.</li> <li>• Review the Employment Stability Plan/Implementation Plan(s) to determine they</li> </ul>	<ol style="list-style-type: none"> <li>1) Current Employment Stability Plan/Implementation Plan covering services provided/billed during the period under review was not in the record.</li> <li>2) Current Employment Stability Plan/Implementation Plan covering services provided/billed during the period under review did not include the name of the recipient served.</li> <li>3) Current Employment Stability Plan/Implementation Plan covering services provided/billed during the period under review did not include goal(s) from the Support Plan the service will address.</li> <li>4) Current Employment Stability Plan/Implementation Plan covering services provided/billed during the</li> </ol>	Service Plan

## Service Specific Record Review – Life Skills Development 2 (SEC)

		<p>contain, at a minimum:</p> <ul style="list-style-type: none"> <li>○ Name, address, and contact information of the individual served;</li> <li>○ Goal(s) from the Support Plan the service will address.</li> <li>○ Strategies employed to assist the individual in meeting the Support Plan goal(s).</li> <li>○ Method to be used for data collection and assessment of the individual’s progress in achieving the Support Plan goal(s).</li> <li>○ The development of natural supports in the workplace;</li> <li>○ The reduction of Life Skills Development 2 services rendered (fading of paid supports) as efficiently as possible to provide only the minimal Life Skills Development 2 services necessary for the supported employee to maintain competitive employment;</li> <li>○ The supported employee’s employment outcomes, including their job/position attained, benefits they receive, their rate of pay, the number of hours worked weekly, and other quality indicators as requested by the Agency.</li> </ul> <ul style="list-style-type: none"> <li>● Review current Employment Stability Plan/Implementation Plan to determine if changes or updates were completed prior to implementation.</li> <li>● Review the Support Plan to determine that Life Skills Development 2 goals are indicated and included on the Employment Stability Plan/Implementation Plan.</li> </ul> <p>If the provider has not rendered services for 30 days or more, score N/A.</p>	<p>period under review did not include the strategies employed to assist the recipient in meeting the Support Plan goal(s).</p> <p>5) Current Employment Stability Plan/Implementation Plan covering services provided and billed during the period under review did not identify the method to be used for data collection and assessment of progress in achieving the Support Plan goal(s).</p> <p>6) Current Employment Stability Plan/Implementation Plan covering services provided and billed during the period under review did not identify the development of natural supports in the workplace.</p> <p>7) Current Employment Stability Plan/Implementation Plan covering services provided and billed during the period under review did not identify the reduction of Supported Employment services rendered (fading of paid supports).</p> <p>8) Current Employment Stability Plan/Implementation Plan covering services provided and billed during the period of review did not include the supported employee’s employment outcomes.</p> <p>9) Current Employment Stability Plan/Implementation Plan covering services provided and billed during the period under review was not updated prior to implementing identified changes.</p>	
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## Service Specific Record Review – Life Skills Development 2 (SEC)

4	<p>The Employment Stability Plan/Implementation Plan is submitted to the individual and when applicable, the legal representative, within required time frames.</p>	<p>CMS Assurance – Financial Accountability iBudget Handbook RECORD REVIEW/PROVIDER INTERVIEW</p> <p>NOTE: For the purposes of this standard, only the “current Employment Stability/Implementation Plan” will be reviewed. This is defined as the Support Plan in effect at the time of the record review.</p> <ul style="list-style-type: none"> <li>• Review the Employment Stability Plan/Implementation Plan to determine if signed by the individual.</li> <li>• Ask the provider about method used to document mailing.</li> <li>• Review the date provided to individual and guardian to determine if provided within 30 days of the support plan effective date or initiation of a new service.</li> <li>• Ask the provider about method used to document delivery.</li> </ul> <p>If the provider has not rendered services for more than 30 days, score N/A.</p>	<ol style="list-style-type: none"> <li>1) Provider did not have documentation the Employment Stability Plan/Implementation Plan was provided to the individual.</li> <li>2) Provider did not have documentation the Employment Stability Plan/Implementation Plan was provided to the legal representative.</li> <li>3) Provider documentation indicates the Employment Stability Plan/Implementation Plan was provided to the individual but not within the 30 day timeframe.</li> <li>4) Provider documentation indicates the Employment Stability Plan/Implementation Plan was provided to the legal representative but not within the 30 day timeframe.</li> </ol>	Financial Account
5	<p>A Quarterly Summary covering services provided and billed during the period under review is in the record.</p>	<p>CMS Assurance – Financial Accountability iBudget Handbook RECORD REVIEW</p> <ul style="list-style-type: none"> <li>• Determine Support Plan effective date to determine Quarterly Summary timeframes for each individual to be reviewed.</li> <li>• Ask provider if provider completes Monthly Summaries or quarterly summaries. Monthly Summaries in lieu of Quarterly Summaries are acceptable.</li> </ul>	<ol style="list-style-type: none"> <li>1) Quarterly/Monthly Summary covering services provided/billed during the period under review was not in the record. (B)</li> <li>2) Quarterly/Monthly Summaries covering services provided/billed during the period under review were present but were not reflective of progress toward Support Plan goals.</li> <li>3) Some, but not all Quarterly/Monthly Summaries covering services provided/billed during the period under review were present. (B)</li> <li>4) Quarterly/Monthly Summaries covering services provided/billed during the period under review were</li> </ol>	Financial Account

