



State of Florida
Agency for Persons with Disabilities

iConnect
Case Management Training Manual Version 7.6
04/03/2023

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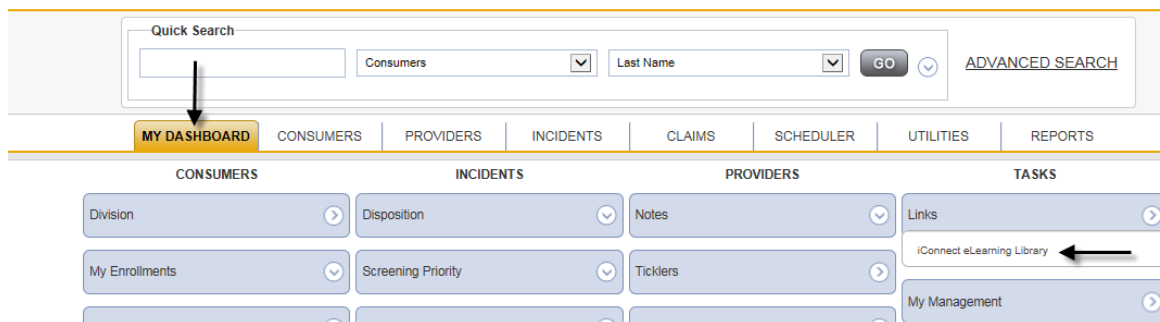
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Introduction | Case Management Module Training Guide

Preceding Training Guide

- iConnect Basics eLearning Module
- This training manual and links to FAQ's for user self-help are available via My Dashboard > My Links > iConnect eLearning Library.



Summary

This training guide covers all aspects of the Intake to the Enrollment processes, including Case Closure and Death reporting.

Learning Objectives for Case Management Module Training Guide:

- ✓ Develop a working knowledge of the various components of a consumer record, and the navigation thereof.
- ✓ Understand the function of roles within iConnect and how to use them with an established workflow.
- ✓ Understand how to complete tasks associated with the user's daily job responsibilities.

Chapter 1 | Consumer Intake

Introduction

This chapter covers the initial Consumer Intake Process. Potential Consumers can make an inquiry for waiver services via phone call, email, paper application, online application sent to the state office or one of the six regional offices. While contact can be and is often made directly with the state office, all inquiries must be directed to the applicable regional office for processing.

Intake Workers are responsible for tracking all inquiries as Call records via the Call Chapter in the iConnect system. Intake Workers will capture information about the Caller and the Potential Consumer in Participant records that are affiliated with the Call records.

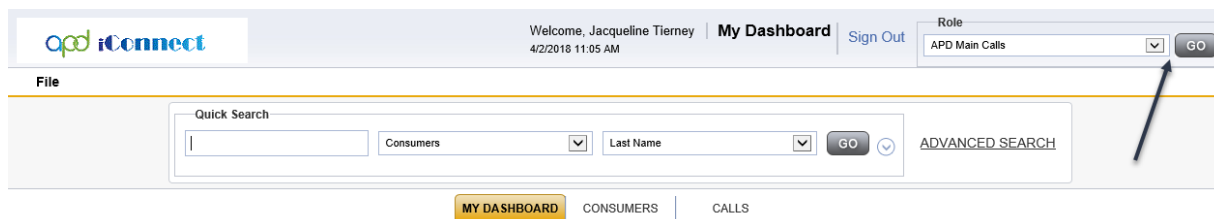
Workers will utilize regional queues to reroute Call records to the appropriate regional office for processing. Potential Consumers will be identified by their residential address and routed to the applicable regional queue based on that address. Workers in the appropriate regional office will then pick up the Call record and complete the Intake process.

Not all Potential Applicant Participant records will result in the creation of Consumer records in iConnect. The process for identifying the Participant records that should be pushed to Consumer records will be outlined below.

Intake Process

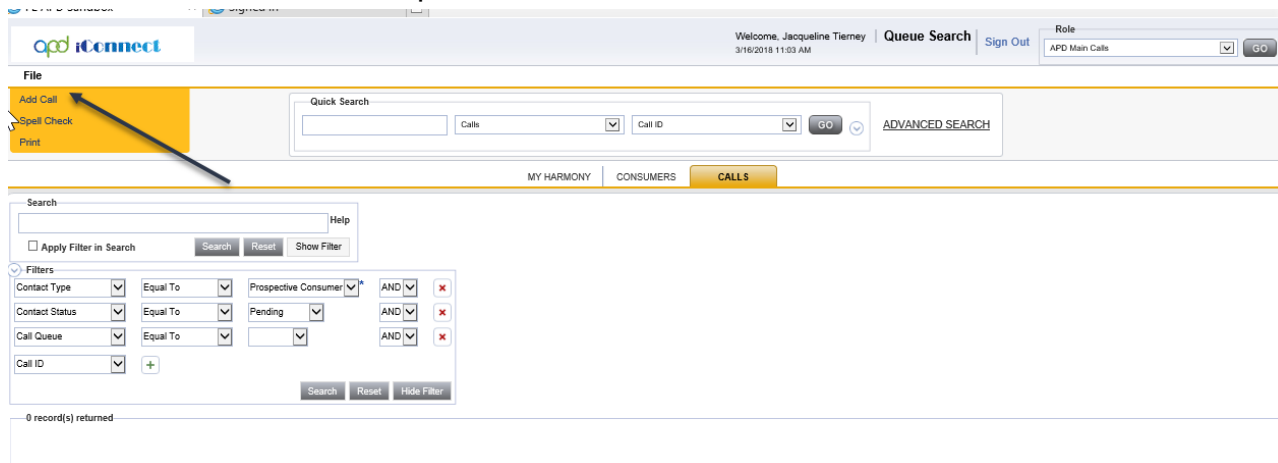
Receiving a Phone Intake

1. State/Region Office Worker receives an inquiry via phone indicating an individual may need APD Services
2. Log into iConnect and select the **APD Main Calls** Role. Click **Go**:



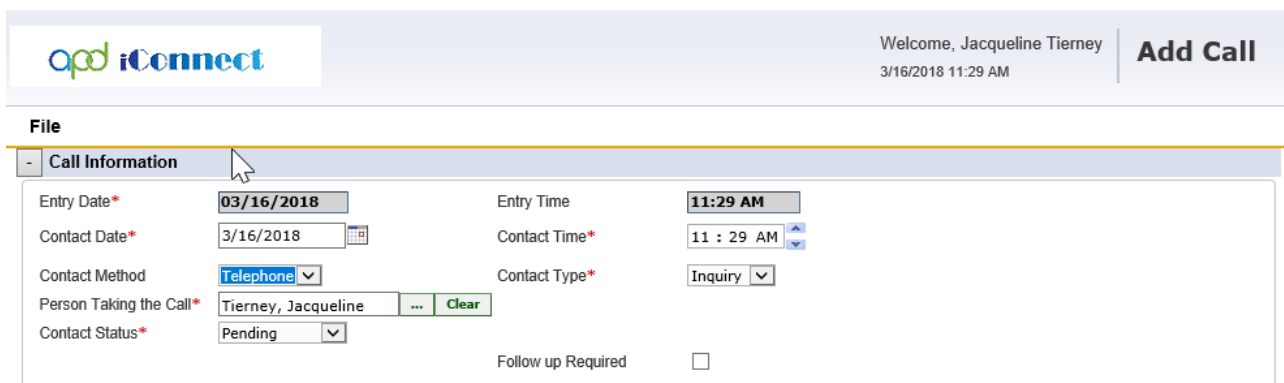
The screenshot shows the iConnect dashboard. At the top, there is a header with the iConnect logo, a welcome message for Jacqueline Tierney, and a 'My Dashboard' link. On the right, there is a 'Role' dropdown menu set to 'APD Main Calls' with a 'GO' button next to it. Below the header, there is a 'File' section with a 'Quick Search' bar and a 'Consumers' dropdown. At the bottom, there are tabs for 'MY DASHBOARD', 'CONSUMERS', and 'CALLS'.

3. Click on the **Calls** chapter > **File** > **Add Call**



The screenshot shows the iConnect 'Calls' chapter. The 'File' section on the left has a yellow background and contains the 'Add Call' button, which is highlighted with an arrow. Below the 'File' section, there is a 'Quick Search' bar and a 'Calls' dropdown. At the bottom, there are tabs for 'MY HARMONY', 'CONSUMERS', and 'CALLS'. Below the tabs, there is a 'Search' section with a search bar and a 'Filters' section with various dropdown menus for filtering search results.

4. In the new Call record, update the following fields in the Call Information Section:
 - a. Set Contact Method to one of the following = Email, Fax, Telephone, Walk In
 - b. The Entry Date, Contact Date, Entry Time and Contact Time fields will default to the current date/time
 - c. The Contact Status field will default to Pending



File

- Call Information

Entry Date* 03/16/2018 Entry Time 11:29 AM

Contact Date* 3/16/2018 Contact Time* 11:29 AM

Contact Method Telephone Contact Type* Inquiry

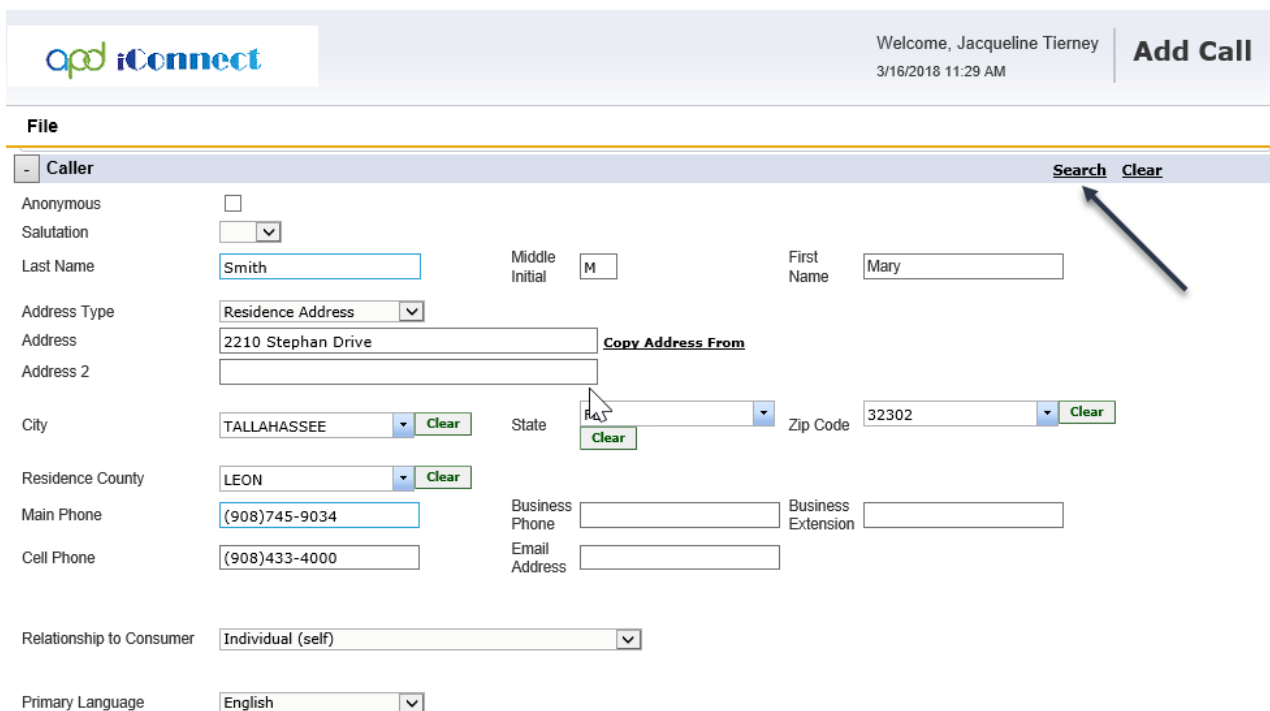
Person Taking the Call* Tierney, Jacqueline ... Clear

Contact Status* Pending

Follow up Required ☐

5. Update the Caller Information Section with information about the Caller:

- If the Caller is the potential Consumer, set Relationship to Consumer = Self
- If the Caller provides enough identifying information, update the relevant demographic fields and then click **Search** to verify if the Caller already has an existing record in the iConnect People Table



File

- Caller [Search](#) [Clear](#)

Anonymous ☐

Salutation

Last Name Smith Middle Initial M First Name Mary

Address Type Residence Address

Address 2210 Stephan Drive [Copy Address From](#)

Address 2

City TALLAHASSEE Clear State FL Clear Zip Code 32302 Clear

Residence County LEON Clear

Main Phone (908)745-9034 Business Phone Business Extension

Cell Phone (908)433-4000 Email Address

Relationship to Consumer Individual (self)

Primary Language English

- The People Search window will open. The multi variable search criteria will pre-populate with the values entered into the fields in the Caller Section of the Call record. Click the red X to remove any search criteria or the green + to add additional criteria. Then click **Search**.

File

Search

Help

☐ Apply Filter to Search

Search

Reset

Show Filter

Filter

Last Name

Begins With

Smith

AND

First Name

Begins With

Mary

AND

Middle Name

Begins With

M

AND

Partial Contact Information

Equal To

AND

Phone

Equal To

(908)745-9034

OR

Phone

Equal To

(908)433-4000

AND

Street

Equal To

2210 Stephan Drive

AND

City

Equal To

TALLAHASSEE

AND

State

Equal To

FL

AND

Zip Code

Equal To

32302

AND

Last Name

+

Search

Reset

Hide Filter

ii. If the Search does not return a matching record from the People Table, the following message will appear:

Welcome, Jacqueline Tierney | People Search

3/16/2018 11:41 AM

File

Filter

Last Name

Begins With

Smith

AND

First Name

Begins With

Mary

AND

Middle Name

Begins With

M

AND

Partial Contact Information

Equal To

AND

Phone

Equal To

(908)745-9034

OR

Phone

Equal To

(908)433-4000

AND

Street

Equal To

2210 Stephan Drive

AND

City

Equal To

TALLAHASSEE

AND

State

Equal To

FL

AND

Zip Code

Equal To

32302

AND

Last Name

+

Search

Reset

Hide Filter

Search Results for Harmony People

Last Name	People ID	First Name	Middle Name	Suffix	DOB	Gender	Date of Death	Race	SSN	Case No	Person Type	Participant Photo
No records to display.												

iii. If the Search does return a matching record from the People Table, matching records will populate under the heading Search Results for People:

Search Results for Harmony People

	Last Name	People ID	First Name	Middle Name	Suffix	DOB	Gender	Date of Death	Race	SSN	Case No	Person Type	Participant Photo
1	Smith	10264	Mary	M								Participant	

iv. Click on the appropriate matching record. A pop-up window will open with the following options. Click on the correct option to pull data from the matching record into the Caller Section of the new Call record:

1. Overwrite Participant Data - Any fields in the Caller's existing People record will overwrite fields on the Caller's new record (i.e. the existing People record will replace the new record)
2. Link to Participant Data - Only empty fields on the Caller's new record will be populated with data from the existing People record



Tip

If you're not sure which option to use, select Link to Participant Data to preserve both sets of data.

Participant Data is NOT Consumer Data. Changes you make here do not affect the Consumer record.

Overwrite Participant Data: Participant data on the intake record will be replaced with data from the selected people record.

Link to Participant: Only empty Participant fields on the intake record will be replaced with data from the selected people record and then will be added/appended to the selected people record.

How would you like to attach the selected record?

☒ Overwrite Participant Data

☐ Link to Participant

☐ Cancel and Return to People Search Grid

OK

6. Scroll down to the Prospective Applicant section and click **Add**. The Add New Prospective Applicant Information window will open:

File

Add New Prospective Applicant Information Search Clear

Primary ☒

Caller is Consumer ☐

Salutation

Last Name Middle Initial First Name

Address Type

Address Copy Address From

Address 2

City Clear State Clear Zip Code Clear

Residence County Clear

Main Phone Business Phone Business Extension

Cell Phone Email Address

SSN Unmask Medicaid ID

Sex Race Ethnicity

Date of Birth Age at Intake

- Update all relevant fields with information about the prospective Consumer.
- If the Caller is the prospective Consumer check the Caller is Consumer field. Upon doing so, relevant data from the Caller Section of the Call record will pre-populate into the affiliated fields in the prospective consumer's Participant record
- If the Caller is not the prospective Consumer, enter all relevant information and then click **Search**. Repeat the steps in Step E above to verify if the prospective Consumer has an existing record in the iConnect People Table
- When finished, click **File > Save and Close Prospective Applicant**

File

Spell Check

Save Prospective Applicant

Save and Close Prospective Applicant

Close Prospective Applicant

Information Search Clear

Address Type Middle Initial First Name

Address Copy Address From

Address 2

City Clear State Clear Zip Code Clear

Residence County Clear

Main Phone Business Phone Business Extension

Cell Phone Email Address

SSN Unmask Medicaid ID

Sex Race Ethnicity

Date of Birth Age at Intake

Caseworkers name and telephone number

Marital Status Living Arrangements

Suspected Developmental Disability

Autism

Cerebral Palsy

Unknown

Prader-Willi Syndrome

Spina Bifida

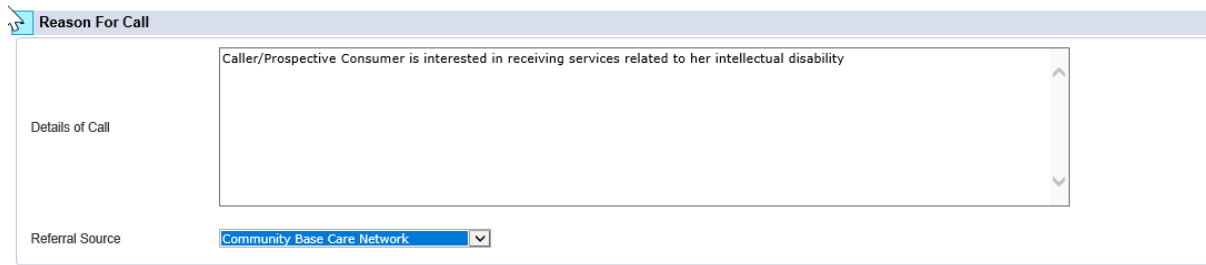
Down Syndrome

Phelan McDermid Syndrome

Intellectual Disability

7. Scroll down to add information into the Reason for Call Section:

a. Update Details of Call and Referral Source as appropriate



Reason For Call

Details of Call
 Caller/Prospective Consumer is interested in receiving services related to her intellectual disability

Referral Source
 Community Base Care Network

8. Scroll down to the Decision Section of the Call record.

a. In the Decision Section, update the following fields:

- i. Call Priority
- ii. Call Queue = Region Office that will service the Prospective Applicant
- iii. Call Disposition = Follow Up (if record must be routed to appropriate regional office) OR Application Pursued (if Caller contacted appropriate regional office)
- iv. Division = APD

If Call Must be Routed to Another Region Office:



Decision

Call Priority: Normal Review

Call Disposition*: Follow Up

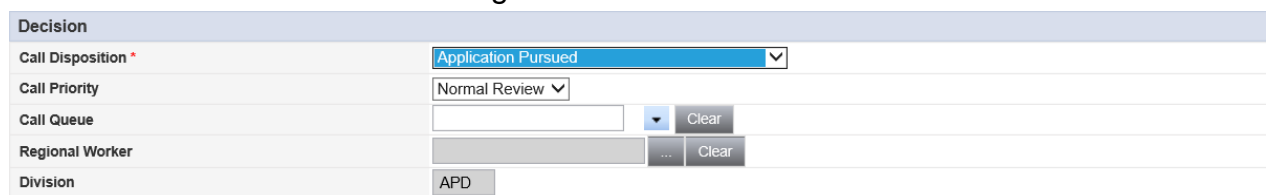
Call Queue: Southern

Other Information:

Regional Worker: Tierney, Jacqueline

Division: APD

If Caller Contacted the Correct Region Office:



Decision

Call Disposition*: Application Pursued

Call Priority: Normal Review

Call Queue: Clear

Regional Worker: Clear

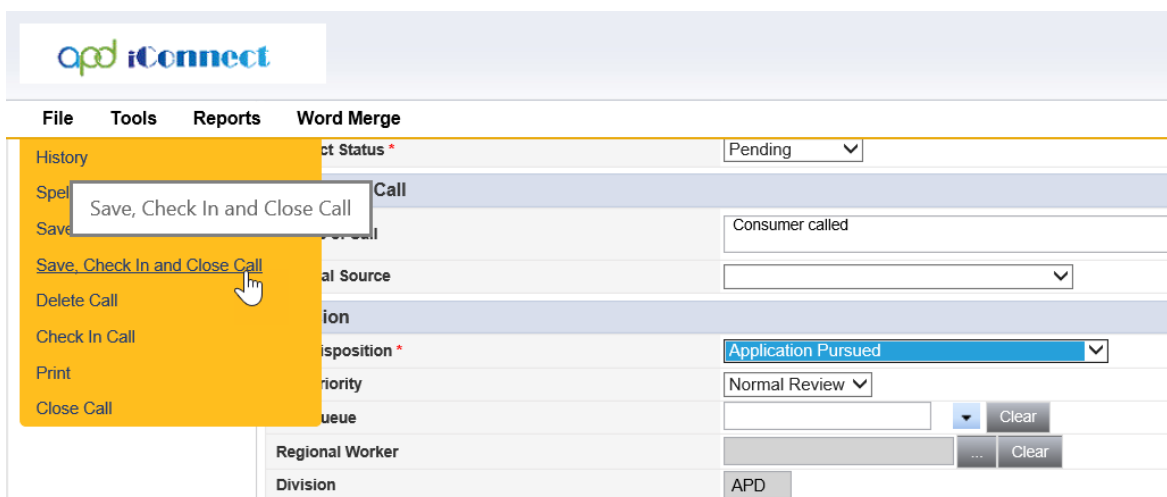
Division: APD

9. Depending on whether the Caller has contacted the appropriate office, choose one of the following options to finish the Intake process:

- a. If the Caller has called the appropriate Region Office that will provide the Prospective Applicant with services, select **File > Save, Close & Create Consumer Record**:



- b. If the Caller contacted the incorrect Region Office and the Call record must be routed to the appropriate Region Office, select **File > Save, Check-in & Close Intake**. proceed to Calls Routed to Different Region Office.



Caller Contacted Correct Region Office:

1. If the Caller has called the appropriate Region Office that will provide the Prospective Applicant with services, but has NOT reached the correct person (for example the call center representative or secretary), update the following fields on the Intake record:
 - a. Disposition = Follow-Up
 - b. Region Worker = the correct Intake Worker in the region.

iConnect

Call ID = 10177 - Alice Sheppard | **Call**
Last Updated by j buck
at 4/16/2018 10:04:12 PM

File Tools Reports Word Merge

Call

Participants

Notes

Associated Calls

Track Call Status

Initial Contact

Entry Date * 04/03/2018

Entry Time * 03:12 PM

Contact Date * 04/03/2018

Contact Time 03:12 PM

Contact Method Telephone

Contact Type * Inquiry

Person Taking the Call * Buck, Jennifer

Follow Up Required ☐

Contact Status * Pending

Reason for Call

Details of Call test

Referral Source

Decision

Call Disposition * Follow Up

Call Priority Normal Review

Call Queue Southern Clear

Regional Worker Reed, Monica Clear Details

Division APD

Call Notes

New Text

Append Text to Note

2. If the Caller has called the appropriate Region Office that will provide the Prospective Applicant with services, and has reached the correct person, select **File > Save, Close & Create Consumer Record**.
3. The Consumer Search window will open prompting the user to search the system to verify if the Prospective Applicant already has a Consumer record.
4. Upon clicking **Save, Close & Create Consumer Record**, the Consumer Search window will open prompting the user to search the system to verify if the Prospective Applicant already has a Consumer record.
5. Use the multi variable search criteria to build a search for the Prospective Applicant and click **Search**:

File

Filters

Last Name	Equal To	Smith Jones	AND	<input type="checkbox"/>
First Name	Equal To	Mary	OR	<input type="checkbox"/>
Date of Birth	Equal To		OR	<input type="checkbox"/>
SSN	Equal To	XXX-XX-0005	OR	<input type="checkbox"/>
Last Name	+			

[Unmask](#)

Search **Reset**

6. If the Consumer Search returns a match, click on the match to open the record.

7. The Prospective Applicant's Consumer record will open to the Demographics page where you can click on the **Divisions** tab to verify if the Consumer already has an active APD Division record.

File **Word Merge**

Division

Events

Track Disposition

Events

Division *	APD
Disposition *	Pending
Disposition Date	03/21/2018
Open Date	03/21/2018
Data Entry Date	03/21/2018
Primary Worker *	Tierney, Jacqueline
Secondary Worker	
Application Received Date	
Interested in ICF/IID	
Age Category at Time of Application	
Application Pended Due Date	
Eligibility Documentation Complete Date	

Referral Source

Referral Date	03/21/2018
Referral Source	Parent

8. If the Consumer Search does not return a match:

- Navigate back to the Call record and click **Participants > Consumer > Tools > Add as Consumer > Add New:**

File Add Participant

Call

Participants

Notes

Associated Calls

Track Call Status

Filters

Last Name +

Search Reset

2 Participants record(s) returned - now viewing 1 through 2

Last Name	First Name	Participant Type	Participant Photo	Main Phone
Smith	Mary	Caller		(908)745-9034
Smith	Mary	Consumer		(908)745-9034

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Add as Consumer:

File Tools Reports

Consumer Search Add as Consumers Applicant

Copy Add as Consumers

Names Add as Consumers

Address Add as Consumers

Phones

Emails

Identifiers

Last Name Smith

First Name Mary

Middle Name M

Address Type Residence Address

Address 2210 Stephan Drive

Add New:

File

Filters

Last Name Equal To Smith AND

First Name Equal To Mary OR

Date of Birth Equal To OR

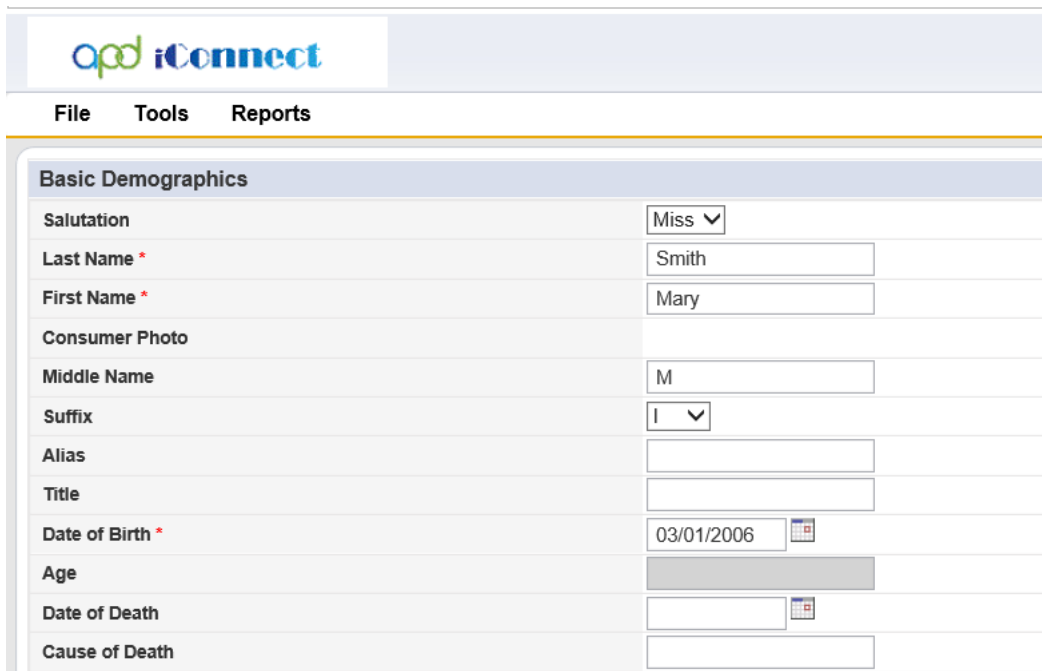
SSN Equal To OR

Last Name +

Unmask

Search Reset Add New

- b. Upon clicking **Add New**, the Consumer record will open to the Demographics page. Information from the Call record will be pushed to populate the consumer's demographics. Set Initial Division = APD:



opd iConnect

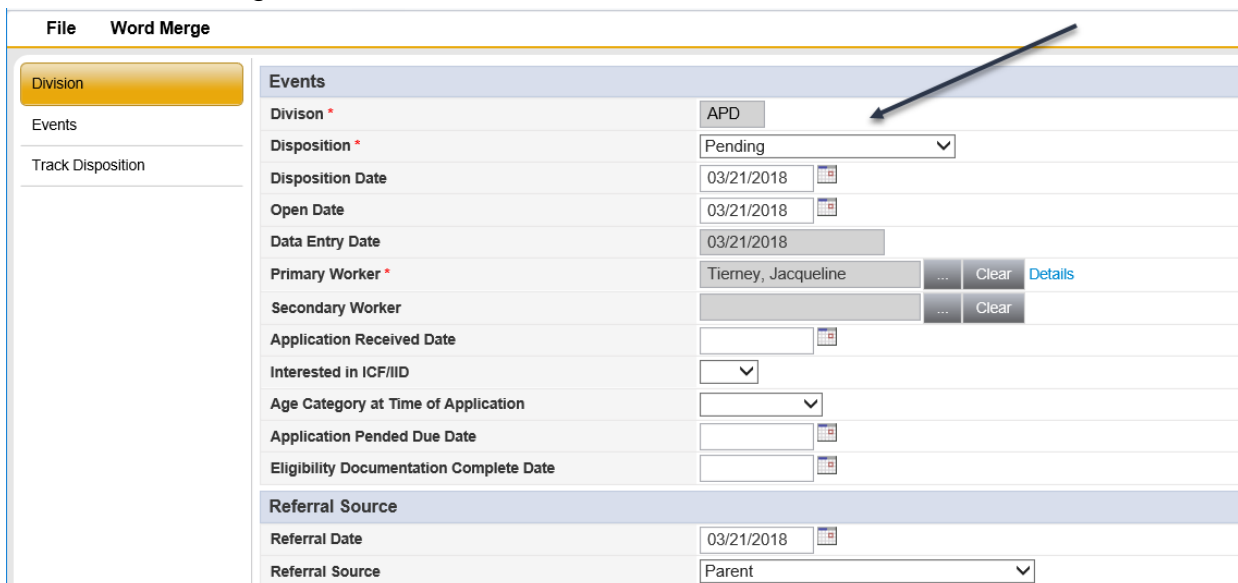
File Tools Reports

Basic Demographics

Salutation	Miss ▼
Last Name *	Smith
First Name *	Mary
Consumer Photo	
Middle Name	M
Suffix	I ▼
Alias	
Title	
Date of Birth *	03/01/2006
Age	
Date of Death	
Cause of Death	

c. Update all relevant demographic fields. When finished, click **File > Save and Close Demographics**.

d. The consumer's Division record will automatically open with Disposition = Pending



File Word Merge

Division

Events

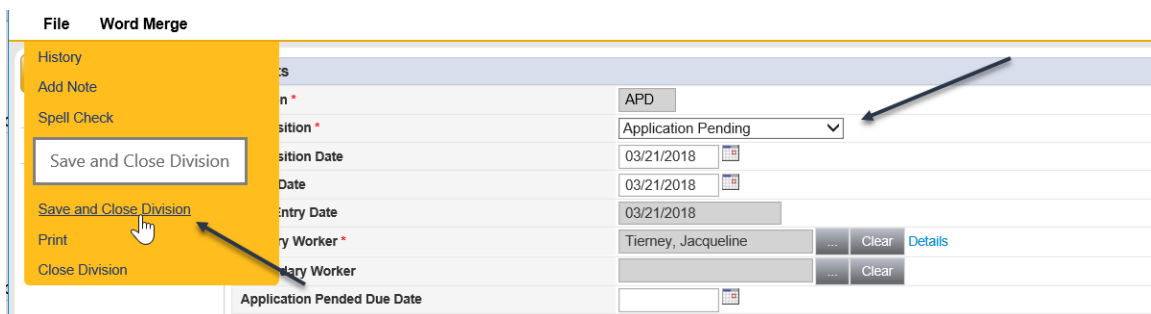
Track Disposition

Events

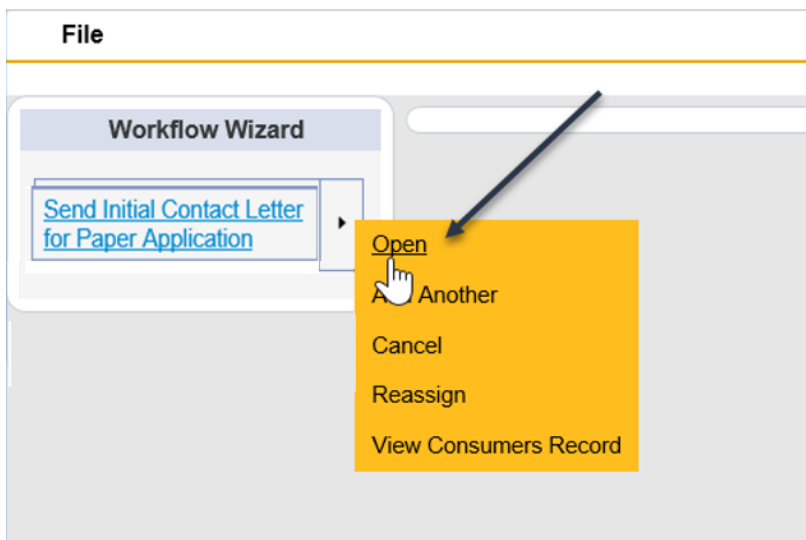
Division *	APD
Disposition *	Pending ▼
Disposition Date	03/21/2018
Open Date	03/21/2018
Data Entry Date	03/21/2018
Primary Worker *	Tierney, Jacqueline ... Clear Details
Secondary Worker	... Clear
Application Received Date	
Interested in ICF/IID	▼
Age Category at Time of Application	▼
Application Pended Due Date	
Eligibility Documentation Complete Date	
Referral Source	
Referral Date	03/21/2018
Referral Source	Parent ▼

e. Add or Update the consumer's APD Division record with Disposition = Application Pending.

- f. The user can skip the Referral source section if the Consumer record was created from a call record, because the referral source information was already recorded on the Call record. The user can review the Call record for this information.
- g. The user would complete the Referral Source section on the Division page if the Consumer record was NOT created from a call record.
- h. Then click **File > Save and Close Division**:

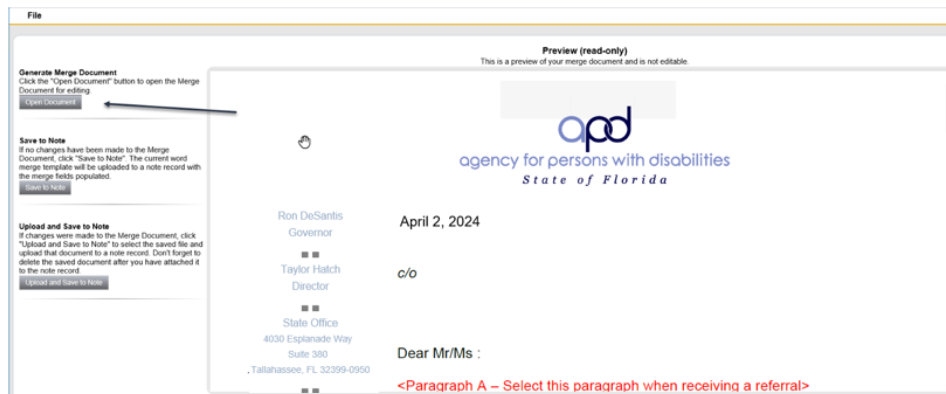


9. Upon saving the APD Division record with Disposition = Application Pending, a Workflow Wizard window will automatically trigger with one Ticklers:
 - a. Send Initial Contact Letter for Paper Application – *Assigned to Current User*, Due Immediately

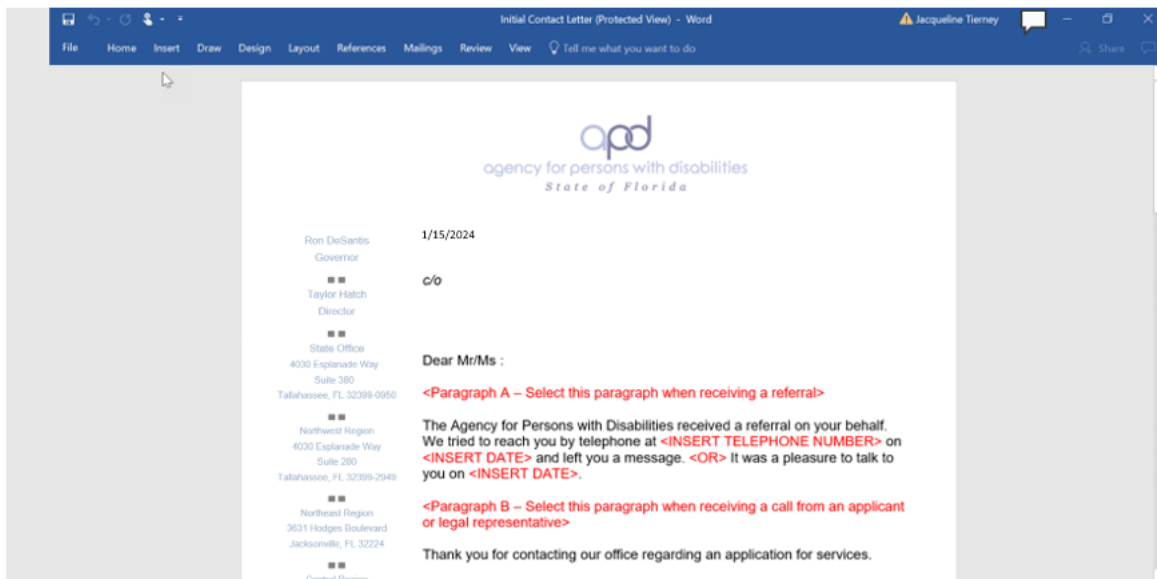


10. Hover the cursor over the Tickler arrow to click Open to access the Tickler.
 - a. The Initial Contact Letter for Paper Application will automatically open.
 - b. Click **Open Document** to edit the letter:

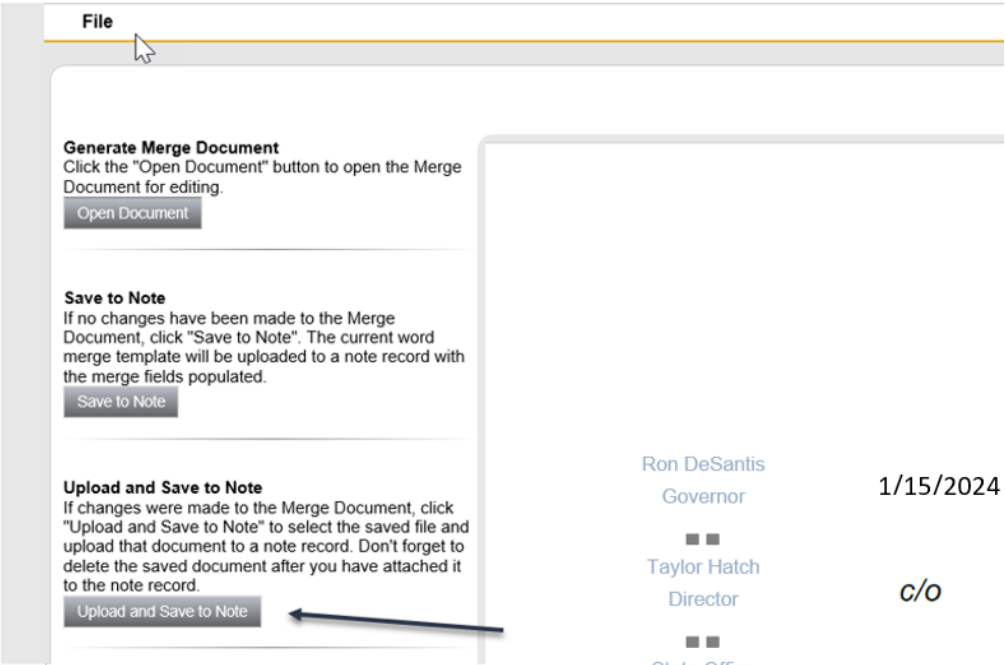
10.



