

APD iCONNECT LUNCH AND LEARN SERIES

REFRESHER COURSE

QUESTIONS & ANSWERS

Please Note: The information contained in this Q&A is provided for general informational purposes only. You should always contact your APD regional office for immediate assistance.

WAIVER ELIGIBILITY WORK SHEET

Q: After getting the eligibility worksheet signed, do we upload to APD iConnect or just keep it in the file?

A: All signed HCBS Waiver Eligibility Work Sheets must be scanned, uploaded, and saved to a note in APD iConnect as Note Type "Waiver Enrollment" and Sub-Type "Signed Waiver Eligibility Worksheet."

Q: Are we supposed to be doing them in APD iConnect now?

A: Yes. Please refer to WSC Advisory 2019-023.

Q: What do you need to do if APD assigned a case to you and it shows transfer in when it should have been WSC selected?

The regions are tasked with using the correct disposition when a new WSC is selected. If the receiving WSC feels the disposition is incorrect, please contact the APD Region office and request a correction.

Q: When I complete a Note it comes up with a different WSC even though I assigned them to me and it shows open.

Please report this concern to the APD iConnect Support Desk by calling 1-800-353-5168. Please have details and screenshots available of the issue.

Q: Why would we print the QSI?

A: The QSI is used during the AIM and Support Plan meeting to facilitate discussion of needs, risks, and goals with the client, legal representatives, and their circles of support who are involved in the support plan process.

Q: How do you mark a note as read?

Open and review the Note record. Click **Tools > Mark as Read**.

Q: When filling out HCBS worksheet, do we need to add the date that Medicaid was first approved?

A: The Medicaid Determination Date is only needed when the person was referred for Medicaid initial eligibility or re-eligibility if the client has lost Medicaid. Please refer to WSC Advisory 2019-023 for further details to complete the form.

Q: Can the eligibility form be edited throughout the year?

A: Yes, please refer to WSC Advisory 2019-023.

Q: Should the last hard copy Waiver Eligibility Work Sheet be uploaded in APD iConnect, or do we complete the electronic form in APD iConnect, even if it's not expired?

A: Upload the most recent HCBS Waiver Eligibility Work Sheet and complete a new one in APD iConnect when the next one is due and annually thereafter. Refer to WSC Advisory 2019-023.

Q: If I'm completing a Waiver Eligibility Work Sheet annual review, do I change initial to annual?

A: Yes.

Q: Why can't we leave the form on draft until we get signature and upload the signed form?

A: If the HCBS Waiver Eligibility Work Sheet is left in Draft status, please make sure you change it to Complete status once the form is signed and uploaded into APD iConnect.

Q: What if we don't know the date the individual was referred to Medicaid?

A: If the person already has Medicaid, there's no need to insert a date when completed annually. If necessary, the WSC can contact the Region to get the date of Medicaid eligibility.

Q: What note type should be selected for the Medicaid Eligibility Work Sheet?

A: The Note Type is "Waiver Enrollment" and Sub-Type is "Signed Waiver Eligibility Worksheet." Please refer to WSC Advisory 2019-023 for further instruction.

Q: When should I complete the "Choices" section on the HCBS Waiver Eligibility Worksheet?

A: The box should not be checked until the form is signed, and the client conveys their wishes to the person completing the form.

Q: In the notes we received about Medicaid eligibility, it says if they already have a Medicaid number will it automatically appear in APD iConnect when selecting no in response to the question has the individual been referred for MEDICAID eligibility?

The Medicaid Number needs to be added to the consumer demographics in order to auto-populate on the HCBS Waiver Eligibility Work Sheet.

Q: What if we make an error with eligibility worksheet and we didn't realize it until we already submitted it?

A: Update the worksheet, obtain appropriate signatures, and upload the worksheet with the Note Description of Updated HCBS Waiver Eligibility Work Sheet.

Q: When should a HCBS Medicaid Eligibility Work Sheet be changed from draft status to complete status?

The HCBS Waiver Eligibility Work Sheet needs to be saved in complete status so that a printable version can be generated. This version is then brought to the Annual Support Plan Review meeting for review by the individual and circle of supports and is then signed and dated.