## Service Specific Record Review – Life Skills Development 2 (SEC)

		<ul style="list-style-type: none"> <li>• Determine if the provider is aware of the person’s recent progress towards or achievement of personal goals the person has recently achieved.</li> <li>• Ask the provider to describe goals achieved for the individual from the Implementation Plan.</li> <li>• Review summaries. Each summary must contain: A summary of the individual’s progress toward achieving Support Plan goals for services billed in that month/quarter.</li> </ul> <p>If service has not been rendered long enough for a Quarterly Summary to be required, score N/A.</p> <p style="text-align: center;"><b>This standard is subject to identification of a potential billing discrepancy</b></p>	<p>completed, but not within required timeframes. (B)</p> <p>5) Quarterly Summaries covering services provided/billed during the period under review were completed but were not aligned with the Support Plan effective date.</p>	
6	<p>The third Quarterly/Annual Report covering services provided and billed during the period under review is in the record.</p>	<p>CMS Assurance – Financial Accountability iBudget Handbook RECORD REVIEW</p> <ul style="list-style-type: none"> <li>• Review record to determine Support Plan effective date.</li> <li>• Determine if the Annual Report is a component of the third quarterly report or a separate document (which is acceptable).</li> <li>• Review Annual Report for content to ensure it includes at a minimum: <ul style="list-style-type: none"> <li>○ A summary of the first three quarters of the Support Plan year</li> <li>○ Description of supports and services received throughout the year</li> <li>○ Description of the person’s progress, or lack thereof, toward achieving each of the goals identified on the Support Plan=;</li> <li>○ Description of any pertinent information about</li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>1) Current third Quarterly/Annual Report covering services provided/billed during the period under review was not in the record. (B)</li> <li>2) Third Quarterly/Annual Report covering services provided/billed during the period under review did not contain a summary of the recipient’s progress toward achieving Support Plan goal(s).</li> <li>3) 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.</li> <li>4) (New) Third Quarterly/Annual Report covering services provided/billed during the period under review did not contain a description of supports and services received throughout the year.</li> <li>5) (New) Third Quarterly/Annual Report covering services provided/billed during the period under review did not contain a description of any pertinent information about significant events that</li> </ol>	Financial Account