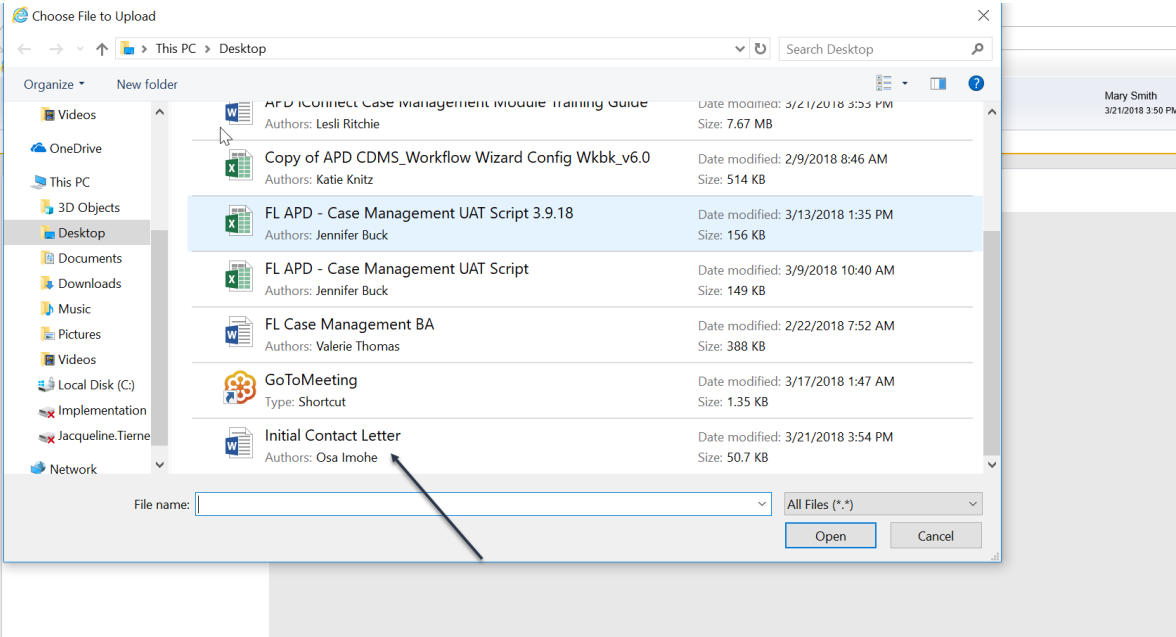
- c. Save the document to your computer so that it can be edited in Microsoft Word:



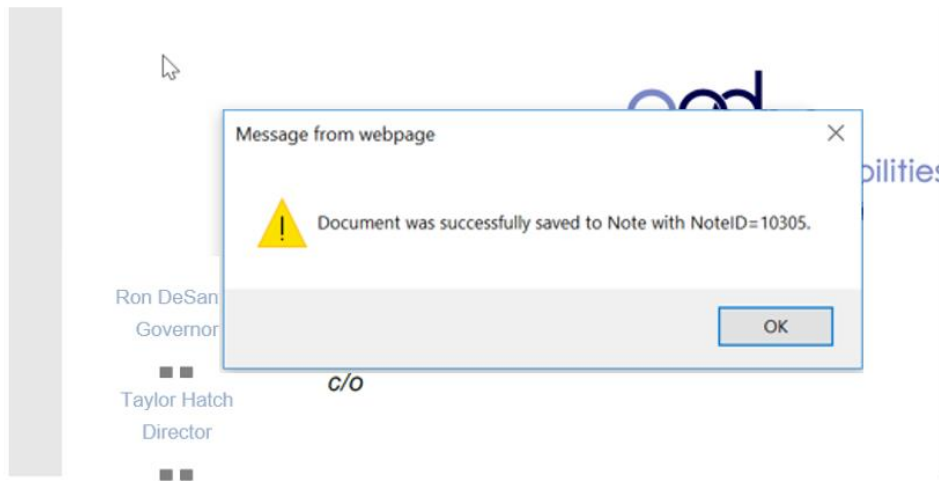
- d. Edit the letter as appropriate and save it to your computer.
e. Then, back in the iConnect system, select **Upload and Save to Note**:



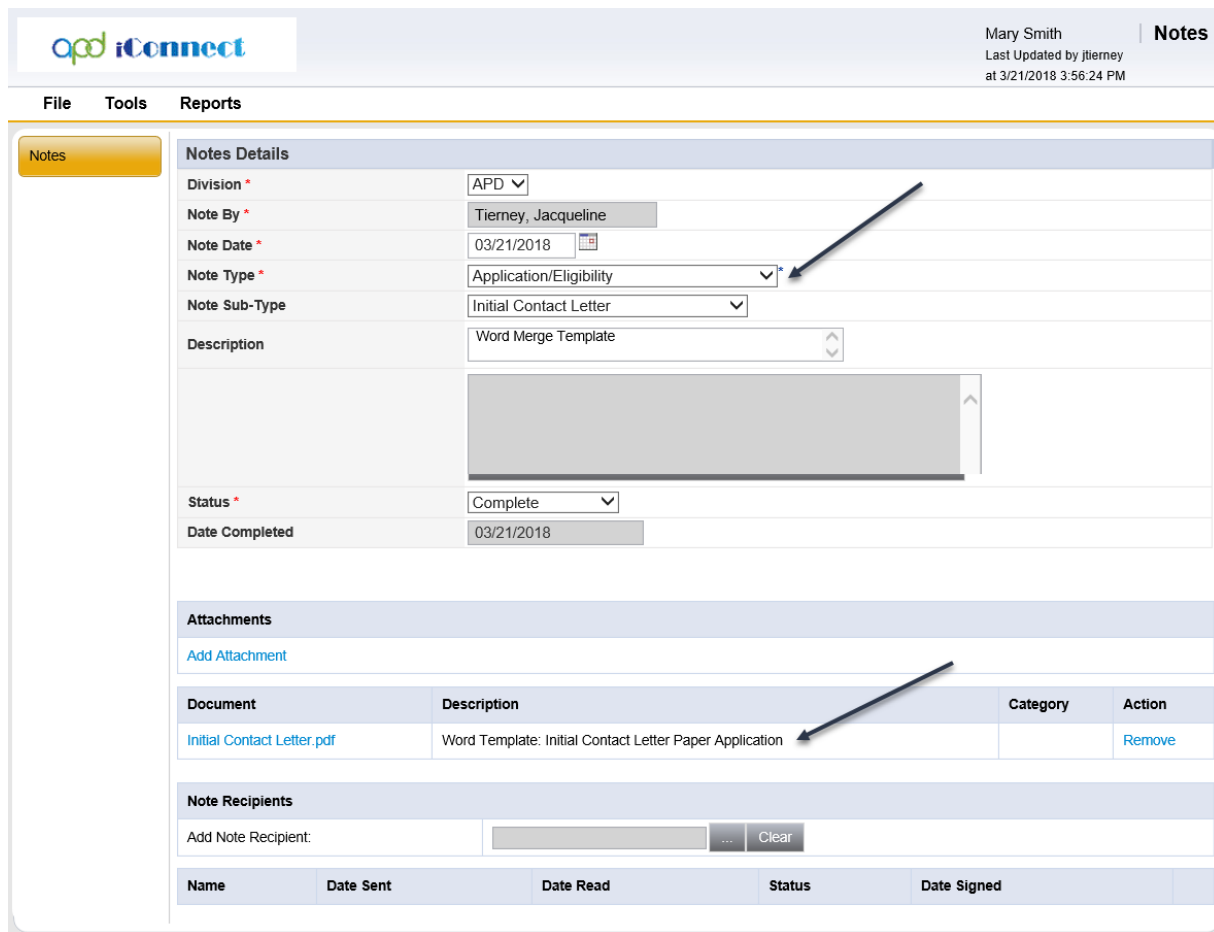
f. Select the appropriate file from your computer:



g. The system will automatically save the updated letter to a new Consumer Note record and return the following message. Click **OK**:



- h. Upon clicking **OK**, a new Consumer Note record will open. In the new Note record, update the following fields:
- Update Note Type = Application/Eligibility and Note Subtype = Initial Contact Letter
 - Set Status = Complete
 - Notice that the Initial Contact Letter is attached to the Note
 - When finished, click **File > Save and Close Notes**



Notes

File Tools Reports

Mary Smith
Last Updated by jtierney
at 3/21/2018 3:56:24 PM

Notes Details

Division * APD ▾

Note By * Tierney, Jacqueline

Note Date * 03/21/2018

Note Type * Application/Eligibility ▾

Note Sub-Type Initial Contact Letter ▾

Description Word Merge Template

Status * Complete ▾

Date Completed 03/21/2018

Attachments

[Add Attachment](#)

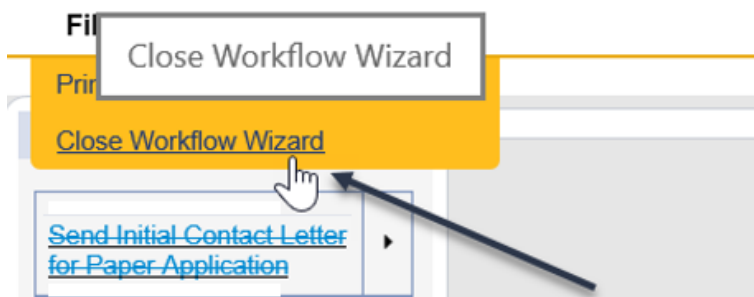
Document	Description	Category	Action
Initial Contact Letter.pdf	Word Template: Initial Contact Letter Paper Application		Remove

Note Recipients

Add Note Recipient: [...](#) [Clear](#)

Name	Date Sent	Date Read	Status	Date Signed
------	-----------	-----------	--------	-------------

11. Return to the open tickler window. From the tickler flyout menu, select Complete. The tickler is marked as complete. Click **File > Close Workflow Wizard**:



Calls Routed to Different Region Office:

1. If the new Call record needed to be routed to a different Region Office, the Region Worker will be able to pick up the Call record via their **My Dashboard**.
2. To do so, log into iConnect and set Role = APD Main Calls. Click **Go**.
3. On the **My Dashboard**, find the Calls Section and scroll down to the Disposition Panel. Click on the **Follow Up** link to access the Calls Queue:

File

Quick Search

Consumers

Last Name

GO

ADVANCED SEARCH

MY HARMONY CONSUMERS CALLS

CALLS

Disposition

Application Pursued	4
Follow Up	1
Unable to Contact	1

4. The Region Worker can also access the Call record by clicking on the **Calls** chapter and using the multi variable search to pull up calls with Disposition = Follow-up and Region = appropriate Region. Click **Search**:

File

Quick Search

Calls

Call ID

GO

ADVANCED SEARCH

MY HARMONY CONSUMERS CALLS

Search

Help

☐ Apply Filter in Search

Search Reset Show Filter

Filters

Call Queue

Equal To

Southern

AND

Call Disposition

Equal To

Follow Up

AND

Call ID

+

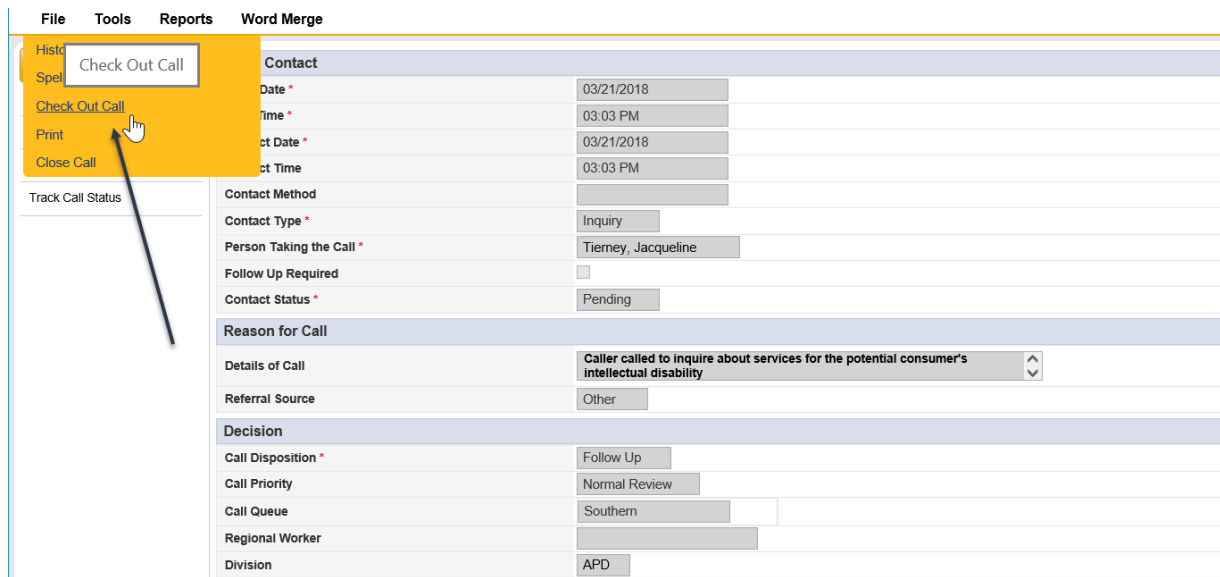
Search Reset Hide Filter

1 Queue Search record(s) returned - now viewing 1 through 1

Call ID	Contact Date	Contact Time	Call Disposition	Contact Status	Caller First Name	Caller Last Name	Consumer First Name	Consumer Last Name	Call Queue	Checked Out By
10155	03/21/2018	3:03 PM	Follow Up	Pending	Mary	Smith Jones	Mary	Smith Jones	Southern	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

5. Note that the worker has five business days to respond to the Consumer to initiate the application process. To do so, attempt to contact the Consumer via phone by completing the following steps:
- Click on the Call record and click **File > Check Out Call** to open it. While you have the Call record checked out, no other users will be able to edit the record:



The screenshot shows the Case Management Module interface. The left sidebar contains a menu with options: 'Check Out Call', 'Print', and 'Close Call'. The 'Check Out Call' option is highlighted in orange. An arrow points from this option to the 'Check Out Call' button in the sidebar. The main area displays a 'Contact' record for a call on 03/21/2018 at 03:03 PM. The contact method is 'Inquiry', the person taking the call is 'Tierney, Jacqueline', and the contact status is 'Pending'. The reason for the call is 'Caller called to inquire about services for the potential consumer's intellectual disability'. The decision is 'Follow Up'.

- b. From within the Call record, click **Participants > Consumer** to open the Potential Applicant's Participant record. Find the consumer's Phone Number and call the applicant:



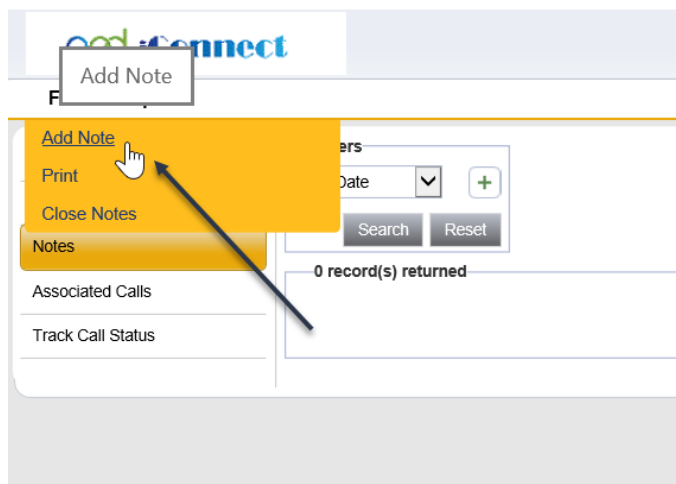
The screenshot shows the 'Add Participant' screen. The left sidebar contains a menu with options: 'Call', 'Participants', 'Notes', 'Associated Calls', and 'Track Call Status'. The 'Participants' option is highlighted in orange. The main area displays a list of participants. The table shows two participants: 'Smith Jones, Mary' (Caller) and 'Smith Jones, Mary' (Consumer). The 'Consumer' participant has a main phone number of (703)929-2222. An arrow points to the 'Consumer' participant record.

Last Name	First Name	Participant Type	Participant Photo	Main Phone
Smith Jones	Mary	Caller		(703)929-2222
Smith Jones	Mary	Consumer		(703)929-2222

- c. If the Region Worker Successfully Contacts the Consumer, proceed to number 7 below. If the Region Worker fails to contact the Consumer, proceed below:

6. Region Worker Fails to Contact Potential Applicant:

- a. Each time the Region Worker is unsuccessful in their attempt to contact the Consumer phone (and no Consumer email address provided), record the attempt in a Note record. To do so, using the APD Main Calls Role, in the Call record > select the **Notes** tab. Click **File > Add Note**.



- b. Update the following fields in the Note record.
 - i. Participant = Potential Applicant
 - ii. Note Type =
 - iii. Note Sub-Type = 1st Attempt OR 2nd Attempt OR 3rd Attempt
 - iv. Note = Record details of contact attempts
 - v. Status = Complete
- c. Then click **File > Save and Close Note**.

7. Region Worker Successfully Contacts Potential Applicant:

- a. Navigate to the Call record and scroll down to the Decision Section to update Call Disposition = Application Pursued and then click **File > Save Call**

The screenshot shows the 'File' menu open with 'Save Call' highlighted. The main form displays the following information:

Contact	
Date *	03/21/2018
Time *	03:03 PM
Contact Date *	03/21/2018
Contact Time	03:03 PM
Contact Method	
Contact Type *	Inquiry
Contact Taking the Call *	Tierney, Jacqueline
Follow Up Required	<input type="checkbox"/>
Contact Status *	Pending
Reason for Call	
Details of Call	Caller called to inquire about services for the potential consumer's intellectual disability
Referral Source	Other
Decision	
Call Disposition *	Application Pursued
Call Priority	Normal Review
Call Queue	Southern
Regional Worker	
Division	APD

- b. On the Call record, click on the **Participants** tab and then click on the record labeled **Consumer** to open the Consumer details.

The screenshot shows the 'iConnect' interface with the 'Participants' tab selected. A table lists participants with columns: Last Name, First Name, Participant Type, Participant Photo, Main Phone, Business Phone, and Age. Two records are shown, both with 'Sample' as the last name and 'Tester' as the first name. The first is a 'Caller' and the second is a 'Consumer'. The 'Consumer' record is highlighted in yellow. Navigation buttons like '<< First', '< Previous', 'Retrieve | 15', 'Next >', and 'Last >>' are at the bottom of the table.

The screenshot shows the 'iConnect' interface with the 'Consumer' details page. The 'Tools' menu is open, showing options: 'Search For Person', 'Copy Address From Consumer', and 'Add as Consumers'. The 'Add as Consumers' option is highlighted with a red box and a mouse cursor. The 'Add as Consumers' sub-menu is also visible, showing a 'Salut' dropdown and a 'Last Name' field with 'Sample' entered.

- c. Select **Tools > Add as Consumer**
- d. Proceed to [Chapter 1 Intake Process](#) to create the Consumer Record and sending the Initial Contact Letter.

Receiving a Paper Application

1. Upon receiving the paper application via email or mail, date stamp the application
2. Log into iConnect and select the Region Pre-Enrollment Workstream Worker Role. Click on the **Consumers** chapter and **File > Add New Demographics Search** to verify if the Potential Applicant already has a record in iConnect:

The screenshot shows the 'iConnect' interface with the 'Advanced Search' page. The 'File' menu is open, showing options: 'Add New Demographics Search' and 'Print'. The 'Add New Demographics Search' option is highlighted with a red box and a mouse cursor. The 'Add New Demographics Search' sub-menu is also visible, showing a 'Last Name' field with 'Sample' entered. The 'Consumers' tab is selected in the top navigation bar.

- Utilize the multi variable Consumer search to build and execute a search for the Potential Applicant. For example, utilize the First Name, Last Name or SSN to build a search statement. Then click **Search**:

Filters

Last Name Contains sample AND

First Name Contains enrollee OR

Last Name +

Search Reset Add New

1 Demographics Search record(s) returned - now viewing 1 through 1

Last Name	First Name	Date of Birth	SSN	iConnect ID	Medicaid ID	Address	City	State	Zip Code	ABC PIN
Sample	Enrollee	09/26/2003	XXX-XX-6464	10131	684469469	123 Sample Street	TALLAHASSEE	FL	32302	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

- If the Consumer Search returns a match, click on the match to open the record and make the applicable updates. If the Consumer Search does not return a match, click **Add New**:

File

Filter

First Name Equal To mitten AND

People ID +

Search Reset Add New

Search Results for Harmony People

People ID	First Name	Last Name	Middle Name
No records to display.			

- Clicking **Add New** or clicking on a matching record will bring you to the consumer's Demographics page.
 - Update all relevant demographic fields with information from the applicant's paper application.
 - Set Initial Division = APD

Gender *	Female
Race	African American
Ethnicity	Cambodia
Suspected Developmental Disability	<div> Autism Intellectual Disability Unknown Prader-Willi Syndrome Spina Bifida Down Syndrome Phelan McDermid Syndrome </div> <div>Cerebral Palsy</div>
Competency	Has Capacity
Marital Status	Married
Living Setting	Family Safety & Preservation Commitment Fac
Referral Source	Court Order
SSN *	XXX-XX-4005 Unmask
Medicaid ID	
Medicare ID	
Medicare Type	Medicare Type A
Initial Division *	APD
ABC PIN	

6. When finished, click **File > Save and Close Demographics**.

- The consumer's APD Division record will automatically open with Disposition = Pending.
- If the Consumer record already existed, the Intake worker will navigate to the consumer's Record and select the existing APD Division Record.
 - If the APD Division Record isn't visible in the list view grid, remove the filters to locate the division record

Filters

Disposition

Not Equal To

Closed

AND

×

Open Date

Greater Than

MM/DD/YYYY

AND

×

Division

+

Search

Reset

0 record(s) returned

7. On the consumer's Division record, update the following fields:

- Disposition = Application Received
- Disposition Date = the date the disposition above was selected. User can update.
- Open Date = defaults to today. This is the Date became APD Client
- Application Received Date = Update to date paper application was received. If this value is unknown, enter 01/01/1900.

IMPORTANT: Each time a NEW application is received, the date of that application being received needs to be updated to reflect the NEW application. Do not leave the OLD received date for the previous application.

- Interest in ICF/IID = Yes or No as appropriate

- f. Age Category at Time of Application = Update as appropriate
- g. The user can skip the Referral source section if the Consumer record was created from a call record, because the referral source information was already recorded on the Call record. The user can review the Call record for this information.
- h. The user would complete the Referral Source section on the Division page if the Consumer record was NOT created from a call record.

Division

John Sheppard
Last Updated by jibuck
at 6/29/2018 4:24:02 PM

File **Word Merge**

Division

Events

Division * APD

Disposition * Application Received

Disposition Date 07/11/2018

Open Date 05/23/2018

Data Entry Date 05/23/2018

Primary Worker * Buck, Jennifer

Secondary Worker Buck, Jennifer

Application Received Date * 05/01/2018

Interested in ICF/IID No

Age Category at Time of Application * 6 and Above

Application Pended Due Date

Eligibility Documentation Complete Date

Referral Source

Referral Date 05/23/2018

Referral Source * Church/Clergy

Referral Reason

Name

Title

Agency

Address

City

State

Zip Code

Main Phone

- 8. When finished, click **File > Save and Close Division**
- 9. Complete the Initial Application Form in the system. To do so, navigate to the consumer's record and click on the **Forms** tab > **File > Add Form**:

File **Tools** **Ticklers** **Word Merge**

Add New Demographics Search

Add Forms

Print

Consumers

Last Name

GO

ADVANCED SEARCH

MY DASHBOARD **CONSUMERS** PROVIDERS

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes **Forms** Appointments Plans Pre-Enrollment Payers

10. Set Please Select Type = Application for Services.
 - a. In the form, update all relevant fields.
 - b. In the header, set Review = Initial and Status = Complete
 - c. When finished, click **File > Save and Close Forms**:

The screenshot displays a web-based form titled "APPLICATION FOR SERVICES". At the top, a dropdown menu is set to "Please Select Type: Application for Services". Below this is a "Consumer Forms" section with two columns of fields. The left column includes "Review" (set to "Initial"), "Review Date" (set to "03/21/2018"), "Division" (set to "APD"), and "Approved By" (set to "Tierney, Jacqueline"). The right column includes "Worker" (set to "Tierney, Jacqueline"), "Status" (set to "Complete"), "Program" (empty), and "Approved Date" (set to "03/21/2018"). Below the "Consumer Forms" section is a blue header bar with the text "APPLICATION FOR SERVICES". Underneath this is a green header bar with the text "APPLICANT INFORMATION". The "APPLICANT INFORMATION" section contains various fields for personal and contact information: "Applicant Last Name" (Smith), "Applicant First Name" (Marianne), "Applicant Middle Name" (empty), "Suffix" (Sr.), "Social Security Number" (XXX-XX-4005), "Street Name" (2210 Stefab Drive), "City" (ALFORD), "State" (FL), "Zip" (32420), and "Region" (NORTHEAST). There are also "Unmask" and "Clear" buttons next to the Social Security Number and Region fields, respectively.

11. To attach application collateral documents to the consumer's record, click on the **Notes** tab > **File > Add Note**.
 - a. In the new Note record, update the following fields:
 - i. Division = APD
 - ii. Note Type = Application/Eligibility
 - iii. Note Subtype = Application Collateral Docs
 - iv. Status = Complete
 - b. Attach all supporting documents submitted with the paper application.
 - c. Then click **File > Save and Close Notes**

Chapter 2 | Application Review

Introduction

The chapter covers the Application review process. The Intake Worker will initiate the Application Review process. Then, the Eligibility Determination Specialist and an Approved Professional, if warranted, will review the consumer's Application for Services and any collateral documentation to determine if the Consumer is eligible to receive Waiver services.

If the Application is incomplete or additional referrals are needed, the Intake Worker or Eligibility Determination Specialist will hold the Consumer in an Application Pended status until all necessary information is obtained and an eligibility determination can be made.

Application Review

- To begin the application review process, the Intake Worker will navigate to the Consumers record and click on the **Divisions** tab.

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics **Divisions** Consumer Budgets Programs Provider Selections Notes Forms Appointments Plans Waiting List Payers Legal

Filters

Disposition ▼ Not Equal To ▼ Closed ▼ AND ▼ ✕

Open Date ▼ Greater Than ▼ AND ▼ ✕

Division ▼ +

Search Reset

1 Divisions record(s) returned - now viewing 1 through 1

Division	Disposition	Primary Worker	Secondary Worker	Open Date ▼	Close Date	LOS
APD	Application Received	Tierney, Jacqueline		03/21/2018		1

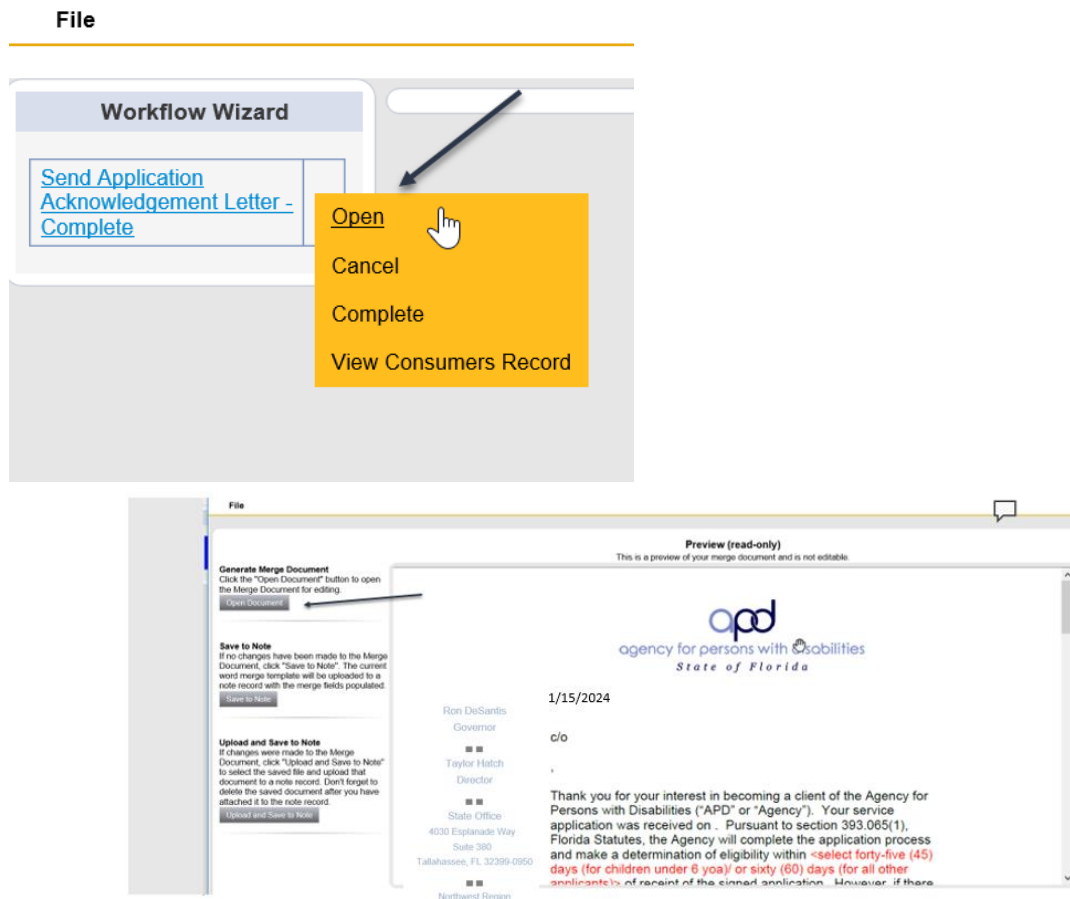
<< First < Previous Retrieve 15 Records at a time Next > Last >>

- Open the record labeled Division = APD and Disposition = Application Received.
 - Update the following fields:
 - Disposition = Application Review
 - Secondary Worker = Eligibility Determination Specialist
 - Age Category at Time of Application = 6 and Above OR Under 6 (if not previously done)
 - When finished, click **File > Save and Close Division**

The screenshot shows a software interface with a menu on the left and a form on the right. The menu, titled 'File Word Merge', includes options: History, Add Note, Spell Check, Save and Close Division (highlighted with a yellow box and a mouse cursor), Print, and Close Division. An arrow points from the 'Save and Close Division' option to the 'Application Review' dropdown in the form. The form contains various fields for application review, including dates, a dropdown for 'Application Review', and a list of workers.

Application Review	
Application Received Date *	03/22/2018
Application Pended Due Date	03/21/2018
Eligibility Documentation Complete Date	03/21/2018
Intake Worker *	Tierney, Jacqueline
Secondary Worker *	
Application Received Date *	03/21/2018
Interested in ICF/IID	No
Age Category at Time of Application *	6 and Above
Application Pended Due Date	
Eligibility Documentation Complete Date	

3. Upon saving the Division record, a Workflow Wizard will trigger one Tickler to the current user (Intake Worker) and two Ticklers to the assigned Eligibility Determination Specialist:
 - a. Send Application Acknowledgment Letter – *Assigned to Intake Worker, Due Immediately*
 - b. Verify Receipt of Collateral Documentation – *Assigned to Eligibility Determination Specialist, Due in 45 days for Consumers under 6, and 60 days for Consumers 6 and above:*
 - c. Approve Eligibility Determination – *Assigned to Eligibility Determination Specialist, Due in 45 days for Consumers under 6, and 60 days for Consumers 6 and above*
4. Hover over the arrow next to the Tickler called Send Application Acknowledgement Letter to click **Open**.
 - a. Edit the document in Microsoft Word. Include a list of all collateral documents that are required to complete the application, if any.
 - b. Print the document to mail to the Consumer.
 - c. Save the updated document to your Desktop.



5. Back in iConnect, click **Upload and Save to Note**. In the new Note Record, update the following fields:
 - a. Division = APD
 - b. Note Type = Application/Eligibility
 - c. Note Subtype = Application Acknowledgement Letter
 - d. Status = Complete
6. When finished, click **File > Save and Close Note**

File Tools Reports

Notes

Notes Details

Division * APD

Note By * Tierney, Jacqueline

Note Date * 03/22/2018

Program/Provider

Note Type * Application/Eligibility

Note Sub-Type Application Acknowledgement Letter

Description Word Merge Template

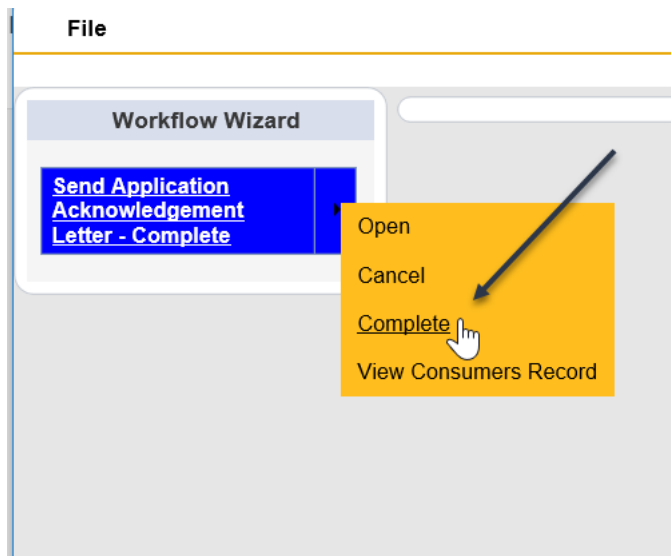
Note

New Text

Append Text to Note

Status * Complete

7. When finished, hover over the arrow next to the Tickler to click **Complete**.



8. Upon receiving the application collateral documents from the Consumer, the Eligibility Determination Specialist will attach the documents to the consumer's record.

9. Collateral documentation includes everything the Eligibility Determination Specialist needs to either make an eligibility determination or decide if an Approved Professional review is needed.
10. The Eligibility Determination Specialist will navigate to the consumer's record and click **Notes > File > Add Note**.
 - a. In the new Note record, update the following fields:
 - i. Division = APD
 - ii. Note Type = Application/Eligibility
 - iii. Note Subtype = Application Collateral Docs
 - iv. Note = Describe the attached documents
 - v. Status = Complete
 - b. Attach the documents

11. When finished, click **File > Save and Close Notes**

The screenshot shows the 'Notes Details' form in the iConnect system. The form is titled 'Notes Details' and has a sidebar with 'File' and 'Tools' options. The main form area contains several fields: 'Division' (APD), 'Note By' (Tierney, Jacqueline), 'Note Date' (03/22/2018), 'Program/Provider' (dropdown), 'Note Type' (Application/Eligibility), 'Note Sub-Type' (Application Collateral Docs), 'Description' (text area with placeholder 'Description of attached collateral docs'), 'Status' (Complete), and 'Date Completed' (03/22/2018). A blue arrow points to the 'Note Sub-Type' dropdown menu.

12. If the consumer's Application is missing any required information, the Intake Worker or Eligibility Specialist will reach out to the Consumer to obtain the information. The Consumer or the Designated Representative is required to submit the missing information within 45 days of the date of the receipt of application.
13. Record each attempt to obtain the missing information in a new Note record by navigating to the consumer's record and clicking **Notes > File > Add Note**.
14. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Application/Eligibility
 - c. Note Subtype = Application Contacts
 - d. Note = Describe the contact attempts
 - e. Status = Complete

15. When finished, click **File > Save and Close Note**

The screenshot shows the 'Notes Details' form in the iConnect system. The form is titled 'Notes Details' and includes the following fields:

- Division ***: APD
- Note By ***: Tierney, Jacqueline
- Note Date ***: 03/22/2018
- Program/Provider**: (empty dropdown)
- Note Type ***: Application/Eligibility
- Note Sub-Type**: Application Contacts
- Description**: Application missing required information. Attempted to contact Consumer on 3/22 and left voicemail requesting required information.
- Note**: (empty text area)
- Status ***: Complete
- Date Completed**: 03/22/2018

16. For any information obtained from a 3rd party, the Intake Worker or Eligibility Determination Specialist must complete the Authorization to Release Information Consent form. This form does not reside in the iConnect System.

17. The two ticklers that were assigned to the Eligibility Determination Specialist when the Division record was saved with Disposition = Application Review are available via **My Dashboard**:

- Verify Receipt of Collateral Documentation
- Approve Eligibility Determination

18. To begin, log into iConnect and set Role = Region Pre-Enrollment Workstream Worker and click **Go**.

The screenshot shows the 'My Dashboard' page in the iConnect system. The page includes the following elements:

- Welcome, Michelle Eligibility**: 4/2/2018 11:33 AM
- My Dashboard**: Sign Out
- Role**: Region Pre-Enrollment Workstream Worker (dropdown menu) with a **GO** button.
- File**: Quick Search section with a search bar, a dropdown menu (Consumers), a Last Name field, and a **GO** button.
- ADVANCED SEARCH**: Link to the advanced search page.

19. Find the consumer's Section and scroll down to the Tickler's Panel. Click on the **Ticklers** link to open queue of outstanding Ticklers.

Alert Notes

Unread Alert Notes0

Ticklers

Ticklers10

Plans

Approved1

Draft2

Pending1

- a. Use the multi variable search to find the following Ticklers. These Ticklers are due in 45 days for Consumers under 6, and 60 days for Consumers 6 and above:
- i. Verify Receipt of Collateral Documentation
 - ii. Approve Eligibility Determination

File

Filters

Status

Equal To

New

AND

Last Name

Equal To

smith

AND

iConnect ID

+

Apply Alert Days Before Due

Search

Reset

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Approve Eligibility Determination	03/22/2018	05/21/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Verify receipt of Collateral Documents	03/22/2018	05/21/2018		New	Tierney, Jacqueline

<< First < Previous Retrieve 15 Records at a time Next > Last >>

20. After receiving the collateral documents from the Consumer, open the Tickler called **Verify Receipt of Collateral Documents**. A message Tickler will open reminding the Eligibility Determination Specialist to Verify Receipt of Collateral Documents.

File

Filters

Status

Equal To

New

AND

Last Name

Equal To

smith

AND

iConnect ID

+

Apply Alert Days Before Due

Search

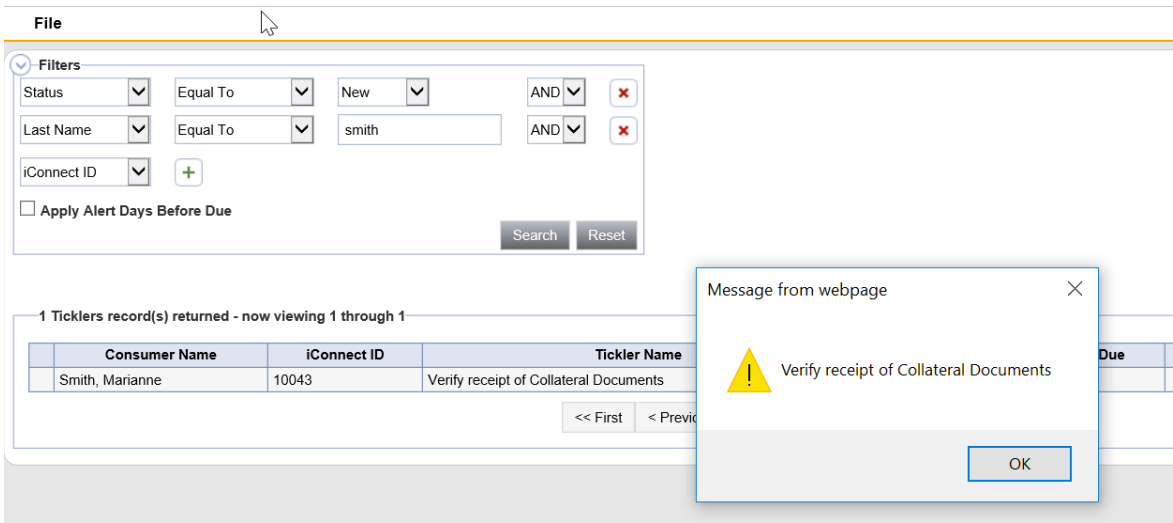
Reset

1 Ticklers record(s) returned - now viewing 1 through 1

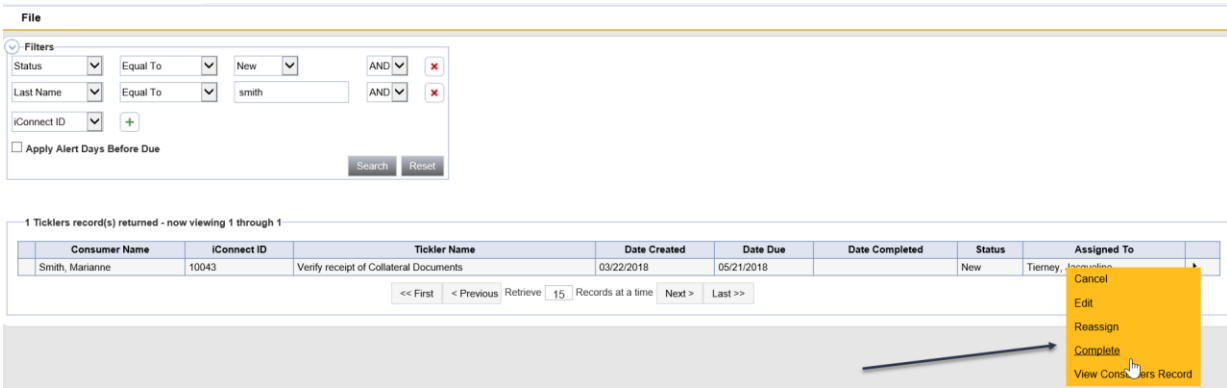
Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Verify receipt of Collateral Documents	03/22/2018	05/21/2018		New	Tierney, Jacqueline

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Message Tickler:

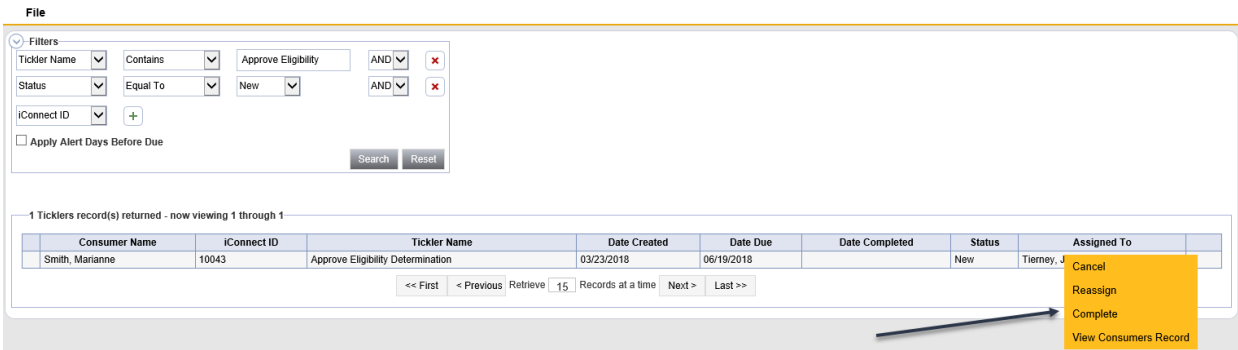


21. Hover over the arrow next to the Tickler to click **Complete**. This will remove the Tickler from the Tickler Queue.



22. Return to the tickler queue and hover over the arrow next to the Tickler called Approve Eligibility Determination.

a. If an Approved Processional review is not needed to make an eligibility determination, the Eligibility Determination Specialist will click **Complete**. This will remove the Tickler from the Tickler Queue.



- b. If an Approved Professional review is needed, the Eligibility Determination Specialist will click **Reassign** to assign the Approve Eligibility Determination tickler to the Approved Professional.

File

Filters

Status Equal To New AND

Last Name Equal To smith AND

iConnect ID +

☐ Apply Alert Days Before Due

Search Reset

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To	
Smith, Marianne	10043	Approve Eligibility Determination	03/22/2018	05/21/2018		New	Tierney,	Cancel
Smith, Marianne	10043	Verify receipt of Collateral Documents	03/22/2018	05/21/2018		New	Tierney,	Edit Reassign Complete View Consumers Record

<< First < Previous Retrieve 15 Records at a time Next > Last >>

- c. Type in the appropriate Approved Professional and click **Search**. In the results, click on the matching Worker record to send the Tickler to that Approved Professional user to complete the Tickler:

Search by Last Name: Tierney

MEMBERID	Worker
213	Tierney, Jacqueline

23. The Eligibility Determination Specialist will submit a request to the Approved Professional via a Note in iConnect and an Authorization paying for the Approved Professional's review will also be created. Proceed to section [Approved Professional Application Review](#).

Approved Professional Application Review

After reviewing all Collateral Documents, if it is determined that a review from an Approved Professional is required to determine if the Consumer has a developmental disability, the Eligibility Determination Specialist will submit a request to the Approved Professional via a Note in iConnect and an Authorization paying for the Approved Professional's review will also be created. The processes described below assume the Approved Professional name is already known. If not, the user

can use the Provider Search functionality in [Chapter 11 | Identify & Select Service Providers](#).

Authorization for Approved Professional's Review

Once a Non-Waiver Program record has been created, the authorization process can begin. The authorization process begins with the creation of a Plan record in iConnect. Once a Plan exists, planned services are added. The planned services are validated against business rules and after passing, authorizations are created.

1. To create a Plan record, proceed to [Chapter 10 | Support Plan](#).
2. Then proceed to [Chapter 11 | Cost Plan](#) to add the planned service and create the authorization for the Approved Professionals Review.

Request for Application Review Note

1. Navigate to the consumer's record and click **Notes > File > Add Note**.
2. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Application/Eligibility
 - c. Note Subtype = Request for Application Review
 - d. Note = Record details of application review including any identified diagnoses
 - e. Status = Pending
3. Route the Note record to the Approved Professional by adding him/her as a note Recipient. The Approved Professional will be able to access the Note record via their **My Dashboard**
4. When finished, click **File > Save and Close Notes**



Key Point

Remember to save the Note in Pending Status so that the recipient can update the Note and route it back to the sender

FileTools

Notes Details

Division *

APD

Note By *

Tierney, Jacqueline

Note Date *

03/22/2018

Program/Provider

Note Type *

Application/Eligibility

Note Sub-Type

Request for Application Review

Description

Note

Please review the Consumer's application and collateral documentation to determine waiver eligibility.

Suspected intellectual disability

Status *

Pending

Date Completed

5. The Approved Professional will monitor the Notes Panel on their **My Dashboard** for new Notes requiring their review. Click on the **Notes** with Pending status link, and then click on the Note record with Note Type = Application/Eligibility and Note Subtype = Request for Application Review to view it.

Notes

Draft	1
Pending	1

File

Filters

Status

Equal To

Pending

AND

ICConnect ID

SearchReset

1 Notes record(s) returned - now viewing 1 through 1

ICConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10043	Smith, Marianne	Application/Eligibility	Request for Application Review	03/22/2018		Tierney, Jacqueline	Pending

<< First < Previous Retrieve 15 Records at a time Next > Last >>

6. Review the Note record and identify the consumer's name. Use the First Name and Last Name as search criteria in the next step to search for the consumer's record:

Notes Details

Division: APD

Note By: Tierney, Jacqueline

Note Date: 03/22/2018

Program/Provider:

Note Type: Application/Eligibility

Note Sub-Type: Request for Application Review

Description:

On 3/22/2018 at 5:29 PM, Jacqueline Tierney wrote: Please review the Consumer's application and collateral documentation to determine waiver eligibility.

Suspected intellectual disability

Notes

Marianne Smith
Last Updated by Tierney
at 3/22/2018 5:29:30 PM

7. Using the consumer's iConnect ID specified in the Note record, locate that consumer's record in iConnect by using the Quick Search feature. Click **Search**.

Quick Search

Smith

Consumers

Last Name

GO

ADVANCED SEARCH

8. Determine if the Consumer is APD Eligible. To do so, review the consumer's application via **Forms > Application for Services** and any collateral documents via **Notes** (select any Notes with Note Type = Application/Eligibility and Note Subtype = Application Collateral Docs)

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER UTILITIES REPORTS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections Notes Forms Appointments Plans Pre-Enrollment Payers Legal

Demographics

iConnect ID: 10043

Salutation: Mrs.

Last Name: Smith

First Name: Marianne

Consumer Photo:

Middle Name:

Alias:

Medicaid Enrolled: No

Date of Birth: 3/4/2004

Medical ID

Medicaid ID:

Age: 14

Race: African American

Ethnicity: Cambodia

Marital Status: Married

Living Setting: Family Safety & Preservation Commitment Facility

Written Language: Central Yupik

Spoken Language: Croatian

Legal County:

9. After determining if the Consumer is APD Eligible, record the decision in a Consumer Note record. To do so, click on the **Notes** tab and open the existing Note record with Note Type = Application/Eligibility and Note Subtype = Request for Application Review.
- Update the following fields in the Note record:
 - Note Type = Application/Eligibility

- ii. Note Subtype = Professional Review Complete
- iii. Note = Specify Eligibility determination
- iv. Status = Complete

b. Attach the Professional Report to the Note record

c. Route the Note to the Eligibility Determination Specialist

d. When finished, click **File > Save and Close Note**

Consumer Notes:

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User
Demographics Divisions Consumer Budgets Programs Provider Selections **Notes** Forms Appointments Plans Pre-Enrollment Payers Legal

Filters
Note Date
Search Reset

2 Notes record(s) returned - now viewing 1 through 2

Note Date	Note By	Note Type	Note Sub-Type	Description	Status	Date Completed	Attachment
03/22/2018	Tierney, Jacqueline	Application/Eligibility	Request for Application Review		Pending		No
03/22/2018	Tierney, Jacqueline	Application/Eligibility	Application Acknowledgement Letter	Word Merge Template	Complete	03/22/2018	Yes

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Updated Consumer Note Record:

oconnect iConnect

Marianne Smith
Last Updated by jtierney
at 3/22/2018 5:29:30 PM

File Tools Reports

Notes

Notes Details

Division * APD

Note By * Tierney, Jacqueline

Note Date * 03/22/2018

Program/Provider *

Note Type * Application/Eligibility

Note Sub-Type * Professional Review Complete

Description

On 3/22/2018 at 5:29 PM, Jacqueline Tierney wrote: Please review the Consumer's application and collateral documentation to determine waiver eligibility.

Suspected intellectual disability
On 3/22/2018 at 5:36 PM, Jacqueline Tierney wrote: 3/22 - Professional Review Complete. Consumer is determined to be eligible.

Note

New Text

Append Text to Note

10. A Workflow Wizard is triggered when the Approved Professional saves the Note with Note Type = Application/Eligibility and Note Sub Type = Professional Review Complete. The tickler is assigned to the Eligibility Determination Specialist (secondary worker) prompting him/her to close the plan that was created for the Approved Professional application review.

