

August 9, 2007

Developmental Services
Support Coordination
Waiver Support Coordination Consultation Tool

<p>The Waiver Support Coordination Consultation (WiSCC) defines an Outcome as results that reflect communicated choices and preferences that matter most to the Person.</p> <p>WSC's should keep in mind the requirements as specified in the Developmental Services Waiver Services Florida Medicaid Coverage and Limitations Handbook (Handbook) must still be met.</p>	<p>The vision of the Waiver Support Coordination Consultation (WiSCC) is to enhance the effectiveness of the WSC service delivery system, to produce results that reflect communicated choices and preferences that matter most to the Person. The consultation is designed to be Person centered and outcome based. It explores organizational practices, which may include leadership, systems, and quality management.</p> <p>An integral component of the interview is to determine if:</p> <ul style="list-style-type: none">• a range of <u>educational</u> opportunities have been provided for the Person,• the Person has been <u>exposed</u> to a variety of ideas; and• the Person has had practical <u>experience</u> with a range of opportunities. <p>The “<u>educate, expose and experience</u>” (EEE) theme is woven throughout the entire consultative process.</p> <p>During the consultative process, the Quality Improvement Consultant conducts interviews with Persons within the sample, using the Personal Outcome Measure (POM) tool as well as other information collection documents. This information is used to make determinations regarding the Persons’ outcome expectations and related supports. These interviews, the Medical Peer Review, the WSC interview, and the review of selected documents and organizational practices, are components of the interactive WiSCC process.</p>
<p>“a” = Alert</p> <p>“R” = Recoupment</p>	<p>Key:</p> <p>A = Achieving</p> <p>I = Implementing</p> <p>E =Emerging</p> <p>N =Not Emerging</p> <p>Met; Not Met; NA=Not Applicable</p>

E	Expectation	Probes	Considerations	A	I	E	N
1	WSC has an effective method for learning about the People who are receiving their supports and services.	<p>Conduct an interview with a sample of People receiving services from the WSC.</p> <p>Discuss with the WSCs:</p> <ul style="list-style-type: none"> • Their understanding of an historical perspective for the People they serve. • Their methodology for capturing and recording information they learn about the Person on an ongoing basis. <p>WSC demonstrates/describes how services have assisted the Persons. What can the Person do now that they could not do before services?</p>	<p>LEARNING Components: Transition process for WSC to begin serving someone; an historical understanding of the Person's life; methodology to consistently and systematically learn substantial information about the Person and how the Person defines results that are most important; there are ongoing discussions concerning any changing needs that could affect the Person's priorities; ongoing contact with the Person and others in the support network; adaptability to Person's communication style; documentation in the SP and the progress notes reflects the WSC's system for learning about the People who are receiving supports and services.</p> <p>Question: To whom does WSC go when they do not know how to proceed? (Mentoring)</p> <p>Mindset: Where has the Person been, where is the individual now and where is the Person going?</p> <p>Findings:</p> <p><u>Achieving:</u> All "Learning" components are consistently and systematically applied. WSC has a thorough understanding of the People served, including their history, important People in their lives, and what they want to achieve in life. Consistent systems exist to assist the WSC to obtain this level of knowledge for any new Persons being served. There are on going probing discussions concerning any changing needs that would affect the Person's priorities. Documentation in the Support Plan and the progress notes reflects a systematic and consistent approach for learning about the People who are receiving supports and services including historical, current, and future information.</p> <p><u>Implementing:</u> Most "Learning" components are being consistently addressed, however, there are no on going probing discussions regarding changing needs that would affect the Person's priorities. The WSC has a good understanding of where the Person has been, where the Person is now, and where the Person is going, however documentation in the Support Plan and the progress notes does not consistently reflect the WSC's system for learning about the People who are receiving supports and services.</p> <p><u>Emerging:</u> WSC has knowledge of the People served, however, it is not thorough. There is limited ongoing probing discussions regarding any changing needs that could affect the Person's priorities. Documentation in the Support Plan and progress notes does not reflect a consistent system for gathering historical, current, and future information.</p> <p><u>Not Emerging:</u> WSC has limited or no knowledge on what matters most to the Person. "Learning" components are not adequately addressed. Documentation in the Support Plan and progress notes is inconsistent and not systematic with gathering historical, current, and future information</p>				