DIENROLLMENT

Q: I have a client showing up twice on my list. How do I remove one?

A: Contact the APD iConnect Support Desk by calling 1-800-353-5168 and be sure to have details/screenshots of the issue. However, if a consumer has forensic involvement, they will appear twice as they are listed on the My Dashboard by division (APD Division and FOR Division).

Q: The consumer is still showing on my APD iConnect and iBudget.

Call the APD iConnect Support Desk by calling 1-800-353-5168 and be sure to have details/screenshots of the issue.

Q: Why does APD iConnect time out in a short timeframe and you have to relog in?

A: APD iConnect will log a user off if the application is idle for a period of time. If this happens often and quickly, such as a user being timed out while the user is actively working on a client's record, call the APD iConnect Support Desk by calling 1-800-353-5168 and be sure to have details/screenshots of the issue.

Q: When disenrollment is due to death, when do we close the case?

A: The WSC needs to follow the process of ending authorizations, turn in the physical file to the Regional Office, and update the Disposition in iConnect. The WSC will send a Note to the Regional Office alerting them of the consumer passing. The Region will then ensure that the Report of Death has been completed and send a Note to State Office for disenrollment.

Q: Does APD iConnect always require an authentication code to log in?

A: Centrify/ID PASS/iDaptive (all the same) will always require authentication. That is the sole purpose of it. It does seem to work best if the user downloads the iDaptive app to their phone instead of requesting an authentication code via text. Some carriers block the text as spam.

Q: How do I close authorization for a client that went to ICF?

A: Please refer the to Waiver Disenrollment Process for Waiver Support Coordinators Presentation found on the eLearning Library at <http://apdcares.org/waiver/iconnect/elearning.htm>.

Q: I have contacted APD IT on several occasions and have been asked for my APD iConnect ID. Where can I locate my APD iConnect ID?

A: The APD iConnect ID is next to the WSC name on the main page.

Q: Is there an addendum option for a completed note?

A: No.

ADDING MEDICATIONS

Q: Several of my consumers have been taking medications for years and I don't know the actual date it was prescribed. So, what date should we put in?

A: Use the date on the most recent prescription or physician's order.

Q: Would we be able to enter a new medication that has already been discontinued, such as an antibiotic? Sometimes we find out later.

A: Yes, as that would give you a good medication history.

Q: What if the medication is not an option on the list?

A: "Other" is an option if the medication is not in the list. When selecting "Other" a text box will appear for the user to manually enter the name of the medication.

Q: With 43 consumers, medications change monthly or sometimes more often. Shouldn't this be the responsibility of the SLC or group home provider in order to be as accurate as possible? The WSC does not always get the most up to date info and know these types of details on a daily basis.

A: As supported living coaches and residential habilitation providers begin using APD iConnect in the future, they will also update the medications. However, the WSC has the responsibility to ensure medication lists are current and accurate.

Q: What if the medication isn't discontinued but it was prescribed for 14 days and is complete but not discontinued?

A: Time-limited medications do not require a separate discontinue order. When the course of the medication is done, it is considered discontinued.

Q: What about injection such as insulin? Is there an option for cc or units or which site the medication is injected?

A: There are dosing unit options for all types of medications. The sites for administration of medications like insulin are typically captured on the client's medication administration record and not on the profile. The profile will have the name of the medication and the route. In the case of insulin, the route will be SQ or subcutaneous.

Q: If you add the medication to the support plan, does it update the Medications tab?

A: Yes, new medications added from the Person-Centered Support Plan will populate back to the Medications tab. However, edits from within the Person-Centered Support

Plan will not update the Medications tab. Always make your edits on the Medications tab prior to initiating/updating the Person-Centered Support Plan form.

Q: What do we enter for Dose, unit, and strength for things like Multivitamins?

A: WSCs should follow the information on the label and enter it with the information at hand. WSCs are not expected to enter a value that is not available or applicable.

Q: Is there a due date for adding medications or contacts yet?

A: WSCs were required to start updating the medications and contacts with the 12/4/18 APD iConnect Launch. The data will be needed for the Person-Centered Support Plan with Rollout 2.

