

WSC ADVISORY #2017-022
ANNUAL FISCAL YEAR COST PLAN ACTIVITIES

ACTION REQUIRED

EFFECTIVE DATE: APRIL 27, 2017

The Agency for Persons with Disabilities (APD) is initiating annual required activities to approve cost plans for Fiscal Year 2017-2018 (FY 17-18), which runs from July 1, 2017 through June 30, 2018. Waiver Support Coordinators (WSCs) must ensure that needed services continue and that service authorizations are issued to providers in a timely manner. APD is automating as much of this process as possible to reduce workload of WSCs and APD staff.

IMPORTANT: Since APD will be implementing system changes on May 5, 2017, **all Fiscal Year 2016-2017 (FY16-17) cost plans must be in approved status by midnight on May 4, 2017. Any cost plans from FY 16-17 that are in draft or pending status on May 5, 2017 will be deleted and the current approved FY 16-17 cost plan will be utilized for this exercise.** Additionally, any FY 17-18 cost plans that have already been created, either in draft, pending, or approved status will also be deleted and can be rebuilt after this exercise.

The procedures below will be followed statewide. WSCs who need assistance should contact their APD Regional offices for help.

I. Authorized 1st Quarter of FY 17-18 and Building Future Quarters

1. For most consumers, APD will populate authorized services into the first quarter of FY 17-18 using the last quarter of FY 16-17. APD will apply the following considerations:
 - a. Services that are authorized on June 30, 2017 for April 1, 2017 through June 30, 2017 will be copied into the quarter that runs July 1, 2017 through September 30, 2017. Services will be copied over in approved status.
 - b. APD will add additional units to accommodate for the extra day that occurs in the July 2017 quarter (i.e., April-June has 91 days and July through September has 92 days).
 - c. APD will not copy over one-time services that are authorized in the June through April quarter the next fiscal year first quarter. These services include the following:
 - i. Durable Medical Equipment
 - ii. Environmental Accessibility Adaptations
 - iii. Assessments: Physical, Speech, Occupational, Respiratory Therapy, Nursing, Specialized Mental Health, Environmental Accessibility Adaptation Assessment and Behavior
 - iv. Dental
 - v. Personal Emergency Response system installation
2. For the 2nd, 3rd, and 4th quarters, APD will copy a shell of the service plans without specific units for WSCs to build the service authorizations at future dates specified in this procedure.

II. Waiver Support Coordinator (WSC) Responsibilities

1. The WSC is responsible for the following:
 - a. Review all 1st quarter authorizations for FY 17-18. If all information is correct, provide the service authorizations to providers no later than June 15, 2017. WSCs will be able to see authorizations in the system on June 1, 2017, but will be unable to print the authorizations until June 2, 2017.
 - b. Update any service authorizations that require changing in the quarter and provide the service authorizations to providers no later than June 15, 2017.
 - c. Complete the full fiscal year cost plan no later than August 30, 2017 to ensure adequate service coverage for the full fiscal year. For the 2nd, 3rd, and 4th quarters issue authorizations to providers no later than 30 days prior to the quarter starting as follows:
 - Quarter 2 (October 1, 2017-December 31, 2017): Service authorizations due to providers by September 1, 2017.
 - Quarter 3 (January 1, 2018-March 31, 2018): Service authorizations due to providers by December 1, 2017.
 - Quarter 4 (April 1, 2018-June 30, 2018): Service authorizations due to providers by March 1, 2018.
2. The WSC must consider the following when reviewing service plans for the 1st quarter and building service plans for future quarters.
 - a. Delete service plans for services that have ended;
 - b. If a provider change occurred in the prior fiscal year, delete or cancel service plans for the provider that is no longer rendering services;
 - c. For 2nd through 4th quarters, enter notes on service plans to specify service provision. The notes should provide direction to the provider describing the manner in which services are to be provided and not duplicate information already identified on the service authorization;
 - d. If a service plan was not copied over per Section I.c., and the consumer still needs the one-time service, add the one-time service plan back. This includes routine Adult Dental services;
 - e. If unutilized service plan units or reserve funds were moved to the 4th quarter of the FY 16-17 cost plan, when reviewing the 1st quarter of FY 17-18, please ensure that the units reflect accurate service provision for the consumer and allow for the annualization of funds to service needs through the entire upcoming fiscal year;
 - f. Ensure service plans entered are in compliance with the iBudget Handbook coverage and limitations. Some examples include, but are not limited to:
 - Respite and Personal Supports cannot be provided at the same time. Personal Supports is for individuals 21 or over unless the individual is in supported or independent living and Respite is for individuals under 21.
 - Ensure consumable medical supplies and personal care items are not on plans for individuals under the age of 21 since they are covered by Medicaid State Plan
 - Ensure that behavior assistant services are only approved for 6 months at a time in accordance with Local Review Committee approvals.

- Ensure service plans are in compliance with any Notice of iBudget Amount that has become final and for which no hearing is pending.

III. Exceptions

1. If there are no units in April, but there are units in May and June, the May services will be copied to August and June services will be copied to September. However, the services cannot be copied to in July. These cost plans will be left in draft. APD will provide a list of these individuals to the WSC by May 8, 2017 so that the WSC can build the first quarter service plans.
2. If the individual has Respite services and has already turned 21 or will turn 21 during the FY 17-18, the service plans for the 1st quarter of FY 17-18 will remain in DRAFT status and not be approved. APD will provide a list of these individuals to the WSC on by May 8, 2017.
3. The WSC will be responsible for building the cost plans for the individuals on these exception reports manually to ensure the correct number of units and services. This must occur by June, 1, 2017 and service authorizations must be sent to providers by June 15, 2017.
4. WSCs should follow the criteria in 2.d. when building the service plans.

IV. Instructions for Consumer Directed Care Plus (CDC+)

Instructions for CDC+ consumers will be provided under a separate advisory.