

**WSC ADVISORY #2016-010  
NEW IBUDGET RULE**

**ACTION REQUIRED**

The new iBudget Rules, 65G-4.0213 through 4.0218, Florida Administrative Code became effective on July 1, 2016. The iBudget Rule establishes a new algorithm for individuals enrolled in the iBudget Waiver program. The algorithm will be re-run for individuals at the time of their annual support plan update and Waiver Support Coordinators will meet with the individuals to identify any significant additional needs and to ensure their health and safety needs are met. WSCs play a key role in working with individuals on their caseloads by making sure that waiver services meet their needs.

Training materials and procedures will be forthcoming for WSCs. In the meantime, WSCs can view a copy of the rule online at <http://apd.myflorida.com/ibudget/rules-regs.htm>.

It is critical for WSCs to ensure that the Program Component is correct in the ABC system. This information is located on the ALCM3 screen in the ABC system. The Program Component identifies the individual's living setting and is a key element in the algorithm.

Additionally, WSCs should ensure that the annual support plan date is also current in ABC. Please verify this data in ABC. The screen shot below shows the program component and support plan fields. WSCs can contact their APD Regional office if they have questions regarding making updates to the ABC system.

ALCM3 Allocation, Budget And Contract Control System Date 08/19/16  
Client Maintenance Page Three Time 10:49

Action  (A, C, V, M, 1, 2, 3, 4, 5, S, B)  
Client Id   
Client Name   
Did The Family Move To FL Due To Parent/Legal Representative Military Assignment? (Y/N)   
If Yes, Did Applicant Receive Services From An HCBS Waiver In Another State? (Y/N)   
Level Of Care Eligibility  A=Option A B=Option B C=Option C  
Original MWE Date  MWE Update Date   
Primary Disability  Secondary Disability   
Other Disability  Iq: Score  Ind   
Major Life Activities        
70=Self-Care 71=Understanding And Use Of Language 72=Learning 73=Mobility  
74=Self-Direction 75=Capacity For Independent Living  
Handicapping Conditions        
21=Ambulatory Deficits 22=Sensory Deficits 37=Chronic Health Problems  
24=Behavior Problems 4=Autism 2=Cerebral Palsy 33=Epilepsy  
9=Prader-Willi Syndrome 8=Spina Bifida 10=Downs Syndrome  
Mental Health Diagnosis       
40=Adjustment Disorder 41=Anxiety Disorder 42=PTSD 43=Bipolar 44=Alzheimer's  
45=Depressive Disorder 48=Dementia 49=ADHD  
50=Schizophrenia/Psychotic Disorders 51=Personality Disorders/Paranoia 52=OCD  
53=Organic Brain Syndrome (OBD) 54=Substance Abuse Disorders 55=Eating Disorders  
56=Sleep Disorders 57=Impulse Control/Conduct Disorders  
60=Medication Induced Movement  
61=Other   
Risks      
01=Suicide Risk 02=Homicide Risk 03=Risk Of Victimization 04=Criminal Behaviour Or History  
05=Elopement Risk 99=N/A  
Program Component  \*Begin\*  
Level Of Care DDC   
Disability Category   
Last Full Supp. Plan  Budget Category   
Home District Assgn  Area   
Worker   
Service Status   
Out District Assgn  Area   
Worker   
Service Status   
Facility Id   
Name  Type   
Address   
City  St  Zip  Phone ( )