Barriers/Findings:

E	Expectation	Probes	Considerations	A	I	E	N
2 A O n/ of f	WSC has a clear understanding of the health, safety, and well-being of the People served and advocates and coordinates in concert with them to support and address identified needs or issues.	<p>Conduct an interview with a sample of People receiving services from the WSC.</p> <p>Discuss with the WSC the methodology used for capturing and recording health, safety, and behavioral information about the Person i.e., how does the WSC:</p> <ul style="list-style-type: none"> • Provide education about availability of a range of health services? • Provide information about process for making decisions? • Support People to manage and direct their own health care? • Continue to address health care concerns, even if preliminary interventions are not suited to the Person's preferences and lifestyle or are not effective? • Assess environmental safety? <p>Determine if the methodology is successful in obtaining needed supports in a joint effort.</p> <p>Discuss with the WSC the methodology used for addressing, documenting, and resolving significant events observed or have been brought to the WSC's attention.</p> <p>Interactively with the WSC, review documentation to show how Incident reports, grievance logs, calls to Abuse/Neglect line, hospitalizations, Baker Acts, police intervention have been used in the past to address problematic situations.</p> <p>Review the central record, i.e., support plan, progress notes, for documentation of these joint efforts. Note: record review is not limited to review of the support plan and progress notes, but may also include additional information, such as assessments, in the record.</p> <p>The alert will be activated when the QIC determines that a Person's health, safety and/or rights are placed in jeopardy and immediate corrective interventions are needed.</p>	<p>UNDERSTANDING Components: Transition process for WSC to begin serving someone; an historical understanding of the Person's health and safety situations; methodology for learning about the Person; ongoing contact with the Person and others in the support network.</p> <p>How does WSC obtain necessary training/education on health and safety issues, both at the basic and at the specialty levels? How does WSC capture and record information?</p> <p>COORDINATION Components: (Implementing) WSC defines their role and determines who takes the lead on specific issues in cooperation with the Person. Identified issues, needs, and concerns are being addressed and communicated to all entities. WSC has a method to ensure that coordination components and necessary follow up are not falling through the cracks. (Achieving) Person is actively involved in the above process. Person is supported to take on a more active role in managing and directing health and safety needs. Person is educated regarding health and safety, including options for service delivery.</p> <p>Question: To whom does WSC go when additional expertise is needed in this area?</p> <p>Mindset: Is best possible health and safety being targeted?</p> <p style="text-align: center;">Findings:</p> <p><u>Achieving:</u> WSC has a clear understanding of the Person's health, safety, and well-being as well as both the Understanding and Coordination Components. Education is occurring regarding preventive health care management, safety practices (In all environments), abuse and neglect and exploitation. Person is directing their own health care. Documentation in the Support Plan and progress notes reflects a systematic and consistent approach for understanding and coordinating health, safety, and well being.</p> <p><u>Implementing:</u> WSC has an understanding of the Person's health status and general safety, as well as the Implementation Level areas of Coordination. Education is occurring regarding preventive healthcare management, safety practices, abuse/neglect and exploitation. Person's needs are being addressed, but the provider/support is making the decisions excluding the Person from understanding the issues and taking on these responsibilities. Documentation in the Support Plan and progress notes reflects a consistent system for gathering health, safety, and well being information.</p> <p><u>Emerging:</u> WSC is aware of the Person's health status and general safety, however efforts to identify and/or address existing issues or provide ongoing education on preventive health, safety, and well-being are limited and/or inconsistent. Documentation in the Support Plan and progress notes does not reflect a consistent system for gathering health, safety, and well being information.</p> <p><u>Not Emerging:</u> WSC has little or no knowledge of the Person's</p>				

			health situation or efforts have not been made to inquire about the Person's situation. WSC may be aware of general health status but is lacking knowledge of specific issues of a significant or critical nature. WSC is not aware of significant occurrences in the Person's life that could have a serious detrimental impact to the Person. WSC is not aware of concerns relating to abuse/neglect. WSC has not assessed the Person's safety or is not aware of a significant safety issue. Documentation in the Support Plan is sparse or nonexistent and not systematic with gathering health, safety, and well being information.				
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Barriers/Findings:

