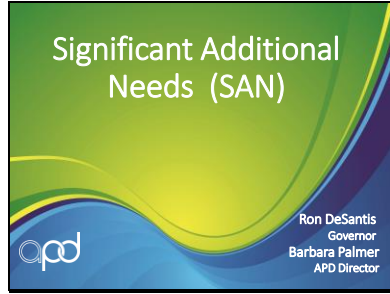
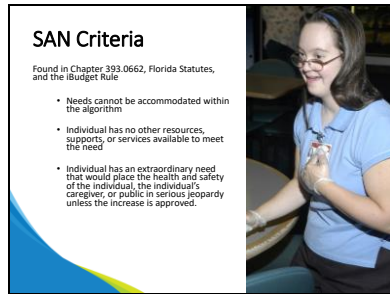


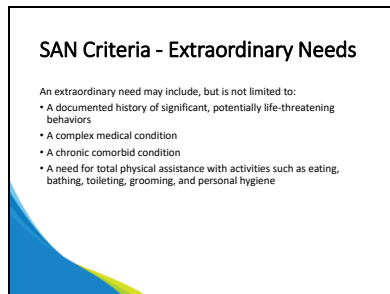
Slide 1



Slide 2



Slide 3



Slide 4

Other SAN Criteria

- One-time or temporary support or services (temporary is less than 12 months)
- Substantial changes in the client’s circumstances on a permanent or long-term basis
- Need for transportation to a waiver-funded adult day training program or to waiver-funded employment services

Slide 5

Other Important Considerations

Medical Necessity Within waiver coverage and limits

Exhaust all available resources

Slide 6

WSC Job Aid

9/20/19 AGENCY FOR PERSONS WITH DISABILITIES
 Waiver Request Coordination (WRC) Job Aid
 Significant Additional Waiver Needs Determination

CONCLUSION: Approved for a waiver Denied for a waiver Pending

Medical Necessity: Met Not Met Pending

Within Waiver Coverage and Limits: Yes No Pending

Exhaust All Available Resources: Yes No Pending

Remarks:

Reasons to be denied prior to submitting a RAIN request

WSC Check Point	Yes	No	Pending
1. The client is currently residing in a long-term care facility.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The client is currently receiving services from another state or country.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The client is currently receiving services from another state or country for a period of 90 days or more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The client is currently receiving services from another state or country for a period of 180 days or more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The client is currently receiving services from another state or country for a period of 365 days or more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The client is currently receiving services from another state or country for a period of 730 days or more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. The client is currently receiving services from another state or country for a period of 1095 days or more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. The client is currently receiving services from another state or country for a period of 1365 days or more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. The client is currently receiving services from another state or country for a period of 1826 days or more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. The client is currently receiving services from another state or country for a period of 2197 days or more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. The client is currently receiving services from another state or country for a period of 2568 days or more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<http://apd.myflorida.com/waiver/support-coordination/>

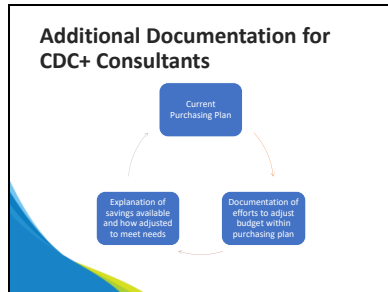
Slide 7

WSC Job Aid - Checkpoint for All Submissions

Section A. Checkpoint for All Submissions
 Address to the plan in submitting a SAN request


	WSC Check Point
1. WSC attempted to address needs within available budget	<input type="checkbox"/>
2. WSC received unallocated funds to meet needs, but funds were not sufficient to cover the need	<input type="checkbox"/>
3. WSC received funds that cannot be used to meet needs, but funds were not sufficient to meet the need	<input type="checkbox"/>
4. WSC received funds that cannot be used to meet needs, but funds were not sufficient to meet the need. Consider other funding sources, such as an organization of the additional funding is needed.	<input type="checkbox"/>
5. Documentation attached include attempts to locate additional funding, such as grants, or other sources of support to meet the individual's health and safety needs	<input type="checkbox"/>
6. CDC, a subset of the current functional, operational, and physical status, and completed within the last three years if the CPE does not have current information, with a detailed description of the need for a new assessment. The WSC can indicate the date that APO was updated if the need for the new assessment is the request.	<input type="checkbox"/>
7. A cost plan proposal (services requested) reflects the specific value services and supports that through data systems are entered in the identified plan that will address the individual's known identified goals. Include the AMM Worksheet if the algorithm was re-processed. Information on the APO worksheet should match requested services in the SAN system and cost plan.	<input type="checkbox"/>