## Service Specific Record Review – Life Skills Development 2 (SEC)

		<p>significant events that have happened in the life of the recipient for the previous year.</p> <ul style="list-style-type: none"> <li>• Determine if progress statements are consistent with supporting data in documentation.</li> <li>• Determine if the third Quarterly/Annual Report was completed at least 60 days prior to the Support Plan effective date.</li> </ul> <p>If the provider was providing services to the person at the time the last Annual Report would have been due an annual report is still required even if the provider has served the person less than one full year., If the provider was not providing services at the time of the last annual, score as N/A.</p> <p style="text-align: center;"><b>This standard is subject to identification of a potential billing discrepancy</b></p>	<p>have happened in the life of the recipient during the previous year.</p> <p>6) (New) Third Quarterly/Annual Report covering services provided/billed during the period under review was completed, but not 60 days prior to the Support Plan effective date.</p> <p>7) 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)</p>	
7	<p>The provider maintains Service Authorization(s) covering services provided and billed during the period under review.</p>	<p>CMS Assurance - Service Plan iBudget Handbook RECORD REVIEW</p> <p>Service authorizations are provided quarterly or more frequently as changes dictate.</p> <ul style="list-style-type: none"> <li>• Review the Service Authorization for Life Skills Development 2 to ensure: <ul style="list-style-type: none"> <li>○ A Service Authorization is available to cover all services provided and billed during the period under review.</li> <li>○ The Service Authorization(s) is in approved status;</li> <li>○ The Service Authorization(s) is for the correct rate (agency vs. solo – geographic vs. non-geographic, ratio).</li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>1) No Service Authorizations were in the record covering services provided and billed during the period under review.</li> <li>2) One or more Service Authorizations covering services provided and billed during the period under review were not in the record.</li> <li>3) One or more Service Authorizations covering services provided and billed during the period under review were not in approved status.</li> <li>4) One or more Service Authorizations covering services provided and billed during the period under review did not indicate the correct rate.</li> </ol>	Service Plan

## Service Specific Record Review – Life Skills Development 2 (SEC)

		<ul style="list-style-type: none"> <li>○ Refer to the current APD Provider rate table as needed.</li> </ul> <p>WSCs <b>and</b> 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.</p> <ul style="list-style-type: none"> <li>○ Consider provider due diligence in securing corrected Service Authorizations when incorrect ones are received.</li> </ul>		
8	<p>The provider renders the service in accordance with the Handbook.</p>	<p>CMS Assurance - Service Plan iBudget Handbook RECORD REVIEW</p> <ul style="list-style-type: none"> <li>• If service authorizations are not present for some or all of the period under review other documentation such as service logs, daily progress note, implementation plans, support plans, etc. can be used.</li> <li>• Review provider records for service authorizations.</li> <li>• Determine Service Authorization(s) are available for the entire period of review.</li> <li>• Determine if service is approved to occur at 1:1 or 1:2-8 ratios.</li> <li>• Determine if service is implemented using the approved staff ratio.</li> <li>• Review Service Logs to determine that ratio is correct.</li> <li>• Review Support Plan or other provider documentation to determine age of individual.</li> <li>• Determine if service is rendered only to individual's age 22 or older.</li> </ul>	<ol style="list-style-type: none"> <li>1) Documentation indicated service is being rendered at an unapproved ratio.</li> <li>2) Service is not being rendered in accordance with the Handbook. (B)</li> <li>3) Documentation indicates service is being rendered to an individual who is not at least 22 years of age. (B)</li> <li>4) Unable to determine due to absence of supporting documentation.</li> </ol>	Service Plan

## Service Specific Record Review – Life Skills Development 2 (SEC)

		<p>If service is being routinely rendered at a frequency less than or greater than the Service Authorization, score as Met and add a discovery.</p> <p style="text-align: center;"><b>This standard is subject to identification of a potential billing discrepancy</b></p>		
9	<p>Provider is in compliance with billing procedures and the Medicaid provider agreement.</p>	<p>CMS Assurance – Financial Accountability iBudget Handbook RECORD REVIEW/PROVIDER INTERVIEW</p> <p>Provider is not to bill for services prior to rendering.</p> <ul style="list-style-type: none"> <li>• Review Claims data for date billed.</li> <li>• Review dates on Service Logs.</li> <li>• Determine whether or not services were rendered prior to billing for each date of service the review period.</li> </ul> <p>Provider bills the appropriate rate:</p> <ul style="list-style-type: none"> <li>• Solo vs. Agency</li> <li>• Approved ratio of 1:1 or 1:2-8.</li> </ul> <ul style="list-style-type: none"> <li>• Determine if service are billed only for individual's age 22 or older.</li> <li>• Review Service Logs to ensure the provider does not receive payment for incentives, subsidies of unrelated vocational training.</li> </ul> <p>Review Service Logs and other documentation to ensure the provider does not bill for supports provided by the individual's employer.</p> <p style="text-align: center;"><b>This standard is subject to identification of a potential billing discrepancy</b></p>	<ol style="list-style-type: none"> <li>1) Provider billed for services prior to rendering services on one or more dates during the period under review.</li> <li>2) Provider is a solo provider but is billing at the agency rate. (B)</li> <li>3) Provider is billing at an unapproved ratio. (B)</li> <li>4) Provider is billing for services provided by the individual's employer. (B)</li> <li>5) Provider is billing for services provided to an individual who is not at least 22 years of age. (B)</li> <li>5) Documentation indicated the provider receives payment for incentives, subsidies of unrelated vocational training. (B)</li> <li>6) Provider billed at an incorrect rate. (B)</li> <li>7) Service is not being billed in accordance with the Handbook. (B)</li> </ol>	Financial Account.