E	Expectation	Probes	Considerations	A	I	E	N
3	The support plan is developed with the Person and is reflective of the communicated choices and preferences that matter most to the Person.	<p>Conduct an interview with a sample of People receiving services from the WSC. During the interview, ask the Person how he/she participates in the development of the support plan and cost plan.</p> <p>Have a comparative discussion with the WSC to determine how the Persons they support actively participate in the development of their support plan, and cost plan.</p> <p>Review the central record (to include but not be limited to the Support Plan, Cost Plan) to determine if the Support Plan is reflective of that which is a priority to the Person. Is the Person's signature on the support plan?</p> <p>Based on the interview with the Person and the discussion with the WSC determine if the support plan reflects the choices and preferences that matter most to the Person, or if the support plan is process driven.</p>	<p>DEVELOP Components: The collecting and piecing together of information taken from whatever systems and methodology the WSC has for learning about Persons to "develop" their Support Plan. Support Plan Development includes information gathering, including effective use of the Personal Outcome Measures tool or another Person centered planning tool, building of support network and organizing/facilitating Support Plan Meeting.</p> <p>FACILITATE Components: WSC has a documented method to ensure Person is an active participant in each phase of the development process; the SP is Person driven and subsequently drives WSC and support network efforts; EEE are utilized; Person is empowered, not limited by support network when choosing goals, and strengths are highlighted and built upon. There is documentation that SC works with Persons to regularly assess/reassess priorities, delegate responsibility and ensure accountability.</p> <p>Question: How is the person controlling his/her own supports/services network?</p> <p>Mindset: SP is the tangible written document showing where the Person has been, where the Person is now, present barriers/concerns and where the Person wants to go.</p> <p>Findings:</p> <p>Achieving: Person is actively included in all aspects of Support Plan Development Process; Person is empowered by support network; creative solutions to barriers or challenges are enlisted. Person and the Support Plan are clearly driving services and progress to "where they want to go" is being noted. Plans, goals and tasks identified on the Support Plan focus on the Person's achievement rather than programmatic and service measures. All priority goals are consistently assessed and addressed. Progress notes reflect WSC's activities with the Person, the Person's family as applicable, and the Person's circle of supports prior to the Support Plan meeting. WSC has annual progress reports from other service providers which accurately describe the</p>				

			<p>Person's progress with their goals prior to the Support Plan meeting. Documentation for Support Plan development, and the Support Plan reflect the Person is consistently driving the Support Plan process.</p> <p><u>Implementing</u>: Person is included in most aspects of the Support Plan Development. Priorities and efforts still seem to be primarily driven by support network instead of the Person and their Support Plan. Efforts may also be inconsistent focusing on just one goal while neglecting others. Progress notes reflect minimal contact with the Person, the Person's family as applicable, and the Person's circle of support. Annual progress reports from other service providers do not adequately address the Person's progress towards their goals and have not been received by the WSC prior to the Support Plan meeting. There is little or no effort to reexamine priorities.</p> <p><u>Emerging</u>: Support Plan somewhat reflects the Person and the Person's goals, but development is more provider/process driven. All the development pieces could be happening but WSC is driving or allowing others to drive this process with little to no input from the Person. Documentation for Support Plan development, and the Support Plan reflect most People are not driving the Support Plan process. Progress notes reflect minimal contact with the Person, the Person's family as applicable, and the Person's circle of support prior to the Support Plan meeting. Annual progress reports from other service providers have not been obtained.</p> <p><u>Not Emerging</u>: No relationship between Support Plan and what Person wants. No effort on the part of the WSC to include Person in Support Plan Development process. Documentation for Support Plan development and the Support Plan is rudimentary and the same information is repeated from year to year. Progress notes only reflect the Support Plan meeting occurred. Annual progress reports from other service providers have not been obtained.</p>				
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obsolete