11. The Approved Professional will close the Tickler called Approve Eligibility Determination.
12. To do so, navigate to **My Dashboard**, find the consumer's Section and scroll down to the Tickler's Panel. Click on the **Ticklers** link to open queue of outstanding Ticklers.

Alert Notes

Unread Alert Notes 0

Ticklers

Ticklers 10

Plans

Approved 1

Draft 2

Pending 1

- a. Use the multi variable search to find the following Ticklers. These Ticklers are due in 45 days for Consumers under 6, and 60 days for Consumers 6 and above:

- i. Approve Eligibility Determination

File

Filters

Status

Equal To

New

AND

Last Name

Equal To

smith

AND

iConnect ID

+

Apply Alert Days Before Due

Search

Reset

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Approve Eligibility Determination	03/22/2018	05/21/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Verify receipt of Collateral Documents	03/22/2018	05/21/2018		New	Tierney, Jacqueline

<< First
 < Previous
 Retrieve 15
 Records at a time
 Next >
 Last >>

13. Hover over the Approve Eligibility Determination Tickler and click **Complete**. This will remove the Tickler from the Tickler Queue.

Pended Applications

1. If the Intake Worker or Eligibility Determination Specialist determines that the consumer's application is still incomplete and the Consumer requires additional evaluations, navigate to the consumer's record and click on **Notes > File > Add Note**.
2. The Note Details page displays. Update the following fields:
 - i. Note Type = Application/Eligibility
 - ii. Note Subtype = Additional Evaluations
 - iii. Note = Document referral details

iv. Status = Complete

3. When finished, click **File > Save and Close Notes**

Notes Details

Division * APD

Note By * Tierney, Jacqueline

Note Date * 03/23/2018

Program/Provider

Note Type * Application/Eligibility

Note Sub-Type Additional Evaluations

Description

Note

Additional evaluations and referrals required. Consumer application incomplete

Status * Complete

Date Completed 03/23/2018

Attachments

4. Update the Consumer record to reflect the Pended Application status.

5. To do so, click on the **Divisions** tab and open the APD Division record:

File Ticklers View Consumer Incident Word Merge

MY DASHBOARD **CONSUMERS** PROVIDERS INCIDENTS CLAIMS SCHEDULER UTILITIES REPORTS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics **Divisions** Consumer Budgets Programs Provider Selections Notes Forms Appointments Plans Pre-Enrollment Payers Legal

Filters

Disposition Not Equal To Closed AND

Open Date Greater Than AND

Division +

Search Reset

1 Divisions record(s) returned - now viewing 1 through 1

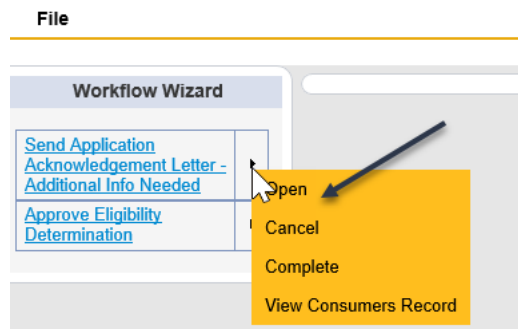
Division	Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
APD	Application Review	Tierney, Jacqueline	Tierney, Jacqueline	03/21/2018		2

<< First < Previous Retrieve 15 Records at a time Next > Last >>

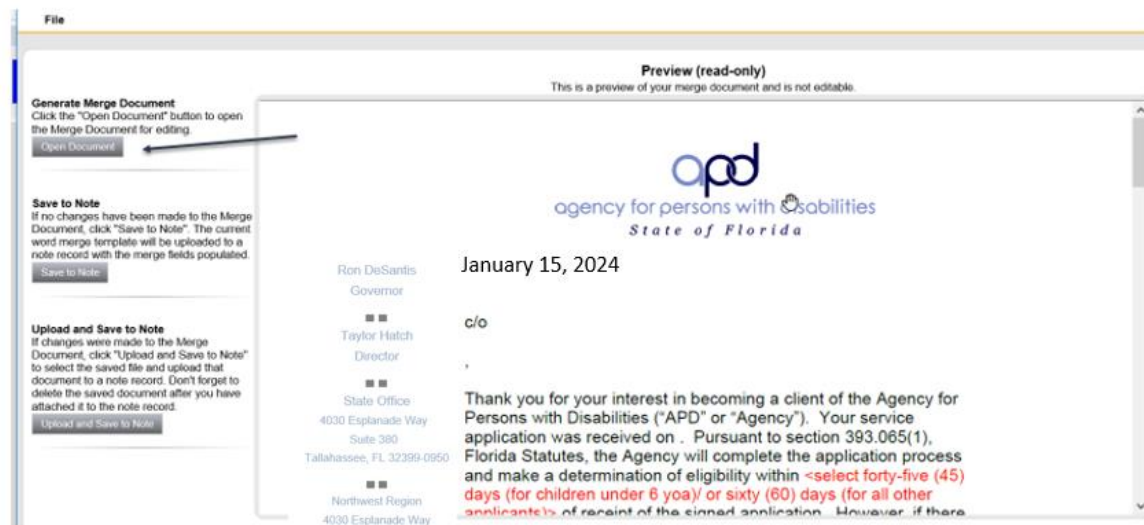
a. Update Disposition = Application Pended and Application Pended Due Date = as appropriate

6. When finished, click **File > Save and Close Division**

7. Upon saving the Division record with Disposition = Application Pended, a Workflow Wizard will trigger two Ticklers:
 - a. Send Application Acknowledgment Letter – Additional Information Needed
Assigned to Eligibility Determination Specialist, due immediately
 - b. Approve Eligibility Determination – *Assigned to Eligibility Determination Specialist, who will reassign to the Approved Professional if a review is needed, due 90 days after Application Received Date*
8. Hover over the arrow next to the Tickler called Send Application Acknowledgment Letter – Additional Info Needed and click **Open**:



9. Click **Open Document** to edit the contents of the Word Merge letter. Edit the document in Microsoft Word. Print the document to mail to the Consumer:



- a. Save the updated letter to your computer. Back in iConnect, click **Upload and Save to Note**. In the new Note Record, update the following fields:
 1. Division = APD
 2. Note Type = Application/Eligibility
 3. Note Subtype = Pended
 4. Status = Complete

10. When finished, click **File > Save and Close Note**

11. Return to the tickler queue and hover over the arrow next to the Tickler called Approve Eligibility Determination.

- If an Approved Processional review is not needed to make an eligibility determination, the Eligibility Determination Specialist will click **Complete**. This will remove the Tickler from the Tickler Queue.
- If an Approved Professional review is needed, the Eligibility Determination Specialist will click **Reassign** to assign the Approve Eligibility Determination tickler to the Approved Professional.

File

Filters

Status Equal To New AND

Last Name Equal To smith AND

iConnect ID +

☐ Apply Alert Days Before Due

Search Reset

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To	
Smith, Marianne	10043	Approve Eligibility Determination	03/22/2018	05/21/2018		New	Tierney,	Cancel
Smith, Marianne	10043	Verify receipt of Collateral Documents	03/22/2018	05/21/2018		New	Tierney,	Edit

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Reassign Complete View Consumers Record

- Type in the appropriate Approved Professional and click **Search**. In the results, click on the matching Worker record to send the Tickler to that Approved Professional user to complete the Tickler:

Search by Last Name: Tierney Search Cancel

MEMBERID	Worker
213	Tierney, Jacqueline

12. The Eligibility Determination Specialist will submit a request to the Approved Professional via a Note in iConnect and an Authorization paying for the Approved Professional's review will also be created. Proceed to section [Approved Professional Application Review](#).

Approved Professional Review Complete, Close the Plan

1. If an Approved Professional review was completed, the Eligibility Determination Specialist will receive a tickler, reminding him/her to close the plan record that was created for the Approved Professional Application review.
2. The Eligibility Determination Specialist will monitor their My Dashboard for Ticklers related to Application Reviews. To so, navigate to the My Dashboard and find the Consumers section. Scroll down to the Ticklers panel and click into the linked number of outstanding Ticklers to access the Tickler Queue:

Notes

Draft	1
I'm Not Interested	1

Alert Notes

Unread Alert Notes	0
--------------------	---

Ticklers

Ticklers	119
----------	-----

Plans

Approved	1
Draft	1

3. From here, use the multi variable search to find the Tickler called Approved Professional Application Review is Complete. Close the Plan Record. Click **Search**:

File

Filters

Tickler Name Contains Approved AND

iConnect ID +

☒ Apply Alert Days Before Due

Search Reset

1 Ticklers record(s) returned - now viewing 1 through 1

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Sheppard, John	10106	Approved Professional Application Review is Complete. Close the Plan Record.	06/11/2018	06/11/2018		New	Buck, Jennifer

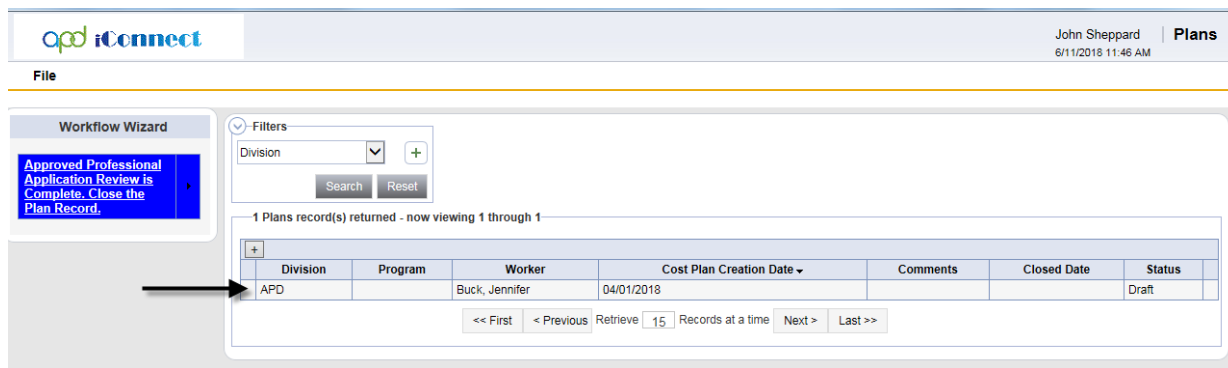
<< First < Previous Retrieve 15 Records at a time Next > Last >>



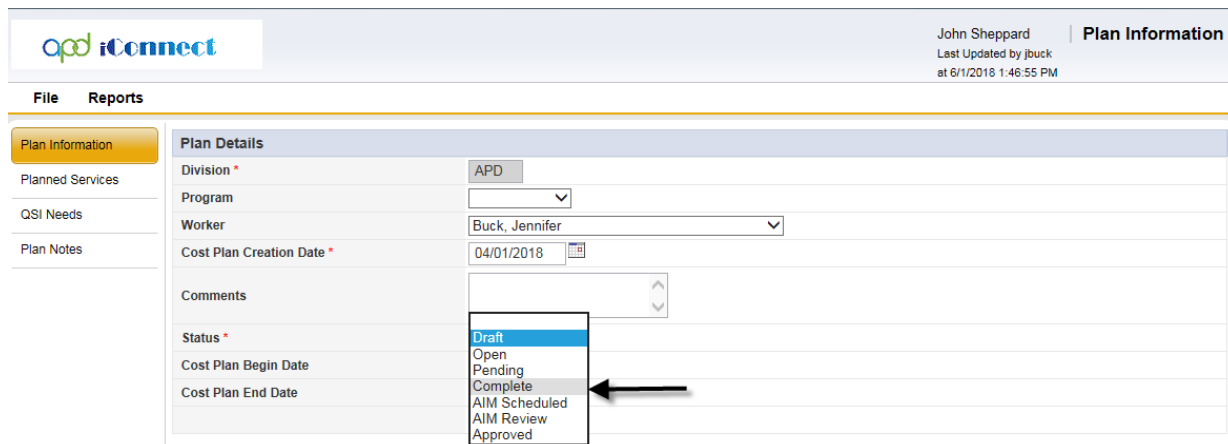
Tip

*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

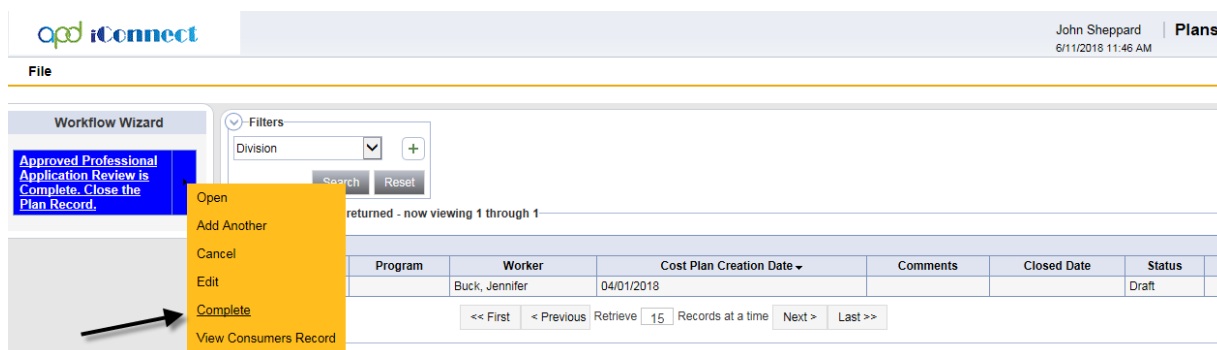
4. Click to open the Approved Professional Application Review is Complete. Close the Plan Record Tickler. The Plans List view will open.
5. Select the Plan record that was created for the Approved Professional application review.



6. The Plan information subpage opens in a new window. Change the Status = Complete any Comments as needed. Click File > Save and Close Plan.



7. When finished, return to the open Workflow Wizard window. Hover over the arrow next to the Tickler to click **Complete**. The Tickler will be removed from the user's Tickler Queue:



Chapter 3 | Eligibility Determination

Introduction

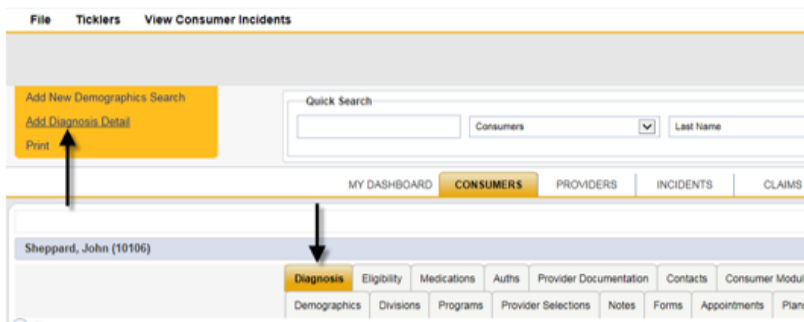
There are four possible paths in the Eligibility Determination process. The Eligibility Determination Specialist will determine which of the four paths is applicable to the Consumer, and indicate their choice by updating the consumer's APD Division record Disposition:

1. Applicant Deemed APD Eligible – High Risk – Not Eligible for Waiver
2. Applicant Deemed APD Eligible – Not High Risk – Enroll in Pre-Enrollment
3. Applicant Deemed APD Eligible but Not Eligible for Waiver
4. Applicant Deemed APD Eligible and Bypasses Pre-Enrollment
5. Applicant Deemed APD Ineligible

Add the APD Eligible Diagnosis

Once an applicant is deemed eligible, regardless of type of eligibility, the Eligibility Determination Specialist needs to create the Diagnosis record and add the APD eligible diagnoses. Only regional staff can record APD Eligible Diagnoses. These fields are read only for the WSC and Service provider roles.

1. The Eligibility Determination Specialist will begin by logging into iConnect and setting Role = Region Pre-Enrollment Workstream Worker. Click **Go**:
2. Navigate to the consumer's record and click Diagnosis. Click **File > Add Diagnosis**.



3. The Diagnosis details page displays. There is only one type of diagnosis recorded on this page, APD Eligible Diagnoses.
4. Update the following fields:
 - a. Review = Other
 - b. Review Date = defaults to today
 - c. Division = defaults to APD

- d. APD Eligible Diagnosis Verified By = defaults to Self
- e. Status = defaults to Pending. Change to Complete.
- f. ICD Version = defaults to 10 and is read only.
- g. Primary Diagnosis = defaults to Diagnosis A (Primary) and is read only. After saving this record, this value will change to the Value selected in the Diagnosis A Primary field below.

The screenshot shows the 'Diagnosis Detail' form in the iConnect system. The form is titled 'Diagnosis Detail' and has a 'File' menu. The fields are as follows:

Field	Value
Review *	Other
Review Date *	06/12/2023
Division *	APD
APD Eligible Diagnosis Verified By *	Diagnosis A (Primary)
Status *	Complete
ICD Version *	10
Primary Diagnosis	Diagnosis A (Primary)
Primary Diagnosis Code	

5. The steps to add a Diagnosis are the same regardless of the type of Diagnosis being entered. To add a Diagnosis, click the **ellipsis** next to one of the Diagnosis A – D fields. The diagnosis Search window opens.
 - a. The default 'Search by' parameter = Diagnosis Code. Change the selection to **'Description'**
 - b. Enter the full or partial name of the **diagnosis**, then click **Search**.
6. Applicable results are displayed. Select the correct APD eligible diagnosis code. These are the **ONLY** ICD-10 codes that should be selected when entering the APD Eligible diagnosis.
 - Intellectual Disability –(ICD10) = F79 Unspecified ID
NOTE: Use **ONLY** F79 Intellectual Disability, Unspecified which will then require you to enter the IQ.
 - Autism – (ICD10) = F84.0 Autism
 - Cerebral Palsy –(ICD10) = G80.9
 - Prader-Willi Syndrome –(ICD10) = Q87.1 Congenital Malformation Syndromes Associated with Short Stature
 - Spina Bifida – (ICD10) = Q05.9
 - Down Syndrome – (ICD10) = Q90.9
 - Phelan McDermid – (ICD10) = Q93.2

DiagCode Search PopUp

Search By: Description Search Text: intell [Search] [Clear] [Cancel]

Please enter at least 3 characters when searching by Description

DiagCode	Description	Axis	Category	Class	Active	SecCode	ID	ICD Type
R41.63	Borderline intellectual functioning	1		APD	Yes	R4163	22816	10
Z81.0	Family history of intellectual disabilities	1		APD	Yes	Z810	71365	10
F79	Intellectual Disabilities, Unspecified	0		APD	Yes	F79	4822	10
F70	Mild intellectual disabilities	0		APD	Yes	F70	4817	10
F71	Moderate intellectual disabilities	0		APD	Yes	F71	4818	10
F78	Other intellectual disabilities	1		APD	Yes	F78	4821	10
F73	Profound intellectual disabilities	0		APD	Yes	F73	4820	10

7. The page refreshes and the selected diagnosis displays on the Diagnosis details page.

Diagnosis Detail

Review * Other

Review Date * 06/12/2023

Division * APD

APD Eligible Diagnosis Verified By *

Status * Complete

ICD Version * 10

Primary Diagnosis Diagnosis A (Primary)

Primary Diagnosis Code

APD Eligible Diagnoses

Diagnosis A (Primary) [F79] Intellectual Disabilities, Unspecified

IQ * 59

Diagnosis B (Secondary)

Diagnosis C (Tertiary)

Diagnosis D

8. When complete, click **File > Save and Close Diagnosis Details**.

Add the Mental Health and Medical Diagnoses

1. Mental Health Diagnosis & Medical Diagnoses are recorded on the Diagnoses - Mental Health and Medical form and are typically created by the WSC.
2. Navigate to the Forms tab. From the File menu, select Add Form.

3. Select the Diagnosis – Mental Health and Medical form. Update the following fields in the header:
 - a. Review = select As Needed
 - b. Review Date = defaults to today and does not need to be changed
 - c. Division = defaults to APD and does not need to be changed
 - d. Worker = defaults to self and does not need to be changed
 - e. Status = Open. This form will remain in Open status so it is editable and can be updated when needed.
 - f. Provider/Program = select your agency

4. For each mental health or medical diagnosis of the consumer, select the ellipsis to search for and select the diagnosis code.
5. Change the search filter to description and enter the textual description of the diagnosis.

oConnect 2/10/2022 3:57 PM | Forms

Please Select Type: Diagnoses - Mental Health and Medical

Consumer Forms

Review * As Needed

Review Date * 02/07/2020

Division * APD

Approved By

Mental Health Diagnosis

Mental Health Diagnosis 1

Mental Health Diagnosis 2

Mental Health Diagnosis 3

Mental Health Diagnosis 4

Mental Health Diagnosis 5

Mental Health Diagnosis 6

Mental Health Diagnosis 7

DiagCode Search PopUp

Search By: Description Search Text: dem ICD-9 ICD-10 Search Clear Cancel

Please enter at least 3 characters when searching by Description

DiagCode	Description	Axis	Category	Class	Active	SecCode	ID	ICD Type
G36.9	Acute disseminated demyelination, unspecified	1		APD	Yes	G369	4997	10
B30.3	Acute epidemic hemorrhagic conjunctivitis (enteroviral)	1		APD	Yes	B303	1025	10
J81.0	Acute pulmonary edema	1		APD	Yes	J810	10230	10
G37.3	Acute transverse myelitis in demyelinating disease of CNS	1		APD	Yes	G373	5001	10
T49.3X5A	Adverse effect of emollients, demulcents and protect, init	1		APD	Yes	T493X5A	59553	10
T49.3X5D	Adverse effect of emollients, demulcents and protect, subs	1		APD	Yes	T493X5D	59554	10
T49.3X5S	Advs effect of emollients, demulcents and protect, sequela	1		APD	Yes	T493X5S	59555	10
F10.27	Alcohol dependence with alcohol-induced persisting dementia	1		APD	Yes	F1027	4196	10
F10.97	Alcohol use, unsp with alcohol-induced persisting dementia	1		APD	Yes	F1097	4210	10
T78.3XXA	Angioneurotic edema, initial encounter	1		APD	Yes	T783XXA	62062	10
T78.3XXS	Angioneurotic edema, sequela	1		APD	Yes	T783XXS	62064	10
T78.3XXD	Angioneurotic edema, subsequent encounter	1		APD	Yes	T783XXD	62063	10
D72.825	Bandemia	1		APD	Yes	D72825	3139	10

6. Select the diagnosis. The page will refresh, and the diagnosis will be visible on the form.

Please Select Type: Diagnoses - Mental Health and Medical

Consumer Forms

Review * As Needed

Review Date * 02/07/2020

Division * APD

Approved By

Worker * Buck, Jennifer Clear Details

Status * Open

Provider/Program

Approved Date

Mental Health Diagnoses

Mental Health Diagnosis 1 Dementia in oth diseases

Mental Health Diagnosis 2 Anxiety disorder, unspeci

Mental Health Diagnosis 3

Mental Health Diagnosis 4

Mental Health Diagnosis 5

7. When all diagnoses have been added, select File, then Save and Close Forms.
8. The contents of this form are also visible on a Report from Diagnosis tab for those roles who do not have access to the Forms tab on a consumer record.
9. From the Diagnosis tab, select Reports then Diagnoses – Mental Health and Medical.

apd iConnect

Last Updated by j buck@apdcare.org
at 1/22/2020 12:06:44 PM

Diagnosis

File

Reports

Ticklers

View Consumer Incident

Diagnoses - Mental Health and Medical

Consumers

Last Name

GO

MY DASHBOARD

CONSUMERS

PROVIDERS

INCIDENTS

CLAIMS

SCHEDULER

UTILITIES

REPORTS

Diagnosis

Eligibility

Medications

Auths

Provider Documentation

Contacts

Consumer Module User

Demographics

Divisions

Consumer Budgets

Programs

Provider Selections

SAN

Notes

Forms

Appointments

Plans

Filters

Search

Reset

1 Diagnosis record(s) returned - now viewing 1 through 1

Review	Review Date	Status	Primary Diag Code	Primary Diag Code Description
As Needed	07/01/2018	Complete	F79	Intellectual Disabilities, Unspecified

10.The report opens in a new window.

apd iConnect

2/10/2022 3:57 PM

Forms

File

Please Select Type: Diagnoses - Mental Health and Medical

Production Report - Work - Microsoft Edge

https://tssbh1.mediware.com/FLAPDInterfaceTest/Pages/Report.aspx?ReportID=11284&SCFid=ID&SCOp=Equal%20To&SCVal=78499&secure=0JaAztFAH00ksLUHOq2mzFPuSCWj5oT5QC306n-3MNBs1&...

HTML

Export

Save to Note

ID 78499

View Report

1 of 1

Find

Next

Mental Health and Medical Diagnoses

Connect ID:78499

Date Printed: 02/10/2022

Mental Health Diagnoses

Vental Health Diagnosis 1
Dementia in oth diseases classd elswhr w behavioral disturb

Vental Health Diagnosis 2
Anxiety disorder, unspecified

Vental Health Diagnosis 3

Vental Health Diagnosis 4

Vental Health Diagnosis 5

Vental Health Diagnosis 6

Vental Health Diagnosis 7

Vental Health Diagnosis 8

Vental Health Diagnosis 9

Vental Health Diagnosis 10

Vental Health Diagnosis Comments

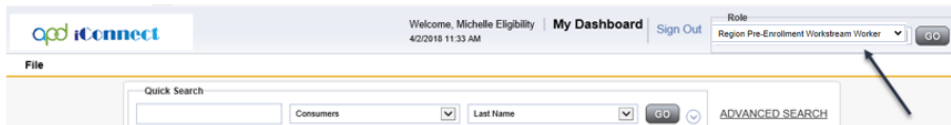
Medical Diagnoses

Medical Diagnosis 1

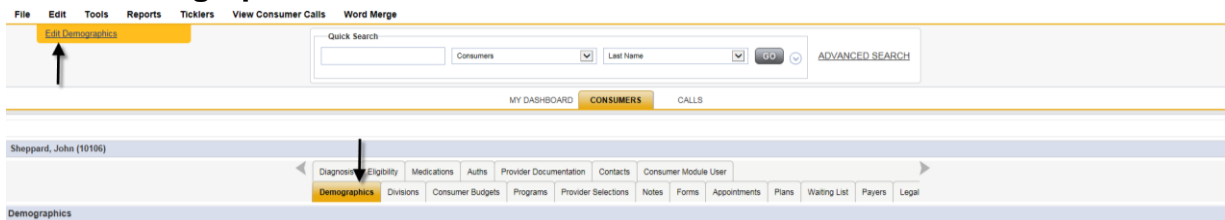
Medical Diagnosis 2

Applicant Deemed APD Eligible – High Risk – Not Eligible for Waiver

1. High risk consumers are those 3 to 5 years old, identified during the application review process as children at high risk of developing a developmental disability but don't have a confirmed diagnosis. These individuals are not added to a Pre-Enrollment category, nor can they be enrolled on the waiver. They can only be APD eligible and receive certain services through IFS.
2. The Intake Worker will create the Consumer Record.
3. To do this, log into iConnect and select the **Region Pre-Enrollment Workstream Worker Role**. Click **Go**:



4. Navigate to the consumer's record and click on **Demographics > Edit > Edit Demographics**



5. Update all relevant demographic fields with information from the applicant's paper application.
6. When finished, click **File > Save and Close Demographics**.
7. Click the **Division** tab. Select the consumer's APD Division Record. On the consumer's Division record, update the following fields:
 - a. Disposition = APD Eligible – High Risk
 - b. Application Received Date = Update to date paper application was received if not already populated. If the date is unknown, enter 01/01/1900.
 - c. Age Category at Time of Application = Under 6
 - d. Primary Worker = Pre-Enrollment Workstream Lead
 - i. Because the Consumer is high risk, he/she is not eligible to be placed in a Pre-Enrollment category, but a Pre-Enrollment Support Coordinator is still assigned.
 - e. Secondary Worker = Clinical Workstream Lead

Events

Division *	APD
Disposition *	APD Eligible - High Risk
Disposition Date	06/29/2018
Open Date	05/23/2018
Data Entry Date	05/23/2018
Primary Worker *	Buck, Jennifer
Secondary Worker	Buck, Jennifer
Application Received Date *	05/01/2018
Interested in ICF/IID	No
Age Category at Time of Application *	Under 6
Application Pended Due Date	
Eligibility Documentation Complete Date	

Referral Source

Referral Date	05/23/2018
Referral Source *	Church/Clergy
Referral Reason	

8. When finished, click **File > Save and Close Division**
9. Upon saving the APD Division record with Disposition = APD Eligible – High Risk, a Workflow Wizard will trigger:
 - a. Complete Support Plan Short Form - *Assigned to Pre-Enrollment Workstream Lead (Primary Worker)*
 - b. Verify Mental Health Diagnosis - *Assigned to Pre-Enrollment Workstream Lead*
 - c. Merge/Mail the Eligibility/Ineligibility Notice (Mega Notice) – *Assigned to Pre-Enrollment Workstream Lead*
10. The Pre-Enrollment Workstream Lead will be able to access the Ticklers assigned to them via the Tasks Panel on the **My Dashboard**:
 - a. To do so, navigate to the **My Dashboard** and click on **Ticklers Due**
 - b. Click on the linked number of outstanding Ticklers:
 - c. Use the multi variable search criteria to narrow the results in the Tickler Queue. Then click **Search**:



Tip

*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

432 Ticklers record(s) returned - now viewing 1 through 15

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Sheppard, Alice	10053	Verify Mental Health Diagnosis	08/10/2018	09/24/2018		New	Buck, Jennifer
Sheppard, Alice	10053	Generate Notice of APD Eligibility/Ineligibility	08/10/2018	02/15/2018		New	Buck, Jennifer
Sheppard, Alice	10053	Complete Support Plan Short Form	08/10/2018	09/24/2018		New	Buck, Jennifer

11. Click the Tickler called Complete Support Plan Short Form.

12. The Support Plan Short Form will open. Complete all relevant fields.

13. In the Form header, set Review = Initial, Division = APD and Status defaults to Draft.

14. Answer the questions in the Form.

15. When finished, if all the questions are answered, change the Status = Complete. If all the questions are not answered, keep the Status = Draft.

16. Click **File > Save Forms**. The Tickler is marked as complete. Close the **Workflow Wizard** window.

SUPPORT PLAN - SHORT FORM

Consumer Name:

Last Name: Sheppard

First Name: John

Middle Name: L

Consumer DOB: 12/31/1970

Consumer SSN: XXX-XX-6355

Medicaid #: 12314588

Review: Initial

Review Date: 08/06/2018

Division: APD

Worker: Buck, Jennifer

Status: Draft

Approved By:

Note:

17. Back in the Tickler Queue, click on the next Tickler called Verify Mental Health Diagnosis.

18. The consumer's Diagnosis list view will open.

The screenshot shows the APD iConnect interface. At the top, the user is logged in as John Sheppard on 8/10/2018 at 4:18 PM, with the 'Diagnosis' tab selected. On the left, the 'Workflow Wizard' has 'Verify Mental Health Diagnosis' highlighted. The main area shows a table with 1 diagnosis record. The record details are as follows:

Review	Review Date	APD Eligible Diagnosis Verified By	Status	Primary Diag Code	Primary Diag Code Description	ICD Version
Initial	06/28/2018	Buck, Jennifer	Pending	F79	Intellectual Disabilities, Unspecified	10

Navigation controls at the bottom include '<< First', '< Previous', 'Retrieve 15', 'Records at a time', 'Next >', and 'Last >>'.

19. Verify that the Diagnosis record is correct. If it is not, click into the record and update all relevant fields. Refer to section [Add the APD Eligible Diagnosis](#) section for adding new Diagnosis records.

20. When finished, from the tickler flyout menu, select **Complete**. Select **File > Close Workflow Wizard**.

21. Back in the Tickler Queue, click on the tickler called Merge/Mail the Eligibility/Ineligibility Notice (Mega Notice) to **Open**. The **Notice of APD Eligibility-Ineligibility - MEGA Notice** Word Merge opens in a new window.

The screenshot shows the 'Generate Merge Document' window in APD iConnect. It includes instructions for opening, saving, and uploading documents. The main preview area shows a letter titled 'Notice of Eligibility/Ineligibility for Services from the Agency for Persons with Disabilities'. The letter is dated April 5, 2024, and is addressed to the Consumer. The letter content includes the agency's name, address, and a notice regarding the consumer's application for services.

22. Upon generating the letter, click **Open Document** to edit the letter in Microsoft Word, and **Upload and Save to Note** to save a copy of the modified letter to the consumer's record.

23. In the new Note record, update the following fields:

- Division = APD
- Note Type = Application/Eligibility
- Sub Type = Notice of APD Eligibility/Ineligibility
- Status = Complete

24. When finished, click **File > Save and Close Notes**

File Tools Reports

History

Spell Check

Save Notes

Del Save and Close Notes

Save and Close Notes

Print

Close Notes

Details

APD ▼

Tierney, Jacqueline

03/23/2018 📅

Provider ▼

Application/Eligibility ▼*

Type ▼

Description

Word Merge Template

Note

New Text

Append Text to Note

Status * ▼ Complete

Date Completed 03/23/2018

25. When finished, return to the Tickler Queue. From the tickler **flyout** menu click **Complete**.

apd iConnect

Welcome, Jennifer Buck | **Ticklers**

8/10/2018 4:36 PM

File

Filters

Status ▼ Equal To ▼ New ▼ AND ▼ ✕

iConnect ID ▼ +

☒ Apply Alert Days Before Due

Search Reset

382 Ticklers record(s) returned - now viewing 1 through 15

Consumer Name	iConnect ID	Tickler Name	Date Created ▼	Date Due	Date Completed	Status	Assigned To
Sheppard, Alice	10053	Generate Notice of APD Eligibility/Ineligibility	08/10/2018	02/15/2018		New	View Consumers Record
Sheppard, Alice	10053	Generate Notice of APD Eligibility/Ineligibility	08/10/2018	02/15/2018		New	Complete
Sheppard, Alice	10053	Verify Accuracy of Delinquent Window List Criteria	08/10/2018	02/15/2018		New	

Confirm the Diagnosis and place on Pre-Enrollment

- 90 days prior to the consumer’s 5th birthday, the Pre-Enrollment Workstream Worker will run a report to identify high risk consumers 90 days prior to his/her 5th birthday.

2. The Pre-Enrollment Workstream worker will complete the eligibility determination process again.
 - a. If that process determines the soon to be 5-year-old will be eligible, he/she will be added to the Pre-Enrollment. Proceed to section [Add the APD Eligible Diagnosis](#).
 - b. If the child does not have a confirmed diagnosis at this time, then the case should be closed. Proceed to [Chapter 19 | Case Closure](#).

Applicant Deemed APD Eligible - Not High Risk - Enroll in Pre-Enrollment

1. If the applicant has been deemed eligible for APD services but is not High Risk, a dependent of an Active Military services member or diagnosed as having Phelan McDermid Syndrome, the Eligibility Determination Specialist can begin the Pre-Enrollment Enrollment process. If the applicant is a dependent of an Active Military service member or diagnosis as having Phelan McDermid Syndrome, the applicant will bypass the Pre-Enrollment. Proceed to [APD Eligible – Bypass PE section](#).

Assign Primary Worker

1. The Eligibility Determination Specialist will begin by logging into iConnect and setting Role = Region Pre-Enrollment Workstream Worker. Click **Go**:

Welcome, Caroline Shorter 4/4/2024 3:48 PM

My Dashboard Sign Out

Role
Region Pre-Enrollment Workstream Worker GO

File Reports

Quick Search
Consumers Last Name GO ADVANCED SEARCH

2. Navigate to the consumer's record and click **Division** and open the Division record with Division = APD.

MY HARMONY CONSUMERS PROVIDERS INCIDENTS CLAIMS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module Use

Demographics Divisions Programs Provider Selections Notes Forms Appointments Plans

Filters
Disposition Not Equal To Closed AND
Open Date Greater Than AND
Division +

Search Reset

1 Divisions record(s) returned - now viewing 1 through 1

Division	Disposition	Primary Worker	Secondary Worker
APD	Application Pended	Tierney, Jacqueline	Tierney, Jacqueline

<< First < Previous Retrieve 15 Records at a time Next > Last >>

3. Update the following fields:
 - a. Disposition = APD Eligible - Pre-Enrollment

- b. Primary Worker = Pre-Enrollment Workstream Worker
- c. Secondary Worker = Clinical Workstream Lead
- d. Age Category at Time of Application = Under 6 or 6 and Above
- e. Eligibility Documentation Complete Date = Date when all required collateral documentation received
- f. If the Consumer has expressed interest in ICF/IID, update Interested in ICF/IID = Yes and proceed to the ICF-Central Admission process.

4. When finished, click **File > Save and Close Division**

File Word Merge

Division

Events

Track Disposition

An asterisk (*) indicates a required field

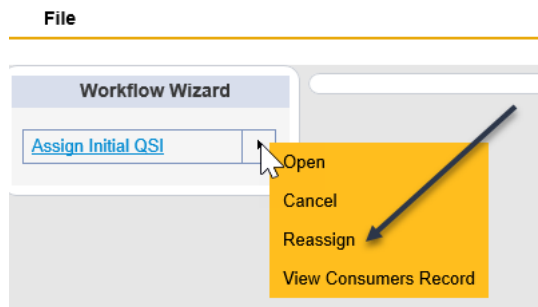
Events

Division *	APD
Disposition *	APD Eligible - Pre-Enrollment
Disposition Date	04/03/2024
Open Date	01/27/2023
Data Entry Date	01/27/2023
Primary Worker *	Shorter, Caroline Lookup Clear Details
Temporary Primary Worker	<input type="checkbox"/>
Secondary Worker	Shorter, Caroline Lookup Clear Details
Interested in ICF/IID	<input type="checkbox"/>
Application Received Date *	01/27/2023
Age Category at Time of Application *	6 and Above
Application Pended Due Date	MM/DD/YYYY
Eligibility Documentation Complete Date	MM/DD/YYYY

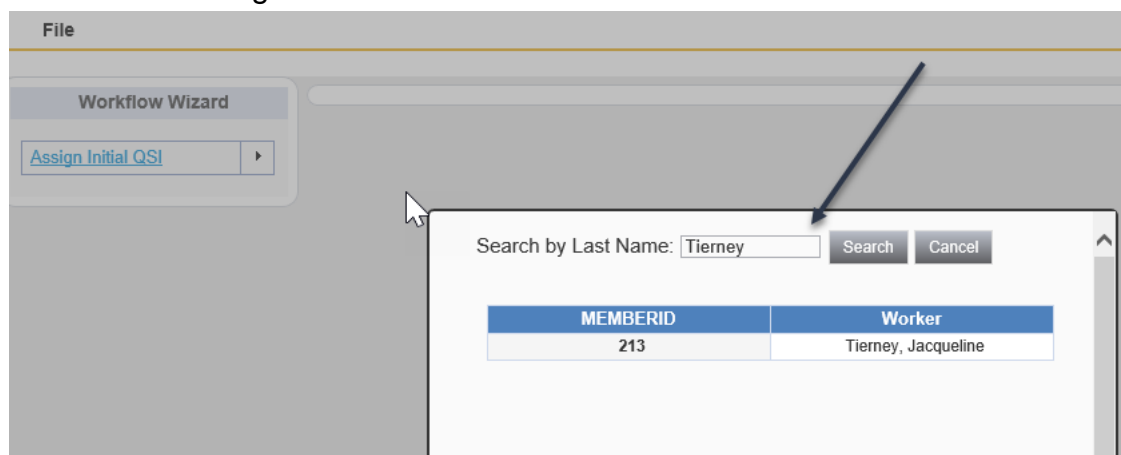
- 5. Upon saving the APD Division record with Disposition = APD Eligible – Pre-Enrollment, a Workflow Wizard will trigger with one Tickler and one System Automation:
 - a. Assign Initial QSI – *Assigned to the Clinical Workstream Lead (Secondary Worker)*, Due Immediately. The Clinical Workstream Lead will reassign this tickler to a QSI Assessor.
 - b. System Automation will automatically enroll the Consumer onto Waiver Pre-Enrollment
- 6. The Clinical Workstream Lead will monitor his/her ticklers via My Dashboard.
- 7. Click the Tickler queue to open.
- 8. Search for and select the Assign Initial QSI tickler.

9. In the Workflow Wizard, hover over the arrow next to the Tickler called Assign Initial QSI and click the **Reassign** link. In the Reassign Tickler window, search for the appropriate QSI Assessor, click Search, and upon finding a match click on the name:

a. Find the Reassign link:

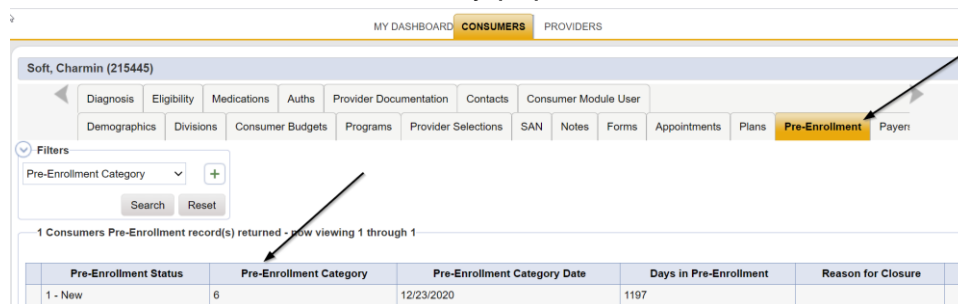


b. Reassign the Tickler to the QSI Assessor:



10. The QSI Assessor will be able to access the reassigned tickler via the Tickler Panel on the My Dashboard. This process is outlined in [Chapter 8 | QSI Assessment](#).

11. Navigate to the consumer's record and click on the **Pre-Enrollment** tab to view that the Consumer successfully populated on the APD Pre-Enrollment:



Pre-Enrollment Support Coordinator Assignment

11. The Pre-Enrollment Coordinator Supervisor will assign a Pre-Enrollment Support Coordinator to the consumer's record.
12. The Pre-Enrollment Support Coordinator Supervisor will monitor his/her My Dashboard > Consumers > Division queue.
13. Select the Status = APD Eligible – Pre-Enrollment to display a list of APD Eligible Consumers awaiting a Pre-Enrollment Support Coordinator assignment.

MY DASHBOARD CONSUMERS PROVIDERS

CONSUMERS

Division

APD Eligible - PESC Assigned	2
APD Eligible - Pre-Enrollment	1

14. Select a consumer from the list.

apd iConnect

Welcome, Caroline Shorter 4/3/2024 6:16 PM

File

Filters

Disposition Equal To APD Eligible - Pre-Enrollment AND

Referral Date +

Search Reset

1 My Dashboard Division record(s) returned - now viewing 1 through 1

Client Name	Fund Code	Case No	Referral Date	Open Date	Closed Date	Disposition Date	Gender	LOS	Age	Date of Birth	Date Of Death
Applicant, Prospective	APD	215681	01/27/2023			04/03/2024	Male	432	123.0	01/01/1900	

First Previous Records per page: 15 Next Last

15. The Consumer record opens. click on the **Divisions** tab and open the APD Division record:

Applicant, Prospective (215681)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics **Divisions** Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Payers

Filters

Disposition Not Equal To Closed AND

Open Date Greater Than MM/DD/YYYY AND

Division +

Search Reset

1 Consumers Divisions record(s) returned - now viewing 1 through 1

Division	Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
APD	APD Eligible - Pre-Enrollment	Shorter, Caroline	Shorter, Caroline	01/27/2023		432

16. From there, update the following fields:
 - a. Disposition = APD Eligible - PESC Assigned
 - b. Primary Worker = Pre-Enrollment Support Coordinator
 - c. Secondary Worker = Pre-Enrollment Workstream Lead

17. When finished, click **File > Save and Close Division**

An asterisk (*) indicates a required field

Events	
Division *	APD
Disposition *	APD Eligible - Pre-Enrollment
Disposition Date	04/03/2024
Open Date	01/27/2023
Data Entry Date	01/27/2023
Primary Worker *	Shorter, Caroline Lookup Clear Details
Temporary Primary Worker	<input type="checkbox"/>
Secondary Worker	Shorter, Caroline Lookup Clear Details
Interested in ICF/IID	<input type="checkbox"/>
Application Received Date *	01/27/2023
Age Category at Time of	

18. Upon saving the Division record, a Workflow Wizard will trigger with the following Ticklers assigned to the Pre-Enrollment Support Coordinator (Primary Worker on the Division record):

- Verify Accuracy of Preliminary Pre-Enrollment Category – Due immediately
- Complete Waiver Eligibility Worksheet – Due within 45 days
- Complete Support Plan Short Form – Due within 45 days
- Generate Notice of APD Eligibility/Ineligibility – Due 45 days from the Application Received Date when Consumer is under 6. Due 60 days from the Application Received date when consumer is 6 and Above.
- Verify Mental Health Diagnosis – Due with Support Plan Short Form
- Send Annual Status Review Form to Consumer – Due 365 Days after Initial form sent

19. The Pre-Enrollment Support Coordinator will monitor their My Dashboard for Ticklers related to Pre-Enrollment. To do so, navigate to the **My Dashboard** and find the Consumers section. Scroll down to the Ticklers panel and click into the linked number of outstanding Ticklers to access the Tickler Queue:

Notes

Draft

1

I'm Not Interested

1

Alert Notes

Unread Alert Notes

0

Ticklers

Ticklers

119

Plans

Approved

1

Draft

1

20. From here, use the multi variable search to find New Ticklers click **Search**:

apd iConnect

Welcome, Caroline Shorter

Ticklers

4/3/2024 5:22 PM

File

Print

Close Ticklers

Tickler Name

Contains

Pre-Enrollment

AND

AND

Search

Reset

1 My Dashboard Ticklers record(s) returned - now viewing 1 through 1

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Applicant, Prospective	215681	Verify Accuracy of Preliminary Pre-Enrollment Category	04/03/2024	04/03/2024		New	Shorter, Caroline

First

Previous

Records per page 15

Next

Last



Tip

When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.