## Service Specific Record Review – Life Skills Development 2 (SEC)

10	The provider assists in securing and maintaining employment according to the individual's desired outcomes.	<p>CMS Assurance - Service Plan iBudget Handbook RECORD REVIEW/PROVIDER INTERVIEW</p> <ul style="list-style-type: none"> <li>• Ask the provider to describe process used to assist individuals in securing employment</li> <li>• Ask the provider to describe method used to determine the type of work the individual is capable of performing, the activities, the hours, pay and needed supports.</li> <li>• Review the Service Logs, Quarterly Summaries, Employment Stability Plan/Implementation Plan and other provider documentation to determine method used to assist in securing employment based on desired outcomes.</li> <li>• Look for considerations of hours of employment, time of day/week, type of work, level of pay, desired benefits, etc.</li> </ul>	<ol style="list-style-type: none"> <li>1) Provider did not have methods to learn about the individual desires related to employment.</li> <li>2) Documentation did not indicate the provider's efforts to secure employment according to the individual's desired outcome.</li> <li>3) Documentation did not indicate the provider is aware of the individual's interests regarding community employment.</li> <li>4) Documentation did not indicate the provider has addressed the person's interests regarding community employment.</li> <li>5) Documentation or interview results showed the choice of employment was inconsistent with the individual's desired outcome(s).</li> </ol>	Service Plan
11	The provider addresses the individual's choices and preferences.	<p>CMS Assurance - Service Plan iBudget Handbook RECORD REVIEW/PROVIDER INTERVIEW</p> <ul style="list-style-type: none"> <li>• Ask the provider to explain method of soliciting and documenting individual's choices and preferences as related to this service.</li> <li>• Review record for documentation supporting stated method of addressing individual's choices and preferences.</li> <li>• Ask the provider for description of individual's choices and preferences.</li> <li>• Review Service Log (s) to determine if choices and preferences are solicited and addressed within documentation.</li> </ul>	<ol style="list-style-type: none"> <li>1) Documentation did not indicate the provider was aware of the individual's choices and preferences related to employment.</li> <li>2) Documentation indicated the provider was aware, but had not addressed the individual's choices and preferences related to employment.</li> <li>3) Provider was aware of but had not documented the individual's choices and preferences related to employment.</li> </ol>	Service Plan

## Service Specific Record Review – Life Skills Development 2 (SEC)

		<ul style="list-style-type: none"> <li>Review Support Plan and Employment Stability Plan/Implementation Plan to determine if person's choices and preferences are identified and match provider activities.</li> </ul> <p>If service rendered under 45 days by provider, score N/A</p>		
12	The provider assists the individual/legal representative to know about rights.	<p>CMS Assurance - Service Plan iBudget Handbook RECORD REVIEW/PROVIDER INTERVIEW</p> <ul style="list-style-type: none"> <li>Ask the provider how they inform individuals and their families or legal representatives of their rights and responsibilities as related to this service and how frequently.</li> <li>Ask the provider for examples of how they have assisted individuals to fully exercise their rights and make informed choices.</li> <li>Review documentation supporting discussion with the provider.</li> <li>Ask the provider for examples of how they observe the rights and responsibilities of individuals.</li> </ul>	<ol style="list-style-type: none"> <li>Provider documentation did not reflect evidence of assisting the individual/legal representative to know about rights.</li> <li>Provider was able to describe efforts to assist the individual/legal representative to know about rights, but had not documented the information.</li> </ol>	Service Plan
13	The provider has justification to support individual remaining in job development status for more than two months.	<p>CMS Assurance – Financial Accountability iBudget Handbook RECORD REVIEW</p> <ul style="list-style-type: none"> <li>Ask the provider about method used to review individual's job development status.</li> <li>Review service logs/documentation for justification stating reasons employment has not been obtained and strategies planned for securing employment.</li> <li>If individual remained in job development status for more than 2 months during the period of review,</li> </ul>	<ol style="list-style-type: none"> <li>The provider did not have justification to support individual remaining in job development status for more than two months. (B)</li> <li>(New) Provider had justification but had not received written approval from APD Regional Director. (B)</li> </ol>	Financial Account