Barriers/Findings:						
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E	Expectation	Probes	Considerations	A	I	E	N
4	WSC has evaluated the effectiveness of and satisfaction with all supports for each Person served, and has implemented strategies to address any barriers that have been identified.	<p>Conduct an interview with a sample of People receiving services from the WSC.</p> <p>Discuss with the WSC the methodology for identifying and recording what services are supporting or what supports are challenging in the service delivery system for the People they serve.</p> <p>Discuss with the WSC the methodology for</p>	ASSESSMENT components: WSC is aware of all supports (paid/unpaid) in Person's life, including healthcare providers; has regular contact with service providers/key supports; ensures effectiveness is defined by Person regarding paid and unpaid supports; determines the Person's satisfaction with and effectiveness of each support; identifies the benefits and the challenges; has knowledge and informs the Person of alternate sources of support; understands the nature of the relationship between the support (family/ long time provider) and Person; is aware of past effectiveness of paid and unpaid supports; system to evaluate should be well rounded-to include: Person's input				

annually assessing People's satisfaction with the WSCs services, and also paid and unpaid supports. Review documented steps/actions the WSC took to address any concerns raised in the satisfaction surveys.

Discuss with the WSC methods in place for educating Persons on the support system so the Person can better assess satisfaction.

Review the central record (i.e. support plan, case notes) to determine if the Support Plan addresses the supports and challenges identified in the service delivery system.

Discuss strategies the WSC has implemented to address barriers identified with ineffective/challenging service delivery system(s).

and/or input from the Person's Personal advocate and Person(s) who knows the Person best, input from supports/service providers, documents; evaluation is ongoing--built into service delivery system; documentation in support plan and progress notes reflects the WSC's evaluation of and the Person's satisfaction with all supports for People served.

EFFECTING CHANGE components: Discusses with Persons the results of assessment and satisfaction activities; Prioritizes order for addressing with Person; Discusses with supports results of assessment activities (with Persons permission); Involves Person and supports in effecting improvements; Develops strategies to address each barrier/challenge; Coordinates needed changes with supports; Promotes positive atmosphere when addressing barriers; Reevaluates supports for effectiveness; Encourages/assists Person to assess effectiveness of supports; Consistently identifies and evaluates all supports for effectiveness; Supports building connections with agents outside the typical service delivery network, e.g. civic organizations, business community, religious institutions; Demonstrates how aggregate information is used to develop strategies to address barriers.

Question: Who does the WSC go to when barrier is overwhelming?

Mindset: Are services effective at assisting the Person to get where they want to go?

Findings:

Achieving: Everything in Implementing and Emerging is present. Reevaluates supports and satisfaction with supports after changes have been implemented. Promotes positive atmosphere. Encourages/assists Person to evaluate effectiveness of and satisfaction with supports. Provides evidence that the WSC is supportive of building connections with and informing the Person of agents outside the typical service delivery network (i.e. Civic organizations, business community, religious institutions, etc). Documentation in the Support Plan, progress notes, and satisfaction surveys reflects a systematic and consistent approach for evaluating the effectiveness of, and the Person's satisfaction with, all supports. WSC consistently acts upon this information to achieve results towards Person's goals or priorities.

Implementing: Aware of most supports. Has regular contact with key supports. System to evaluate is well rounded. Evaluation is ongoing. Has knowledge of alternate sources of support. Understands nature of relationship between Person and support. Discusses assessment/potential changes with Person and supports. Evaluation is ongoing--built into service delivery system. Coordinates needed changes. Documentation in the Support Plan and progress notes is thorough. Strategies and/or systems used to address barriers have not yet been effective in achieving results for the Person, or in addressing identified barriers.