Q: What do we enter for dose for ointments if prescription just says apply topically and does not specify how much to apply?

A: WSC should get clarification from the provider who obtained the prescription and the medication, since they need to know how much to apply.

Q: If the client is not on medication, how should that be logged?

A: The WSC will document this in the My Medication Information section of the Person-Centered Support Plan.

Q: I have a consumer who takes a different dosage of the same pill in the morning and afternoon. How do I enter that dosage?

A: A medication with different doses given at different times should be entered separately.

CONTACTS

Q: How will APD iConnect handle contacts with the same name but different people?

A: When adding a contact, the user will search existing contacts first. There are several search filters, including address, city, zip code, etc.

PERSON CENTERED SUPPORT PLAN

Q: APD said we cannot copy and paste from QSI to SP?

A: The QSI scoring descriptors are generalized. Therefore, it is important for the WSC to specifically explain the risk or need identified by the QSI. Simply copying and pasting from the QSI is not enough information to successfully address the risk or need. The "Copy Shared Response" option on the File menu will populate the QSI score, which will help complete the QSI section of the Person-Centered Support Plan.

Q: When should a Support Plan be changed from draft status to complete status?

A: WSCs should never use the same Person-Centered Support Plan from year to year. However, some information may not change. At the time of the Annual Support Plan Review, the current support plan will be changed from open status to complete, at which

point it will become read-only. WSCs may use the “Duplicate Assessment” feature to create a new draft copy of the support plan for the new support plan year. The WSC must update all sections of the support plan with new information and change the effective date of the plan.

Q: Can information between the Support Plan and Medications Tab be shared?

A: Yes. To include medication from the Medication Tab to the Support Plan, use the search function in the My Medications Information section of the Support Plan. Medication information that was entered directly into the Support Plan will automatically populate in the Medications Tab. All edits to existing medications should be done on the Medications tab, not from within the Person-Centered Support Plan.

Q: Do we put Support Plan in "complete" status before submitting it to family and APD or not?

A: The Person-Centered Support Plan remains in “Open” status throughout the support plan year. At the end of the support plan year, it is updated to “Complete” and then a new one is created for the coming support plan year.

Q: Can previous support plans be uploaded to APD iConnect?

A: No. The first support plan to be created in APD iConnect will need to be manually entered. Moving forward, at the time of the annual support plan review, the support plan can be duplicated and updated as needed. WSCs may use the “Duplicate Assessment” feature to create a new draft copy of the support plan for the new support plan year.

ADDING PROVIDERS

Q: Are we to add providers in APD iConnect?

A: This functionality will be available in the future.

SYSTEM CONFIGURATIONS

Q: What is the difference between the section for ticklers on the left and ticklers due on the right?

A: Ticklers in the Consumers column of My Dashboard are all consumer-specific ticklers. The ticklers in the My Management section of the Tasks column are all ticklers assigned to the user. These may include (in the future) incident- and provider-related ticklers.

Q: What is Medicare type?

A: This should document the type of Medicare plan that the individual has, if applicable, i.e. Part A, B, D, etc.

Q: Has more memory been added to the mainframe APD iConnect app so we can add a consumer photo, psychological reports, SS card, DOB certificate, Medicaid/Medicare card? Can we start using PCSP in APD iConnect even though it's not yet required?

A: APD iConnect is a cloud-based service. The ability to upload a photo exists. Other documents such as Social Security card, birth certificate, etc. should be attached to a Note. The Person-Centered Support Plan does not yet have the printable output available, so using the Person-Centered Support Plan form in APD iConnect should wait until Rollout 2. WSCs may use the PDF version of the Person-Centered Support Plan from APD website now.

Q: What is the difference between an alert and a note?

A: A Note is specific information about a single area or issue, such as "the HCBS Waiver Eligibility Work Sheet has been completed and uploaded." An Alert is a type of Note that will notify anyone who opens the client's case file that a change has been made that will affect all providers, such as a "WSC has changed." Alerts should NOT be used for routine notes. The primary uses for Alert Notes are new WSC selection, placement in a facility, and/or death.