21. Work through each of the New Ticklers in the Tickler Queue:
- a. Click on the first Tickler called Verify Accuracy of Preliminary Pre-Enrollment Category.
 - i. The consumer’s Pre-Enrollment record will open. From here, verify that the Consumer successfully populated on the APD Pre-Enrollment and verify if the preliminary Pre-Enrollment Category is accurate.
 - ii. Hover over the arrow next to the first Tickler to click **Complete**.
 - iii. When finished, click **File > Close Workflow Wizard**
 - iv. Note: If changes need to be made to the Pre-Enrollment Category, the steps are documented in [Chapter 4](#) of the Training Guide.

22. Click on the second Tickler called Complete Waiver Eligibility Worksheet.
- The consumer's HCBS Waiver Eligibility Worksheet will open
 - Complete all relevant fields
 - When finished, click **File > Save Forms** and **File > Close Workflow Wizard**

23. After obtaining the necessary signatures, attach the signed HCBS Waiver Eligibility Worksheet to the consumer's record. To do so, navigate to the consumer's record and click on **Notes > File > Add Note**:
- In the new Note record, update the following fields:
 - Division = APD
 - Note Type = Waiver Enrollment
 - Note Subtype = Signed Waiver Eligibility Worksheet
 - Status = Complete
 - From the **File** menu > select **Save and Close Notes**.
24. Back in the Tickler Queue, click on the next Tickler called Complete Support Plan Short Form to open it. The consumer's Support Plan Short Form will Open:
- Complete all relevant fields
 - When finished, click **File > Save Forms** and **File > Close Workflow Wizard**

Tickler Queue:

File

Filters

Status Equal To New AND

Last Name Equal To smith AND

iConnect ID

☐ Apply Alert Days Before Due

Search Reset

6 Ticklers record(s) returned - now viewing 1 through 6

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Complete Support Plan Short Form	03/19/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Complete Family Risk Factor	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Verify Mental Health Diagnosis	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Generate Notice of APD Eligibility/Ineligibility	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Approve Eligibility Determination	03/23/2018	06/19/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Send Annual Status Review Form to Consumer	03/23/2018	03/23/2019		New	Tierney, Jacqueline

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Complete and Save the consumer's Support Plan Short Form:

File

Spell Check

Save Forms

Copy From Previous

Print

Close Forms

Please Select Type: Support Plan Short Form

Consumer Forms

Review * Initial

Worker * Tierney, Jacqueline Clear Details

Review Date * 03/23/2018

Status * Draft

Division * APD

Approved By

Approved Date

SUPPORT PLAN - SHORT FORM

Consumer Name:

Last Name: Smith

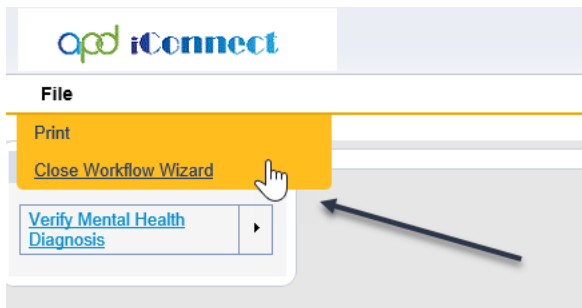
First Name: Marianne

Middle Name:

Consumer DOB: 03/04/2004

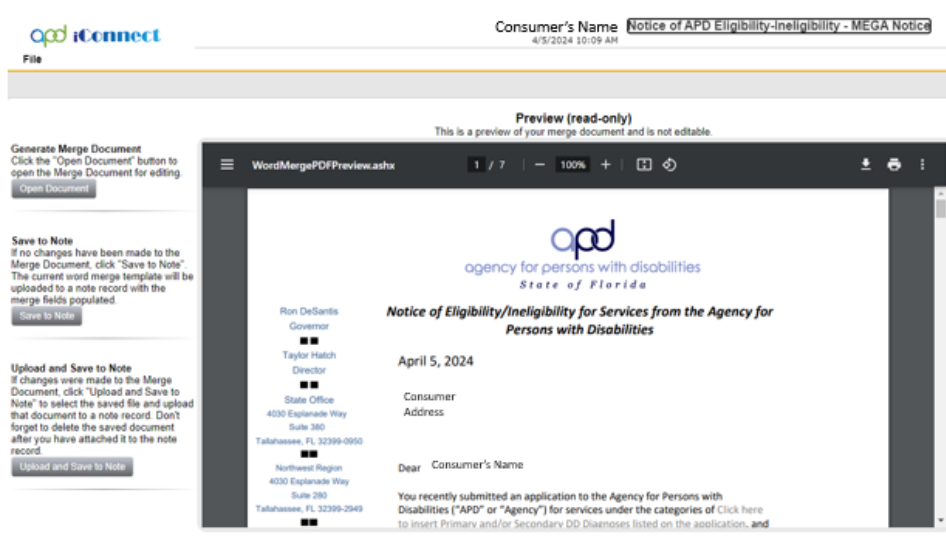
25. Back in the Tickler Queue, click to open the Tickler called Verify Mental Health Diagnosis. The consumer's Diagnosis record (if any) will open.

- If the Diagnosis record does not exist, liaise with the relevant worker who can add a diagnosis (e.g. Eligibility Determination Specialist to ensure one is added). Relevant worker can View consumer's record, Click **Diagnosis** tab > **File > Add Diagnosis**. Complete all relevant fields on the new Diagnosis record. When finished, click **File > Save and Close Diagnosis**.
- Mark the tickler as complete.
- Back in the Workflow Wizard window, click **File > Close Diagnosis** and **File > Close Workflow Wizard**.



26. Back in the Tickler Queue, click to open the Tickler called Generate Notice of APD Eligibility/Ineligibility to open it

- a. The Notice of APD Eligibility-Ineligibility MEGA Notice will open in preview mode. Click **Open Document** to edit the contents of the letter in Microsoft Word.



27. Save the document to your computer.

27. Back in the Word Merge preview screen, click **Upload and Save to Note** to attach a copy of the updated letter to a new Consumer Note record.

28. In the new Note record, update the following fields:

- a. Division = APD
- b. Note Type = Application/Eligibility
- c. Sub Type = Notice of APD Eligibility/Ineligibility
- d. Status = Complete

29. When finished, click **File > Save and Close Notes**.

The screenshot displays the 'File' menu in the top-left corner, which is open and highlighted in orange. The menu items are: History, Spell Check, Save Notes, Del (with a sub-menu), Save and Close Notes (highlighted with a blue underline and a mouse cursor), Print, and Close Notes. The background shows a case details form for 'Tierney, Jacqueline'. The form includes fields for APD (dropdown), Date (03/23/2018), Provider (dropdown), Application/Eligibility (dropdown), Word Merge Template (dropdown), and a large text area for notes. The status is set to 'Complete' and the date completed is 03/23/2018. A blue arrow points from the 'Save and Close Notes' menu item to the 'Application/Eligibility' dropdown, and another blue arrow points from the 'Save and Close Notes' menu item to the 'Save and Close Notes' menu item.

30. When Division Disposition = APD Eligible - PESC Assigned a Workflow Wizard also triggered the following tickler for the Secondary Worker (the Pre-Enrollment Workstream Lead)

- a. Complete Family Risk Factor. This tickler will be reassigned to the Clinical Workstream Lead.

31. The Pre-Enrollment Workstream Lead will reassign the tickler to the Clinical Workstream Lead.

- a. From the tickler flyout menu, select **Reassign**.
- b. Search for and select the Clinical Workstream Lead. The tickler is reassigned.

32. The Clinical Workstream Lead will monitor their My Dashboard for Ticklers. To do so, navigate to the **My Dashboard** and find the Consumers section. Scroll down to the Ticklers panel and click into the linked number of outstanding Ticklers to access the Tickler Queue:

Notes

Draft	1
I'm Not Interested	1

Alert Notes

Unread Alert Notes	0
--------------------	---

Ticklers

Ticklers	119
----------	-----

Plans

Approved	1
Draft	1

33. From here, use the multi variable search to find New Ticklers click **Search**:

Welcome, Jacqueline Tierney | Ticklers

File

Filters

Status

Equal To

New

AND

X

Last Name

Equal To

smith

AND

X

iConnect ID

+

☐ Apply Alert Days Before Due

Search

Reset

8 Ticklers record(s) returned - now viewing 1 through 8

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Complete Waiver Eligibility Worksheet	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Complete Support Plan Short Form	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Complete Family Risk Factor	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Verify Mental Health Diagnosis	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Generate Notice of APD Eligibility/Ineligibility	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Approve Eligibility Determination	03/23/2018	06/19/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Send Annual Status Review Form to Consumer	03/23/2018	03/23/2019		New	Tierney, Jacqueline

<< First

< Previous

Retrieve 15

Records at a time

Next >

Last >>



Tip

*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

34. Locate the tickler called Complete Family Risk Factor

- a. The Clinical Workstream Lead will reassign the tickler to the QSI Assessor.
 - i. From the tickler flyout menu, select **Reassign**.
 - ii. Search for and select the QSI Assessor. The tickler is reassigned. Proceed to the Complete Family Risk Factors section of [Chapter 8 | QSI Assessment](#).

Applicant Deemed APD Eligible but Not Eligible for Waiver

1. If the Applicant has been deemed APD eligible but is not eligible for the Waiver, the Eligibility Determination Specialist will navigate to the consumer's record and click **Divisions** > open the record with Division = APD

2. Update the following fields:
 - a. Disposition = APD Eligible – Nonwaiver
 - b. Primary Worker = Pre-Enrollment Support Coordinator Supervisor.
3. When finished, click **File > Save and Close**

File Word Merge

Division

Events

Track Disposition

Events

Division *

APD

Disposition *

APD Eligible - NonWaiver

Disposition Date

03/23/2018

Open Date

03/21/2018

Data Entry Date

03/21/2018

Primary Worker *

Tierney, Jacqueline

...

Clear

Details

Secondary Worker

Tierney, Jacqueline

...

Clear

Details

Application Received Date *

03/21/2018

Interested in ICF/IID

No

Age Category at Time of Application *

6 and Above

Application Pended Due Date

03/30/2018

Eligibility Documentation Complete Date

4. Upon saving the APD Division record with Disposition = APD Eligible – Non-waiver, a Workflow Wizard will trigger one Tickler:
 - a. Notice of APD Eligibility/Ineligibility – *Assigned to the Eligibility Determination Specialist, Due in 5 Days*
 - This tickler is not due immediately so will be visible via My Dashboard.
5. The Eligibility Determination Specialist will monitor their My Dashboard for Ticklers. Navigate to the **My Dashboard** and find the Consumers section. Scroll down to the Ticklers panel and click into the linked number of outstanding Ticklers to access the Tickler Queue:

Notes

Draft

1

I'm Not Interested

1

Alert Notes

Unread Alert Notes

0

Ticklers

Ticklers

119

Plans

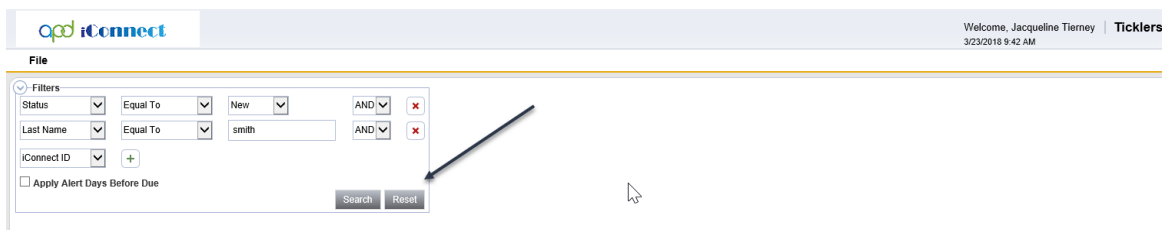
Approved

1

Draft

1

6. From here, use the multi variable search to find New Ticklers click **Search**:



The screenshot shows the iConnect application interface. At the top, there's a header with the iConnect logo and a user welcome message: 'Welcome, Jacqueline Tierney | Ticklers'. Below the header, there's a 'File' tab. The main area contains a 'Filters' section with several dropdown menus and input fields. The 'Status' dropdown is set to 'New', and the 'Last Name' dropdown is set to 'smith'. There are also 'Equal To' and 'AND' operators. At the bottom of the filters, there's a checkbox labeled 'Apply Alert Days Before Due' which is checked. A blue arrow points to the 'Search' button.

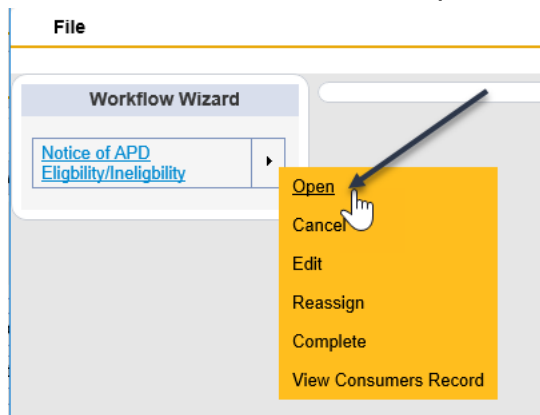


Tip

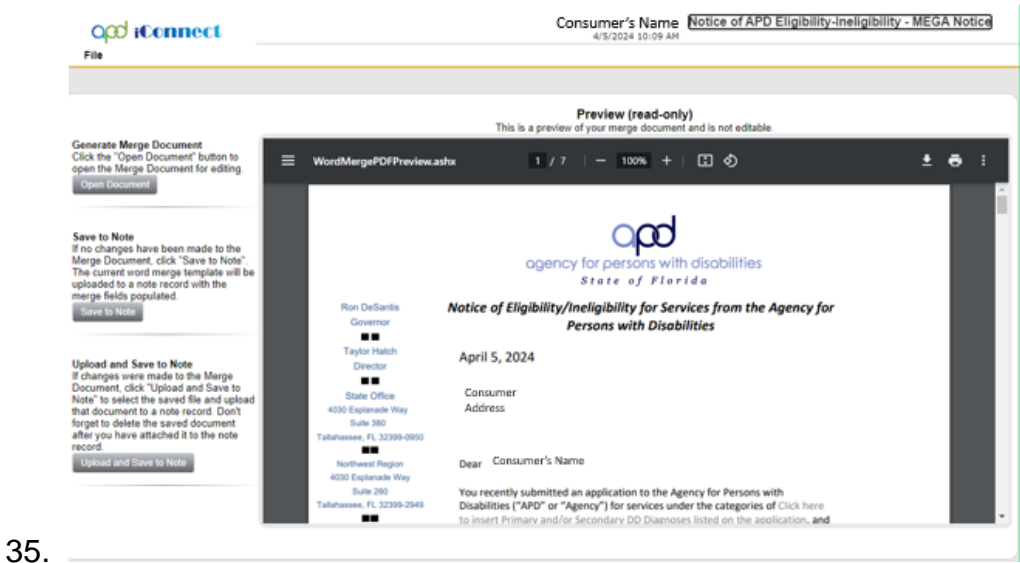
*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

7. Locate the Notice of APD Eligibility/Ineligibility tickler.

8. Click on the Tickler to open it.



9. The Notice of APD Eligibility/Ineligibility – MEGA Notice letter will open in Word Merge preview mode. Click **Open Document** to edit it in Microsoft Word. Print and mail it to the Consumer:



- 10. Save the updated letter to your computer. Back in iConnect, click **Upload and Save to Note**. In the new Note Record, update the following fields:
 - a. Division = APD
 - b. Note Type = Application/Eligibility
 - c. Status = Complete
- 11. When finished, click **File > Save and Close Note**.
- 12. Return to the open Workflow Wizard. From the tickler flyout menu, select **Complete**. The tickler is marked as complete.
- 13. When the Eligibility Determination Specialist updated the Division record with Disposition = APD Eligible – Nonwaiver, the Pre-Enrollment Support Coordinator Supervisor was added as the primary worker.

John Sheppard

Last Updated by jlbuck

at 10/11/2018 9:56:33 AM

Division

FileWord Merge

Division

Events

Track Disposition

Events

Division *

APD

Disposition *

APD Eligible - NonWaiver

Disposition Date

11/21/2018

Open Date

05/23/2018

Data Entry Date

05/23/2018

Primary Worker *

Buck, Jennifer

Clear

Details

Secondary Worker

Buck, Jennifer

Clear

Details

Application Received Date *

08/01/2018

Interested in ICF/IID

Age Category at Time of Application *

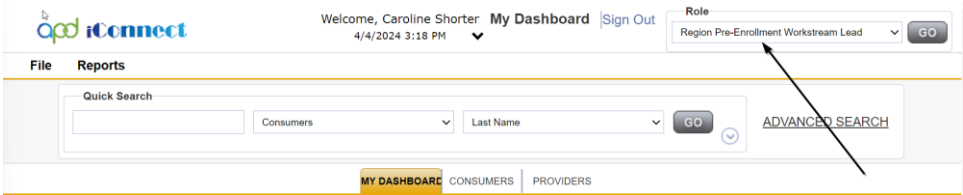
6 and Above

Application Pended Due Date

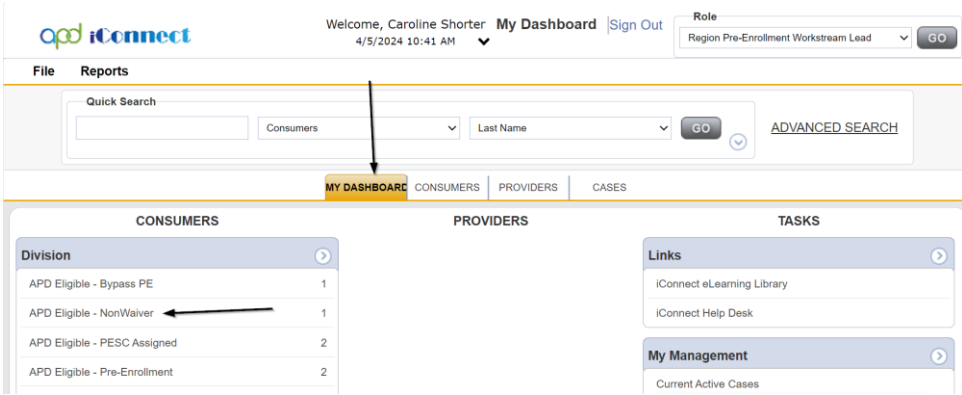
08/01/2018

Eligibility Documentation Complete Date

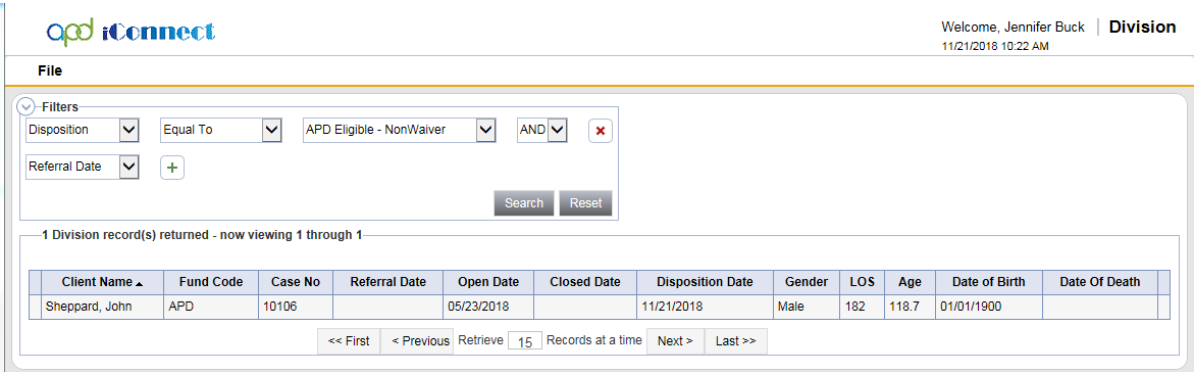
14. The Pre-Enrollment Support Coordinator Supervisor will monitor his/her My Dashboard for newly assigned Cases. To do so log into iConnect with Role = Region Pre-Enrollment Workstream Lead.



15. Select the **My Dashboard** tab. Locate the Consumer > Division task pane.



16. Select the **APD Eligible – Nonwaiver** status to display a list of consumers with this Pre-Enrollment Support Coordinator Supervisor as the Primary Worker.



17. Click on a record to open. Click the **Division** tab.

Sheppard, John (10106)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics **Divisions** Consumer Budgets Programs Provider Selections SANS Notes Forms Appointments Plans

Filters

Disposition Not Equal To Closed AND

Open Date Greater Than AND

Division +

Search Reset

2 Divisions record(s) returned - now viewing 1 through 2

Division	Disposition	Primary Worker	Secondary Worker	
APD	APD Eligible - NonWaiver	Buck, Jennifer	Buck, Jennifer	05/23/20

<< First < Previous Retrieve 15 Records at a time Next > Last >>

18. The Division details page displays. Update the following fields:

- Primary Worker: Search for and select the **Pre-Enrollment Support Coordinator** as the Primary Worker on the Division record.

John Sheppard | Division

Last Updated by jBuck at 11/21/2018 10:20:06 AM

File Word Merge

Division

Events

Track Disposition

Events

Division * APD

Disposition * APD Eligible - NonWaiver

Disposition Date 11/21/2018

Open Date 05/23/2018

Data Entry Date 05/23/2018

Primary Worker * Reed, Monica

Secondary Worker Buck, Jennifer

Application Received Date * 08/01/2018

Interested in ICF/IID

Age Category at Time of Application * 6 and Above

Application Pended Due Date 08/01/2018

Eligibility Documentation Complete Date

19. Click **File > Save and Close Division**.

20. The Pre-Enrollment Support Coordinator Supervisor will also create the Non-Waiver Program record.

21. To enroll the Consumer in Non-Waiver Program, navigate to the consumer's record and click on **Programs > File > Add Program**.

The screenshot shows the 'View Consumer Incident' page. At the top, there is a navigation bar with 'File', 'Ticklers', and 'View Consumer Incident'. Below this, there is a search bar with 'Add Program' and 'People Search' buttons. A red arrow points to the 'Add Program' button. Below the search bar, there is a 'Print' button. The main content area has a tabbed interface with 'CONSUMERS', 'PROVIDERS', 'INCIDENTS', 'CLAIMS', 'SCHEDULER', and 'UTIL'. The 'CONSUMERS' tab is selected. Below the tabs, there is a header for 'Smith, Marianne (10043)'. Below the header, there is a grid of tabs: 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation', 'Contacts', 'Consumer Module User', 'Demographics', 'Divisions', 'Consumer Budgets', 'Programs', 'Provider Selections', 'Notes', 'Forms', 'Appointments', and 'Plans'. The 'Programs' tab is highlighted with a red arrow. Below the tabs, there is a 'Filters' section with 'Disposition' and 'Program' dropdowns, and a 'Search' button. Below the filters, it says '0 record(s) returned'.

22. The Program details page displays. Update the following fields:

- Program = Non-Waiver
- Disposition = PESC Assigned Non-Waiver
- Enrollment Type = select applicable value
- Primary Worker = defaults to the Primary Worker on the Division Record (Pre-Enrollment Support Coordinator)

The screenshot shows the 'Program' details page. At the top, there is a header with 'Baked Manicotti' and 'Program' on the right, and '4/5/2024 10:55 AM' on the left. Below the header, there is a navigation bar with 'File' and 'Tools'. Below the navigation bar, there is a message: 'An asterisk (*) indicates a required field'. Below the message, there is a form with the following fields: 'Division' (APD), 'Referral Date' (MM/DD/YYYY), 'Create Date' (04/05/2024), 'Program' (Non-Waiver), 'Disposition' (PESC Assigned Non-Waiver), 'Disposition Date' (04/05/2024), 'Enrollment Type' (dropdown), 'Primary Worker' (Shorter, Caroline), 'Program Begin Date' (MM/DD/YYYY), and 'Expected Deactivated Date' (MM/DD/YYYY). The 'Program' field is highlighted with a red arrow. There are 'Lookup', 'Clear', and 'Details' buttons next to the 'Primary Worker' field.

23. When finished, click **File > Save Program**

24. Upon saving the Non-Waiver Program record with Disposition = PESC Assigned Non-Waiver, a Workflow Wizard will trigger three Ticklers assigned to *Pre-Enrollment Support Coordinator (Primary Worker Division)*:

- Complete Waiver Eligibility Worksheet
- Complete Support Plan Short Form
- Verify Mental Health Diagnosis

25. The Pre-Enrollment Support Coordinator will monitor their My Dashboard for Ticklers related to Non-Waiver enrollments. To do so, navigate to the **My Dashboard** and find the Consumers section. Scroll down to the Ticklers panel and click into the linked number of outstanding Ticklers to access the Tickler Queue:

The screenshot shows a 'My Dashboard' interface with four main sections, each with a right-pointing arrow icon:

- Notes:** Contains 'Draft' (1) and 'I'm Not Interested' (1).
- Alert Notes:** Contains 'Unread Alert Notes' (0).
- Ticklers:** Contains 'Ticklers' (119). A red arrow points to the number 119.
- Plans:** Contains 'Approved' (1) and 'Draft' (1).

26. From here, use the multi variable search to find New Ticklers click **Search**:

The screenshot shows the 'iConnect' Ticklers search interface. The search filters are set to Status: New, Last Name: smith. The 'Apply Alert Days Before Due' checkbox is checked. A red arrow points to the Search button.

8 Ticklers record(s) returned - now viewing 1 through 8

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Complete Waiver Eligibility Worksheet	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Complete Support Plan Short Form	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Complete Family Risk Factor	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Verify Mental Health Diagnosis	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Generate Notice of APD Eligibility/Ineligibility	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Approve Eligibility Determination	03/23/2018	06/19/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Send Annual Status Review Form to Consumer	03/23/2018	03/23/2019		New	Tierney, Jacqueline

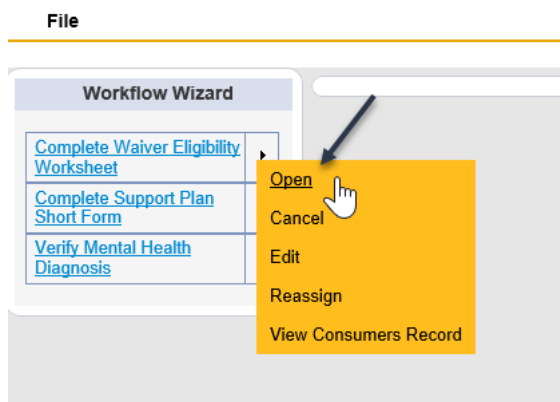
<< First < Previous Retrieve 15 Records at a time Next > Last >>



Tip

*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

27. Click on the Tickler called Complete Waiver Eligibility Worksheet and click **Open**:



28. The HCBS Waiver Eligibility Worksheet will open

The image shows a web-based form titled 'HCBS WAIVER ELIGIBILITY WORKSHEET'. On the left is a 'Workflow Wizard' sidebar with three options: 'Complete Waiver Eligibility Worksheet' (selected), 'Complete Support Plan Short Form', and 'Verify Mental Health Diagnosis'. The main form area has a header 'Please Select Type: HCBS Waiver Eligibility Worksheet'. Below this is a 'Consumer Forms' section with fields for 'Review' (Initial), 'Review Date' (03/23/2018), 'Division' (APD), 'Worker' (Tierney, Jacqueline), 'Status' (Complete), 'Program', and 'Approved Date' (03/23/2018). The main body of the form contains client information: 'Client First Name' (Marianne), 'Client Last Name' (Smith), '*Social Security Number' (XXX-XX-4005), 'Region' (CENTRAL), and 'Support Plan Effective Date' (03/23/2018). Below this is a green header for 'LEVEL OF CARE ELIGIBILITY' followed by a statement: 'The individual is an APD client with a Developmental Disability who meets one of the following criteria and is eligible to receive services provided in an ICF/ID.' At the bottom, there is a small note: 'Option A: The individual's primary disability is Intellectual Disability with an intelligence quotient (IQ) of 59 or less.'

29. Complete all relevant fields

30. When finished, click **File > Save Forms**

31. Print the form.

32. After obtaining the necessary signatures, attach the signed HCBS Waiver Eligibility Worksheet to the consumer's record. To do so, navigate to the consumer's record and click on **Notes > File > Add Note**.

33. In the new Note record, update the following fields:

- Division = APD
- Note Type = Waiver Enrollment
- Note Subtype = Signed Waiver Eligibility Worksheet
- Status = Complete

34. From the **File** menu > select **Save and Close Notes**.

35. Hover over the arrow next to the tickler called Complete Short Plan Short Form and click **Open**.

36. The Support Plan Short Form will open

37. Complete all relevant fields.

38. When finished, click **File > Save Forms**

The screenshot shows a software interface with a 'File' menu at the top. On the left is a 'Workflow Wizard' sidebar with three items: 'Complete Waiver Eligibility Worksheet' (red text), 'Complete Support Plan Short Form' (blue text and highlighted), and 'Verify Mental Health Diagnosis' (blue text). The main area is titled 'Please Select Type: Support Plan Short Form'. Below this is a 'Consumer Forms' section with fields for Review (Initial), Review Date (03/23/2018), Division (APD), Worker (Tierney, Jacqueline), Status (Draft), Program (dropdown), Approved By, and Approved Date. Below the forms is a blue header 'SUPPORT PLAN - SHORT FORM'. The form fields include: Consumer Name (Last Name: Smith, First Name: Marianne, Middle Name: empty), Consumer DOB (03/04/2004), Consumer SSN (XXX-XX-4005 with an 'Unmask' link), and Medicaid #: empty.

39. Hover over the tickler called Verify Mental Health Diagnosis and click **Open**.

- A Message Tickler will open: Verify Mental Health Diagnosis and confirm or create a diagnosis record in the Diagnosis tab

The screenshot shows the 'File' menu at the top. The 'Workflow Wizard' sidebar on the left has three items: 'Complete Waiver Eligibility Worksheet' (red text), 'Complete Support Plan Short Form' (blue text), and 'Verify Mental Health Diagnosis' (blue text and highlighted). A blue message box at the top of the main area says 'Verify Mental Health Diagnosis and confirm or create a diagnosis record in the Diagnosis tab.' A black arrow points from the 'Verify Mental Health Diagnosis' item in the sidebar to the message box.

40. From the tickler flyout menu, select View Consumer Record. The Consumer record opens in a new window.

41. To confirm/add the Diagnosis record, click on the **Diagnosis** tab.

- a. In the list view, review the existing Diagnosis records to confirm if the consumer's diagnosis has an affiliated record.

42. If it does not, select **File > Add Diagnosis Detail**.

The screenshot shows the 'View Consumer Incident' interface for a consumer named Marianne Smith (10043). The top navigation bar includes 'File', 'Ticklers', and 'View Consumer Incident'. The 'File' menu is open, displaying options: 'Add Diagnosis Detail', 'Add Diagnosis Detail', and 'Print'. An arrow points to 'Add Diagnosis Detail'. Below the menu, there are tabs for 'MY DASHBOARD', 'CONSUMERS', 'PROVIDERS', 'INCIDENTS', 'CLAIMS', 'SCHEDULER', and 'UTIL'. The 'CONSUMERS' tab is active. The main content area shows the consumer's name and a list of tabs: 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation', 'Contacts', 'Consumer Module User', 'Demographics', 'Divisions', 'Consumer Budgets', 'Programs', 'Provider Selections', 'Notes', 'Forms', 'Appointments', and 'Plans'. The 'Diagnosis' tab is selected. Below the tabs, there is a 'Filters' section with 'Search' and 'Reset' buttons. The search results area shows '0 record(s) returned'.

43. The Diagnosis details page displays. Proceed to the [Add the APD Eligible Diagnosis section](#).

44. Return to the open tickler window. From the tickler flyout menu > click **Complete**.

Applicant Deemed APD Eligible and Bypasses Pre-Enrollment

1. If the Applicant has been deemed APD eligible and can also bypass the Pre-Enrollment (as in cases of military family, or Phelan McDermid diagnosis), the eligibility determination tasks will be completed. The Eligibility Determination specialist will mail the iBudget Waiver Enrollment Offer letter. The EZ iBudget calculator will be generated to determine the consumer's algorithm amount. Once the consumer accepts the offer, the remaining standard waiver enrollment tasks are completed.
2. The Eligibility Determination Specialist will navigate to the consumer's record and click **Divisions** > open the record with Division = APD.

File Ticklers View Consumer Incident Word Merge

MY DASHBOARD **CONSUMERS** PROVIDERS INCIDENTS CLAIMS SCHEDULER UTIL

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics **Divisions** Consumer Budgets Programs Provider Selections Notes Forms Appointments Plans

Filters

Disposition ▼ Not Equal To ▼ Closed ▼ AND ▼ X

Open Date ▼ Greater Than ▼ AND ▼ X

Division ▼ +

Search Reset

1 Divisions record(s) returned - now viewing 1 through 1

Division	Disposition	Primary Worker	Secondary Worker	
APD	APD Eligible - NonWaiver	Tierney, Jacqueline	Tierney, Jacqueline	03/21/2

<< First < Previous Retrieve 15 Records at a time Next > Last >>

3. The Division Details page displays. Update the following fields:
 - a. Disposition = APD Eligible - Bypass PE
 - b. Primary Worker = Pre-Enrollment Workstream Lead
 - c. Secondary Worker = Clinical Workstream Lead
 - d. Age Category at time of Application = Update as appropriate
4. When finished, click **File > Save and Close Division**

File Word Merge

Division

Events

Track Disposition

An asterisk (*) indicates a required field

Events

Division * APD

Disposition * APD Eligible - Bypass PE

Disposition Date 04/03/2024

Open Date 01/13/2022

Data Entry Date 01/12/2022

Primary Worker * Shorter, Caroline Lookup Clear Details

Temporary Primary Worker ☐

Secondary Worker Trainee, WSC Lookup Clear Details

Interested in ICF/IID ▼

Application Received Date * MM/DD/YYYY

Age Category at Time of Application * ▼

Application Pended Due Date 01/12/2022

Eligibility Documentation Complete Date 01/12/2022

Referral Source

Referral Date 01/12/2022

5. Upon saving the APD Division record with Disposition = APD Eligible Bypass PE, a Workflow Wizard will trigger:

Assigned to Eligibility Determination Specialist (Self)

 - a. Merge/Mail the Eligibility/Ineligibility Notice – *Assigned to Eligibility Determination Specialist, Due Immediately*

Assigned to Clinical Workstream Lead (Secondary Worker)

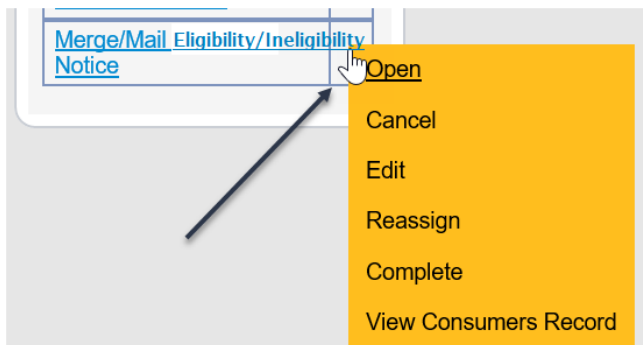
- b. Assign Initial QSI – *Assigned to Clinical Work Stream Lead which will be reassigned to the QSI Assessor*
- c. Complete Family Risk Factor - *Assigned to Clinical Workstream Lead which will be reassigned to the QSI Assessor.*

Assigned to Pre-Enrollment Workstream Lead (Primary Worker)

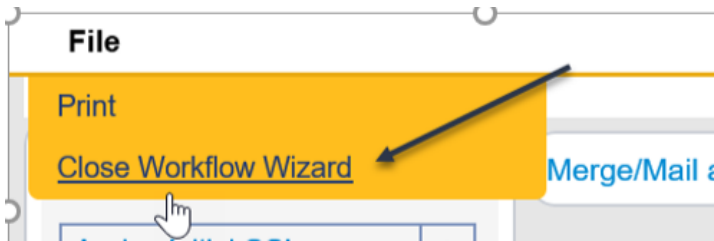
- d. Complete Waiver Eligibility Worksheet – *Assigned to Pre-Enrollment Workstream Lead which will be reassigned to the Pre-Enrollment Support Coordinator – Due in 45 Days*
- e. Complete Support Plan Short Form - *Assigned to Pre-Enrollment Workstream Lead which will be reassigned to the Pre-Enrollment Support Coordinator – Due in 45 Days*
- f. Verify Mental Health Diagnosis - *Assigned to Pre-Enrollment Workstream Lead which will be reassigned to the Pre-Enrollment Support Coordinator – Due in 45 days.*

Assigned to Eligibility Determination Specialist (Self)

- 6. The Eligibility Determination Specialist will select the tickler to open or hover over the arrow next to the Tickler called Merge/Mail Eligibility/Ineligibility Notice to click **Open**:

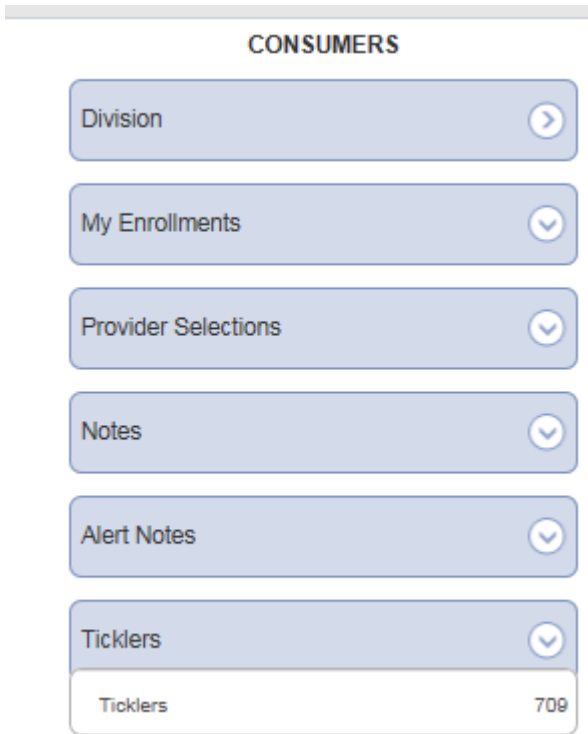


- 7. The Notice of Eligibility/Ineligibility Word Merge opens. Upon generating the letter, click **Open Document** to edit the letter in Microsoft Word, and **Upload and Save to Note** to save a copy of the modified letter to the consumer's record
- 8. When finished, click **File > Close Workflow Wizard**:



Assigned to Clinical Workstream Lead (Secondary Worker)

- 9. The Clinical Workstream Lead will be able to access the Assign Initial QSI and Complete Family Risk Factor ticklers via the Tasks Panel on their **My Dashboard**.
- 10. To do so, navigate to the **My Dashboard** and click on **Ticklers Due**:



- 11. Click on the linked number of outstanding Ticklers:



- 12. Use the multi variable search criteria to narrow the results in the Tickler Queue. Then click **Search**:

File

Filters

Tickler Name

Contains

assign initial qsi

AND

ID

Apply Alert Days Before Due

Search

Reset

4 My Ticklers record(s) returned - now viewing 1 through 4

ID	Type	Name	Tickler Name	Due Date	Fund Code	
10029	Consumers	Slater, Drew	Assign Initial QSI	02/08/2018	APD	
10043	Consumers	Smith, Marianne	Assign Initial QSI	03/26/2018	APD	
10033	Consumers	Tester, John	Assign Initial QSI	02/12/2018	APD	
10030	Consumers	Thomas, Valerie	Assign Initial QSI	02/08/2018	APD	

<< First

< Previous

Retrieve 15

Records at a time

Next >

Last >>

13. Hover over the arrow next to the Tickler called Assign Initial QSI to click **Reassign**:

4 My Ticklers record(s) returned - now viewing 1 through 4

ID	Type	Name	Tickler Name	Due Date	Fund Code	
10029	Consumers	Slater, Drew	Assign Initial QSI	02/08/2018	APD	
10043	Consumers	Smith, Marianne	Assign Initial QSI	03/26/2018	APD	
10033	Consumers	Tester, John	Assign Initial QSI	02/12/2018	APD	
10030	Consumers	Thomas, Valerie	Assign Initial QSI	02/08/2018	APD	

<< First

< Previous

Retrieve 15

Records at a time

Next >

Last >>

Cancel

Edit

Reassign

14. In the Reassign Tickler window, search for the appropriate Assessor, click **Search**, and upon finding a match click on the name. The Tickler will be reassigned to selected user and will populate under the Tasks Panel on the Assessor's **My Dashboard**. This Process is outlined in [Chapter 8 | QSI Assessment](#).

Search by Last Name: Tierney

Search

Cancel

MEMBERID	Worker
213	Tierney, Jacqueline

15. The Clinical Workstream Lead returns to the Tickler queue and locates the **Complete Family Risk Factor** tickler. From the tickler flyout menu, select **Reassign**.

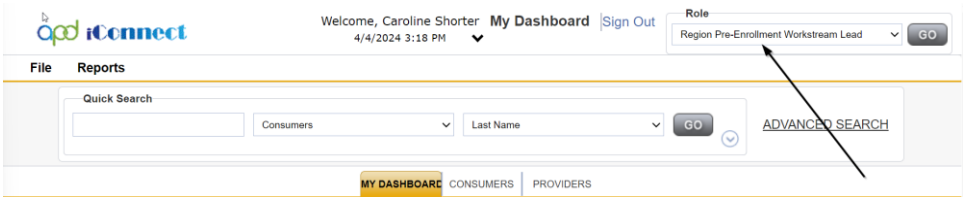
16. In the Reassign Tickler window, search for the appropriate Assessor, click **Search**, and upon finding a match click on the name. The Tickler will be reassigned to selected user and will populate under the Tasks Panel on the Assessor's **My Dashboard**. This Process is outlined in [Chapter 8 | QSI Assessment](#).

Assigned to Pre-Enrollment Workstream Lead (Primary Worker)

17. The Pre-Enrollment Workstream Lead will reassign the three ticklers assigned when the Eligibility Determination Specialist created the APD Eligible – Bypass PE Division record to the Pre-Enrollment Support Coordinator.

- a. Complete Waiver Eligibility Worksheet
- b. Complete Support Plan Short Form
- c. Verify Mental Health Diagnosis

18. The Pre-Enrollment Workstream Lead will monitor his/her My Dashboard for newly assigned ticklers. To do so log into iConnect with Role = Region Pre-Enrollment Workstream Lead.



19. Click **My Dashboard > Ticklers**.

20. A list of outstanding ticklers assigned to the Pre-Enrollment Workstream Lead is displayed.

21. Locate the Complete Waiver Eligibility Worksheet tickler. From the tickler **flyout** menu > select **Reassign**.

The screenshot shows the 'Ticklers' page in iConnect. At the top right, it says 'John Sheppard' and '11/26/2018 1:43 PM'. Below this, there is a 'File' tab. A 'Filters' section is visible with dropdowns for 'Status', 'Equal To', 'New', and 'AND'. There is a 'Search' button and a 'Reset' button. Below the filters, it says '346 Ticklers record(s) returned - now viewing 1 through 15'. A table of ticklers is displayed with columns: 'Assigned To', 'Tickler Name', 'Date Due', 'Date Created', 'Date Completed', and 'Status'. The tickler 'Complete Waiver Eligibility Worksheet' is highlighted. A flyout menu is open for this tickler, showing options: 'Cancel', 'Edit', and 'Reassign'. An arrow points to the 'Reassign' option.

Assigned To	Tickler Name	Date Due	Date Created	Date Completed	Status
Buck, Jennifer	Verify Mental Health Diagnosis	01/10/2019	11/26/2018		New
Buck, Jennifer	Complete Waiver Eligibility Worksheet	01/10/2019	11/26/2018		New
Buck, Jennifer	Complete Support Plan Short Form	01/10/2019	11/26/2018		New
Buck, Jennifer	Assign Initial QSI	11/26/2018	11/26/2018		New
Buck, Jennifer	Notice of APD Eligibility/Ineligibility	11/26/2018	11/21/2018		New

22. Search for and select the Pre-Enrollment Support Coordinator name. The tickler is reassigned.
23. Return to the list of outstanding ticklers. Locate the Complete Support Plan Short Form tickler. From the tickler **flyout** menu > select **Reassign**. Search for and select the Pre-Enrollment Support Coordinator name. The tickler is reassigned.
24. Return to the list of outstanding ticklers. Locate the Verify Mental Health Diagnosis tickler. From the tickler **flyout** menu > select **Reassign**. Search for and select the Pre-Enrollment Support Coordinator name. The tickler is reassigned.
25. The Pre-Enrollment Workstream Lead will also assign the Pre-Enrollment Support Coordinator as the Primary Worker on the consumer's APD Division Record.
26. Navigate to the **Division** tab. Select the **APD Eligible – Non-Pre-Enrollment** Division record.

Applicant, Prospective (215681)

Diagnosis Eligibility **Divisions** Auths Provider Documentation Contacts Consumer Module User

Demographics Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Payer

Filters

Disposition Not Equal To Closed AND

Open Date Greater Than MM/DD/YYYY AND

Division +

Search Reset

1 Consumers Divisions record(s) returned - now viewing 1 through 1

Division	Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
APD	APD Eligible - Bypass PE	Shorter, Caroline	Shorter, Caroline	01/27/2023		432

27. The Division details page displays. Update the following fields:
 - a. Primary Worker: Search for and select the **Pre-Enrollment Support Coordinator** as the Primary Worker on the Division record.