Emerging: WSC is aware of most supports. Has knowledge of barriers/ineffectiveness, however, has no system to identify effective or ineffective supports. Relies on reactive approach. Inconsistently evaluates services/supports. Documentation in progress notes is inconsistent.

Not Emerging: WSC is not aware of key supports in Person's life. WSC does not have knowledge of barriers to service delivery or of services that are ineffective. Documentation in progress notes is rudimentary

Barriers/Findings:

E	Expectation	Probes	Consideration	A	I	E	N
5	WSC has facilitated educational opportunities, practical experiences, and exposure to ideas, to increase opportunities for choice and promote self-determination.	<p>Review precursor information submitted by the WSC to begin evaluating the methodology for providing educational opportunities, practical experiences, and exposure to ideas for the People served and their supports.</p> <p>Conduct an interview with a sample of People receiving services from the WSC.</p> <p>With the Person's consent, elicit additional information from family, providers, and other supports on the effectiveness of increasing opportunities for choice and promoting self-determination.</p> <p>Discuss the WSC's efforts to provide EEE.</p>	<p>EEE Component: Historical understanding of the Person's experiences; understanding of areas where each Persons and his/her supports could benefit from additional education, exposure, and experience; strategy to overcome barriers to living everyday lives; awareness of available formal and informal life experiences in the local community; EEE is an integral part of their service delivery. Ongoing discussions regarding exposure to new experiences and People. Documentation of EEE is reflected in the SP and progress notes.</p> <p>CHOICE Component: How does WSC determine what options are presented to the Persons served? How does WSC promote informed decision-making? How does WSC educate Person on the potential risks involved in certain decisions? How does WSC advocate such that choices made by Persons are honored? Documentation of choice component is reflected in the Support Plan and progress notes.</p> <p>Question: Does the WSC know the communities in which the Person lives?</p> <p>Mindset: How can People make good life decisions if they do not know their options?</p> <p style="text-align: center;">Findings:</p> <p><u>Achieving:</u> Clear evidence exists that Persons experience informed choice and everyday life activities. WSC regularly evaluates and has a strategy to overcome barriers to making informed choices in everyday life activities. The three E's are utilized to share and deliver choices, options and information in life areas that are important to the Person served. Documentation in the Support Plan and progress notes reflects a systematic and consistent method for facilitating the three E's. It is evident these efforts have generated new life experiences for Persons.</p> <p><u>Implementing:</u> WSC is active in providing some components in each area of education, exposure, and experience, and opportunities for choice making. Documentation in the Support Plan and progress notes reflect a systematic and consistent method for facilitating the three E's, however, it is not clear that these efforts have generated new life experiences for Persons or an increased ability to make informed choices.</p> <p><u>Emerging:</u> WSC is aware of areas in which Persons would like to grow and experience new things, and is familiar with the communities in which the Persons live, however, no or limited choices and experiences are being discussed with or presented to the Persons. Documentation in the Support Plan and progress notes reflects an inconsistent method for facilitating the three Es.</p> <p><u>Not Emerging:</u> WSC is not aware of the areas in which Persons would like to grow and experience new things. The WSC is not familiar with the communities in which Persons live. Documentation in the Support Plan and progress notes is rudimentary or nonexistent for facilitation of the three Es.</p>				

Barriers/Findings:

E	Expectation	Probes	Considerations	A	I	E	N
6	WSC has facilitated the accomplishment of positive results that reflect communicated choices and preferences that matter most to the Person.	<p>Conduct an interview with a sample of People receiving services from the WSC.</p> <p>Have a comparative discussion with the WSC to evaluate how positive changes for the People being served have been facilitated.</p> <p>Determine how the WSC ensures that choices and preferences that matter most to the Person are addressed.</p> <p>Determine what plans the WSC has made with the Person to continue the momentum generated by successes in effecting positive change in the Person's life.</p> <p>Discuss the utilization of information received by the WSC in identifying supports that are working or supports that are challenging within the service delivery system to affect change.</p> <p>Discuss the method to gather and track aggregate data for all of the goals for the People the WSC supports.</p> <p>Projected Service Outcomes are used as a tool to support goal achievement.</p> <p>With the Person's consent, elicit additional information from families, providers, and other supports on the effectiveness of the WSC's ability to achieve positive results for the Person.</p> <p>Review the central record (support plan, case notes, etc.) to validate how the WSC has achieved positive results for the People served.</p>	<p>FACILITATION Components: WSC uses POM tool and/or other Person centered approaches to identify what Persons want to achieve. WSC promotes active involvement on the part of the Person and the Person's supports relative to attaining the desired results. WSC completes an annual self assessment. WSC uses the findings of the self assessment to improve their service delivery system WSC promotes a cooperative and supporting relationship between the Person, supports, the Area Office and all other entities striving to achieve the desired results.</p> <p>RESULTS Components: Results that reflect communicated choices and preferences that matter most to the Person are being achieved. WSC has a consistent method to document Person's results in the SP and case notes. WSC has a system to track the progress towards and achievement of the Person's stated goals and outcomes.</p> <p>Question: Does the WSC know that they are making a difference?</p> <p>Mindset: Unless results that reflect communicated choices and preferences that matter most to the Person are not being completely achieved, the service delivery system is not successful.</p> <p style="text-align: center;">Findings:</p> <p><u>Achieving</u>: Everything in Facilitation and Results components are present. Results that reflect communicated choices and preferences that matter most to the Person are being achieved on a regular and consistent basis. WSC proactively involves Person and his/her supports in achieving desired results. Documentation in the Support Plan and progress notes reflects a consistent and systematic method for facilitating the accomplishment of positive results that matter most to the Person.</p> <p><u>Implementing</u>: WSC is applying all of the "Facilitation" components. Documentation in the Support Plan and progress notes reflects a consistent and systematic method for facilitating the accomplishment of positive results that matter most to the Person. However, Persons are not yet consistently achieving the results they desire.</p> <p><u>Emerging</u>: WSC understands the "Facilitation" components but has not put all of them in place. Documentation in the Support Plan and progress notes reflects an inconsistent method for facilitating the accomplishment of positive results that matter most to the Person. Persons are not yet achieving the results they desire.</p>				

Not Emerging: The WSC does not understand the “Facilitation” components for the Persons served. Documentation in the Support Plan and progress notes does not reflect a method for facilitating the accomplishment of positive results that matter most to the Person. Persons are not achieving the results they desire.

Barriers/Findings:

obsolete

E	Expectation	Probes	Considerations	M	N	NA
7 a	<p>Level 2 background screenings are completed for all direct service employees.</p> <p>And</p> <p>Employees undergo background screening every 5 years if applicable.</p>	<p>Review documentation to verify there are level 2 background screenings to include: Florida Department of Law Enforcement clearance, FBI clearance, local law enforcement screening, and a notarized affidavit of good moral character.</p> <p>Fingerprint card has been submitted for processing within 10 days of employment for solo and agency staff.</p> <p>Criminal records that include possible disqualifiers have been resolved through court disposition.</p> <p>Review documentation to verify employee background screening every 5 years. Look for evidence of completion and submission of an FDLE form. Results of the screening are on file. NOTE: Fingerprints not required.</p> <p>Due diligence on the part of the WSC to obtain documentation regarding the status of submitted Level 2 paperwork and/or fingerprint cards will be taken into consideration when scoring this element.</p> <p>If Level 2 background screening is Not Met,</p>	<p>MET: All required documentation is present demonstrating compliance with this element.</p> <p>NOT MET: One or more parts of the required documentation are not present at the time of the consult. Results of the FBI and FDLE screening have not yet been received within 90 days of employment. NOTE: this should be determined Not Met this one time.</p>			

		<p>the QIC will inform the WSC that he/she must submit documentation of efforts to obtain any missing information to the designated Area liaison office within 10 days of the consultant's visit. The QIC will phone the Area Liaison for Level 2 requirements and provide the liaison with the information that is not present. The alert will be turned on.</p> <p>The consultant will verify Level 2 background information has been completed at the time of the follow up consultation.</p>				
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Barriers/Findings:

E	Expectation	Probes	Considerations	M	N	NA
8	WSC has attended required training.	<p>Review documentation to verify the WSC has attended the required training, to include:</p> <ol style="list-style-type: none"> 1. Pre-service training-“Living Everyday Lives” (34 Hours) 2. Area specific training (26 Hours) 3. Individual Cost Guidelines (ICG) 4. Personal Outcome Measures (POM’s) 5. Zero Tolerance 6. 24 hours annual job-related training 7. Core Competency training (8 Hours) <p>Attendance at ICG training may count 16 hours towards the 24 hours of required annual job-related training.</p> <p>The 34 hour preservice training, “Living Everyday Lives” is required prior to service provision.</p> <p>Area specific training must be provided by the Area office within 90 days of the completion of the Pre-service training.</p> <p>POM training is required within 90 days of receiving a certificate of enrollment from the APD area office.</p> <p>Internal management meetings held by agencies do not count toward the required 24 hours of annual job-related training. Trainers employed by the agency can provide no more than 12</p>	<p>MET: All required documentation is present demonstrating compliance with this element.</p> <p>NOT MET: One or more parts of the required training are not present at the time of the consultation.</p>			

Barriers/Findings:

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E	Expectation	Probes	Considerations	M	N	NA
9 R	WSC services and all other service providers are authorized by an approved cost plan and service authorization.	<p>Review the cost plan and service authorization(s) in the Person's central record to assure they are current and reflect any changes in service.</p> <p>QIC will confirm the printed copy of the ABC cost plan with pen and ink changes noted during the Support Plan is signed and dated by the Person and/or legal guardian on the date of the Support Plan. NOTE: The Person and/or legal guardian's signature and date are NOT required for updates to the cost plan.</p> <p>QIC will match recommended services in the Support Plan to the cost plan for all services recommended, including natural or generic supports.</p> <p>WSC will provide a printed copy of the ABC cost plan, showing the approved services to the Person and/or guardian.</p> <p>WSC has provided a printed copy of the service screen for each service authorized, signed the service authorization and provided a copy to the service provider by the effective date of the authorized service. The WSC needs to have a system in place to verify the SA has been sent to the providers within the specified time frames. This verification may be a note on the SA with the date it was sent to the provider, a case note in the Person's record, or a fax.</p>	<p>MET: All required documentation is present demonstrating compliance with this element.</p> <p>NOT MET: Documentation was not available to support one or more of the above MET items.</p>			

Barriers/Findings:

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E	Expectation	Probes	Considerations	M	N	NA
10 R	The provider bills for the service at the authorized rate.	<p>Review WSC billing to validate services are reimbursed at the authorized rate.</p> <p>Determine if the Support Coordination is for full WSC supports or limited WSC supports.</p>	<p>MET: Billing validates WSC services were reimbursed at the authorized rate.</p> <p>NOT MET: Billing indicates WSC services were not reimbursed at the authorized rate.</p>			

Barriers/Findings:

E	Expectation	Probes	Considerations	M	N	NA
11 R	The provider maintains documentation required for billing.	<p>Review the central record for documentation required for billing: current support plan including the Personal outcome measures information and outcome notes; the Department approved assessment; current printed ABC cost plan (MAP screen; ACLMSP screen, and ACPRT screen may also verify services have been approved); current waiver eligibility work sheet, progress notes on required face-to-face contacts; progress notes reflect at least one other contact/activity per month related to the Person unless waived by Central Office. Progress notes adequately and clearly detail support coordination provided to the Person and his/her family or guardian.</p> <p>The WSC Reference Sheet should be utilized to expand these probes if the provider has not previously received a Delmarva Foundation consultation.</p>	<p>MET: All documents required for billing are present. Progress notes adequately and clearly detail support coordination provided.</p> <p>NOT MET: All documents required for billing are NOT present. Progress notes are not adequate and clear.</p>			

Barriers/Findings:

obsolete