Slide 8




Slide 9


SAN Documentation



Recent and reflect current needs



Provide for ALL services on the cost plan



Documentation is listed in the IBudget Rule and service-specific documents are in the IBudget Waiver Handbook

Slide 10

iBudget SAN System

iBudget SAN System WSC User Guide
<http://apd.myflorida.com/ibudget/users.htm>

Slide 11

iBudget SAN System - Common Errors

SAN Requested Due to Updated Algorithm – Yes or No

Fiscal Year * 2017-2018 Date C sent to

SAN requested due to updated algorithms *

Reason for AIM Total #

Slide 12

iBudget SAN System - Common Errors

Reason for AIM Field

- New Algorithm Calculated for Annual Support Plan
- Algorithm Recalculated due to a SAN Request
- Algorithm for New Waiver Enrollee

Fiscal Year * 2017-2018 Date C sent to

SAN requested due to updated algorithms * ADM #

Reason for AIM

Slide 13

iBudget SAN System - SAN Service Screens

Service Summary

Service Code *	9141	Service Level	Day
Procedure Code	00130UCSC	Service Ratio	1:1
Unit Type	Day	Provider Type	
Current Units *	12	Service Rate	63.50
Annualized Units *	12	Current Allocation *	763.50
		Current Annualized *	763.50

Slide 14

iBudget SAN System - SAN Service Screens

Recommendation * New Request Stage

Total # Units Current FY (current + new) *	50	New Amount *	6,388.00
New Annualized Units *	100	New Annualized Amount *	12,538.00
Effective Date *	1/25/2019		

Comments * **Schedule attached**

Slide 15

AIM Worksheet

Budget Florida

Discussion on Budget Amount

Ind. Code	Date of Birth/SSN
Employer	Prof. Office
Address	Home
City	
Algorithm Inv	

This should reflect new algorithm amount

Please verify against our Address Book for public funding to ensure the algorithm works.

Slide 19

iBudget SAN System - SAN Service Screens

Procedure Code	5199AC	Service Ratio	None
Unit Type	Each	Provider Type	
Current Units	12	Service Rate	23.00
Annualized Units	12	Current Allocation	276.00
Recommendation	End Request	Current Annualized Amount	276.00
Total # Units Current FY (current + new)	0	Stage	WISC
New Annualized Units	0	New Amount	138.00
		New Annualized Amount	0.00

Slide 20

Things to Remember for a Successful SAN

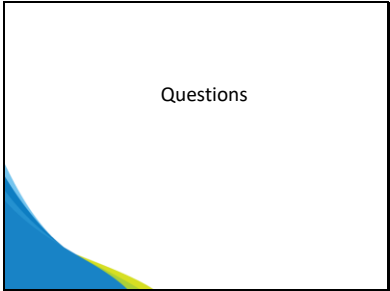
- SANs are for situations that place the health and safety of the client, the client's caregiver, or the public in immediate, serious jeopardy unless the increase is approved.
- WISCs must help individuals plan in advance when choosing to move to a new living setting. This means obtaining services and funds prior to the move, unless there is an immediate health/safety need.
- Services approved as SANs must be medically necessary.

Slide 21

Things to Remember for a Successful SAN

- For Consumer-Directed Care Plus participants, the SAN services should reflect waiver services and not services on Purchasing Plan.
- Be proactive. Consider all current and near future needs of the consumer.
- Remember Notice reflects current cost plan services and annualized approved services, not prorated approved amounts.
- Follow units in SAN service screens when creating cost plans.

Slide 22



Slide 23