File Word Merge

Division

Events

Track Disposition

An asterisk (*) indicates a required field

Events

Division *

Disposition *

Disposition Date

Open Date

Data Entry Date

Primary Worker *

Temporary Primary Worker

Secondary Worker

Interested in ICF/IID

Application Received Date *

Age Category at Time of Application *

Application Pended Due Date

Eligibility Documentation Complete Date

Referral Source

Referral Date

Referral Source *

APD

APD Eligible - Bypass PE

04/03/2024

01/13/2022

01/12/2022

Shorter, Caroline

Lookup Clear Details

☐

Trainee, WSC

Lookup Clear Details

MM/DD/YYYY

01/12/2022

01/12/2022

01/12/2022

28. Click **File > Save and Close Division**.

29. The Pre-Enrollment Support Coordinator can **use My Dashboard** to track his/her newly assigned cases.

30. To do so log into iConnect with Role = Region Pre-Enrollment Workstream Lead.

apd iConnect

Welcome, Caroline Shorter 4/4/2024 3:18 PM

My Dashboard Sign Out

Role

Region Pre-Enrollment Workstream Lead GO

File Reports

Quick Search

Consumers Last Name GO ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS

31. Select the **My Dashboard** tab.

32. Locate the Consumer > Division task pane.

Quick Search

Consumers Last Name GO ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS

CONSUMERS

PROVIDERS

TASKS

Division

APD Eligible - Bypass PE

APD Eligible - PESG Assigned

APD Eligible - Pre-Enrollment

Links

iConnect eLearning Library

iConnect Help Desk

My Management

33. Select the **APD Eligible – Bypass PE** status to display a list of consumers with this Pre-Enrollment Workstream Lead as the Primary Worker.

qad iConnect

Welcome, Caroline Shorter
4/3/2024 6:04 PM

Division

File

Filters

Disposition

Equal To

APD Eligible - Bypass PE

AND

Referral Date

+

Search

Reset

1 My Dashboard Division record(s) returned - now viewing 1 through 1

Client Name	Fund Code	Case No	Referral Date	Open Date	Closed Date	Disposition Date	Gender	LOS	Age	Date of Birth	Date Of Death
	APD	215666		01/24/2023		04/03/2024	Male	435	123.0	01/01/1900	

First

Previous

Records per page 15

Next

Last

34. The assigned Pre-Enrollment Support Coordinator will also monitor his/her ticklers via **My Dashboard**.
- a. Navigate to **My Dashboard** and click on **Ticklers**

CONSUMERS

Division

My Enrollments

Provider Selections

Notes

Alert Notes

Ticklers

Ticklers

709

- b. Use the multi variable search criteria to narrow the results in the Tickler Queue. Then click **Search**:



Tip
*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

File

Filters

Last Name Equal To AND

Status Equal To AND

iConnect ID +

☐ Apply Alert Days Before Due

4 Ticklers record(s) returned - now viewing 1 through 4

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Complete Waiver Eligibility Worksheet	03/26/2018	05/10/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Complete Support Plan Short Form	03/26/2018	05/10/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Complete Family Risk Factor	03/26/2018	05/10/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Verify Mental Health Diagnosis	03/26/2018	05/10/2018		New	Tierney, Jacqueline

<< First < Previous Retrieve 15 Records at a time Next > Last >>

35. Click to open the Tickler called Complete Waiver Eligibility Worksheet.

36. The HCBS Waiver Eligibility Worksheet will open.

- Communicate with the Consumer as needed to complete all relevant fields on the form. Keep the form with Status = Draft to keep it editable.
- Only when all fields are complete, in the Form header, set Review = Initial, Division = APD and Status = Complete.

37. Print the form for signature.

38. When finished, click **File > Save and Close Form** and **File > Close Workflow Wizard**

File

Workflow Wizard

Complete Waiver Eligibility Worksheet

Please Select Type: **HCBS Waiver Eligibility Worksheet**

Consumer Forms

Review * Worker * Clear Details

Review Date * Status *

Division * Approved By

Approved Date

HCBS WAIVER ELIGIBILITY WORKSHEET

Client First Name:

Client Last Name:

*Social Security Number: Unmask

Region: Clear

Support Plan Effective Date:

39. After obtaining the necessary signatures, attach the signed HCBS Waiver Eligibility Worksheet to the consumer's record. To do so, navigate to the consumer's record and click on **Notes > File > Add Note**:

- In the new Note record, update the following fields:
 - Division = APD
 - Note Type = Waiver Enrollment
 - Note Subtype = Signed Waiver Eligibility Worksheet
 - Status = Complete

- b. From the **File** menu > select **Save and Close Notes**.

40. Back in the Tickler Queue, click on the Tickler called Complete Support Plan Short Form.

41. The Support Plan Short Form will open.

- a. Complete all relevant fields
- b. In the Form header, set Review = Initial, Division = APD and Status = Complete

42. When finished, click **File > Save and Close Form** and **File > Close Workflow Wizard**

The screenshot shows the 'Support Plan Short Form' interface. On the left is a 'Workflow Wizard' sidebar with a button labeled 'Complete Support Plan Short Form'. The main area has a header 'Please Select Type: Support Plan Short Form'. Below this is a 'Consumer Forms' section with fields for Review (Initial), Review Date (03/26/2018), Division (APD), Worker (Tierney, Jacqueline), Status (Draft), and Approved By. A blue banner below the form reads 'SUPPORT PLAN - SHORT FORM'. Underneath, there are input fields for Consumer Name (Last Name: Smith, First Name: Marianne, Middle Name:).

45. Back in the tickler queue, select the tickler called Verify Mental Health Diagnosis

46. A Message Tickler will open: Verify Mental Health Diagnosis and confirm or create a diagnosis record in the Diagnosis tab

The screenshot shows a 'Verify Mental Health Diagnosis' message tickler. It features a 'Workflow Wizard' sidebar on the left with three options: 'Complete Waiver Eligibility Worksheet' (red text), 'Complete Support Plan Short Form' (blue text), and 'Verify Mental Health Diagnosis' (blue text and highlighted with a blue background). An arrow points to the 'Verify Mental Health Diagnosis' option. The main area contains the text: 'Verify Mental Health Diagnosis and confirm or create a diagnosis record in the Diagnosis tab.'

47. From the tickler flyout menu, select View Consumer Record. The Consumer record opens in a new window.

48. To confirm/add the Diagnosis record, click on the **Diagnosis** tab.

- a. In the list view, review the existing Diagnosis records to confirm if the consumer's diagnosis has an affiliated record.
 - b. If it does not, select **File > Add Diagnosis Detail**.
 - c. Proceed to the [Add the APD Eligible Diagnosis section](#).
49. Return to the open tickler window. From the tickler flyout menu > click **Complete**.
43. The Offer Letter will be mailed to the consumer. Proceed to [Chapter 5 | iBudget Offer Enrollment Letter](#).
44. The EZ iBudget calculator form will be completed for the consumer. Proceed to [Chapter 9 | EZ iBudget Calculator](#).
45. The Pre-Enrollment Support Coordinator will submit the Enrollment request Note to the State Office only after verifying Medicaid Eligibility, verifying completion and consumer signature on the Waiver Eligibility Worksheet and the algorithm amount from the EZ iBudget calculator form.
46. Navigate to the consumer's Record and select the **Notes** tab. From the **File** menu > click **Add Note**.
47. A new Consumer Note record opens. Update the following fields:
 - a. Note Type = Waiver Enrollment
 - b. Note Subtype = Waiver Enrollment Request
 - c. Note = document that contact initiated with Consumer. The user should indicate who should be the primary worker on both the Division and Program records, the WSC or a designated Region worker.
 - d. Route the Note to appropriate State Office Enrollment Worker by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
 - e. Status = Pending

Notes Details

Division * APD

Note By * Regional, Jim

Note Date * 03/29/2018

Program/Provider

Note Type * Waiver Enrollment

Note Sub-Type Waiver Enrollment Request

Description

Note 3.27 - Contact initiated with customer

Status * Pending

Date Completed



Key Point

Remember to save the Note in Pending Status so that the recipient can update the Note and route it back to the sender

48. When finished, click **File > Save and Close Notes**.

49. The State Office Enrollment Worker will monitor their **My Dashboard** for Note records related to Waiver Enrollment request.

50. To do so, log into iConnect and set Role = State Office Enrollment. Click **Go**.

apd iConnect

Welcome, Worker State | My Harmony | Sign Out

Role: State Office Enrollment GO

File

Quick Search

Consumers Last Name GO ADVANCED SEARCH

51. On the **My Dashboard**, find the Consumers Section and Scroll down to the Notes Panel. Click on the **Pending** link to open a queue of Notes with Status = Pending. The State Office can mark the status as Complete if the request is complete or keep the status as Pending if issues exist to allow for the back and forth of this note.

52. In the Notes Queue, open the Note record with Note Type = Waiver Enrollment and Note Subtype = Waiver Enrollment Request. Review the contents of the Note and then click **File > Close Notes**.

53. Navigate consumer's record and click on the **Divisions** tab. In the Divisions List View Grid, open the consumer's APD Division record:

Manicotti, Baked (215466)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User
Demographics **Divisions** Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Payer

Filters
Disposition: Not Equal To Closed AND
Open Date: Greater Than MM/DD/YYYY AND
Division: +

Search Reset

1 Consumers Divisions record(s) returned - now viewing 1 through 1

Division	Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
APD	APD Eligible - PESC Assigned	Cancelliere, Colleen	Shorter, Caroline	01/24/2022		800

54. In the APD Division record, update the following fields:

- Primary Worker = Waiver Support Coordinator (or designated regional worker if the Consumer has not yet selected a WSC)
- Secondary Worker = Waiver Workstream Lead
- Disposition = APD Eligible - Waiver

55. When finished, click **File > Save and Close Division**

File Word Merge

Division

Events

Track Disposition

Events

Division * APD

Disposition * APD Eligible - Waiver

Disposition Date 03/29/2018

Open Date 03/21/2018

Data Entry Date 03/21/2018

Primary Worker * Reed, Monica ... Clear Details

Secondary Worker WaiverWSL, Stanley ... Clear Details

Application Received Date * 03/21/2018

Interested in ICF/IID No

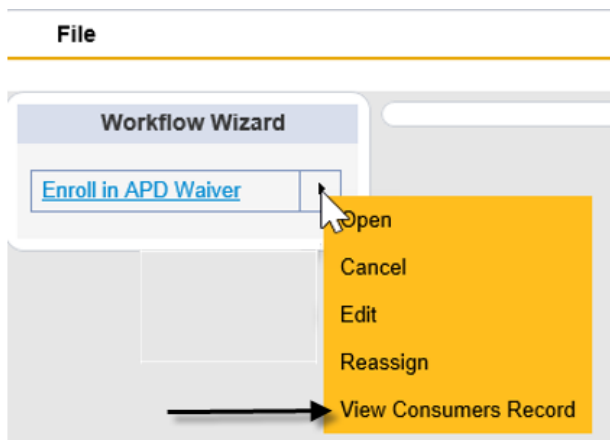
Age Category at Time of Application * 6 and Above

56. Upon saving the APD Division record with Disposition = APD Eligible - Waiver, a Workflow Wizard triggers with the following Tickler:

- Enroll in APD waiver - *Assigned to the State Office Worker*, Due Immediately

57. Select the tickler to open. A message tickler displays: Create/Update the APD waiver Program Record with Disposition = Enrolled.

58. Hover over the arrow next to the Tickler called Enroll in APD waiver to and click **View consumer's Record**:



59. The consumer record opens in a new window.

60. Select **File > Add Program**. The Program details page opens. Update the following fields:

- Program = APD waiver
- Disposition = Enrolled
- Enrollment Type = Pre-Enrollment to Waiver
NOTE: The Enrollment type can vary depending on the type of enrollment: Crisis, ICF/IDD, etc.
- Primary Worker on the Division tab = Waiver Support Coordinator
- Program Begin Date = update as appropriate

61. When finished, click **File > Save and Close Program**.

apd iConnect Prospective Applicant
Last Updated by caroline.shorter@apdcares.org
at 1/27/2023 3:02:05 PM

File Tools Word Merge

Program

Program Workers

Notes

Track Disposition

An asterisk (*) indicates a required field

Division *	APD
Referral Date	MM/DD/YYYY
Create Date *	01/27/2023
Program *	APD Waiver Details
Disposition *	Crisis Request
Disposition Date *	01/26/2023
Enrollment Type	Pre-Enrollment to Waiver
Program Begin Date	02/01/2023

62. Return to the Open Workflow Wizard window. From the tickler flyout menu select Complete.

63. Upon saving the Program record, a Workflow Wizard triggers with six Ticklers assigned to the Waiver Support Coordinator and will be outlined in the section on [Cost Plans. and Support Plan](#)

- a. Initiate Cost Plan - *Assigned to WSC, Due Immediately*
- b. Complete Person-Centered Support Plan - *Assigned to WSC, Due Immediately*
- c. Complete Amount Implementation Meeting - *Assigned to WSC, Due Immediately*
- d. Upload Support Planning Collateral Documents to Note - *Assigned to WSC, Due Immediately*
- e. Complete Cost Plan - *Assigned to WSC, Due in 45 Days*
- f. Eligibility Worksheet Reminder - *Assigned to WSC, Due in 45 Days*

Applicant Deemed APD Ineligible

1. If the Applicant has been deemed ineligible to receive APD benefits, the Eligibility Determination Specialist will navigate to the consumer's record and click on the **Divisions** tab and open the APD Division record.

MY DASHBOARD CONSUMERS PROVIDERS

Help Info [?] [?] [?]

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics **Divisions** Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Paye

Filters

Disposition Not Equal To Closed AND

Open Date Greater Than MM/DD/YYYY AND

Division +

Search Reset

1 Consumers Divisions record(s) returned - now viewing 1 through 1

Division	Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
APD	APD Eligible - Bypass PE	Shorfer, Caroline	Shorfer, Caroline	01/24/2023		435

First Previous Records per page: 15 Next Last

2. Update the following fields:
 - a. Disposition = APD Ineligible

NOTE: APD Ineligible will keep the iConnect record in an open state, in case the consumer needs to invoke Due Process.
3. When finished, click **File > Save and Close Division**

File Word Merge	
Division	Events
Events	Track Disposition
<div> <div> <div>Events</div> <div> <div>Division *</div> <div>APD</div> </div> <div> <div>Disposition *</div> <div>APD Ineligible</div> </div> <div> <div>Disposition Date</div> <div>03/26/2018</div> </div> <div> <div>Open Date</div> <div>03/21/2018</div> </div> <div> <div>Data Entry Date</div> <div>03/21/2018</div> </div> <div> <div>Primary Worker *</div> <div>Tierney, Jacqueline</div> <div>...</div> <div>Clear</div> <div>Details</div> </div> <div> <div>Secondary Worker</div> <div>Tierney, Jacqueline</div> <div>...</div> <div>Clear</div> <div>Details</div> </div> <div> <div>Application Received Date *</div> <div>03/21/2018</div> </div> <div> <div>Interested in ICF/IID</div> <div>No</div> </div> <div> <div>Age Category at Time of Application *</div> <div>6 and Above</div> </div> <div> <div>Application Pended Due Date</div> <div>03/30/2018</div> </div> <div> <div>Eligibility Documentation Complete Date</div> <div></div> </div> </div> </div>	

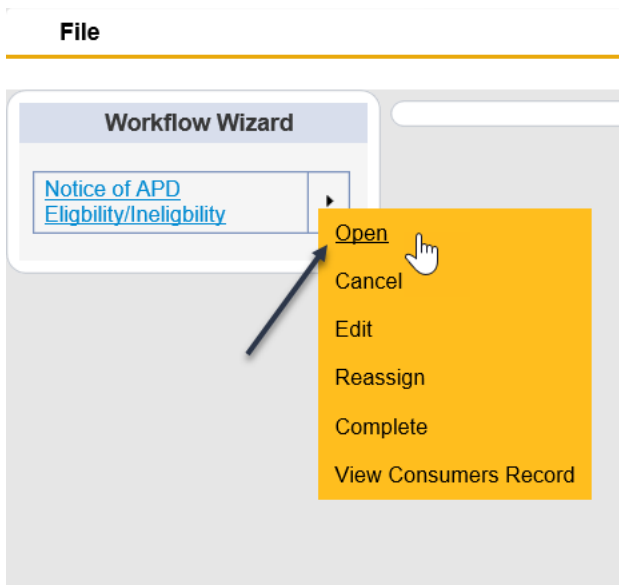
4. Upon saving the APD Division record with Disposition = APD Ineligible, a Workflow Wizard will trigger with the following Ticklers:
 - a. Notice of APD Eligibility/Ineligibility – *Assigned to Eligibility Determination Specialist*, Due Within 5 Business Days
 - b. Verify if Request to Exercise Due Process was Received – *Assigned to Eligibility Determination Specialist*, Due 35 Days after Disposition Date. This tickler will not trigger immediately because it's not due now. It will be visible via My Dashboard.
5. The Eligibility Determination Specialist will be able to access the Ticklers assigned to them via the Tasks Panel on the **My Dashboard**:
6. To do so, navigate to the **My Dashboard** and click on **Ticklers**.
7. Use the multi variable search criteria to narrow the results in the Tickler Queue. Then click **Search**:



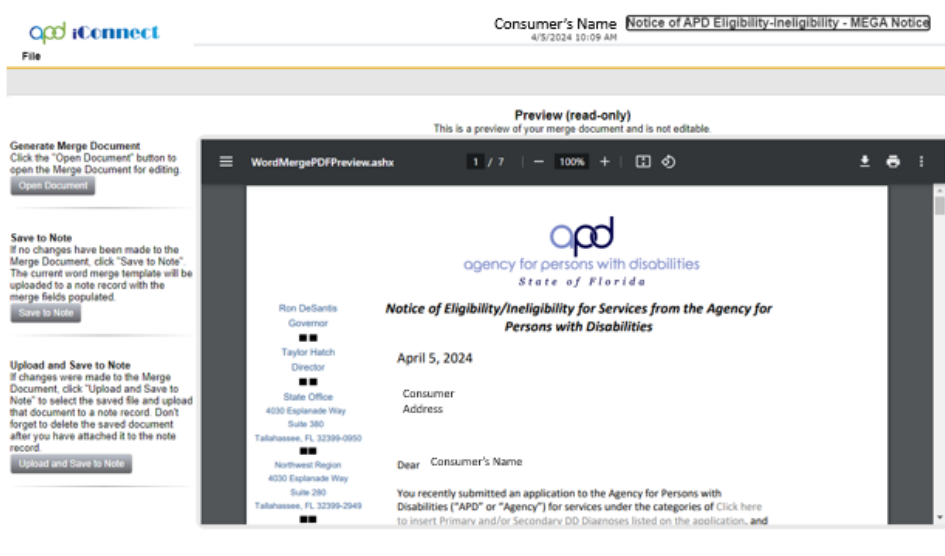
Tip

*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

8. Locate the tickler called Notice of APD Eligibility/Ineligibility and click to **Open**.



9. The Notice of APD Eligibility/Ineligibility – MEGA Notice letter will open in Word Merge preview mode. Click **Open Document** to edit it in Microsoft Word. Print and mail it to the Consumer:



36.

10. Save the updated letter to your computer. Back in iConnect, click **Upload and Save to Note**. In the new Note Record, update the following fields:
- Division = APD
 - Note Type = Application/Eligibility
 - Status = Complete
11. When finished, click **File > Save and Close Note**

12. Thirty-five days after the user updated the consumer’s Division Disposition = APD Ineligible, a Tickler will be due prompting the Eligibility Determination Specialist to Close the APD Division record if Due Process was not exercised. If Due Process was exercised, the user can cancel the Tickler.
13. To access the remaining Tickler, navigate to the **My Dashboard** tab and click on **Ticklers**.

File

Filters

SearchReset

1 Ticklers Due record(s) returned - now viewing 1 through 1

Worker	Number Of Ticklers Due
Tierney, Jacqueline	131

<< First < Previous Retrieve 15 Records at a time Next > Last >>

14. Use the multi variable search criteria to narrow the results in the Tickler Queue. Then click **Search**:



Tip
*When searching for a future Tickler, remember to clear the check box next to **Apply Alert Days Before Due** prior to clicking **Search**.*

File

Filters

Status

Equal To

New

AND

Last Name

Equal To

smith

AND

iConnect ID

+

☐ Apply Alert Days Before Due

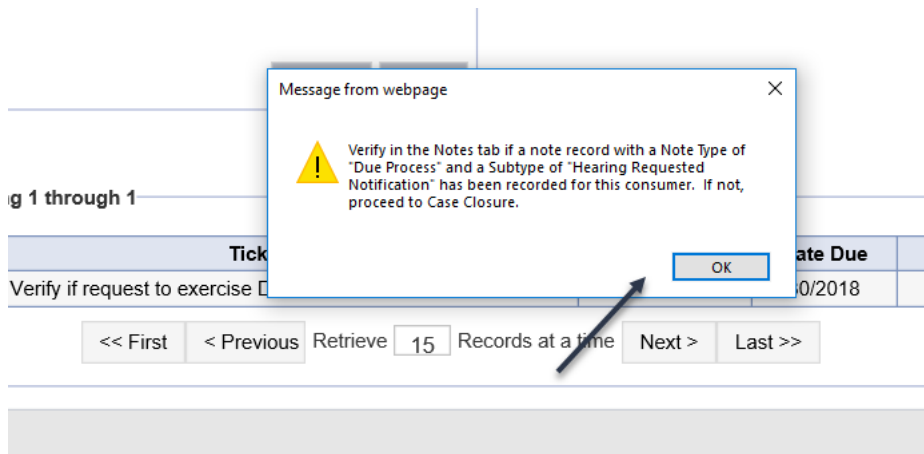
SearchReset

1 Ticklers record(s) returned - now viewing 1 through 1

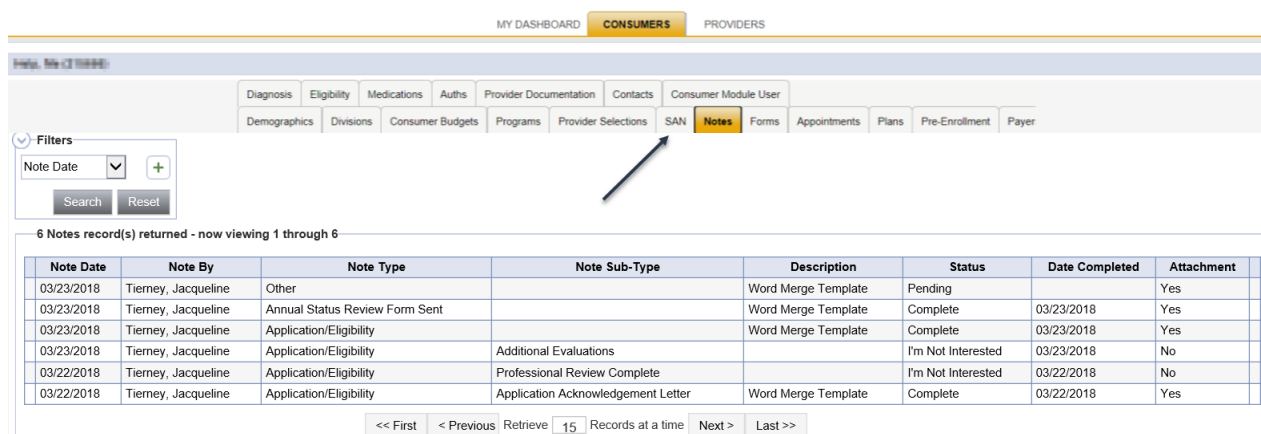
Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Verify if request to exercise Due Process received	03/26/2018	04/30/2018		New	Tierney, Jacqueline

<< First < Previous Retrieve 15 Records at a time Next > Last >>

15. Click on the Tickler called Verify if Request to Exercise Due Process Received to open it. A Message Tickler will open – Verify in the Notes tab if a Note record with Note Type = Due Process and Note Subtype = Hearing Requested Notification has been recorded for this Consumer. If not, proceed to Case Closure:



16. To verify if the Consumer has a Due Process Note record, navigate the consumer's record and click on the **Notes** tab:



17. In the queue of existing Consumer Notes, verify if the appropriate Note record exists (Note Type = Due Process and Note Subtype = Hearing Requested Notification).

- If the Due Process Note Does Exist, this tickler can be cancelled. To do so, hover over the arrow next to the Tickler and click **Cancel**. Proceed to the [Due Process](#) section.
- If Due Process was not exercised and the Due Process Note does not exist, close the case. Navigate to the consumer's APD Division record. Update the following fields:
 - Disposition = Closed
- Click **File > Save and Close Division**

18. A pop-up window will open with the following message: Authorizations for the consumer will be terminated and all current Ticklers will be marked as Cancelled. New Ticklers can be added, if necessary. Click OK to continue or Cancel to return to the detail page. Click **OK**.

FileWord Merge

Division

Events

Track Disposition

Events

Divison *APD

Disposition *Closed

Disposition Date

Open Date

Data Entry Date

Primary Worker *

Secondary Worker

Application Received Date *

Interested in ICF/IID

Age Category at Time of Application *6 and Above

Application Pended Due Date03/30/2018

Eligibility Documentation Complete Date

Authorizations for the consumer will be terminated and all current Ticklers will be marked as Cancelled. New Ticklers can be added, if necessary. Click "OK" to continue or "Cancel" to return back to the detail page.

OKCancel

Chapter 4 | Pre-Enrollment

Introduction

After a Consumer is determined to be APD Eligible and is placed on the Pre-Enrollment with Status = New, the assigned Pre-Enrollment Support Coordinator will review the consumer's record to determine the appropriate Pre-Enrollment Category (Category 1-6 recording on the Pre-Enrollment detail record). After determining the consumer's Pre-Enrollment Category, the Pre-Enrollment Support Coordinator will obtain approval for their decision from the Region Operations Manager (ROM). The ROM will either approve the consumer's Pre-Enrollment Category or recommend a different Pre-Enrollment Category. The Pre-Enrollment Support Coordinator will then update the consumer's Pre-Enrollment detail record accordingly.

Placement on the Pre-Enrollment

1. The PESC will begin by logging into iConnect and setting Role = Region Pre-Enrollment Workstream Worker. Click **Go**:

Quick Search: Consumers Last Name [ADVANCED SEARCH](#)

2. The Pre-Enrollment Support Coordinator (PESC) will monitor the Division Panel on their **My Dashboard** for new records flagged as APD Eligible – PESC Assigned. The PESC will manage these Consumers:

Quick Search: Consumers Last Name [ADVANCED SEARCH](#)

MY DASHBOARD CONSUMERS PROVIDERS TASKS

CONSUMERS

Division

- APD Eligible - Bypass PE 1
- APD Eligible - PESC Assigned 2
- APD Eligible - Pre-Enrollment 1

PROVIDERS

TASKS

Links

- iConnect eLearning Library
- iConnect Help Desk
- My Management

3. Click into the **APD Eligible – PESC Assigned** link to view the queue of Consumers who were just added to the Pre-Enrollment

Filters

Disposition Equal To APD Eligible - PESC Assigned AND

Referral Date

2 My Dashboard Division record(s) returned - now viewing 1 through 2

Client Name	Fund Code	Case No	Referral Date	Open Date	Closed Date	Disposition Date	Gender	LOS	Age	Date of Birth	Date Of Death
Lawrence, Sharon	APD	215450		11/23/2021		04/03/2024	Female	863	24.3	01/01/1999	
Manicotti, Baked	APD	215465		01/24/2022		04/03/2024	Female	801	32.0	01/01/1990	

4. Click to open the relevant consumer's record. When the consumer's record opens, click on the **Pre-Enrollment** tab. By default, all Consumers will be assigned to Pre-Enrollment Category = New

5. Review the consumer's Forms and any additional collateral documentation to determine the consumer's Pre-Enrollment Category (1-6) via **Forms** and **Notes**

Pre-Enrollment Category 3 or 4

1. Upon deciding that the Consumer should be in Pre-Enrollment Category 3 or 4, send an Approval Request note to the Region Operations Manager. To do so, navigate to the consumer's record and click on **Notes > File > Add Note**:
2. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Pre-Enrollment Category
 - c. Note Subtype = Cat. 3 or 4-Approval Request
 - d. Note = Write details of approval request
 - e. Status = Pending
 - f. In the new Note record, attach any supporting documentation by clicking **Add Attachment > Browse >** select the correct document and click **Upload**
 - g. Route the new Note record to the Region Operations Manager by clicking the **Ellipsis** button next to Add Note Recipient
3. When finished, click **File > Save and Close Note**



Tip

*By setting the Note Status = Pending, the Note recipient will be able to open and edit the Note via their **My Dashboard***

File Tools

Notes Details

Division * APD ▾

Note By * WLCordinator, Sue ▾

Note Date * 03/26/2018

Program/Provider ▾

Note Type * Pre-Enrollment Category ▾

Note Sub-Type Cat. 3 or 4-Approval Request ▾

Description

Note

Please approve the Waiting List Category 3 decision for this Consumer

Status * Draft ▾

Date Completed

Attachments

[Add Attachment](#)

Document	Description	Category	Action
There are no attachments to display			

Note Recipients

Add Note Recipient:

Name	Date Sent	Date Read	Status	Date Signed	
Tierney, Jacqueline	3/26/2018		Unread		Remove

4. Log into iConnect and set your Role = ROM/Deputy ROM. Click **Go**:

oqd iConnect

Welcome, Jacqueline Tierney | 3/26/2018 2:27 PM | **My Harmony** | [Sign Out](#)

Role ROM/Deputy ROM ▾

File

Quick Search

Consumers ▾ Last Name ▾

[ADVANCED SEARCH](#)

5. The Region Operations Manager will monitor the Notes Panel on their **My Dashboard** for any new Notes flagged as Pending. Click into the **Pending** link to view the queue of unread Consumer Notes:

Notes		
Draft	1	
I'm Not Interested	1	
Pending	1	

6. In the Notes Queue, click on the appropriate Note record with Note Type = Pre-Enrollment Category and Note Subtype = Cat. 3 or 4 Approval Request:

Filters

Status: [v] Equal To: [v] Pending: [v] AND: [v] X

iConnect ID: [v] +

Search Reset

1 Notes record(s) returned - now viewing 1 through 1

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10043	Smith, Marianne	Pre-Enrollment Category	Cat. 3 or 4-Approval Request	03/26/2018		WLCoordinator, Sue	Pending

<< First < Previous Retrieve 15 Records at a time Next > Last >>

File

Filters

Status: [v] Equal To: [v] Pending: [v] AND: [v] X

iConnect ID: [v] +

Search Reset

1 Notes record(s) returned - now viewing 1 through 1

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10043	Smith, Marianne	Pre-Enrollment Category	Cat. 3 or 4-Approval Request	03/26/2018		1.Coordinator, Sue	Pending

<< First < Previous Retrieve 15 Records at a time Next > Last >>

7. Review the contents of the Cat. 3 or 4 Approval Request Note record and then navigate to the consumer's record and click **Forms** to view any supporting documentation
8. After reviewing the consumer's record, the Region Operations Manager will approve or disapprove the Cat. 3 or 4 Approval Request.
 - a. To do so, navigate to the **Notes** tab and open the Note record that contains the original approval request
 - b. Update the Note with the approval or disapproval and indicate the correct Pre-Enrollment Category (if applicable) and by clicking **Append**.
 - c. Set Status = Pending
 - d. Route the Note record back to the correct State Office Worker clicking the **Ellipsis** button next to Add Note Recipient
 - e. When finished, click **File > Save and Close Note**

9. The State Office Worker will monitor the Notes Panel on their My Dashboard for any new Notes flagged as Pending to access the Pre-Enrollment Category approval/disapproval
10. On the Notes Panel, click into the **Pending** link to view the queue of unread Consumer Notes
11. In the Notes Queue, click on the appropriate Note record with Note Type = Pre-Enrollment Category and Note Subtype = Cat. 3 or 4 Approval Request:

File

Filters

Status Equal To Complete AND

iConnect ID

Search Reset

6 Notes record(s) returned - now viewing 1 through 6

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10010	Doe, Jim	ICF	ICF Response-Accepted	11/25/2017	ICF Accept	Admission, Central	Complete
10010	Doe, Jim	ICF	ICF Response-Admitted	11/26/2017	Admission into ICF	Admission, Central	Complete
10010	Doe, Jim	ICF	Admission Process Completed	11/25/2017	ICF Process Complete	Admission, Central	Complete
10016	Patrick, Lucy	Waiver Enrollment	CBC to Waiver	11/30/2017	CBC to Waiver Note	WLSuper, Robert	Complete
10017	Sample, Thomas	QSI	QSI Status Complete	11/29/2017	QSI Status Complete with Consumer	Thomas, Valerie	Complete
10043	Smith, Marianne	Pre-Enrollment Category	Cat. 3 or 4-Approval Request	03/26/2018		WLCordinator, Sue	Complete

<< First < Previous Retrieve 15 Records at a time Next > Last >>

12. In the Note record, view the Region Operations Manager's Pre-Enrollment Category approval/disapproval.
13. Update the consumer's Pre-Enrollment record as appropriate.
14. If no category change is needed, update the consumer's Pre-Enrollment record as follows:
 - a. Navigate to the consumer's record and click on the **Pre-Enrollment tab** > open the appropriate Pre-Enrollment record

Soft, Charmin (215445)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans **Pre-Enrollment** Payers

Filters
Pre-Enrollment Category
Search Reset

1 Consumers Pre-Enrollment record(s) returned - now viewing 1 through 1

Pre-Enrollment Status	Pre-Enrollment Category	Pre-Enrollment Category Date	Days in Pre-Enrollment	Reason for Closure
1 - New	6	12/23/2020	1198	

- b. Update Pre-Enrollment Status = Waiting
- c. Update Pre-Enrollment Status Date as appropriate

15. When finished, click **File > Save Pre-Enrollment** and **File > Close Pre-Enrollment**

16. If a category change is necessary, update the consumer's Pre-Enrollment Category as appropriate:

- a. Navigate to the consumer's record and click on the **Pre-Enrollment** tab:

Soft, Charmin (215445)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans **Pre-Enrollment** Paye

Filters
Pre-Enrollment Category
Search Reset

1 Consumers Pre-Enrollment record(s) returned - now viewing 1 through 1

Pre-Enrollment Status	Pre-Enrollment Category	Pre-Enrollment Category Date	Days in Pre-Enrollment	Reason for Closure
1 - New	6	12/23/2020	1198	

- b. On the Pre-Enrollment page, click to open the consumer's Pre-Enrollment record.
 - i. Update Pre-Enrollment Category = appropriate Category

File Word Merge

Pre-Enrollment

Notes

An asterisk (*) indicates a required field

Pre-Enrollment

Pre-Enrollment Category 6

Pre-Enrollment Category Date 12/23/2020

Pre-Enrollment Status 2 - Pre-Enrollment

Pre-Enrollment Status Date * 04/01/2024

Date Placed in Pre-Enrollment 12/23/2020

Days in Pre-Enrollment 1198

Reason for Closure

Closure Date MM/DD/YYYY

- c. Click **File > Save Pre-Enrollment** and then **File > Close Pre-Enrollment**

17. Upon changing the Pre-Enrollment Status, a Workflow Wizard triggered two ticklers

- a. Send the Notice of Decision for Change in Pre-Enrollment Category, *Assigned to the Pre-Enrollment Support Coordinator, due immediately.* The

Pre-Enrollment Support Coordinator will reassign this tickler to the applicable Region Worker.

- b. Notify the Region Office of the Category change, *Assigned to Pre-Enrollment Support Coordinator, Due immediately*

18. Return to the = Pre-Enrollment Category Note record. Click **Append** to indicate the change that was made to the consumer's Pre-Enrollment record

19. Route the Note record back to the correct PESC clicking the **Ellipsis** button next to Add Note Recipient

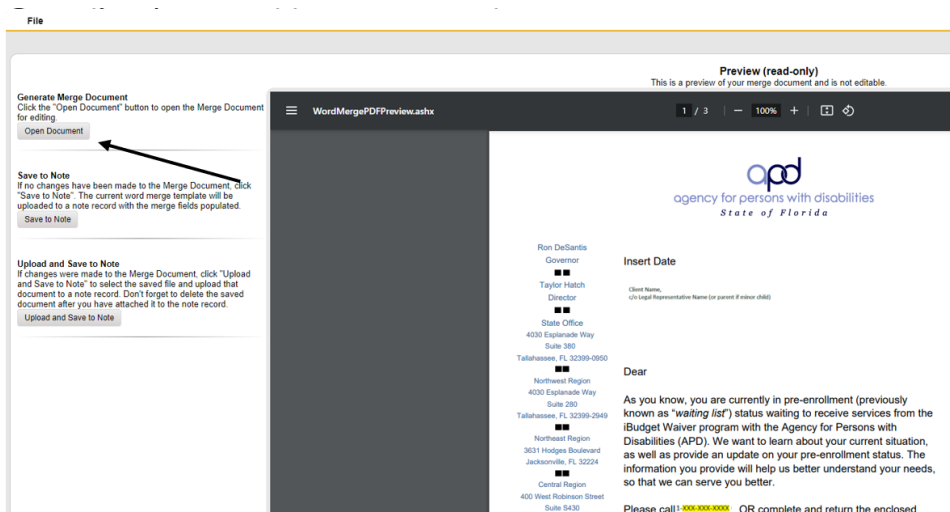
20. When finished, click **File > Save and Close Note**

**Tip**

By setting the Note Status = Complete, the Note recipient will be able to open and view but NOT edit the contents of the Note record

Annual Status Review – Pre-Enrollment

1. When the Division record was saved with Disposition = APD Eligible – PESC Assigned, a Workflow Wizard triggered a tickler for the Primary Worker to Send the Annual Review Form to the Consumer, due in 365 days.
2. Once this form is sent and saved to a Note, a second Workflow Wizard will trigger a tickler for the Primary worker again due 365 days after the initial form was sent so the annual review reminder continues if the consumer is on the Pre-Enrollment.
3. To begin, log into iConnect and set Role = Pre-Enrollment Workstream Worker. Click **Go**.
4. Navigate to My Dashboard > Consumers > Tickler. Open the Tickler queue. Click to open the Tickler called Send Annual Status Review Form to Customer.
5. The Annual Status Review Form will open in preview mode. Click **Open Document** to edit the contents of the letter in Microsoft Word



6. Save the document to your computer
7. Print and mail the letter to the Consumer
8. Back in the Word Merge preview screen, click **Upload and Save to Note** to attach a copy of the updated letter to a new Consumer Note record
9. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Annual Status Review Form Sent
 - c. Status = Complete
10. When finished, click **File > Save and Close Notes**

File Tools Reports

Notes

Notes Details

Division * APD ▾

Note By * Tierney, Jacqueline

Note Date * 03/23/2018

Program/Provider ▾

Note Type * Annual Status Review Form Sent ▾

Note Sub-Type ▾

Description Word Merge Template


Note

New Text

Append Text to Note

Status * Complete ▾

Date Completed 03/23/2018



11. Saving the Note with Note Type = Annual Status Review Form Sent and Status = Complete triggers a Workflow Wizard for the Pre-Enrollment Support Coordinator with two ticklers:
 - a. Annual Status Review Receipt Confirmation
 - b. Annual Status Review 365 Day Reminder

Annual Status Review Receipt Confirmation

1. When the Pre-Enrollment Support Coordinator saved the Note with Note Type = Annual Status Review Form Sent and Status = Complete a Workflow Wizard triggered the Annual Status Review Receipt Confirmation tickler, due 45 days from when the Review form was sent to the Consumer.
2. The Pre-Enrollment Support Coordinator will monitor his/her Tickler queue.
3. To do so, navigate to the My Dashboard, find the consumer's section and scroll down to the Ticklers Panel. Click on the linked number of outstanding Ticklers, uncheck the Alert Days before Due checkbox, and use the multi variable search criteria to narrow the results by Consumer Name. Then click **Search**.

Notes	
Draft	1
I'm Not Interested	1

Alert Notes	
Unread Alert Notes	0

Ticklers	
Ticklers	119

Plans	
Approved	1
Draft	1

4. In the search results, find the Annual Status Review Receipt Confirmation Tickler and click to open it:

File

Filters

Status

Equal To

New

AND

Last Name

Equal To

smith

AND

iConnect ID

+

☐ Apply Alert Days Before Due

Search

Reset

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Annual Status Review Receipt Confirmation	03/23/2018	05/07/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Annual Status Review 365 Day Reminder	03/23/2018	03/23/2019		New	Tierney, Jacqueline

<< First

< Previous

Retrieve 15

Records at a time

Next >

Last >>

5. A Message Tickler will appear that says Review record to determine if Annual Status Review form has been received. If received, confirm/document consumer’s responses in the form in the Forms tab. If it has not been received, proceed with Case Closure and cancel 365-day reminder Tickler.

File

Filters

Last Name Equal To AND

Status Equal To AND

iConnect ID +

☐ Apply Alert Days Before Due

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler
Smith, Marianne	10043	Annual Status Review Re
Smith, Marianne	10043	Annual Status Review 365

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Message from webpage

Review record to determine if Annual Status Review form has been received. If received, confirm/document consumers responses in the form in the Forms tab. If it has not been received proceed with Case Closure and cancel 365 Day Reminder tickler.

OK

6. If the form has been received, navigate to the consumer's record and click on the **Forms** tab via **File > Add Forms**.
 - a. In the Please Select Type field, select the Annual Status Report Form
 - b. Complete all relevant fields. Set Status = Complete and Review = Annual
7. When finished, click **File > Save and Close Forms**

File

Please Select Type: Annual Status Report

Consumer Forms

Review * Worker * Tierney, Jacqueline ... Clear Details

Review Date * 03/23/2018 Status * Complete

Division * APD Program

Approved By Tierney, Jacqueline Approved Date 03/23/2018

ANNUAL STATUS REPORT

1. Are you or your family currently receiving any services related to your developmental disability? This may include services funded by Medicaid, school-based services, or other sources. Please select all that apply:

2. What services do you or your family need at this time?

3. Is the APD client currently employed?

Respite Care
Supported Employment
Consumable Supplies (e.g. diapers)
Behavioral Therapy
Other

Adult Day Training

Supported Employment

8. Back in the Tickler Queue, hover over the arrow next to the Tickler to click **Complete**. This will remove the Tickler from the user's Tickler Queue

File

Filters

Last Name Equal To AND

Status Equal To AND

iConnect ID +

☐ Apply Alert Days Before Due

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Annual Status Review Receipt Confirmation	03/23/2018	05/07/2018		New	
Smith, Marianne	10043	Annual Status Review 365 Day Reminder	03/23/2018	03/23/2019		New	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Cancel
Edit
Reassign
Complete
View Consumers Record

Annual Status Review – Year 2 +

1. When the Pre-Enrollment Support Coordinator saved the Note with Note Type = Annual Status Review Form Sent and Status = Complete a Workflow Wizard triggered the Annual Status Review 365 Day Reminder tickler, due 365 days from when the last Annual Review Form was sent.
2. The Pre-Enrollment Support Coordinator will monitor his/her Tickler queue.
3. To do so, navigate to My Dashboard, find the consumer's section and scroll down to the Ticklers Panel. Click on the linked number of outstanding Ticklers, uncheck the Alert Days before Due checkbox, and use the multi variable search criteria to narrow the results by Consumer Name. Then click **Search**.

Notes

Draft	1
I'm Not Interested	1

Alert Notes

Unread Alert Notes	0
--------------------	---

Ticklers

Ticklers	119
----------	-----

Plans

Approved	1
Draft	1

4. In the search results, find the Annual Status Review 365 Day Reminder tickler and click to open it.

File

Filters

Last Name Equal To AND

Status Equal To AND

iConnect ID +

☐ Apply Alert Days Before Due

1 Ticklers record(s) returned - now viewing 1 through 1

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Annual Status Review 365 Day Reminder	03/23/2018	03/23/2019		New	Tierney, Jacqueline

<< First < Previous Retrieve 15 Records at a time Next > Last >>

5. The Annual Status Review Form will open in preview mode. Click **Open Document** to edit the contents of the letter in Microsoft Word

File

Generate Merge Document
Click the "Open Document" button to open the Merge Document for editing.

Save to Note
If no changes have been made to the Merge Document, click "Save to Note". The current word merge template will be uploaded to a note record with the merge fields populated.

Upload and Save to Note
If changes were made to the Merge Document, click "Upload and Save to Note" to select the saved file and upload that document to a note record. Don't forget to delete the saved document after you have attached it to the note record.

WordMergePDFPreview.ashx

1 / 3 100% + -

Preview (read-only)
This is a preview of your merge document and is not editable.

Agency for Persons with Disabilities
State of Florida

Ron DeSantis
Governor

Taylor Hatch
Director

State Office
4030 Esplanade Way
Suite 380
Tallahassee, FL 32399-0950

Northwest Region
4030 Esplanade Way
Suite 280
Tallahassee, FL 32399-2949

Northwest Region
3631 Hodges Boulevard
Jacksonville, FL 32224

Central Region
400 West Robinson Street
Suite 8430

Insert Date

Client Name,
US Legal Representative Name (or parent if minor child)

Dear

As you know, you are currently in pre-enrollment (previously known as "waiting list") status waiting to receive services from the iBudget Waiver program with the Agency for Persons with Disabilities (APD). We want to learn about your current situation, as well as provide an update on your pre-enrollment status. The information you provide will help us better understand your needs, so that we can serve you better.