## Service Specific Record Review – Life Skills Development 2 (SEC)

		<p>determine if provider received written approval from APD Regional Director.</p> <ul style="list-style-type: none"> <li>If individual did not stay in job development status for more than 2 months score this standard as N/A</li> </ul> <p><b>This standard is subject to identification of a potential billing discrepancy</b></p>		
14	<p>The provider has a method in place to gather information about the individual's physical and behavioral/emotional health on an ongoing basis.</p>	<p>CMS Assurance – Health and Welfare iBudget Handbook RECORD REVIEW/PROVIDER INTERVIEW</p> <ul style="list-style-type: none"> <li>Ask the provider for method of documenting historical physical and behavioral/emotional health.</li> <li>Ask the provider for method of collecting and documenting current information about the individual's physical and behavioral/emotional health.</li> <li>Review file for documentation supporting stated method.</li> <li>Documentation may include intake forms, stand-alone forms, or other available documentation.</li> </ul>	<ol style="list-style-type: none"> <li>Provider has no method in place to gather information about the individual's physical health.</li> <li>Provider has no method in place to gather information about the individual's behavioral/emotional health.</li> <li>The provider is knowledgeable of the individual's physical health but documentation does not demonstrate provider's efforts to gather information for their records</li> <li>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</li> <li>Key/Critical pieces of physical health were absent from the record.</li> <li>Key/Critical pieces of behavioral/emotional health information were absent from the record.</li> </ol>	Health & Welfare
15	<p>The provider submits documents to the Waiver Support Coordinator as required.</p>	<p>CMS Assurance - Service Plan iBudget Handbook RECORD REVIEW/PROVIDER INTERVIEW</p> <ul style="list-style-type: none"> <li>Ask the provider for method of submitting documents to the Waiver Support Coordinator (WSC).</li> <li>Review Service logs or other available documentation for proof of submission to the WSC.</li> </ul>	<ol style="list-style-type: none"> <li>Provider did not have evidence of submitting copies of Service Log (s).</li> <li>Provider did not have evidence of submission of the Employment Stability Plan/Implementation Plan within 30 days of the Support Plan effective date.</li> <li>Provider did have evidence of submission of the Employment Stability Plan/Implementation Plan but not within 30 days of the Support Plan effective date.</li> <li>Provider did not have evidence of submission of</li> </ol>	Service Plan

## Service Specific Record Review – Life Skills Development 2 (SEC)

		<ul style="list-style-type: none"> <li>• Documents to be provided:             <ul style="list-style-type: none"> <li>▪ Service Logs</li> <li>▪ Employment Stability Plan/Implementation Plan</li> <li>▪ Monthly/Quarterly/Annual Reports</li> </ul> </li> <li>• Examples could include fax transmittal reports with cover sheet indicating descriptions of what was faxed, submission tracking logs, date stamps, or indication of date of submission and method sent on the documentation.</li> </ul> <p>If PCR, ask the WSC for proof of receipt of documentation from the provider.</p>	<p>Quarterly/Monthly Summaries.</p> <p>5) (New) Provider did not have evidence of submission of 3<sup>rd</sup> Quarter/Annual Report at least 60 days prior to Support Plan effective date.</p> <p>6) (New) Provider did have evidence of submission of 3<sup>rd</sup> Quarter/Annual Report but not at least 60 days prior to Support Plan effective date.</p>	
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