Please call 1-800-369-3900 OR complete and return the enclosed

6. Save the document to your computer
7. Print and mail the letter to the Consumer
8. Back in the Word Merge preview screen, click **Upload and Save to Note** to attach a copy of the updated letter to a new Consumer Note record
9. In the new Note record, update the following fields:
- Division = APD
 - Note Type = Annual Status Review Form Sent
 - Status = Complete
10. When finished, click **File > Save and Close Notes**


File Tools Reports

Notes

Notes Details

Division *	APD ▾
Note By *	Tierney, Jacqueline
Note Date *	03/23/2018 
Program/Provider	▾
Note Type *	Annual Status Review Form Sent ▾ 
Note Sub-Type	▾
Description	Word Merge Template 
Note	<div><div></div><div>New Text</div><div></div><div>Append Text to Note</div></div>
Status *	Complete ▾
Date Completed	03/23/2018

11. Saving the Note with Note Type = Annual Status Review Form Sent and Status = Complete triggers a Workflow Wizard for the Pre-Enrollment Support Coordinator with two ticklers:
- Annual Status Review Receipt Confirmation due in 45 days.
 - Annual Status Review 365 Day Reminder due in 365 days.
12. After sending the Annual Status Review Form, return to the tickler and hover over the arrow next to the Tickler to click **Complete**:



Welcome, Jacqueline Tierney | **Ticklers**
3/23/2018 2:20 PM

File

Filters

Last Name

Equal To

smith

AND

Status

Equal To

New

AND

iConnect ID

+

Apply Alert Days Before Due

Search

Reset

1 Ticklers record(s) returned - now viewing 1 through 1

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Annual Status Review 365 Day Reminder	03/23/2018	03/23/2019		New	

<< First

< Previous

Retrieve 15 Records at a time

Next >

Last >>

Cancel

Edit

Reassign

Complete

View Consumers Record

Chapter 5 | Standard APD Waiver Enrollment

Introduction

This Chapter outlines the workflow from the point in time when a Consumer is placed on the Pre-Enrollment based on the Consumer being eligible to receive APD services and presumed eligible for the waiver.

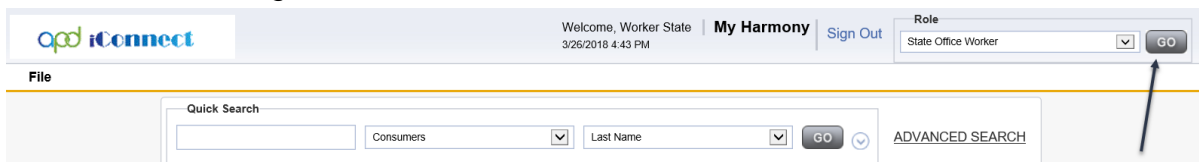
As the Consumer moves through the process of receiving a Waiver offer, accepting the offer and ultimately enrolling onto the APD waiver Program, designated workers will update the Pre-Enrollment Status field on the consumer's Pre-Enrollment record to indicate where the Consumer is in the enrollment process.

When additional waiver funding is approved by Legislature and signed by the Governor for additional waiver offers, the State Office Worker will identify the Consumers who meet the established criteria to receive Waiver services and the Waiver offer letter is sent.

The Consumer contacts the State Office to accept/decline the offer to participate in the APD waiver and to choose a Waiver Support Coordinator (WSC). The Pre-Enrollment Support Coordinator will record the consumer's WSC selection via a Provider Selection record in iConnect and remove the consumer from the Pre-Enrollment.

iBudget Waiver Enrollment Offer

1. This section is only used when the legislature has approved waiver funding. During times when funding has not been approved, there will not be a word merge template for the iBudget Waiver Enrollment Offer Letter available.
2. When additional waiver funding is approved by Legislature and signed by the Governor for additional waiver offers, the State Office Worker will identify the Consumers who meet the established criteria to receive Waiver services.
3. To do so, log into iConnect and set Role = State Office Worker. Click **Go**.



4. To view a specific consumer's Pre-Enrollment record, navigate to the Consumer record and select the Pre-Enrollment tab.

Soft, Charmin (215445)

Diagnosis

Eligibility

Medications

Auths

Provider Documentation

Contacts

Consumer Module User

Demographics

Divisions

Consumer Budgets

Programs

Provider Selections

SAN

Notes

Forms

Appointments

Plans

Pre-Enrollment

Payers

Filters

Pre-Enrollment Category

Search

Reset

1 Consumers Pre-Enrollment record(s) returned - now viewing 1 through 1

Pre-Enrollment Status	Pre-Enrollment Category	Pre-Enrollment Category Date	Days in Pre-Enrollment	Reason for Closure
3 - Offered	6	12/23/2020	1198	

5. To view all Consumer Pre-Enrollment records, on the **My Dashboard**, and under the Tasks Panel, click on the **Pre-Enrollment** link:

MY DASHBOARD

CONSUMERS

PROVIDERS

CONSUMERS

Division

APD Eligible - Waiver

3

My Enrollments

Enrolled

1

Provider Selections

Open

3

WSC - Selected

1

Notes

Complete

1

Ticklers

Ticklers

9

PROVIDERS

Notes

Complete

16

Pending

5

Ticklers

Ticklers

30

TASKS

Links

iConnect eLearning Library

APD Help Desk

My Management

Current Active Cases

Enrollments

SAN Queue

Pending Assessments Queue

Pending Provider Assessments Queue

Pre-Enrollment

DOD OpenClose Open List

Provider Credentials Queue

Pending Plans

File

Filters

Waiting List Status

Equal To

1 - New

AND

Waiting List Category

Search

Reset

3 Waiting List record(s) returned - now viewing 1 through 3

	Pre-Enrollment Category	Pre-Enrollment Category Date	Pre-Enrollment Status	Consumer	iConnect	Days On Pre-Enrollment	Gender	Region	Reason for Removal
<input type="checkbox"/>	6	12/29/2017	1	Example, Forensics	10020	116	Female		
<input type="checkbox"/>	6	12/29/2017	1	Connor, John	10013	115	Male		
<input type="checkbox"/>	5	01/17/2018	1	Doe, Suzy	10005	68	Female	SUNCOAST	

<< First

< Previous

Retrieve

15

Records at a time

Next >

Last >>

6. Click on the consumer's record to make sure the QSI, Waiver Eligibility Worksheet and EZ iBudget calculator form are completed and the Consumer is still eligible. Review the consumer's Forms by clicking on the **Forms** and select each form to review.

Sheppard, John (10106)

Diagnosis | Eligibility | Medications | Auths | Provider Documentation | Contacts | Consumer Module User

Demographics | Divisions | Consumer Budgets | Programs | Provider Selections | SANS | Notes | **Forms** | Appointments | Plans

Filters
Form

6 Forms record(s) returned - now viewing 1 through 6

Form	Review	Review Date	Worker
Support Plan Short Form	Initial	08/06/2018	Buck, Jennifer
Person-Centered Support Plan	Initial	07/19/2018	Buck, Jennifer
Questionnaire Situational Information	Initial	07/11/2018	Buck, Jennifer
HCBS Waiver Eligibility Worksheet	Initial	06/11/2018	Buck, Jennifer
EZ iBudget Calculator	Initial	06/11/2018	Buck, Jennifer
Questionnaire Situational Information	Initial	06/05/2018	Buck, Jennifer

7. For Consumers who are to be sent an Offer Letter, from the consumer's record, click on the Plans Tab. From the Report option in the toolbar, select Notice of Initial iBudget Amount report.

apd iConnect

John Sheppard | Plan Information
Last Updated by j buck
at 10/9/2018 4:08:30 PM

File Reports

Plan Info
AIM Worksheet
Consumer Plan
Planned
Notice of Initial iBudget Amount
QSI New
Plan Validation Report

Plan Notes

APD
APD Waiver
Buck, Jennifer
Cost Plan Creation Date * 04/01/2018
Comments
Status * Draft
Cost Plan Begin Date 07/01/2018
Cost Plan End Date 06/30/2020

8. The Notice of Initial Budget Amount letter will open as a report in a new window. Click Save to Note to save it to a Note. Proceed to step 10.

HTML

1 of 2 ? Find | Next

apd
agency for persons with disabilities
State of Florida

NOTICE OF INITIAL iBUDGET AMOUNT

November 12, 2018

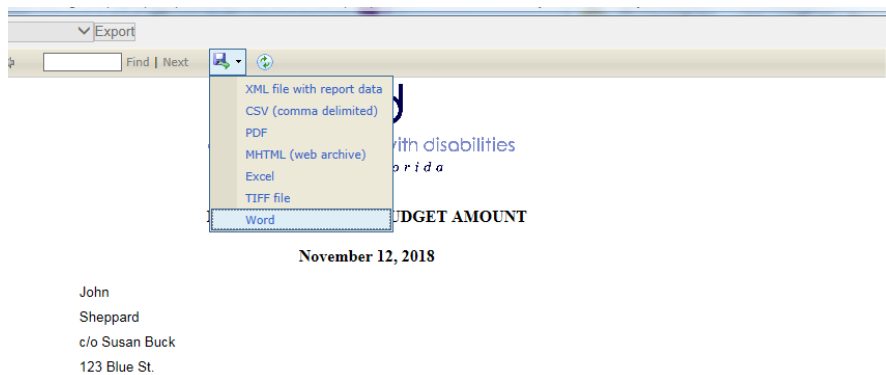
Ron DeSantis
Governor

Taylor Hatch
Director

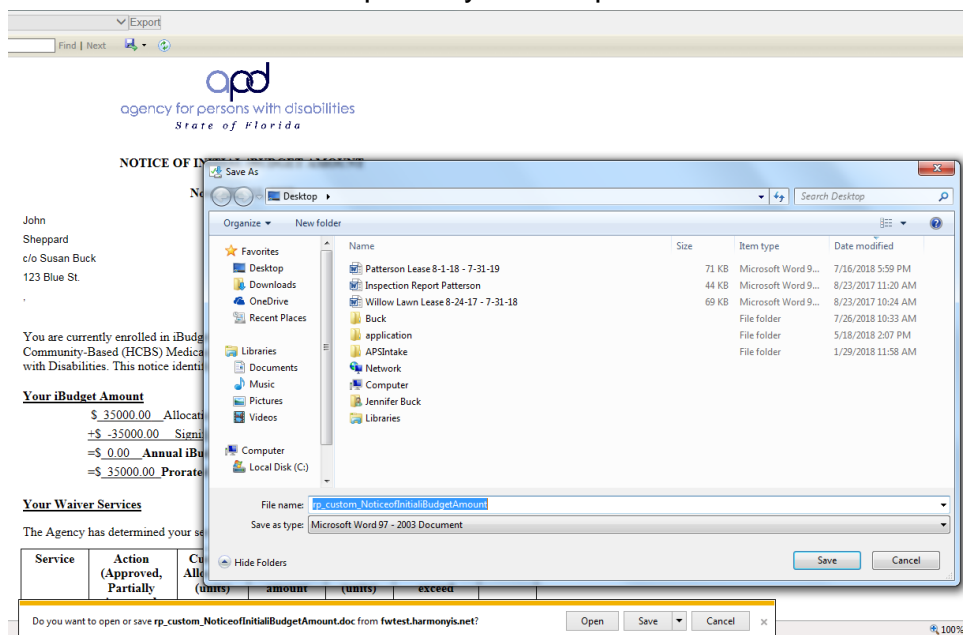
State Office
4030 Esplanade Way

John
Sheppard
c/o Susan Buck
123 Blue St.

9. To make changes to the letter, save it to your computer as a WORD document by selecting Word from the Export Dropdown menu.



a. Save the report to your computer. Edit the file and save your changes.



b. Back in the consumer's record, select the Notes tab. Click File > Add Note.

10. In the new Note record, update the following fields:

- Division = APD
- Note Type = Waiver Enrollment
- Note Subtype = Offer Sent
- Status = Complete

11. When finished, click **File > Save and Close Notes**

File Tools Reports

Notes

Notes Details

Division * APD

Note By * State Worker

Note Date * 03/27/2018

Program/Provider

Note Type * Waiver Enrollment

Note Sub-Type Offer Sent

Description Word Merge Template

Note

New Text

Append Text to Note

Status * Complete

Date Completed 03/27/2018

Attachments

Add Attachment

Document	Description	Category	Action
WM_CM435_Notice-of-Initial-Budget-Amount.pdf	Word Template: Notice of Initial iBudget Amount		Remove

Note Recipients

Add Note Recipient: Clear

12. Upon saving the Note, a Workflow Wizard will trigger with the following Ticklers:

- Update Pre-Enrollment Status to Offered - *Assigned to State Office Worker* – Due Immediately. This tickler can be cancelled for consumers who by-pass the Pre-Enrollment.
- 15 Day Consumer Offer Response Received - *Assigned to PESC* – Due 15 days after Note Date
- 30 Day Consumer WSC Selection Reminder - *Assigned to PESC* – Due 30 days after Note Date

13. In the Workflow Wizard, hover over the arrow next to the Tickler called Update Pre-Enrollment Status to Offered to click **Open**:

File Reports

Workflow Wizard

Update Pre-Enrollment Status to "Offered"

Open

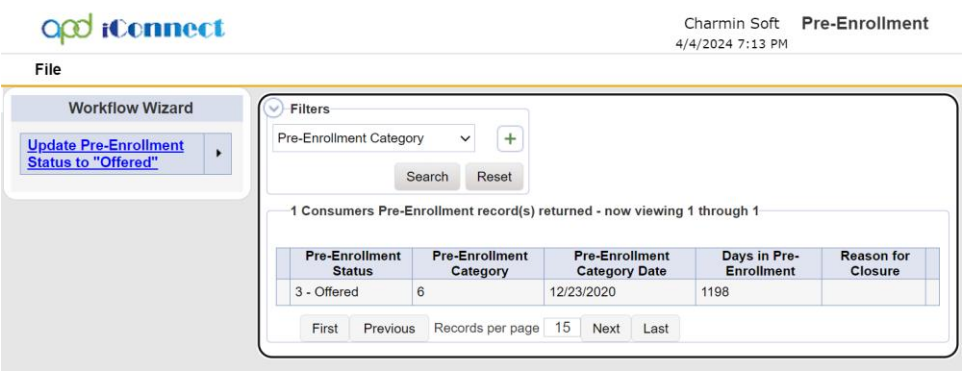
Cancel

Reassign

Complete

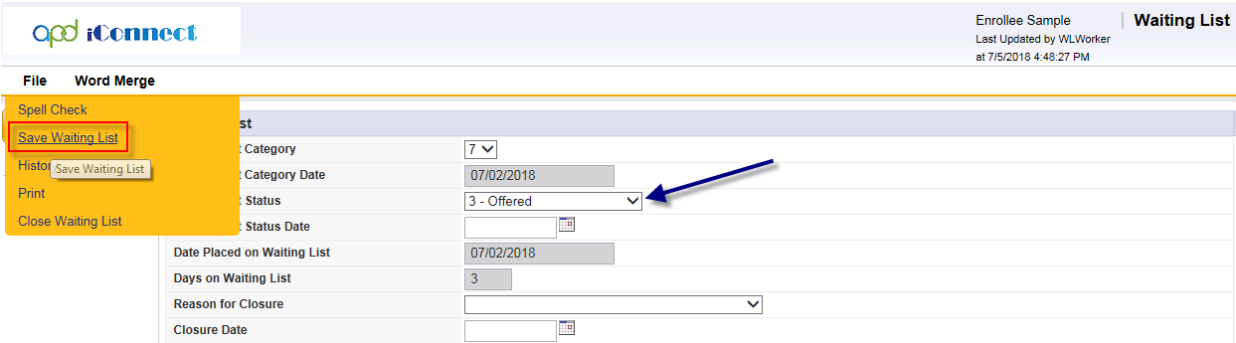
View Consumers Record

- The consumer's Pre-Enrollment View grid will open. Click on the Pre-Enrollment record to open it:



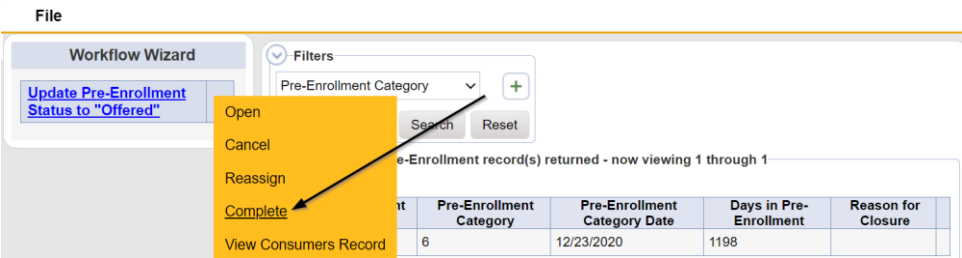
b. Update Pre-Enrollment Status = 3-Offered

14. Click **File > Save Pre-Enrollment**



15. When finished, click **File > Close Pre-Enrollment**

16. Hover over the arrow next to the Tickler to click **Complete**



17. In 15 days, follow up with the Consumer to ensure the Waiver Offer was received. In 30 days, follow up with the Consumer to ensure that they have selected a Waiver Support Coordinator.

18. The following Ticklers are available to the Pre-Enrollment Support Coordinator via their **My Dashboard**:

a. 15 Day Consumer Offer Response Received

b. 30 Day Consumer WSC Selection Reminder

19.To find these Ticklers, navigate to the **My Dashboard**, find the Consumers Section and click on the **Ticklers** link under the Ticklers Panel:

File

Quick Search

Consumers

Last I

MY HARMONY

CONSUMERS

PROVIDERS

CONSUMERS

INCIDENTS

Notes

Complete2

Alert Notes

Unread Alert Notes0

Ticklers

Ticklers4

a. Use the multi variable search to narrow down the results in the Tickler Queue:

File

Filters

Status

Equal To

New

AND

Last Name

Equal To

smith

AND

iConnect ID

+

Apply Alert Days Before Due

Search

Reset

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	30 Day Consumer WSC Selection Reminder	03/27/2018	04/26/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	15 Day Consumer Offer Response Received	03/27/2018	04/11/2018		New	Tierney, Jacqueline

<< First

< Previous

Retrieve 15 Records at a time

Next >

Last >>



Tip
When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.

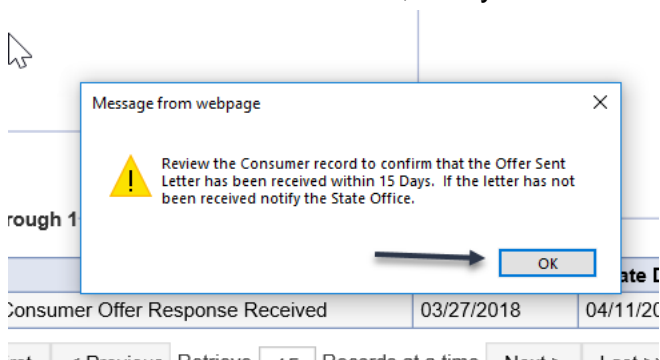
20. In the Tickler Queue, click to open the Tickler called 15 Day Consumer Offer Response Received

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To	
Smith, Marianne	10043	30 Day Consumer WSC Selection Reminder	03/27/2018	04/26/2018		New	Tierney, Jacqueline	▶
Smith, Marianne	10043	15 Day Consumer Offer Response Received	03/27/2018	04/11/2018		New	Tierney, Jacqueline	▶

<< First < Previous Retrieve 15 Records at a time Next > Last >>

- a. A Message Tickler will open – Review the Consumer record to confirm that the Offer Sent Letter has been received within 15 days. If the letter has not been received, notify the State Office. Click **OK**.



21. Hover over the arrow next to the Tickler to click **Complete**:

opd iConnect

Welcome, Jacqueline Tierney | Ticklers
3/27/2018 11:00 AM

File

Filters

Status ▾ Equal To ▾ New ▾ AND ▾ ✕

Last Name ▾ Equal To ▾ smith AND ▾ ✕

iConnect ID ▾ +

☐ Apply Alert Days Before Due

Search Reset

1 Ticklers record(s) returned - now viewing 1 through 1

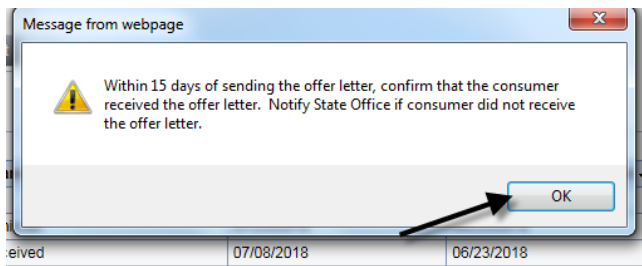
Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To	
Smith, Marianne	10043	15 Day Consumer Offer Response Received	03/27/2018	04/11/2018		New	Tierney, Jacqueline	▶

<< First < Previous Retrieve 15 Records at a time Next > Last >>

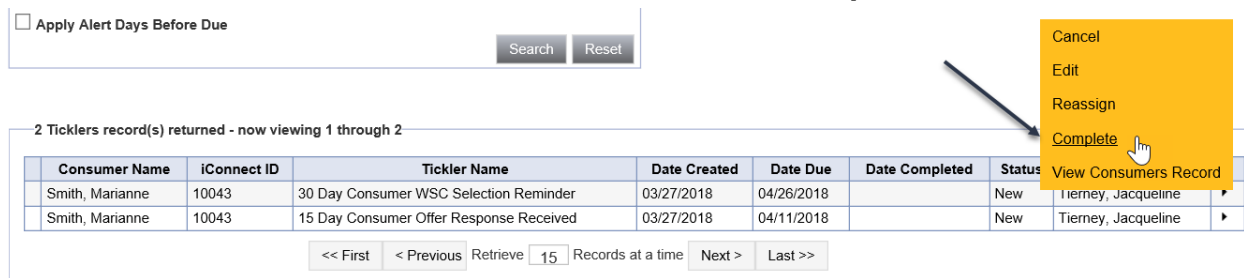
Cancel
Edit
Reassign
Complete
View Consumers Record

22. Back in the Tickler Queue, click to open the Tickler called 30 Day Consumer WSC Selection Reminder.

- a. A Message Tickler will open – Review the Consumer Record for the completed WSC Selection Form. If no WSC has been selected, select on behalf of the Consumer. Click **OK**.

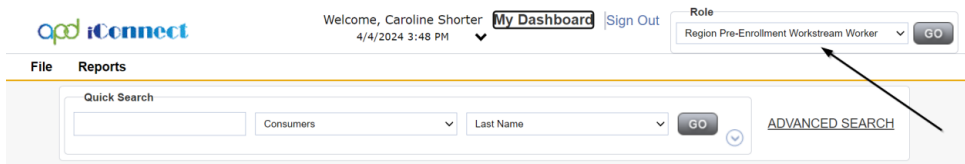


23. Hover over the arrow next to the Tickler to click **Complete**:

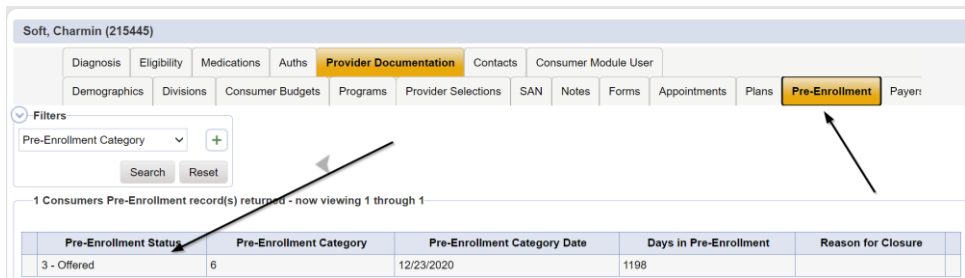


Consumer Accepts Waiver Offer

- 1. To accept the offer, the Consumer contacts the Region Office and indicates which Waiver Support Coordinator they would like to work with.
- 2. To begin, the Pre-Enrollment Support Coordinator will log into iConnect and set Role = Region Pre-Enrollment Workstream Worker:



- 3. Upon receiving the consumer’s acceptance, navigate to the consumer’s record and click on the **Pre-Enrollment** tab:



4. Click on the consumer's Pre-Enrollment detail record and update the Pre-Enrollment Status field = Waiver Offer Accepted:

File Word Merge

Pre-Enrollment

Notes

An asterisk (*) indicates a required field

Pre-Enrollment

Pre-Enrollment Category	4
Pre-Enrollment Category Date	04/05/2024
Pre-Enrollment Status	4 - Waiver Offer Accepted
Pre-Enrollment Status Date *	MM/DD/YYYY
Date Placed in Pre-Enrollment	03/22/2021
Days in Pre-Enrollment	1110

5. When finished, click **File > Save Pre-Enrollment** and **File > Close Pre-Enrollment**
6. User can find and update the consumer's Pre-Enrollment Record. Upon doing so, a Workflow Wizard will trigger with the three Ticklers:
 - a. Add WSC Selection Initial Assignment Note - *Assigned to PESC, Due Immediately*
 - b. Add WSC Selection - *Assigned to PESC, Due Immediately*
 - c. Waiver Enrollment Offer Accepted Note - *Assigned to PESC, Due Immediately*

opd iConnect

Welcome, Sue .Coordinator | Workflow Wizard

3/27/2018 11:22 AM

File

Workflow Wizard

Add WSC Selection Initial Assignment Note	▶
Add WSC Selection	▶
Waiver Enrollment Offer Accepted Note	▶

7. In the Workflow Wizard, hover over the arrow next to the Tickler called Add WSC Selection Initial Assignment Note and click **Open**
 - a. A new Consumer Note record will open. Update the following fields:
 - i. Division = APD
 - ii. Note Type = WSC Selection
 - iii. Note Subtype = Initial Assignment
 - iv. Status = Complete

- v. Attach the consumer's signed WSC Selection Form if submitted

8. When finished, click **File > Save Notes**

The screenshot shows the 'Notes Details' form. On the left is a 'Workflow Wizard' sidebar with buttons: 'Add WSC Selection Initial Assignment Note' (highlighted in blue), 'Add WSC Selection', and 'Waiver Enrollment Offer Accepted Note'. The main form has the following fields:

- Division: APD
- Note By: Coordinator, Sue
- Note Date: 03/27/2018
- Program/Provider: (empty)
- Note Type: WSC Selection
- Note Sub-Type: Initial Assignment
- Description: 3/27 - This Consumer has selected Sue Coordinator as her WSC.
- Status: Complete
- Date Completed: 03/27/2018

Two blue arrows point to the 'Note Type' and 'Status' dropdown menus.

9. Back in the Workflow Wizard, hover over the arrow next to the second Tickler called Add WSC Selection and click **Open**:

- a. A new Provider Selection record will open. In the new Provider Selections record, select the consumer's chosen WSC. If the Consumer has not selected a WSC, choose a WSC based on professional Judgment. To do so, update the following fields:
 - i. Provider = Selected WSC or Agency
 - ii. Referral Type = Waiver Support Coordinator
 - iii. Disposition = WSC-Selected
 - iv. Provider Worker = WSC

10. When finished, click **File > Save Provider**

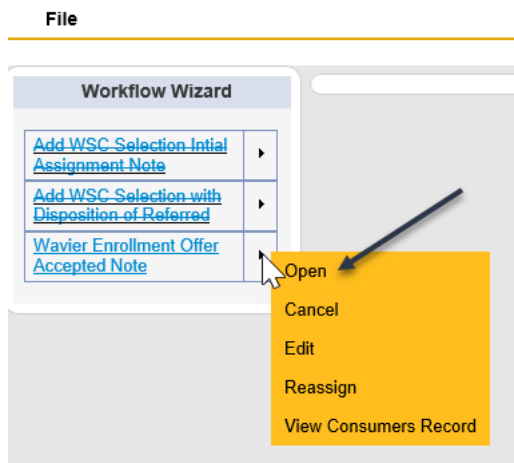
Workflow Wizard

- [Add WSC Selection Initial Assignment Note](#)
- [Add WSC Selection](#)
- [Waiver Enrollment Offer Accepted Note](#)

Form Fields:

- Division: APD
- Selected By: .Coordinator, Sue
- Selection Date: 03/27/2018
- Provider: WSC Agency1
- Referral Type: Waiver Support Coordinator
- Disposition: WSC - Selected
- Disposition Date: 03/27/2018
- Provider Worker: Tierney, Jacqueline
- WSC Transfer Effective Date:
- WSC Transfer End Date:
- Comments:

11. Upon saving the Provider Selection record, a Workflow Wizard will trigger with the following Ticklers. **Note that these Ticklers are not addressed until the next section, [Standard Waiver Enrollment](#):**
- Verify QSI Current - *Assigned to Clinical Workstream Lead*, Due Immediately
 - Verify Completion and get Consumer signature on the Waiver Eligibility Worksheet and save to a Note – *Assigned to WSC*, Due Immediately
 - Verify Medicaid Eligibility and Type - *Assigned to WSC*, Due Immediately
 - Create/Update Plan Add WSC Service - *Assigned to WSC*, Due Immediately
 - Verify Algorithm Amount from EZ iBudget Calculator - *Assigned to WSC*, Due Immediately
 - Send Waiver Enrollment Request - *Assigned to the Primary Worker who is the Pre-Enrollment Support Coordinator/Region Office Worker when the Consumer does NOT bypass the Pre-Enrollment. It is assigned to the Pre-Enrollment Workstream Lead when the consumer DOES bypass the Pre-Enrollment.*
12. Back in the Workflow Wizard, hover over the arrow next to the third Tickler called Waiver Enrollment Offer Accepted Note and click **Open**:



13. A new Consumer Note record will open. Update the following fields:

- Division = APD
- Note Type = Waiver Enrollment
- Note Subtype = Offer Response - Accepted
- Status = Complete
- Attach the consumer's Waiver Acceptance document by clicking **Add Attachment > Browse >** select the correct document and click **Upload**

14. When finished, click **File > Save Notes** and **File > Close Workflow Wizard**

The screenshot shows the 'Notes Details' form. The 'Workflow Wizard' menu is visible on the left. The form fields are as follows:

Notes Details	
Division *	APD
Note By *	LCoordinator, Sue
Note Date *	03/27/2018
Program/Provider	WSC Agency1
Note Type *	Waiver Enrollment
Note Sub-Type	Offer Response - Accepted
Description	
Note	3/27/18 - Consumer accepted Waiver Offer (see attached letter)
Status *	Complete
Date Completed	03/27/2018

Arrows point to the 'Note Type' and 'Status' fields.

15. Add the selected WSC as the Primary Worker on the consumer's APD Division record.

16. To do so, navigate to the consumer's record, click on the **Divisions** tab > open the existing APD Division record:

Soft, Charmin (215445)

Diagnosis | Eligibility | Medications | Auths | Provider Documentation | Contacts | Consumer Module User

Demographics | **Divisions** | Consumer Budgets | Programs | Provider Selections | SAN | Notes | Forms | Appointments | Plans | Pre-Enrollment | Payers

Filters

Disposition ▼ Not Equal To ▼ Closed ▼ AND ▼ ✕

Open Date ▼ Greater Than ▼ MM/DD/YYYY

Division ▼ +

Search Reset

1 Consumers Divisions record(s) returned - now viewing 1 through 1

Division	Disposition	Primary Worker	Secondary Worker	Open Date ▼	Close Date	LOS
APD	APD Eligible - PESC Assigned	Shorter, Caroline	Shorter, Caroline	12/22/2020		1199

17. In the APD Division record, update the following fields:

- Primary Worker = selected WSC
- Disposition = remains PESC Assigned. The disposition will be updated later by the State Office Enrollment worker when they receive the request for Waiver enrollment.

18. When finished, click **File > Save and Close Divisions**

File Word Merge

Division

Events

Track Disposition

An asterisk (*) indicates a required field

Events

Division * APD

Disposition * APD Eligible - PESC Assigned ▼

Disposition Date 04/04/2024

Open Date 12/22/2020

Data Entry Date 12/22/2020

Primary Worker * Shorter, Caroline [Lookup](#) [Clear](#) [Details](#)

Temporary Primary Worker ☐

Secondary Worker Shorter, Caroline [Lookup](#) [Clear](#) [Details](#)

Interested in ICF/IID ▼

Application Received Date * 12/16/2020

App Category at Time of

Standard Waiver Enrollment

- When the WSC Provider Record was saved, a Workflow Wizard was triggered with the following ticklers:

Assigned to Clinical Workstream Lead (Secondary Worker)

- Verify QSI Current - *Assigned to Clinical Workstream Lead, Due Immediately*

Assigned to WSC (Provider Worker)

- Verify Completion and get Consumer signature on the Waiver Eligibility Worksheet and save to a Note – *Assigned to WSC, Due Immediately*
- Verify Medicaid Eligibility and Type - *Assigned to WSC, Due Immediately*

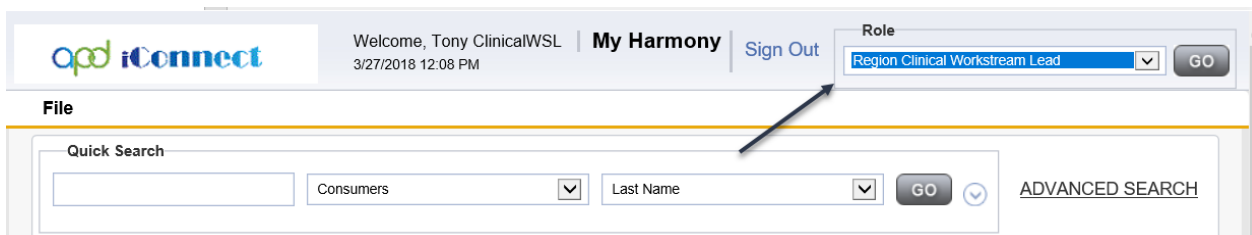
- d. Create/Update Plan Add WSC Service - *Assigned to WSC, Due Immediately*
- e. Verify Algorithm Amount from EZ iBudget Calculator - *Assigned to WSC, Due Immediately*

Assigned to Pre-Enrollment or Waiver Support Coordinator (Primary Worker Division)

- f. Send Waiver Enrollment Request - *Assigned to the Primary Worker who is the Pre-Enrollment Support Coordinator/Region Office Worker when the Consumer does NOT bypass the Pre-Enrollment. It is assigned to the Pre-Enrollment Workstream Lead when the consumer DOES bypass the Pre-Enrollment.*

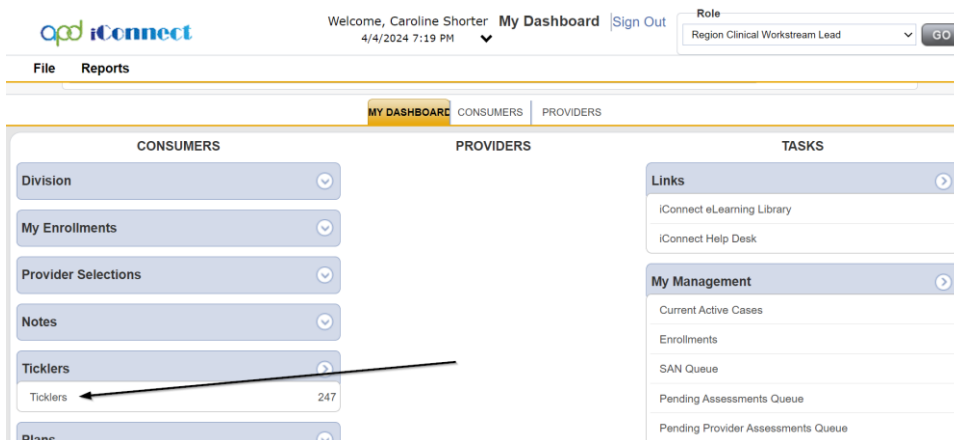
Assigned to Clinical Workstream Lead (Secondary Worker)

- 2. The Clinical Workstream Lead will log into iConnect and set Role = Region Clinical Workstream Lead:



The screenshot shows the iConnect login interface. At the top, there's a header with the iConnect logo, a welcome message 'Welcome, Tony ClinicalWSL', the date and time '3/27/2018 12:08 PM', and links for 'My Harmony' and 'Sign Out'. Below this is a 'Role' dropdown menu with 'Region Clinical Workstream Lead' selected. An arrow points to this dropdown. Below the header is a 'File' section with a 'Quick Search' bar containing a text input, a 'Consumers' dropdown, a 'Last Name' dropdown, a 'GO' button, and a link to 'ADVANCED SEARCH'.

- 3. The Clinical Workstream Lead will monitor their **My Dashboard** for new Ticklers related to Provider Selection.
- 4. Find the Consumers Section and scroll down to the Ticklers Panel. Click on the **Ticklers** Link to open the Tickler Queue:



The screenshot shows the iConnect 'My Dashboard' interface. At the top, there's a header with the iConnect logo, a welcome message 'Welcome, Caroline Shorter', the date and time '4/4/2024 7:19 PM', and links for 'My Dashboard' and 'Sign Out'. Below this is a 'Role' dropdown menu with 'Region Clinical Workstream Lead' selected. Below the header is a 'File' section with a 'Reports' link. The main content area is divided into three sections: 'CONSUMERS', 'PROVIDERS', and 'TASKS'. The 'CONSUMERS' section has a list of links: 'Division', 'My Enrollments', 'Provider Selections', 'Notes', 'Ticklers' (with a count of 247), and 'Plans'. An arrow points to the 'Ticklers' link. The 'PROVIDERS' section is empty. The 'TASKS' section has a 'Links' section with 'iConnect eLearning Library' and 'iConnect Help Desk', and a 'My Management' section with 'Current Active Cases', 'Enrollments', 'SAN Queue', 'Pending Assessments Queue', and 'Pending Provider Assessments Queue'.

- a. Use the multivariable search to narrow down the results in the Tickler Queue:

File

Filters

Status Equal To New AND

Last Name Equal To smith AND

iConnect ID

☐ Apply Alert Days Before Due

5 Ticklers record(s) returned - now viewing 1 through 5

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Verify QSI is Current	03/27/2018	03/27/2018		New	ClinicalWSL, Tony



Tip

When searching for a future Tickler, remember to clear the check box next to **Apply Alert Days Before Due** prior to clicking **Search**.

5. In the Tickler Queue, click to open the Tickler Called Verify QSI is Current. The consumer's Form List View Grid will open and display all Forms saved to the consumer's record.
 - a. Click to open the Form called Questionnaire Situational Information (QSI)

File Tools

Workflow Wizard

Verify QSI is Current

Filters

Form

5 Forms record(s) returned - now viewing 1 through 5

Form	Review	Review Date	Worker	Division	Status
Questionnaire Situational Information	Initial	03/27/2018	ClinicalWSL, Tony	APD	Complete
EZ iBudget Calculator	Initial	03/26/2018	State, Worker	APD	Draft
HCBS Waiver Eligibility Worksheet	Initial	03/23/2018	Tierney, Jacqueline	APD	Draft
Support Plan Short Form	Initial	03/23/2018	Tierney, Jacqueline	APD	Draft
Family Risk Factors	Initial	03/23/2018	Tierney, Jacqueline	APD	Draft

<< First < Previous Retrieve 15 Records at a time Next > Last >>

- b. Review the Review Date and Approved Date in the form header of the QSI to verify if it is current. Then click **File > Close Forms**

File Reports Word Merge

Questionnaire Situational Information

Consumer Forms

Review * Initial Worker * ClinicalWSL, Tony [Details](#)

Review Date * 03/27/2018 Status * Complete

Division * APD Program

Approved By ClinicalWSL, Tony [Details](#) Approved Date 03/27/2018

FQSI ADMINISTRATOR INFORMATION

1. FQSI Administrator (i.e. the name of the person administering this questionnaire) Behavior, Area

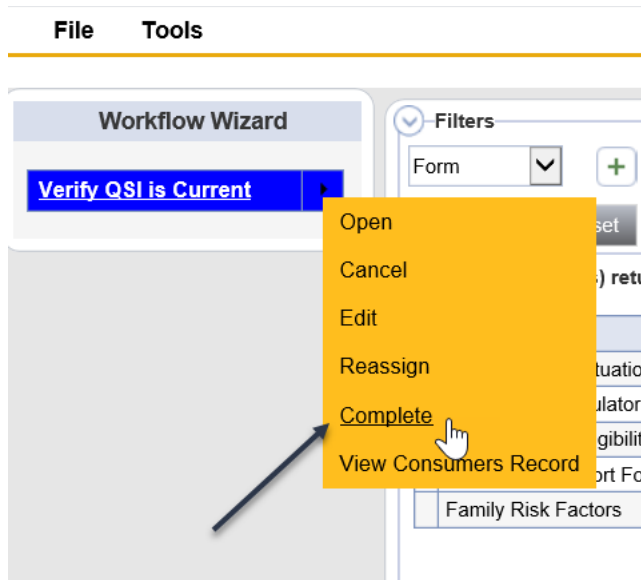
2. Initiation Date (Select the date in which the FSIQ is initiated) 03/06/2018

3. Administration Date (Select the date in which the FSIQ is completed) 03/20/2018

FQSI Administrator's ID#: Clearly write the five-digit FSIQ administrator number of the person completing this form.

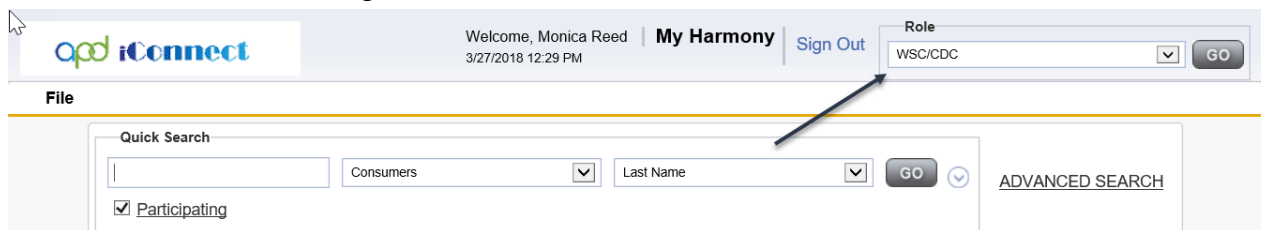
- Back in the Workflow Wizard window, hover over the arrow next to the Tickler to click **Complete**.

- Click **File > Close Workflow Wizard**



Assigned to WSC (Provider Worker)

- To finish the consumer's Waiver Enrollment, the assigned Waiver Support Coordinator will log into iConnect and set Role = WSC/CDC



- The assigned Waiver Support Coordinator will monitor their **My Dashboard** for new Ticklers. Find the Consumers Section and scroll down to the Ticklers Panel. Click on the **Ticklers** Link to open the Tickler Queue:

Ticklers

Ticklers49

Appointments

Scheduled4

Authorizations

Approved11

Terminated3

a. Use the multivariable search to narrow down the results in the Tickler Queue:

File

Filters

Status

Equal To

New

AND

Last Name

Equal To

smith

AND

iConnect ID

+

☐ Apply Alert Days Before Due

SearchReset

4 Ticklers record(s) returned - now viewing 1 through 4

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Verify Completion and get consumer signature on the Waiver Eligibility Worksheet and Save to a Note	06/04/2018	06/04/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Create/Update Plan and WSC Service	06/04/2018	06/04/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Verify Allocation Algorithm Amount from EZ iBudget Calculator	06/04/2018	06/04/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Verify Medicaid Eligibility and Type	06/04/2018	06/04/2018		New	Tierney, Jacqueline

<< First

< Previous

Retrieve 15

Records at a time

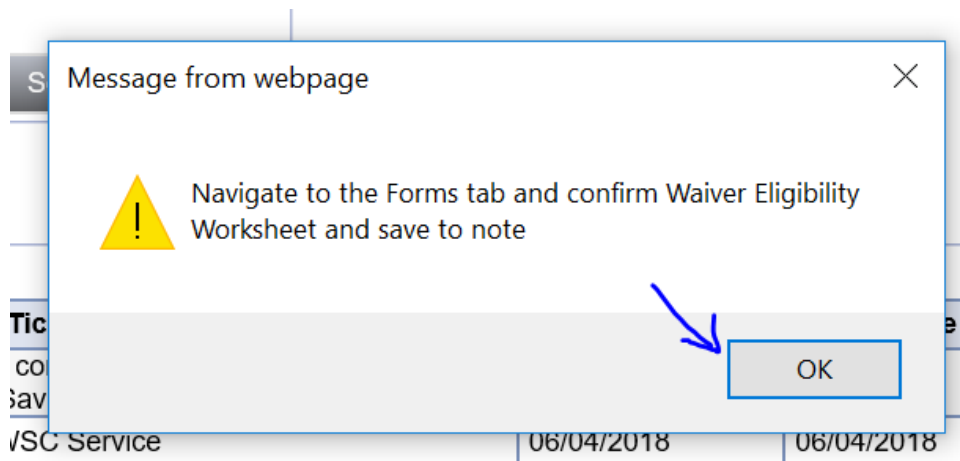
Next >

Last >>



Tip
When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.

10. In the Tickler Queue, click to open the Tickler called Verify Completion and get Consumer signature on the Waiver Eligibility Worksheet and save to a Note.
- a. A Message Tickler will open – Navigate to the Forms tab and confirm Waiver Eligibility Worksheet and save to Note. Click **OK**.



11. To complete the Tickler, navigate to the consumer's record and click on the **Forms** tab. Confirm that the Consumer has a completed HCBS Waiver Eligibility Worksheet in Complete Status

Soft, Charmin (215445)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes **Forms** Appointments Plans Pre-Enrollment Payers

Filters
Form

5 Forms record(s) returned - now viewing 1 through 5

Form	Review	Review Date	Worker	Division	Status
Questionnaire Situational Information	Initial	03/27/2018	ClinicalWSL, Tony	APD	Complete
EZ Budget Calculator	Initial	03/26/2018	State, Worker	APD	Draft
HCBS Waiver Eligibility Worksheet	Initial	03/23/2018	Reed, Monica	APD	Complete
Support Plan Short Form	Initial	03/23/2018	Reed, Monica	APD	Draft
Family Risk Factors	Initial	03/23/2018	Reed, Monica	APD	Draft

<< First < Previous Retrieve 15 Records at a time Next > Last >>

12. With the open HCBS Waiver Eligibility Worksheet form displays, select Word Merge > HCBS Waiver Eligibility Worksheet. Print the document and get the necessary signatures.

apd iConnect

John Sheppard
Last Updated by j buck
at 9/14/2018 11:10:43 AM

Forms

File Reports Word Merge

HCBS Waiver Eligibility HCBS Waiver Eligibility Work Sheet

Consumer Forms

Review * Initial Worker * Buck, Jennifer Details

Review Date * 09/14/2018 Status * Complete

Division * APD Provider/Program * WSC Agency1 Details

Approved By Buck, Jennifer Approved Date 09/14/2018

HCBS WAIVER ELIGIBILITY WORKSHEET

Client First Name: John

Client Last Name: Sheppard

*Social Security Number: XXX-XX-6355

Region: NORTHWEST

Support Plan Effective Date: 09/01/2018

13. Then, after obtaining the necessary signatures, scan the Worksheet. Attach the signed HCBS Waiver Eligibility Worksheet to the consumer's record. To do so, click **Notes > File > Add Note**. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Waiver Enrollment
 - c. Note Subtype = Signed Waiver Eligibility Worksheet
 - d. Status = Complete
14. When finished, click **File > Save and Close Note**
15. Navigate back to the Tickler Queue and click **Complete** next to the Tickler
16. In the Tickler Queue, click to open the Tickler called Verify Medicaid Eligibility Type.
17. A Message Tickler will open – Navigate to the Eligibility tab to confirm Medicaid Eligibility. Click **OK**.
 - a. Eligibility data is critical in determining whether a consumer is eligible for one or more programs and, once enrolled, monitoring that they remain eligible. Consumers can, and often do, gain and lose Medicaid eligibility as their income, living situations, and other circumstances change. iConnect automatically queries, on an ongoing basis, the state eligibility system for each consumer's eligibility status. That data is posted into the consumer's Payer and eligibility records.
 - b. The WSC can also log in to the state eligibility website and check eligibility manually. In these cases, with correct Role access, the user can manually add the Payer and Eligibility Record in iConnect.
18. From the consumer's record, click on the **Eligibility** tab to confirm if the Consumer is Medicaid Eligible based on the records that were added automatically from the 270/271 eligibility interface with FMMIS.

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER UTILITIES REPORT

Reed, Test (10002)

Diagnosis **Eligibility** Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans

Filters

Payer Name

5 Eligibility record(s) returned - now viewing 1 through 5

Payer Name	Index Code	Subsubject Code	Eligibility Type	Start Date	End Date ▼	Status	
Medicaid	Statewide	Medicaid	Waiver	03/01/2019	03/31/2026	Active	3/6/2019
Medicaid	Statewide	Medicaid	Waiver	01/01/2019	01/31/2019	Active	1/22/2019

19. If the Medicaid Eligibility is checked by logging into the state website, the Payer and Eligibility records can be manually added in iConnect.

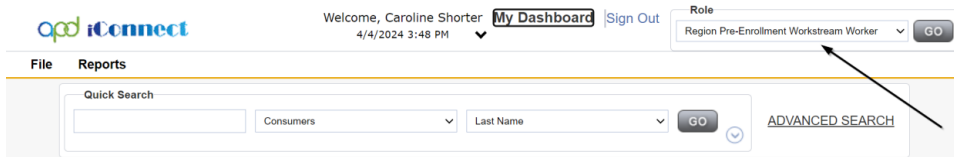
Chapter 6 | Declined, Return Mailed, or Nonresponsive Waiver Offers

Introduction

Upon being notified of available Waiver Funds, the State must distribute the funds amongst eligible Consumers. Many times, those Consumers are not interested and/or contact information has not been updated. This results in returned offer letters, a lack of a response from the Consumer and in some cases, the Consumer simply declines the offer presented. In this Chapter, the method in which to document said scenario(s) is outlined.

Consumer Declines Waiver Offer

1. The Consumer may contact the Pre-Enrollment Support Coordinator to decline Waiver Offer. They may want to be removed from the Pre-Enrollment or may be interested in the Waiver offer but not in need of services and will remain on the Pre-Enrollment
2. To begin, the Pre-Enrollment Support Coordinator will log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.



The screenshot shows the iConnect system interface. At the top, there is a header with the iConnect logo, a welcome message 'Welcome, Caroline Shorter', the date and time '4/4/2024 3:48 PM', and links for 'My Dashboard' and 'Sign Out'. Below this, there is a 'Role' dropdown menu currently set to 'Region Pre-Enrollment Workstream Worker' with a 'GO' button next to it. An arrow points to this 'GO' button. Below the header, there is a navigation bar with 'File' and 'Reports' tabs. Under the 'File' tab, there is a 'Quick Search' section with a text input field, a dropdown menu set to 'Consumers', and a 'Last Name' dropdown menu. There is a 'GO' button and a checkmark icon next to the search fields. To the right of the search fields is a link for 'ADVANCED SEARCH'.

3. To document the consumer's response to the offer, navigate to the consumer's record and click **Notes > File > Add Note**
 - a. In the new Note record, update the following fields:
 - i. Division = APD
 - ii. Note Type = Waiver Enrollment
 - iii. Note Subtype = Offer Response - Declined
 - iv. Note = Explain consumer's reason for declining
 - v. Status = Complete
 - b. When finished, click **File > Save and Close Note**

File Tools

Notes Details

Division *	APD ▼
Note By *	WLCoordinator, Sue ▼
Note Date *	04/09/2018
Program/Provider	▼
Note Type *	Waiver Enrollment ▼*
Note Sub-Type	Offer Response – Declined ▼
Description	
Note	Consumer declined Waiver offer for X reason
Status *	Complete ▼

4. If the Consumer has elected to remain on the Pre-Enrollment, navigate to the consumer's record and click on the **Pre-Enrollment** tab > open the relevant Pre-Enrollment record.
 - a. Update the following fields:
 - i. Status = Waiting
 - b. When finished, click **File > Save and Close Pre-Enrollment**

File Word Merge

Pre-Enrollment

Notes

Pre-Enrollment Category	1 ▼
Pre-Enrollment Category Date	04/03/2018
Pre-Enrollment Status	2 - Pre-Enrollment ▼
Pre-Enrollment Status Date *	03/29/2018
Date Placed in Pre-Enrollment	03/23/2018
Days in Pre-Enrollment	17
Reason for Closure	▼
Closure Date	04/05/2018

5. The PESC will maintain ongoing case management efforts throughout the duration of the Consumer being on the Pre-Enrollment
6. If the Consumer has elected to be removed from the Pre-Enrollment, navigate to the consumer's record and click on the **Pre-Enrollment** tab > open the relevant Pre-Enrollment record
 - a. Update the following fields:
 - i. Status = Removed

- ii. Reason = Record reason for removal
- b. When finished, click **File > Save and Close Pre-Enrollment**

Consumer Does Not Respond to Waiver Offer

1. After the initial Waiver Offer Letter has been sent to Consumers, they have 15 days to respond indicating if they would like to accept/decline. To identify Consumers who have not replied to the offer, the Region Office Worker or Pre-Enrollment Support Coordinator will log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.
2. Navigate to the **Reports** chapter and run the Waiver Offer No Response Report as often as needed
3. The Pre-Enrollment Support Coordinator (PESC) will attempt to contact each Consumer who did not respond to their Waiver Offer Letter by phone call. Track each Consumer contact attempt in a Note record.
 - a. To do so, navigate to the consumer's record and click on **Notes > File > Add Note**.

Note Date	Note By	Note Type	Note Sub-Type
04/09/2018	WLCordinator, Sue	Waiver Enrollment	Offer Response – Declined
04/09/2018	Reed, Monica	IFS Request	Verification of Available IFS Funds

- b. In the new Note record, update the following fields:
 - i. Division = APD

- ii. Note Type = Waiver Enrollment
- iii. Note Subtype = 1st Attempt OR 2nd Attempt OR 3rd Attempt
- iv. Status = Complete

c. When finished, click **File > Save and Close Notes**

The screenshot shows a 'Notes Details' form with the following fields:

- Division ***: APD
- Note By ***: WLCordinator, Sue
- Note Date ***: 04/10/2018
- Program/Provider**: APD Waiver (with a 'Details' link)
- Note Type ***: Waiver Enrollment (highlighted by a blue arrow)
- Note Sub-Type**: 1st Attempt
- Description**: (empty text area)
- Note**: Attempted to contact the Consumer by phone on 4/10. Left a voicemail with call back instructions
- Status ***: Complete

4. There are three possible outcomes:
 - a. If PESCC Successfully Contacts Consumer and Consumer Accepts Waiver Offer, proceed to [Chapter on Standard APD Enrollment](#)
 - b. If PESCC Successfully Contacts the Consumer and Consumer Declines the Waiver Offer, proceed to [Chapter on Declined Return Mailed or Non Responsive Waiver Offers - Consumer Declines Waiver Offer](#)
 - c. If PESCC is Unsuccessful in Contacting Consumer After Three Attempts, proceed below.
5. If the PESCC is unsuccessful in contacting the Consumer after three attempts, decide if the consumers should be removed from the Pre-Enrollment and if their case should be closed.
6. To remove the Consumer from the Pre-Enrollment, navigate to the consumer's record, click on the **Pre-Enrollment** tab > open the relevant Pre-Enrollment record.
 - a. Update the following fields:
 - i. Pre-Enrollment Status = Removed
 - ii. Reason for Closure = update as appropriate
 - b. When finished, click **File > Save and Close Pre-Enrollment**

File Word Merge

Pre-Enrollment

Notes

Pre-Enrollment

Pre-Enrollment Category 1

Pre-Enrollment Category Date 04/03/2018

Pre-Enrollment Status 6 - Removed

Pre-Enrollment Status Date 03/29/2018

Date Placed in Pre-Enrollment 03/23/2018

Days in Pre-Enrollment 17

Reason for Closure Case Closed - Loss of Contact

Closure Date 04/05/2018

7. If the PESCC decides that the consumer's case is to be closed, proceed to Case Closure.

Waiver Offer Letter Returned in the Mail

1. If a Waiver Offer Letter was mailed to the Consumer but returned to APD by the post office, the Region Office worker will record this on the consumer's record
2. To begin, log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.
3. Navigate to the consumer's record and click on the **Note > File > Add Note**.

File Tools Reports Ticklers View Consumer Incidents

Add New Add Notes People Search

Add Notes

Print

MY DASHBOARD **CONSUMERS** PROVIDERS CLAIMS SC-

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module U

Demographics Divisions Programs Provider Selections **Notes** Forms Appointments Plans

Filters

Note Date

Search Reset


57 Notes record(s) returned - now viewing 1 through 15

Note Date	Note By	Note Type	Note Sub-Type
04/09/2018	WLCordinator, Sue	Waiver Enrollment	Offer Response - Declined

- a. In the new Note record, update the following fields:
 - i. Division = APD
 - ii. Note Type = Waiver Enrollment
 - iii. Note Subtype = Returned Mail
 - iv. Status = Pending
 - v. Route the Note to the Pre-Enrollment Support Coordinator by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search

results, click on the matching Worker Name to route the note to that recipient.

b. When finished, click **File > Save and Close Notes**



Marianne Smith
4/11/2018 9:37 AM

Notes

File

Tools

Notes Details

Division *

APD

Note By *

State, Worker

Note Date *

04/11/2018

Program/Provider

Note Type *

Waiver Enrollment

Note Sub-Type

Returned Mail

Description


Note

Waiver offer letter was returned in the mail to APD on 4/11

Status *

Pending

4. The PESC monitor their **My Dashboard** for Notes related to Waiver Enrollment issues. To begin, log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.



Welcome, Caroline Shorter
4/4/2024 3:48 PM

My Dashboard

Sign Out

Role
Region Pre-Enrollment Workstream Worker

GO

File

Reports

Quick Search

Consumers

Last Name

GO

ADVANCED SEARCH

5. On the **My Dashboard**, identify the Consumer panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Pending Notes

Notes	
Complete	4
Draft	1
I'm Interested	1
Pending	1

Alert Notes	
Unread Alert Notes	0

Ticklers	
Ticklers	52

6. In the Pending Notes queue, open the Note record with Note Type = Waiver Enrollment and Note Subtype = Returned Mail:
 - a. Review the details of the returned Waiver Offer Letter
 - b. Navigate to the consumer's record to obtain the Telephone Number
7. Contact the Consumer to obtain the updated address. Record each contact attempt in a Consumer Note record. To do so, navigate to the consumer's record, click on **Notes > File > Add Note**:
 - a. In the new Note record, update the following fields:
 - i. Division = APD
 - ii. Note Type = Consumer Contact
 - iii. Note Subtype = Telephone
 - iv. Status = Complete
 - b. When finished, click **File > Save and Close Notes**

apd iConnect Marianne Smith
4/11/2018 9:54 AM **Notes**

File Tools

Notes Details

Division *	APD ▼
Note By *	WLCoordinator, Sue ▼
Note Date *	04/11/2018
Program/Provider	▼
Note Type *	Consumer Contact ▼
Note Sub-Type	Telephone ▼
Description	<div></div>
Note	<div>-Attempted to contact Consumer on 4/11 to obtain updated address</div>
Status *	Complete ▼

- i. If All Research Efforts Exhausted and No New Address Found, proceed to the [Chapter on Case Closure](#).
- ii. If New Address Found, proceed below

8. If a new address is obtained, navigate to the consumer's record and click on **Demographics > Edit > Edit Demographics > Addresses > click** on the outdated address record

at 4/9/2018 1:35:28 PM

File Edit Ticklers View Consumer Incidents Word Merge

Edit Demographics

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module Use

Demographics Divisions Programs Provider Selections Notes Forms Appointments Plans

Demographics

iConnect ID	10043	Medicaid ID	
Salutation	Mrs.	Age	
Last Name	Smith	Race	

File Tools Reports

Demographics

Addresses

Contact Names

Contact Phones

Contact Emails

Contact Identifiers

Basic Demographics

Salutation	Mrs. ▼
Last Name *	Smith
First Name *	Marianne
Consumer Photo	
Middle Name	
Suffix	Sr. ▼
Alias	
Title	
Date of Birth *	03/04/2004
Age	14.1

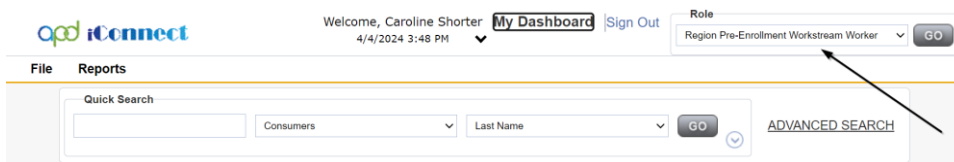
9. Update the address as appropriate and click **File > Save and Close Address**.

10. From the consumer's Demographics record, click on the **Word Merge** menu > iBudget Waiver Offer Enrollment Letter to generate the letter

- a. Click **Open Document** to edit the contents of the Word Merge letter. Edit the document in Microsoft Word. Print the document to mail to the Consumer

- b. Save the updated letter to your computer. Back in iConnect, click **Upload and Save to Note**. In the new Note Record, update the following fields:
 1. Division = APD
 2. Note Type = Waiver Enrollment
 3. Note Subtype = Second Offer
 4. Status = Complete
- c. When finished, click **File > Save and Close Note**

11. If the SECOND Waiver Offer Letter was mailed to the Consumer but returned to APD by the post office, record this on the consumer's record. To begin, log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.

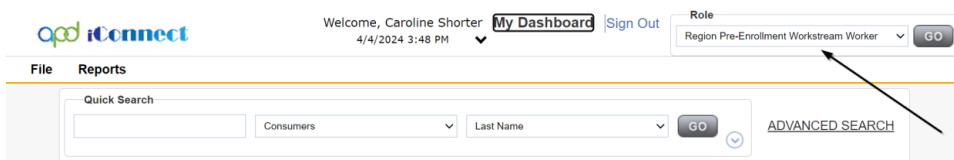


The screenshot shows the iConnect dashboard. At the top, it says 'Welcome, Caroline Shorter' and '4/4/2024 3:48 PM'. There are links for 'My Dashboard' and 'Sign Out'. A dropdown menu for 'Role' is open, showing 'Region Pre-Enrollment Workstream Worker' selected. Below this, there is a 'Quick Search' section with a text input, a 'Consumers' dropdown, a 'Last Name' dropdown, and a 'GO' button. An 'ADVANCED SEARCH' link is also visible. An arrow points to the 'GO' button in the role dropdown.

12. Navigate to the consumer's record and click on **Notes > File > Add Note**:

- a. In the new Note record, update the following fields:
 - i. Division = APD
 - ii. Note Type = Waiver Enrollment
 - iii. Note Subtype = Returned Mail
 - iv. Status = Pending
 - v. Route the Note to the Pre-Enrollment Support Coordinator by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
- b. When finished, click **File > Save and Close Notes**

13. The PESC monitor their **My Dashboard** for Notes related to Waiver Enrollment issues. To begin, log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.



This screenshot is identical to the one above, showing the iConnect dashboard with the 'Role' dropdown set to 'Region Pre-Enrollment Workstream Worker' and an arrow pointing to the 'GO' button.

14. On the **My Dashboard**, identify the Consumer panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Pending Notes

Notes	
Complete	4
Draft	1
I'm Interested	1
Pending	1

Alert Notes	
Unread Alert Notes	0

Ticklers	
Ticklers	52

15. In the Pending Notes queue, open the Note record with Note Type = Waiver Enrollment and Note Subtype = Returned Mail:

16. Remove the Consumer from the Pre-Enrollment. To do so, navigate to the consumer's record and click on the **Pre-Enrollment** tab > open the relevant Pre-Enrollment record

- a. Update the following fields:
 - i. Pre-Enrollment Status = Removed
 - ii. Reason for Closure = Update as appropriate
- b. When finished, click **File > Save and Close Pre-Enrollment**

File Word Merge

Pre-Enrollment	Pre-Enrollment
Notes	Pre-Enrollment Category: 1
	Pre-Enrollment Category Date: 04/03/2018
	Pre-Enrollment Status: 6 - Removed
	Pre-Enrollment Status Date: 03/29/2018
	Date Placed in Pre-Enrollment: 03/23/2018
	Days in Pre-Enrollment: 17
	Reason for Closure: Case Closed - Loss of Contact
	Closure Date: 04/05/2018

- i. If the consumer's Case is to be Closed, Proceed to the [Chapter on Case Closure](#).

Chapter 7 | Level of Care

Introduction

Level of Care assessments are completed by a Waiver Support Coordinator, to assist in determining if an individual meets eligibility requirements and to what level of service is required to accommodate the consumer's needs. The Support Coordinator will utilize the Waiver Eligibility Worksheet to document the LOC determinations.

Complete Waiver Eligibility Worksheet

37. To begin, the Region Staff member will log into iConnect and set Role = WSC/CDC. Click **Go**.
38. The consumer's Initial HCBS Waiver Eligibility Worksheet will be available by navigating to the consumer's record and clicking on the **Forms** tab.

MY DASHBOARD **CONSUMERS** PROVIDERS INCIDENTS CLAIMS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module Use

Demographics Divisions Programs Provider Selections Notes **Forms** Appointments Plans

Filters
Form

5 Forms record(s) returned - now viewing 1 through 5

Form	Review	Review Date	
Questionnaire Situational Information	Initial	03/27/2018	Clinic
EZ iBudget Calculator	Initial	03/26/2018	State
HCBS Waiver Eligibility Worksheet	Initial	03/23/2018	Reed
Support Plan Short Form	Initial	03/23/2018	Reed
Family Risk Factors	Initial	03/23/2018	Reed

<< First < Previous Retrieve 15 Records at a time Next > Last >>

39. To add a new form, annually, click **Forms > File > Add Form** and in the Please Select Type field select the **HCBS Waiver Eligibility Worksheet**

qcd iConnect

Marianne Smith | **Forms**

4/3/2018 9:33 AM

Please Select Type:

- Central Record Transfer Form
- Crisis Identification Tool
- Critical Incident Preliminary Alert Notification
- Daily Attendance Log
- Demographic Expansion Fields
- DEO Wage Data Assessment
- DOR Wage Data Assessment
- EZ iBudget Calculator
- Family Risk Factors
- Functional Behavioral Assessment
- General Local Review Committee Minutes
- HCBS Waiver Eligibility Worksheet
- Local Review Committee Programs Review
- LRC BASP Review and Approval
- LRC Chair Behavior Analysis Services Eligibility
- Medical Case Manager Report
- Medication Destruction Record
- Medication Error Report
- Nursing Health Assessment

Consumer Forms

Review *

Review Date *

Division *

Approved By

Worker * Regional, Jim

Status * Draft

Program

Approved Date

40. In the new HCBS Waiver Eligibility Worksheet, complete all relevant fields

41. Then, update the fields in the header:

- a. Review = Annual
- b. Division = APD
- c. Status = Complete

42. Print the form for signature

43. When finished, click **Save and Close Forms**

The screenshot shows a web-based form titled "HCBS WAIVER ELIGIBILITY WORKSHEET". At the top, there is a "File" menu and a "Please Select Type:" dropdown set to "HCBS Waiver Eligibility Worksheet". Below this is a "Consumer Forms" section with two columns of fields. The left column contains: "Review *" (dropdown: Annual), "Review Date *" (calendar: 04/03/2018), "Division *" (dropdown: APD), and "Approved By" (text: Regional, Jim). The right column contains: "Worker *" (text: Regional, Jim), "Status *" (dropdown: Complete), "Program" (dropdown: APD Waiver), and "Approved Date" (calendar: 04/03/2018). Below the "Consumer Forms" section is a blue header bar with the text "HCBS WAIVER ELIGIBILITY WORKSHEET". Underneath is a form with fields for "Client First Name:" (Marianne), "Client Last Name:" (Smith), "*Social Security Number:" (XXX-XX-4005), "Region:" (CENTRAL), and "Support Plan Effective Date:" (04/03/2018). At the bottom, there is a green bar with the text "LEVEL OF CARE ELIGIBILITY" and a grey bar with the text "The individual is an APD client with a Developmental Disability who meets one of the following criteria and is eligible to receive services provided in an ICF/DD."

44. After obtaining the necessary signatures, attach the signed HCBS Waiver Eligibility Worksheet to the consumer's record. To do so, navigate to the consumer's record and click on **Notes > File > Add Note**:

45. In the new Note record, update the following fields:

- i. Division = APD
- ii. Note Type = Waiver Enrollment
- iii. Note Subtype = Signed Waiver Eligibility Worksheet
- iv. Status = Complete

46. From the **File** menu > select **Save and Close Notes**.

Chapter 8 | QSI Assessment

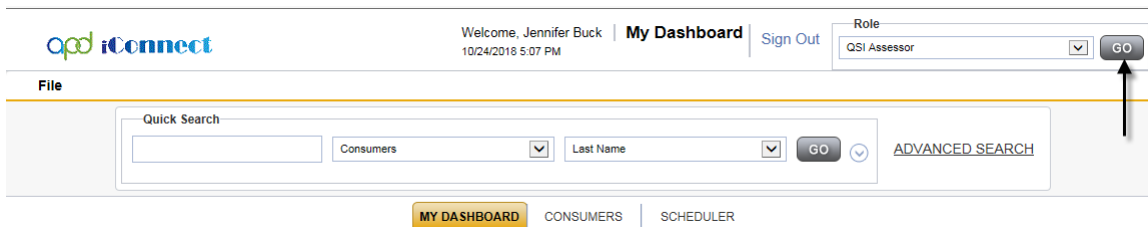
Introduction

The chapter focuses on the process of scheduling and conducting the QSI Assessment. The Clinical Workstream Lead will assign a QSI Assessor who will schedule and conduct the QSI for a Consumer. The QSI Assessor has the option to complete the QSI Assessment on a paper form while in-person with the Consumer and then transpose the consumer's responses into the QSI Assessment Form in iConnect. Alternatively, the Assessor can use Mobile Assessments to complete the QSI online while in person with the Consumer.

After completing the QSI Assessment, the QSI Assessor may need to obtain supplementary documentation from the Consumer. The QSI Assessor will attach this documentation to the consumer's record via Note records. After finalizing the QSI, the QSI Assessor will notify the assigned Pre-Enrollment Support Coordinator or Waiver Support Coordinator the QSI is complete via a Note in iConnect.

Scheduling the QSI

1. After the Consumer was deemed APD Eligible, the Clinical Workstream Lead reassigned a Tickler called Assign Initial QSI to the QSI Assessor.
2. The QSI Assessor will log into iConnect to pick up the reassigned Tickler. Upon logging in, change your Role = QSI Assessor and click **Go**:



The screenshot displays the iConnect application interface. At the top, the 'qpd iConnect' logo is on the left, and the user's name 'Welcome, Jennifer Buck' and the date '10/24/2016 5:07 PM' are in the center. To the right of the welcome message are links for 'My Dashboard' and 'Sign Out'. On the far right, there is a 'Role' dropdown menu currently set to 'QSI Assessor' and a 'GO' button. An arrow points to the 'GO' button. Below the header is a 'File' section containing a 'Quick Search' area with input fields for 'Consumers' and 'Last Name', each with a dropdown arrow, and a 'GO' button. To the right of the search area is a link for 'ADVANCED SEARCH'. At the bottom of the page, there are three tabs: 'MY DASHBOARD' (highlighted in yellow), 'CONSUMERS', and 'SCHEDULER'.

3. The Assessor will monitor their **My Dashboard** for Ticklers related to the initial QSI. To do so, navigate to the **My Dashboard** and find the Consumers section. Scroll down to the Ticklers panel and click into the linked number of outstanding Ticklers to access the Tickler Queue:

Notes

Draft

1

I'm Not Interested

1

Alert Notes

Unread Alert Notes

0

Ticklers

Ticklers

119

Plans

Approved

1

Draft

1

4. From here, use the multi variable search to find the Assign Initial QSI Tickler and click **Search**:

File

Filters

Status

Equal To

New

AND

iConnect ID

+

☒ Apply Alert Days Before Due

Search

Reset

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Lever, Freddy	10025	Assign Initial QSI	12/17/2017	12/17/2017		New	Assessor, George
Sample, Person	10006	Assign Initial QSI	03/15/2018	03/15/2018		New	Assessor, George

<< First

< Previous

Retrieve 15 Records at a time

Next >

Last >>



Tip
When searching for a future Tickler, remember to clear the check box next to **Apply Alert Days Before Due** prior to clicking **Search**.

5. In the search results, hover over the arrow next to the Assign Initial QSI Tickler and click **View consumer's Record**:

Slater, Urew	10049	Assign Initial QSI	02/08/2018	02/08/2018		New	Tr	Cancel
Smith, Marianne	10043	Assign Initial QSI	03/26/2018	03/26/2018		New	Tr	Reassign
Tester, John	10033	Assign Initial QSI	02/12/2018	02/12/2018		New	Tr	View Consumers Record
Tester, John	10033	view and Document Health and Safety Checklist for Completion	02/13/2018	02/13/2018		New	Tr	
Tester, John	10033	view and Document Health and Safety Checklist for Completion	02/13/2018	02/13/2018		New	Tr	

6. Review the Forms and collateral documentation on the consumer's record by clicking on the **Forms** and the **Notes** tabs:

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module U
Demographics Divisions Programs Provider Selections Notes **Forms** Appointments Plans

Filters
Form

3 Forms record(s) returned - now viewing 1 through 3

Form	Review	Review Date	
HCBS Waiver Eligibility Worksheet	Initial	03/23/2018	Tie
Support Plan Short Form	Initial	03/23/2018	Tie
Family Risk Factors	Initial	03/23/2018	Tie

<< First < Previous Retrieve 15 Records at a time Next > Last >>

7. In order to schedule the QSI Assessment, the Assessor must contact the Consumer via telephone or email to schedule an appointment during which the assessment can be completed
8. Record each attempt to contact the Consumer in a Note record. From the consumer's record, click on **Notes > File > Add Note**.
9. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = QSI
 - c. Note Subtype = Consumer Contact - Telephone
 - d. Notes = Enter details of the contact attempt. Multiple attempts will be documented in the same note. The Assessor can use the Append Text Note option to enter each contact attempt on the same note.
 - e. Status = Pending. The note will remain in an editable/Pending status so it can be updated with each contact attempt. When the appointment is scheduled, the status of this note can be change to Complete.
10. When finished, click **File > Save and Close Note**

qcd iConnect John Sheppard | Notes
Last Updated by j buck at 8/10/2018 4:32:59 PM

File Tools Reports

Notes

Notes Details

Division * APD ▾

Note By * Buck, Jennifer

Note Date * 08/10/2018

Program/Provider ▾

Note Type * QSI ▾*

Note Sub-Type QSI Consumer Contact Telephone ▾

Description Word Merge Template ▾

On 11/12/2018 at 3:17 PM, Jennifer Buck wrote: additional contact attempt notes added

Note

New Text
another contact attempt is made

Append Text to Note

Status * Pending ▾

Date Completed

11. After selecting a date and time for the QSI Assessment appointment, navigate to the consumer's record and click on the **Appointments** tab > **File > Add Appointment**:

qcd iConnect Martin Kastner Appointments Sign Out Role
Last Updated by sylvia.baer@apdcares.org at 3/13/2024 9:48:57 AM Region Clinical Workstream Worker ▾

File Ticklers

Add New Demographics Search
Add Appointment
Spell Check
Print

Quick Search
Consumers ▾ Last Name ▾ GO ▾ ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS

Kastner, Martin (209730)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User
Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms **Appointments** Plans Pre-Enrollment Pay

View Style
List View Monthly View
Weekly View Daily View

Filters
Status ▾ Not Equal To ▾ Draft ▾ AND ▾
Start Date ▾ +
Search Reset

6 Consumers Appointments record(s) returned - now viewing 1 through 6

Start Date	Start Time	End Time	Type	Subject	Status
11/08/2022	9:24:00 AM	10:00:00 AM	Crisis Committee		Pending

12. In the new Appointment record, update the following fields:

- Division = APD
- Start Date
- Start Time
- End Date
- End Time
- Appointment Type = QSI
- Status = Scheduled
- Priority = High (only if QSI is high priority circumstance)

13. When finished, click **File > Save Appointment**

File

Appointment Detail

Division	APD
Program	
Start Date *	03/28/2018
Start Time	04:00 PM
End Date	03/28/2018
End Time	05:00 PM
Travel Time	01:00
Preparation Time	01:00
Type	QSI
Sub Type	
Subject	QSI Appointment
Appointment Summary	<div>500 characters remaining</div>
Additional Information (Private)	<div>500 characters remaining</div>
Reason	
Location	Consumers Home
Status *	Scheduled
High Priority	<input type="checkbox"/>

14. Upon saving the new Appointment record, the Appointment record will refresh and display the Add Attendee tab.

- Click **Add Attendee**
- Scroll to find your Worker record. Select the record and click **Add**. Note that you can use the CTRL key to select multiple workers before clicking **Add**
- When finished, click **File > Save and Close Attendee**
- The Appointment will now display in the Attendee's My Dashboard
- Repeat the process to add all Attendees to the Appointment record

Completing the QSI

- The Assessor will be able to track assigned QSIs using the Assign Initial QSI tickler. This tickler is visible via My Dashboard and will remain on the Assessors ticker list until it is marked as complete.
 - Click on the **Ticklers** link under the Consumers section on the **My Dashboard**. The Tickler Queue will open. Use the multi variable search to find the Assign Initial QSI Tickler with Status = New.

File

Filters

Status: [New] Equal To: [AND] [X]

iConnect ID: [] +

☒ Apply Alert Days Before Due

Search Reset

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Levert, Freddy	10025	Assign Initial QSI	12/17/2017	12/17/2017		New	Assessor, George
Sample, Person	10006	Assign Initial QSI	03/15/2018	03/15/2018		New	Assessor, George

<< First < Previous Retrieve 15 Records at a time Next > Last >>

- b. To view QSI ticklers that have already been completed, change the Search filters in the Tickler queue. The default filter returns ticklers with Status = New.
2. In addition, the Pending Assessments Queue visible via My Dashboard will list all iConnect Assessments with Status = Pending. The Assessor can save the QSI Assessment with Status = Pending until he/she is ready to complete the form.
3. Upon meeting with the Consumer, the Assessor will complete the QSI Assessment. The Assessor has two options:
 - a. The Assessor can complete a paper QSI and transpose it into iConnect upon returning to the office, or
 - b. The Assessor can complete the QSI in iConnect directly in the application or via Mobile Assessment.

Completing the QSI in iConnect

1. To begin, log into iConnect and select Role = QSI Assessor.
2. Navigate to the Consumer record, click **Forms > File > Add Form**.

File Tools Ticklers View Consumer Incident Word Merge

Add Add Forms Consumer People Search Search

Add Forms

Print

MY HARMONY **CONSUMERS** PROVIDERS INCIDENTS CLAIMS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module Us

Demographics Divisions Programs Provider Selections Notes **Forms** Appointments Plans

Filters

Form [] +

Search Reset

3 Forms record(s) returned - now viewing 1 through 3

Form	Review	Review Date	
HCBS Waiver Eligibility Worksheet	Initial	03/23/2018	Tier
Support Plan Short Form	Initial	03/23/2018	Tier
Family Risk Factors	Initial	03/23/2018	Tier

3. Set Please Select Type = Questionnaire Situational Information

Please Select Type: Questionnaire Situational Information

Consumer Forms

Review * Initial Worker * Assessor, George Clear Details

Review Date * 03/26/2018 Status * Complete

Division * APD Program

Approved By Assessor, George Details Approved Date 03/26/2018

FQSI ADMINISTRATOR INFORMATION

1. FQSI Administrator (i.e. the name of the person administering this questionnaire) Brenda, Roberts

2. Initiation Date (Select the date in which the FSIQ is initiated) 03/26/2018

3. Administration Date (Select the date in which the FSIQ is completed) 03/26/2018

FQSI Administrator's ID#: Clearly write the five-digit FSIQ administrator number of the person completing this form.

4. Complete all relevant fields. Required fields are marked with a red asterisk. *
5. The QSI is a long assessment and the Assessor will want to save updates along the way.
6. The QSI can be saved with required fields unanswered only when using Status = Draft. Click **File > Save Forms**.
7. Based on the consumer's responses to questions in the QSI, the system will automatically require that the Consumer complete second-level Assessments including:
 - a. Behavioral Second Level Assessments
 - b. Medical Second Level Assessments

The questions for these second level Assessments will conditionally populate right into the QSI Assessment if they are required.
8. When finished with the entire form, change the form Status = Complete.
9. Click **File > Save and Close Forms**.

iConnect

File Reports Word Merge

- Copy Shared Response
- History
- Duplicate Assessment
- Spell Check
- Save Forms
- Save and Close Forms
- Save and Push to Plan
- Print
- Close Forms

FQSI ADMINISTRATOR INFORMATION

1. FQSI Administrator (i.e. the name of the person administering this questionnaire) Buck, Jennifer

10. When the QSI is complete, notify the Waiver Support Coordinator or Pre-Enrollment Support Coordinator. To do so, navigate to the consumer's record and click on **Notes > File > Add Note**.

11. In the new Note record, update the following fields:

- Division = APD
- Note Type = QSI
- Note Subtype = QSI Status Complete
- Status = Complete
- Route the new Note record to the Waiver Support Coordinator/Pre-Enrollment Support Coordinator by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

Notes Details

Division * APD

Note By * Assessor, George

Note Date * 03/28/2018

Program/Provider

Note Type * QSI

Note Sub-Type QSI Status Complete

Description

Note

Status * Pending

Date Completed

Attachments

[Add Attachment](#)

Document	Description	Category
There are no attachments to display		

Note Recipients

Add Note Recipient:

Name	Date Sent	Date Read	Status	Date Signed
Tierney, Jacqueline	3/28/2018		Unread	

12. When finished, click **File > Save and Close Notes**

Mobile Assessments

- Alternatively, in the future the Assessor can use Mobile Assessments to fill out the Assessment online while with the Consumer. To do so, proceed to [Chapter 24|Mobile Assessments](#).

QSI Supplementary Documentation

1. As the Consumer submits supplementary documentation required for the QSI, add new Note records to capture the documents. To do so, navigate the consumer's record and click on the **Notes > File > Add Note**:
2. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = QSI
 - c. Note Subtype = Supporting Documentation
 - d. Status = Complete
 - e. In the new Note record, attach the supporting documentation by clicking **Add Attachment**. In the pop-up window that opens, click **Browse** to find the appropriate document on your computer and then click **Upload**
3. When finished, click **File > Save and Close Notes**

File Tools

Notes Details

Division *	APD ▼
Note By *	Assessor, George ▼
Note Date *	03/26/2018 [calendar icon]
Program/Provider	▼
Note Type *	QSI ▼
Note Sub-Type	Supporting Documentation ▼
Description	
Note	Supporting Documentation Attached to this Note
Status *	Complete ▼
Date Completed	03/26/2018

Attachments

[Add Attachment](#)

Document	Description	Category	Action
FL APD - Case Management UAT Script.xlsx			Remove

4. When the QSI is complete, notify the Waiver Support Coordinator or Pre-Enrollment Support Coordinator. To do so, navigate to the consumer's record and click on **Notes > File > Add Note**.
5. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = QSI
 - c. Note Subtype = QSI Status Complete
 - d. Status = Pending

- e. Route the new Note record to the Waiver Support Coordinator/Pre-Enrollment Support Coordinator by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

Notes Details

Division * APD

Note By * Assessor: George

Note Date * 03/28/2018

Program/Provider

Note Type * QSI

Note Sub-Type QSI Status Complete

Description

Note

3.26 - QSI Complete

Status * Pending

Date Completed

Attachments

[Add Attachment](#)

Document	Description	Category
There are no attachments to display		

Note Recipients

Add Note Recipient:

Name	Date Sent	Date Read	Status	Date Signed
Tierney, Jacqueline	3/28/2018		Unread	

6. When finished, click **File > Save and Close Notes**

Complete Family Risk Factors

- After the Consumer was deemed APD Eligible, the Clinical Workstream Lead reassigned a Tickler called Complete Family Risk Factor to the QSI Assessor.
- The QSI Assessor will be able to access the reassigned tickler via the Tasks Panel on the My Dashboard. To begin, log into iConnect and set your Role = QSI Assessor. Click **Go**.

oconnect iConnect

Welcome, George Assessor | My Harmony | Sign Out

Role: QSI Assessor

File

Quick Search

Consumers [ADVANCED SEARCH](#)

- The QSI Assessor will monitor their **My Dashboard** for Ticklers. To do so, navigate to the **My Dashboard** and find the Consumers section. Scroll down to the Ticklers

panel and click into the linked number of outstanding Ticklers to access the Tickler Queue:

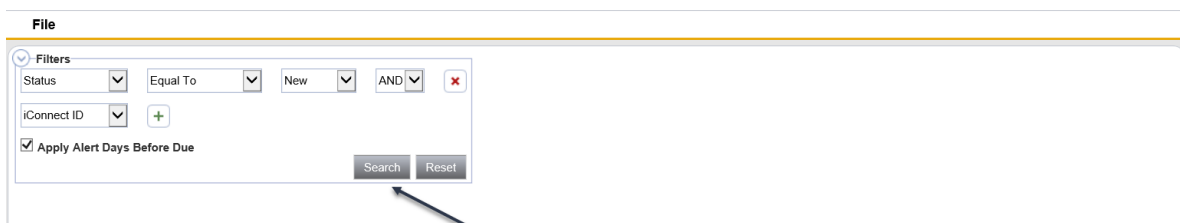
Notes	
Draft	1
I'm Not Interested	1

Alert Notes	
Unread Alert Notes	0

Ticklers	
Ticklers	119

Plans	
Approved	1
Draft	1

4. From here, use the multi variable search to find the Complete Family Risk Factor tickler and click **Search**:

**Tip**

*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

5. Click the tickler to open it. The consumer's Family Risk Factor Form will Open:
- Complete all relevant fields
 - When finished, click **File > Save Forms**. The tickler is marked as complete. Select **File > Close Workflow Wizard**

File

Save Forms

Spell

Save Forms

Copy From Previous

Print

Close Forms

Case Select Type: Family Risk Factors

Consumer Forms

Review *

Initial

Review Date *

03/23/2018

Division *

APD

Approved Date

Worker *

Tierney, Jacqueline

Status *

Draft

Approved By

Clear

Details

FAMILYRISK FACTORS

iConnect ID:

90000

ABC PIN:

3454

Primary caregiver unable to give care due to health status of primary caregiver:

☒ Yes

☐ No

Does the primary caregiver have health issues that prevent them from continuing to provide care?

☒ No

☐ Yes

Primary Caregiver Providing Care to a Minor, Elderly Person, or Other With a Disability within the Family Home:

☒ No

☐ Yes

Primary Caregiver Unemployed:

☐ Yes

☒ No

Chapter 9 | Consumer Budget

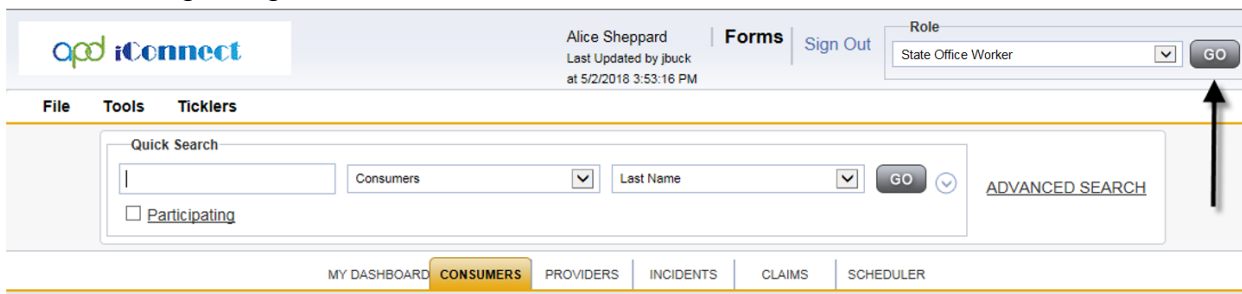
Introduction

When waiver funding is approved by the Legislature, the APD Staff reviews the Pre-Enrollment data to determine the number of clients who meet the established criteria to receive a waiver offer. The APD Staff will use the EZ iBudget Calculator form in iConnect to determine the Algorithm amount for a Consumer and will send the Waiver Enrollment Offer Notice to the Consumers and track the status of the acceptance on the Waiver in iConnect. Once the consumer accepts the offer and a WSC is selected, APD staff create the Budget in iConnect and the WSC is notified to create the cost plan as 'planned services' in iConnect. These planned services must be validated against the algorithm amount and other business rules through the plan validation function in iConnect. This same process is followed for individuals who transition to the waiver via crisis, or any other approved waiver enrollment process. The WSC will be unable to create an authorization until the plan is validated successfully.

EZ iBudget Calculator

Once the funding is available, the State Worker will use the EZ iBudget Calculator form in iConnect that pulls indicator data from the QSI to determine the Allocation Algorithm amount for a Consumer. The Region completes the EZ iBudget calculator when processing CWE, CBC, ICF/IID Transitions, Military, Phelan-McDermid enrollments.

1. To begin, log into iConnect and set Role = State Office Worker. Click **Go**.



2. Navigate to the consumer's record, click on the **Forms** tab > **File** > **Add Form**

The screenshot shows the iConnect system interface. At the top, the user is logged in as Alice Sheppard, with the role of Service Provider. The 'Forms' tab is selected. In the left sidebar, the 'Add Forms' button is highlighted with an orange background and an arrow pointing to it. Below this, there are search filters for 'Consumers' and 'Last Name', along with a 'GO' button and an 'ADVANCED SEARCH' link. The main content area shows a list of consumers, with 'Sheppard, Alice (10053)' selected. Below the consumer name, there are tabs for 'Diagnosis', 'Medications', 'Forms', 'Provider Documentation', and 'Contacts'. The 'Forms' tab is currently active.

3. In the Please Select Type field select the **EZ iBudget Calculator** form. The form is displayed with some fields auto populated.

The screenshot shows the 'EZ iBudget Calculator' form. At the top, the user is logged in as Alice Sheppard, with the role of Service Provider. The 'Forms' tab is selected. In the left sidebar, the 'Add Forms' button is highlighted with an orange background and an arrow pointing to it. Below this, there are search filters for 'Consumers' and 'Last Name', along with a 'GO' button and an 'ADVANCED SEARCH' link. The main content area shows a list of consumers, with 'Sheppard, Alice (10053)' selected. Below the consumer name, there are tabs for 'Diagnosis', 'Medications', 'Forms', 'Provider Documentation', and 'Contacts'. The 'Forms' tab is currently active. The 'Please Select Type' dropdown is set to 'EZ iBudget Calculator'. Below this, there are fields for 'Review *', 'Review Date *', 'Division *', 'Approved By', 'Worker *', 'Status *', 'Program', and 'Approved Date'. The 'EZ iBudget Calculator' form is displayed with the following fields: 'First Name' (Alice), 'M.I.' (empty), 'Last Name' (Sheppard), 'Area/Region' (empty), 'PIN Number' (empty), 'Update required in following situations?' (empty), 'Select Client's Living Setting' (empty), 'Client's Current Age' (37), 'Intercept' (27.57204), 'Living Setting' (empty), 'Age 21 to 30' (0), and 'Age 31 or older' (48.96336). Arrows point to the 'First Name', 'Last Name', 'Client's Current Age', and 'Age 21 to 30' fields.

4. Pull in the linked QSI data by selecting File > Copy Shared Response. The existence of linked data on a form is indicated by the link icon next to the Form

Type. **Complete this step first before completing any other fields on this form otherwise your data will be lost.**

File

- Copy Shared Response
- Spell Check
- Save Forms
- Save and Close Forms
- Copy From Previous
- Print
- Close Forms

Worker * Buck, Jennifer Clear Details

Status * Draft

Program

Approved Date

EZ iBudget Calculator

5. A list of Assessments with Shared Responses is displayed. Select the Questionnaire Situational Information form.

File

Filters Search Reset

5 Assessments with Shared Responses record(s) returned - now viewing 1 through 5

Form Name	Review	Review Date	Rater
EZ iBudget Calculator	Initial	04/17/2018	Buck, Jennifer
Questionnaire Situational Information	Initial	04/17/2018	Buck, Jennifer
Person Centered Support Plan	Initial	04/13/2018	Buck, Jennifer
Person Centered Support Plan	Initial	04/04/2018	Buck, Jennifer
Person Centered Support Plan	Initial	04/04/2018	Buck, Jennifer

<< First < Previous Retrieve 15 Records at a time Next > Last >>

6. The linked responses on the QSI form populate on the EZ iBudget Calculator form. (i.e. Questions 16, 18, 20, Functional status...)
7. The form automatically completes the calculations. Make sure all required * fields are answered.
8. Note the Allocation Algorithm Amount value.

QSI Question 34	0
QSI Question 36	0
QSI Question 43	0
Coefficient Sum	76.53540000000001
Algorithm Amount	\$5857.67
Proportion Factor	1.00288
Allocation Algorithm Amount	\$5874.54
QSI Behavioral (QSI25-30) Sum	0
QSI Functional (QSI14-24) Sum	0



- 9. In the form header, change the status to **Complete**.
- 10. Click **File > Save and Close Form**.

Create a New Annual Budget

The APD staff will record the Allocation Algorithm amount from the EZ iBudget Calculator form on the Budget tab of the consumer record once the enrollment offer is accepted, by creating a Consumer Budget Detail record in iConnect. The amount of the approved budget will be recorded as a Budget Transaction on that Consumer Budget Detail record. In order to add the next year's budget a second Consumer Budget Detail record and related Budget Transaction record will be created. The Budget Entry Staff role can be used by Region staff to edit an existing budget. That role should not be able to create an initial budget for a person new to the waiver. Creating initial budgets should be limited to the State Office Enrollment role only.

Consumer Budget Detail

1. To begin, log into iConnect and set Role = State Office Enrollment or Budget Entry Staff. Click **Go**.

2. Navigate to the consumer's record, click on the **Consumer Budget** tab.

3. Click **File** menu > Select **Add Consumer Budget Detail**

NOTE: The Waiver Support Coordinator can view the budget details on this tab but cannot add or edit.

4. The Consumer Budget details page displays. Update the following fields:
 - a. Division = defaults to APD and is read only.
 - b. Fiscal Year = select the current fiscal year
 - c. Start Date and End Date auto populate when fiscal year is selected. Edit as needed.

- d. Programs = Open program enrollments for the consumer are listed here. The value selected here controls the plans that are available to link to this budget.
- e. Budget Type = defaults to iBudget and is read only
- f. Allocation Algorithm Amount = Add the amount from the EZ iBudget Calculator Form to this field
- g. Current Budget = displays a read only sum of all the Budget Transaction values.
- h. Budget Status = Draft

NOTE: The status of all Budget Detail records = Draft until it is saved for the first time. After saving, the following Budget statuses are available: Budget Approved, Complete, Pending, Terminated

NOTE: When Budget Status = Approved the record becomes read only and cannot be changed. Status = Budget Approved indicates the Budget has been reviewed and approved but remains editable in case changes are needed throughout the year.

- i. Description and comments are optional text fields
- j. WSC, Region Office Staff and State Office Staff lookup fields exist to select the associated staff for this Consumer.
- k. Annualized Budget = This is the total amount for a fiscal year. If someone has a \$12,000 algorithm, and they enroll on the waiver 9/1/19, their initial transaction will only be for \$10,000 (prorated amount for the part of the fiscal year they are on the waiver). Their annualized budget for the next year will be \$12,000.
- l. Prior iBudget Amount = this is field used for the transition process of iBudget to iConnect.

File			
Budget	Budget ID	51	Approved By
Linked Plans	Approval Date		Division *
	Fiscal Year *	2019	Start Date *
	Program(s)	CDC+ Non-Waiver	End Date *
	Termination Date		Budget Type *
	Allocation Algorithm Amount *	\$35,000.00	Current Budget
	Budget Status *	Budget Appr	Description
	WSC	Buck, Jennifer	Regional Office Staff
	Amount Unauthorized	\$8,871.17	State Office Staff
	Comments		Annualized Budget *
	Prior iBudget Amount *	\$32,574.00	

5. Click **File** > select **Save**. The page refreshes and the Budget Transaction section is displayed.

Budget Transactions

A Consumer can have more than one budget transaction. For example, a consumer newly enrolls on the waiver mid-year so his/her algorithm amount would be prorated for that year. The consumer would have a second budget transaction with

annualized amount showing for a full fiscal year. Another example would be a SAN approval mid-year where the consumer would have a prorated increase for that current fiscal year and an annualized increase for following fiscal year.

1. Enter the amount of the budget. From the consumer's Budget detail page, click **File > Add Budget Transaction** to enter the budget amount.

1. The Budget Transaction page displays. Update the following fields:
 - a. Amount = the amount of the budget based on the algorithm amount.
NOTE: if the budget does not cover the full fiscal year, the budget amount should be prorated.
 - b. Transaction Type = select the applicable budget Type
 - c. Transaction Date = the effective date of the budget
 - d. Comments = enter budget comments
2. Click **File > Save and Close**
3. The budget transaction is visible on the Consumer Budget Details Page.
4. The sum of all budget transaction amounts equals the Current Budget amount.
5. The Current Budget amount will change as amounts(services) are encumbered.

iConnect John Sheppard
Last Updated by j buck
at 9/25/2019 11:44:27 AM **Consumer Budget Detail**

File

Budget

Linked Plans

Budget ID	98	Approved By	
Approval Date		Division *	APD
Fiscal Year *	2020	Start Date *	07/01/2019
Program(s)	<div style="display: flex; align-items: center;"> <div style="border: 1px solid #ccc; padding: 2px; margin-right: 5px;">CDC+ Non-Waiver</div> <div style="border: 1px solid #ccc; padding: 2px; margin-right: 5px;">APD Waiver</div> </div>		
Termination Date		End Date *	06/30/2020
Allocation Algorithm Amount *	\$15,000.00	Budget Type *	iBudget
Budget Status *	Budget Appr	Current Budget	\$45,000.00
WSC		Description	
Amount Unauthorized	\$43,661.79	Regional Office Staff	
Comments		State Office Staff	
		Prior iBudget Amount *	\$0.00
Annualized Budget *	\$15,000.00		

Budget Transactions

Filters

Transaction ID ▼ +

Search Reset

1 Budget Transactions record(s) returned - now viewing 1 through 1

Transaction ID	Amount	Transaction Type	Transaction Date	Updated By	Updated On
122	\$45,000.00	Budget Adjustment due to AIM	09/25/2019	Buck, Jennifer	9/25/2019 11:43:47 AM

Link/Unlink a Plan to the Annual Budget

Once the enrollment offer is accepted and the Waiver Support Coordinator has been selected, he/she will add the consumer's cost plan as planned services in iConnect. These planned services must be validated against the algorithm amount documented on the Consumer Budget tab and other business rules through the plan validation function in iConnect described in [Chapter 11|Add Planned Services](#). The planned services on the Plans tab of the Consumer record must be linked to the Budget on the Consumer Budget tab of the Consumer record.

1. To link a Plan to the Consumer budget, navigate to the Consumer budget tab of the Consumer record.

This screenshot shows the 'Incident' page in the Case Management Module. At the top right, it displays 'Person Sample' and 'Last Updated by wsc2 at 3/15/2018 11:53:24 AM'. Below this is a 'Quick Search' bar with a text input field, a 'Consumers' dropdown menu, a 'Last Name' dropdown menu, and a 'GO' button. A navigation bar below the search bar includes 'MY DASHBOARD', 'CONSUMERS' (highlighted), 'PROVIDERS', 'INCIDENTS', 'CLAIMS', 'SCHEDULER', and 'UTILITIES'. At the bottom, there is a secondary navigation bar with tabs for 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation', 'Contacts', 'Consumer Module User', 'Demographics', 'Divisions', 'Consumer Budgets' (highlighted), 'Programs', 'Provider Selections', 'Notes', 'Forms', 'Appointments', and 'Plans'.

2. Select the existing budget record. The Consumer Budget details page displays.
3. Note the Programs field. Only Plans for the selected Programs will display on the Linked Plans subpage.
4. Select the **Linked Plans** subpage.

This screenshot shows the 'Consumer Budget Detail' page. The top header includes the 'iConnect' logo and user information: 'John Sheppard', 'Last Updated by jibuck at 8/25/2018 10:41:22 AM'. The left sidebar has a 'File' menu with 'Budget' (highlighted) and 'Linked Plans' (indicated by an arrow). The main content area displays budget details: 'Budget ID' 51, 'Approval Date', 'Fiscal Year' (dropdown), 'Approved By', 'Division' (APD), 'Start Date' (07/01/2018), 'End Date' (06/30/2019), and 'Program(s)' (APD Waiver).

5. From the **File** menu > Select **Link to Plan**

This screenshot shows the 'Linked Plans' subpage. The top header includes the 'iConnect' logo and user information: 'John Sheppard', '8/25/2018 10:42 AM'. The left sidebar has a 'File' menu with 'Link to Plan' (highlighted by an arrow) and 'Close Linked Plans'. The main content area shows a search bar with a dropdown menu, a '+' button, and 'Search' and 'Reset' buttons.

6. A list of existing Plan records is displayed. Select the Link option from the flyout menu next to the selected Plan.

John Sheppard | Link to Plan
8/25/2018 10:44 AM

File Tools

Filters
Fund Code [v] +
Search Reset

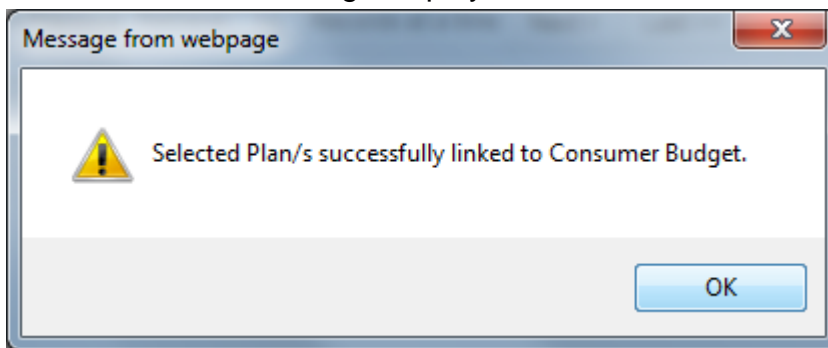
1 Link to Plan record(s) returned - now viewing 1 through 1

Fund Code	Program	Plan Start Date	Plan End Date	Worker	Status
APD	APD Waiver	07/01/2018	06/30/2020	Buck, Jennifer	Draft

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Link

7. A notification message displays. Click OK. Close the Link to Plan window.



8. The Linked Plans subpage now displays the Plan record that was just linked.

John Sheppard | Linked Plans
8/25/2018 10:47 AM

File Tools

Budget
Linked Plans

Filters
Fund Code [v] +
Search Reset

1 Linked Plans record(s) returned - now viewing 1 through 1

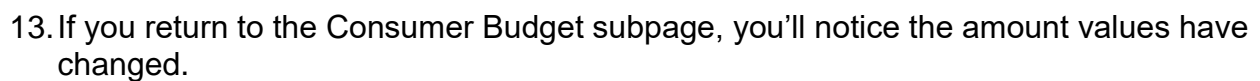
Fund Code	Program	Plan Start Date	Plan End Date	Worker	Status
APD	APD Waiver	07/01/2018	06/30/2020	Buck, Jennifer	Draft

<< First < Previous Retrieve 15 Records at a time Next > Last >>

9. Return to the Consumer Budget subpage. Notice the Amount unauthorized fields are now populated, if the linked plan included existing authorizations.

10. In the event of an error, a Plan can be Unlinked. Select the **Linked Plans** subpage.
11. Select the checkbox to the right of the Linked Plan. From the **Tools** Menu > Select **Unlink Plan**.

12. The Unlink notification displays. Click OK.



File

Budget

Budget ID: 98

Approval Date:

Fiscal Year: 2020

Program(s): CDC+ Non-Waiver, APD Waiver

Termination Date:

Allocation Algorithm Amount: \$15,000.00

Budget Status: Budget Appr

WSC: \$45,000.00

Amount Unauthorized: \$45,000.00

Approved By:

Division: APD

Start Date: 07/01/2019

End Date: 06/30/2020

Budget Type: iBudget

Current Budget: \$45,000.00

Description:

Regional Office Staff:

State Office Staff:

Edit/Change the Current Annual Budget

The annual budget may need to be adjusted throughout the year because of a SAN, a budget adjustment due to AIM, or an administrative budget adjustment. This is completed by State Office staff using the Budget Entry role.

1. Navigate to the consumer's record, click on the **Consumer Budget** tab.
2. Select the current annual budget. The **Consumer Budget Detail** page displays. Update any fields as needed to correct errors.

File

Budget

Budget ID: 98

Approval Date:

Fiscal Year: 2020

Program(s): CDC+ Non-Waiver, APD Waiver

Termination Date:

Allocation Algorithm Amount: \$15,000.00

Budget Status: Budget Appr

WSC: \$45,000.00

Amount Unauthorized: \$45,000.00

Approved By:

Division: APD

Start Date: 07/01/2019

End Date: 06/30/2020

Budget Type: iBudget

Current Budget: \$45,000.00

Description:

Regional Office Staff:

State Office Staff:

3. To update the current budget amount, add a new Budget Transaction. The current budget amount is the sum of all budget transactions.
4. From the File menu, select Add Budget Transaction. Proceed to the [Budget Transactions section](#).

Chapter 10 | Support Plan

Introduction

The Support Plan cannot be created until the cost plan is first initiated for an individual coming onto the waiver for the first time. The initial cost plan can be created once the QSI Assessment is completed. Based on the Consumer/Legal representative's responses to questions in the QSI Assessment, iConnect uses Copy Shared Responses functionality to import QSI responses directly into the Person-Centered Support Plan (PCSP). The WSC will review the QSI responses and address those needs during person-centered planning.

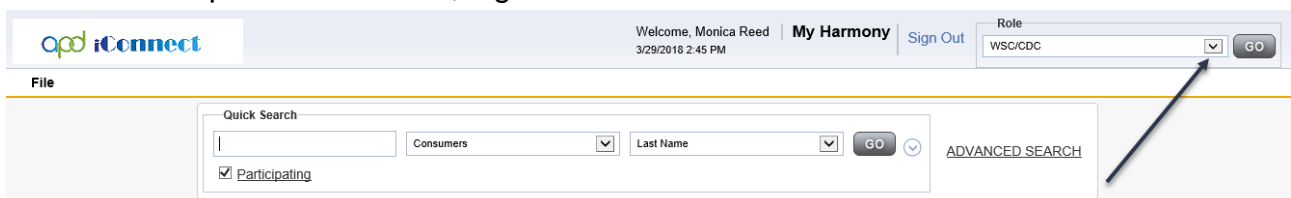
For existing consumers already in iBudget, the QSI has already been completed and will not be added to iConnect; therefore, the Copy Shared Responses function will not be available.

Once the WSC has completed the person-centered planning process, he/she will create the support plan as a Form in iConnect.

Create the Support Plan

47. Upon enrolling the Consumer into the APD waiver Program (see Chapter on Standard APD Enrollment), a Workflow Wizard triggered the following Ticklers to the Waiver Support Coordinator:
 - a. Complete Person-Centered Support Plan - *Assigned to WSC*, Due Immediately
 - b. Complete Amount Implementation Meeting - *Assigned to WSC*, Due Immediately
 - c. Upload Support Planning Collateral Documents to Note - *Assigned to WSC*, Due Immediately
 - d. Eligibility Worksheet Reminder - *Assigned to WSC*, Due in 45 Days

2. To complete the Ticklers, log into iConnect and set Role = WSC/CDC. Click **Go**.



3. On the **My Dashboard**, find the Consumers section and scroll down to the Ticklers Panel. Click on **Ticklers** to open the Tickler Queue:

Alert Notes
Unread Alert Notes 0

Ticklers 53

Appointments
Scheduled 4

4. Use the multi variable search to narrow down the Tickler Queue. Click **Search**:

Filters

Status Equal To New AND

Last Name Equal To smith AND

iConnect ID +

☐ Apply Alert Days Before Due

Search Reset

6 Ticklers record(s) returned - now viewing 1 through 6

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Initiate Cost Plan	03/29/2018	03/29/2018		New	Reed, Monica
Smith, Marianne	10043	Complete AIM	03/29/2018	04/28/2018		New	Reed, Monica
Smith, Marianne	10043	Complete Person Centered Support Plan	03/29/2018	03/29/2018		New	Reed, Monica
Smith, Marianne	10043	Upload Support Planning Docs	03/29/2018	03/29/2018		New	Reed, Monica
Smith, Marianne	10043	Complete Cost Plan	03/29/2018	05/13/2018		New	Reed, Monica
Smith, Marianne	10043	Waiver Eligibility Worksheet Reminder	03/29/2018	03/29/2019		New	Reed, Monica

<< First < Previous Retrieve 15 Records at a time Next > Last >>

5. From in the Tickler Queue, hover over the arrow next to the Tickler called Complete Person-Centered Support Plan to open it:

5 Ticklers record(s) returned - now viewing 1 through 5

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Complete AIM	03/29/2018	04/28/2018		New	Reed, Monica
Smith, Marianne	10043	Complete Person Centered Support Plan	03/29/2018	03/29/2018		New	Reed, Monica
Smith, Marianne	10043	Upload Support Planning Docs	03/29/2018	03/29/2018		New	Reed, Monica
Smith, Marianne	10043	Complete Cost Plan	03/29/2018	05/13/2018		New	Reed, Monica
Smith, Marianne	10043	Waiver Eligibility Worksheet Reminder	03/29/2018	03/29/2019		New	Reed, Monica

<< First < Previous Retrieve 15 Records at a time Next > Last >>

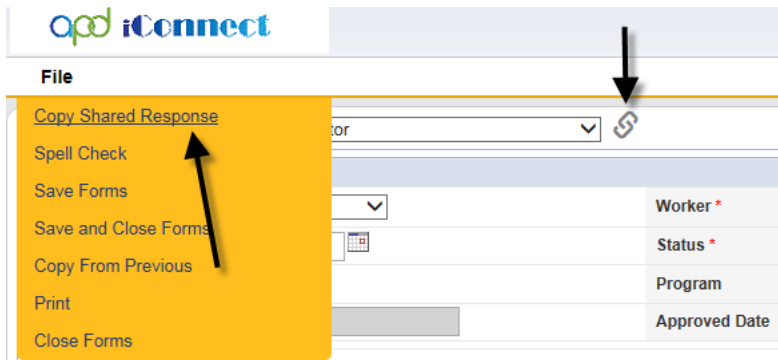
6. The Person-Centered Support Plan form displays.

7. Complete the header information. In the header of the form, set Review = Initial and Status = Open.

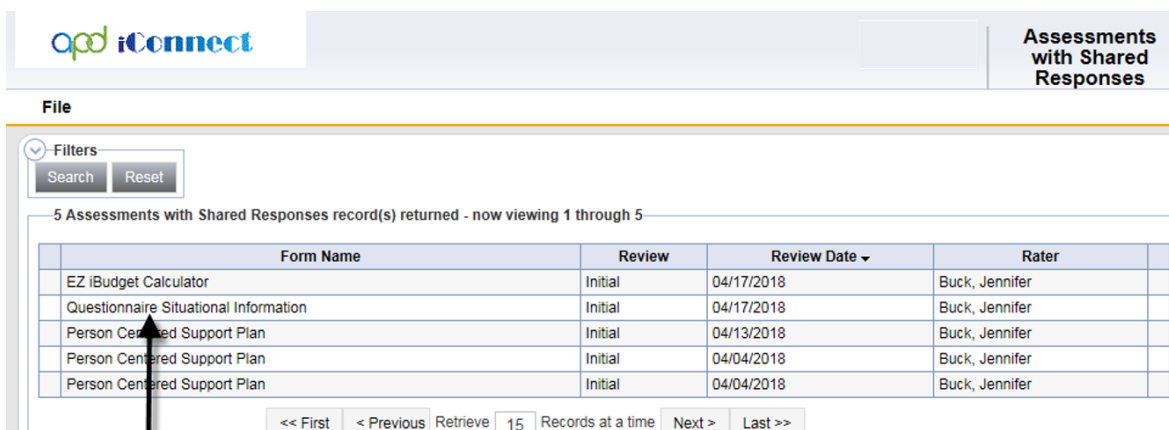
NOTE: There should be only one Support Plan for the year. The WSC will leave the status = Open and make changes to the same form when there is an update vs. creating a new form each time there is an update.

8. Information from other forms such as the QSI Assessment can be copied over into the support plan record automatically using the Copy Shared Response functionality in iConnect.

9. The WSC will select File > Copy Shared Responses and select the Questionnaire for Situational Information Assessment from the list of available forms.



10. A list of Assessments with Shared Responses is displayed. Select the Questionnaire Situational Information form.



11. Once selected, the system will pull the information from the QSI to fill in the full QSI section on the Person-Centered Support Plan form.

12. Please note that the Person-Centered Support Plan in iConnect should be filled out in the same way as the hard copy Person-Centered Support Plan. For questions related to what type of information should be included in the various sections of the support plan, please refer to the Person-Centered Support Plan Training modules found on the APDcares.org website.

13. Update all remaining fields.

14. When finished, click **File > Save and Close Forms**.

15. In the Workflow Wizard, hover over the arrow next to the Tickler to click **Complete**.

16. When finished, click File > Close Workflow Wizard.

Add Medication

A user can add a medication on the Medication Tab of the consumer record or add a medication to the Medication Tab of the consumer record from the Person-Centered Support Plan form.

Add a new Medication from a Form

1. To add a new medication from within the PCSP, the WSC will either add a new PCSP or open the existing PCSP.

The screenshot shows the iConnect web application interface. At the top, there's a navigation bar with 'File', 'Tools', 'Ticklers', and 'Word Merge'. Below this is a search bar with 'Quick Search' and 'Consumers' dropdown. The main content area displays the 'Person-Centered Support Plan' form for 'Kastner, Martin (209730)'. The form has tabs for 'Diagnosis', 'Eligibility', 'Medications', 'Auth', 'Provider Documentation', 'Contacts', 'Consumer Module User', 'Demographics', 'Divisions', 'Consumer Budgets', 'Programs', 'Provider Selections', 'SANS', 'Notes', 'Forms', 'Appointments', 'Plans', 'Pre-Enrollment', and 'Claim'. The 'Forms' tab is active, showing a list of forms with columns for 'Division' and 'Status'.

Division	Status
APD	Draft
APD	Complete
APD	Draft
APD	Pending
APD	Draft
APD	Pending
APD	Open
APD	Complete
APD	Draft
APD	Complete

- Medications are captured in the Medications tab of iConnect and can be added to the support plan without the WSC re-typing the information.
- WSCs can also add new medications from the Person-Centered Support Plan form and the medication will be added to the support plan and the Medications tab of iConnect.
- To add an existing medication from the Medication tab to the Person-Centered Support Plan, select **Search** and a list of medications from the medications tab of the consumer record is displayed. Select a medication and the page refreshes and the support plan is populated with the medication information.

The screenshot shows the 'Medication list' form in the iConnect web application. The form has a table with columns for 'Medication ID', 'Medication', 'Dose', 'Frequency', and 'Status'. The table contains one row with the following data:

Medication ID	Medication	Dose	Frequency	Status
69	Zosyn	400	Q4H (Every 4 hours)	Active

Below the table, there's a section for 'My Health' with a 'Medication Control' button.

- To add a new medication from the Person-Centered Support Plan that will be added to the Support plan form and to the Medication tab, use the Medication Control on the form.
- In the My Health section of the form, select **Add New Medication**.

The screenshot shows the 'My Health' section of a web application. It has a green header bar with the text 'My Health'. Below the header, there is a section titled 'Important Information About My Health' with a dropdown menu labeled 'Hospitalizations in the past year?'. Underneath, there is a section titled 'My Medication Information (current as of date of support plan meeting)' with a sub-section 'Medications'. The 'Medications' section shows '0 record(s) returned' and a large empty text area. At the bottom of the 'Medications' section, there are two buttons: 'Add New Medication' and 'Search'.

7. The Medication search window opens. Begin typing the name of the medication. Matching values are displayed. Select the medication and complete the remaining fields.

The screenshot shows the 'Add New Medication' window. It has a title bar 'Add New Medication' with a close button. The window contains several fields for medication information: 'Medication' (with a search icon and a 'Clear' button), 'Order Date (start date)' (MM/DD/YYYY), 'D/C Date (end date)' (MM/DD/YYYY), 'Status' (dropdown), 'Dose' (text), 'Dose Units' (dropdown), 'Frequency' (dropdown), 'Route' (dropdown), 'Where Obtained' (dropdown), 'Mail Order' (dropdown), 'Packaging' (dropdown), 'Type of Assistance' (dropdown), 'Medication Assistance' (dropdown), 'Prescribed By' (text), 'Instructions per Label' (text), 'Reason for Medication' (text), and 'Side Effects/Problems Experienced' (text). At the bottom, there are 'Save' and 'Cancel' buttons.

8. Once complete, select **Save and Close**. The page will refresh with the medication information section completed.

9. Save and Close the Person-Centered Support Plan form.

Add Medication to the Medication Tab

1. Navigate to the **Medication** tab on the Consumer record.
2. From the **File** menu >Select **Add Medication**.

The screenshot displays the iConnect software interface. At the top, the user is logged in as John Sheppard, with a 'Medications' tab selected in the top navigation bar. Below this, a 'File' menu is open, highlighting the 'Add Medication' option. An arrow points to this option. The main area shows a consumer record for 'Sheppard, John (10106)'. The 'Medications' tab is selected in the sub-navigation bar. Another arrow points to this tab. A 'Filters' section on the left shows 'Order Date' set to 'All' and 'Search' buttons. The status at the bottom indicates '0 record(s) returned'.

3. Complete the Medication details page.

File

An asterisk (*) indicates a required field

Medication *

NDC Code

Dose *

Dose Units *

Strength *

Frequency *

Route *

Prescribed By *

Order Date (start date) *

D/C Date (end date)

Status *

PRN?

Instructions per Label

Reason for Medication

Side Effects/Problems Experienced

Where Obtained

Mail Order

Packaging

Type of Assistance *

Medication Assistance *

Send To Emar

Dispense Time 1

Dispense Time 2

Dispense Time 3

Dispense Time 4

Dispense Time 5

4. When complete, select **File > Save and Close Medication**. Repeat this process for each Medication.

Schedule & Complete the AIM

48. Back in the Tickler Queue, click to open the Tickler called Complete AIM:

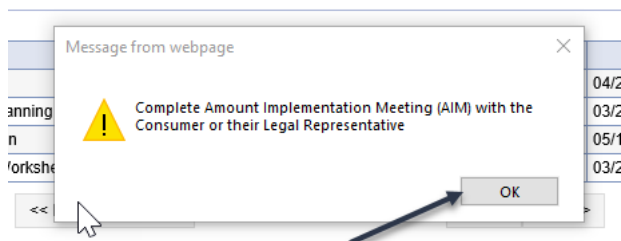
4 Ticklers record(s) returned - now viewing 1 through 4

Consumer Name	ICoconnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To	
Smith, Marianne	10043	Complete AIM	03/29/2018	04/28/2018		New	Reed, Monica	▶
Smith, Marianne	10043	Upload Support Planning Docs	03/29/2018	03/29/2018		New	Reed, Monica	▶
Smith, Marianne	10043	Complete Cost Plan	03/29/2018	05/13/2018		New	Reed, Monica	▶
Smith, Marianne	10043	Waiver Eligibility Worksheet Reminder	03/29/2018	03/29/2019		New	Reed, Monica	▶

<< First < Previous Retrieve 15 Records at a time Next > Last >>

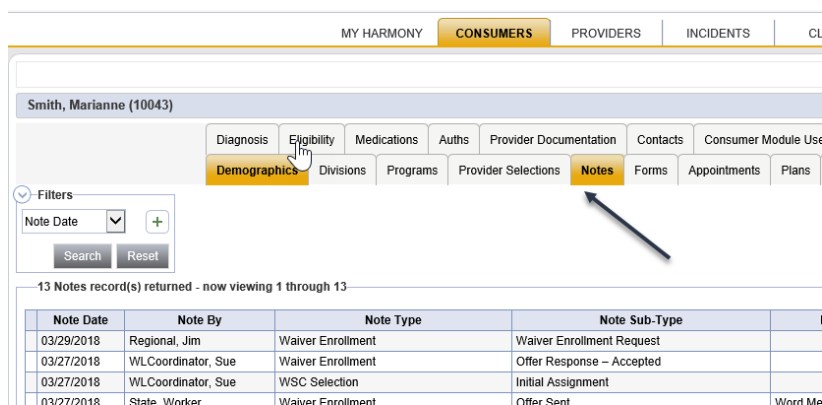
49. A Message Tickler opens - Complete Amount Implementation Meeting (AIM) with the Consumer or their Legal Representative. Click **OK**.

50. Hover over the arrow next to the Tickler to click **Complete**, then schedule and complete the Amount Implementation Meeting (AIM) following the steps outlined below:



51. Contact the Consumer to schedule the AIM and to identify AIM participants. Document each contact in a Consumer Note record.

52. To do so, navigate to the consumer's record and click on the **Notes** tab > **File > Add Note**:



53. In the new Consumer Note record, update the following fields:

- Division = APD
- Note Type = Support Plan
- Note Subtype = Pre-Support Planning Activities
- Status = Complete

54. When finished, click **File > Save and Close Note**.

File Tools

Notes Details

Division * APD ▼

Note By * Reed, Monica ▼

Note Date * 03/29/2018

Program/Provider ▼

Note Type * Support Plan ▼

Note Sub-Type Pre-Support Planning Activities ▼

Description

Note

3/29/18 - Attempted to contact the Consumer. Left voicemail. |

Status * Complete ▼

Date Completed 03/29/2018

55. Upon identifying Consumer Participants, add them to the Consumers record by clicking on **Contacts > Add New Contacts Search**:

File Tools Ticklers View Consumer Incident

Add New Contacts Search

Add New Consumer Participant Search

Print

Quick Search

Consumers ☒ Last Name

Participating

MY HARMONY **CONSUMERS** PROVIDERS INCIDENTS CI

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation **Contacts** Consumer Module Us

Demographics Divisions Programs Provider Selections Notes Forms Appointments Plans

Filters

Active ▼ Equal To ▼ Yes AND ▼ ✕

Relation ID ▼ +

Search Reset

56. Use the multi variable search to search for the Participant.

57. If you find a matching record in the search results, click on the match.

58. If no matching record is found, click **Add New**:

File

Filters

Last Name

Equal To

slater

AND

×

First Name

Begins With

eugene

×

OR

×

Last Name

+

Search

Reset

Add New

0 record(s) returned

59. On the Contact Detail page, update all relevant fields including Primary Relationship and Relationships = Care Planning Participant (if they will be invited to participate in the AIM)

File

Contact Detail

Primary Relationship *

Attorney

▼

Relationship(s)

Advocate

Aunt

Boyfriend

Brother

Care Planning Participant

Care Provider

Case Manager

▶

▶

▶

▶

▶

▶

▶

Attorney

Active Military Status

☐

Active

☒

Comments

Demographic Information

Salutation

Mr.

▼

Last Name *

Slater

First Name *

Eugene

Middle Name

Suffix

Jr.

▼

Title

Attorney at Law

×

60. When finished, click **File > Save and Close Contacts**

61. Upon identifying the consumer’s AIM Participants, reach out to invite them to participate in the AIM. Document each participant outreach attempt in a Consumer Note. To do so, navigate to the consumer’s record and click on the **Notes** tab > **File > Add Note**.

62. In the new Note record, update the following fields:

- a. Division = APD
- b. Note Type = Support Plan
- c. Note Subtype = Pre-Support Planning Activities
- d. Status = Complete

63. When finished, click **File > Save and Close Note**.

64. Upon reaching the Consumer via telephone, schedule the appointment. Optionally, add an Appointment in iConnect on the Consumers record. To do so, navigate to the consumer's record and click **Appointments > File > Add Appointment**.

The screenshot displays the iConnect software interface. At the top, there is a menu bar with 'File', 'Ticklers', and 'View Consumer Incident'. Below this, a yellow dropdown menu is open, showing options: 'Add Appointment', 'File Search', 'Quick Search', 'Add Appointment', 'Spell Check', and 'Print'. A mouse cursor is pointing at the 'Add Appointment' option. Below the menu, there are tabs for 'MY HARMONY', 'CONSUMERS', 'PROVIDERS', 'INCIDENTS', and 'CL'. The 'CONSUMERS' tab is selected. Below the tabs, there is a search bar with 'Smith, Marianne (10043)' entered. To the right of the search bar, there are tabs for 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation', 'Contacts', 'Consumer Module User', 'Demographics', 'Divisions', 'Programs', 'Provider Selections', 'Notes', 'Forms', 'Appointments', and 'Plans'. The 'Appointments' tab is selected. Below the tabs, there is a 'View Style' section with radio buttons for 'List View', 'Monthly View', 'Weekly View', and 'Daily View'. To the right of the 'View Style' section, there is a 'Filters' section with dropdown menus for 'Status', 'Not Equal To', 'Draft', 'AND', and a red 'X' button. Below the 'Filters' section, there is a 'Start Date' dropdown menu and a '+' button. At the bottom right, there are 'Search' and 'Reset' buttons.

65. In the new Appointment record, update the following fields:

- a. Division = APD
- b. Start Date
- c. Start Time
- d. End Date
- e. End Time
- f. Appointment Type = AIM/Support Plan Meeting
- g. Status = Scheduled

66. When finished, click **File > Save Appointment**

File

Appointment Detail

Division	APD ▼
Program	▼
Start Date *	03/29/2018
Start Time	03 ▼ 41 ▼ PM ▼
End Date	03/29/2018
End Time	04 ▼ 11 ▼ PM ▼
Travel Time	▼ ▼ ▼
Preparation Time	▼ ▼ ▼
Type	AIM/Support Plan Meeting ▼*
Sub Type	▼
Subject	AIM Support Plan Meeting
Appointment Summary	3/29/18 - AIM Meeting Scheduled 468 characters remaining
Additional Information (Private)	 500 characters remaining
Reason	▼
Location	▼
Status *	Scheduled ▼
High Priority	<input type="checkbox"/>

67. Upon doing so, the Appointment record will refresh and display the **Add Attendee** tab

File

Appointment

Attendee List

Add Attendee

Appointment Detail

Division	APD ▼
Program	▼
Start Date *	03/29/2018
Start Time	03 ▼ 41 ▼ PM ▼
End Date	03/29/2018
End Time	04 ▼ 11 ▼ PM ▼
Travel Time	▼ ▼ ▼
Preparation Time	▼ ▼ ▼
Type	AIM/Support Plan Meeting ▼*

68. To add Participants to the Appointment, click on the **Add Attendee** tab and set Filter = Case Relations.

69. Click on the appropriate relation and click Add to add the Participant to the Appointment. Note that you can use the CTRL key to select multiple workers before clicking **Add**

70. When finished, click File > Save and Close Add Attendee

71. Prior to conducting the Initial Support Plan/AIM meeting, the WSC will prepare the documentation. WSCs will take a meeting signature sheet to the Initial Support Plan/AIM meeting with the Consumer. A blank Person-Centered Support Plan output report is printed. It will be filled out when face to face with the consumer and then keyed into the Person-Centered Support Plan form in iConnect.
72. The WSC will add Planned Services discussed with the Consumer in iConnect. Planned services can be added before and/or after the Initial Support Plan/AIM meeting with the consumer. If they are entered before, the WSC can benefit from a partially completed AIM Worksheet to review with the Consumer.
73. There will be a second meeting with the Consumer. The planned services have been entered and the Person-Centered Support Plan form completed in iConnect. The completed Person-Centered Support Plan report output and AIM Worksheet are printed from APDiConnect. Both are signed by the consumer and added as attachments to Notes in iConnect.
74. Before printing the AIM, navigate to the **Plans** tab and open the existing Plan record:

Kastner, Martin (209730)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User
Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments **Plans** Pre-Enrollment Cla

Filters
Division
Search Reset

7 Consumers Plans record(s) returned - now viewing 1 through 7

	Division	Program	Worker	Cost Plan Creation Date	Review Request Date	Status	Cost Plan Begin Date
	APD	APD Waiver	Baer, Sylvia	06/29/2023	07/01/2023	Draft	07/01/2023

75. Update the following fields:
- Worker = WSC
 - Status = Draft
76. When finished, click **File > Save Plan**.
77. Print the AIM Worksheet. On the Plan Information page, click Reports. From here, select the AIM Worksheet.

The screenshot shows the 'Plan Information' section of the iConnect system. The left sidebar has a yellow highlight on the 'Plan Info' tab. The main form contains the following fields:

Worker	Buck, Jennifer
Cost Plan Creation Date *	04/01/2018
Comments	
Status *	Draft
Cost Plan Begin Date	07/01/2018
Cost Plan End Date	06/30/2020

78. This will launch a new window. Choose to save as an excel document, so it can be edited.

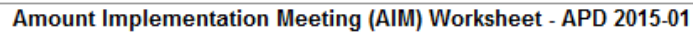
The screenshot shows a web browser window displaying the 'Amount Implementation Meeting (AIM) Discussion on iBudget Amount' form. An 'Export' dropdown menu is open, showing the following options: XML file with report data, CSV (comma delimited), PDF, MHTML (web archive), Excel (highlighted), TIFF file, and Word. The form content includes:

Amount Implementation Meeting (AIM) Discussion on iBudget Amount

Date: 10/29/2019	Date of Enrollment: 05/23/2018
Individual: Sheppard, John	Field Office: 11
Legal Rep: Sheppard, Violet	Region: SOUTHERN
Attendees:	PIN: 10106
WSC: Reed, Monica	Date of Birth: 01/01/1988
Algorithm Amt: \$12660.55	Proposed iBudget CP:

Please identify Significant Additional Needs that justify funding to exceed the algorithm amount.

79. Excel will launch and the AIM worksheet will show as 3 sheets. Each sheet represents a page of the AIM Worksheet. All 3 sheets need to be printed to take to the consumer and review.



Date: 10/29/2019	Date of Enrollment: 05/23/2018
Individual: Sheppard, John	Field Office: 11
Legal Rep: Sheppard, Violet	Region: SOUTHERN
Attendees:	PIN: 10106
WSC: Reed, Monica	Date of Birth: 01/01/1988
Algorithm Amt: \$12660.55	Proposed iBudget CP:

[illegible]

Individual or Legal Representative (Signature) _____ Date: _____
Individual or Legal Representative Printed Name Sheppard, Violet

80. Sheet 2 pulls from any existing planned services in the Plan

Amount Implementation Meeting Worksheet



Region: SOUTHERN

Date Submitted:

iBudget Cost Plan Begin/End Dates

From: 07/01/2018

To: 06/30/2019

Individual's Name: Sheppard, John

PIN: 10106

Legal Rep. Name: Sheppard, Violet

iBudget Amount: 170000

Requested Annualized Services

SERVICE	BEGIN DATE	END DATE	RATE	UNITS	AMOUNTS	ANNUALIZED	ANNUALIZED
(4260) Speech Therapy	07/01/2018	06/30/2019	16.02	1460.00	23389.2		\$
(4270) Support Coordination	07/01/2018	06/30/2019	148.69	12.00	1784.28		\$
(4270) Support Coordination	07/01/2018	11/01/2018	148.69	5.00	743.45		\$
(4270) Support Coordination	07/01/2018	06/30/2019	148.69	12.00	1784.28		\$
(4175) Residential	07/01/2018	06/30/2019	136.50	365.00	49822.5		\$
(4142) Personal Supports	08/29/2018	06/30/2019	4.00	2448.00	9792		\$
(4300) Transportation - Mile	07/01/2018	06/30/2019	30.00	2600.00	78000		\$
(4083) Life Skills	08/29/2018	06/30/2019	9.05	22.00	199.1		\$
TOTAL:					165514.81		

Region Office Notes

(For Region Office Use Only)



81. Print the Person-Centered Support Plan. Navigate to the Forms tab. Open the Person-Centered Support Plan Form from the grid view.

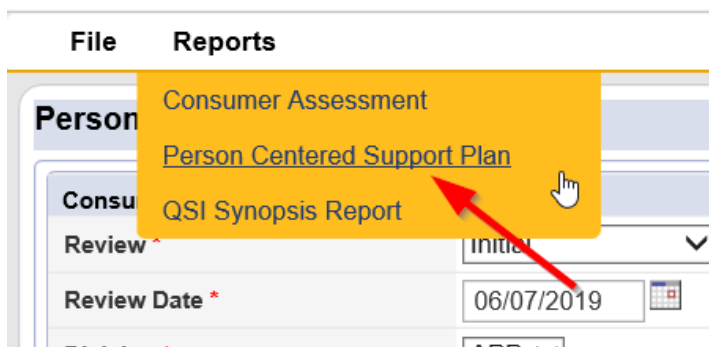
Demographics
Divisions
Consumer Budgets
Programs
Provider Selections
SAN
Notes
Forms
Appointments
Plans

Filters
Form
Search
Reset

4 Forms record(s) returned - now viewing 1 through 4

Form	Review	Review Date	Worker
Person-Centered Support Plan	Initial	06/07/2019	Mott, Shelia
Questionnaire Situational Information	Initial	06/07/2019	Mott, Shelia
HCBS Waiver Eligibility Worksheet	Annual	05/10/2019	Mott, Shelia

82. From within the PCSP form, select **Reports > Person Centered Support Plan**.



83. This will launch a new window. The WSC can either save directly to note or save as pdf to their computer. Either option will give the WSC a printable pdf version of the PCSP to be used when gathering consumer / legal representative signature.

Person-Centered Support Plan

About Me

Last Name: Sheppard First Name: John Nickname: Date of Birth: 01/01/1988

Medicaid ID: 12314588 iConnect ID: 10106 Legal Status:

Living Setting: Hospital - Psychiatric Spoken Language: English Alternate Communication: Braille

Where I Live

Street Address: 12 Sippary Road City: MIAMI State: FL Zip: 33101

Email Address: info@wellsky.com Cell/Home Phone: (205)854-9875 Work Phone: (559)874-4894 Region: SOUTHERN

Deliver my mail to: 12 Sippary Road City: MIAMI State: FL Zip: 33101

Best way to contact me: Work Phone|Permission to leave a voicemail message

My Legal Representative(s)

#1

Last Name: Admission First Name: Central Guardian/Legal Representative Type: Legal Representative

Relationship: Caregiver Other:

Address: 1234 Esplanade Way, Suite 100 City: TALLAHASSEE State: FL Zip: 32399

Day Phone: Night Phone: Cell Phone:

Email Address:

84. If the Save to Note option is chosen, a Note window will launch with the pdf output listed as an attachment.

Notes Details

Division *

APD

Note By *

Note Date *

06/07/2019

Program/Provider *

WSC Agency1

Details

Note Type *

Support Plan

Note Sub-Type

Signatures

Description

Person Centered Support Plan

Note

New Text

Printable output to share with consumer / legal representative and to obtain signatures.

Append Text to Note

Status *

Pending

Attachments

Add Attachment

Document

rp_custom_PersonCenteredSupportPlanReport.pdf

Description

85. Attach a copy of the signed AIM Worksheet and Person-Centered Support Plan to a Note in iConnect. On the consumer’s record, click on **Notes > File > Add Note**:

File Tools Reports Ticklers View Consumer Incident

Ad

Add Notes

Consumer People Search

Tick Search

Add Notes

Print

Consumers

Last Name

MY DASHBOARD

CONSUMERS

PROVIDERS

INCIDENTS

CLAIMS

SCHEDULER

Smith, Marianne (10043)

Diagnosis

Eligibility

Medications

Auths

Provider Documentation

Contacts

Consumer Module User

Demographics

Divisions

Consumer Budgets

Programs

Provider Selections

Notes

Forms

Appointments

Filters

Note Date

86. In the new Note record, update the following fields:

- a. Note Type = Support Plan

- b. Note Subtype = Signatures
- c. Status = Complete
- d. Attach the signed Person-Centered Output Report to the Note record by clicking **Add Attachment > Browse >** select the appropriate file from your computer > **Upload**
- e. Note Recipients = the WSC add all relevant providers as recipients on that note. If an update to the PCSP has information necessary for any or all providers, the WSC will follow the same process to notify the pertinent providers.

87. When finished, click File > Save and Close Note

Notes Details	
Division *	APD ▼
Note By *	Tierney, Jacqueline ▼
Note Date *	03/30/2018
Program/Provider	APD Waiver ▼ Details
Note Type *	Support Plan ▼*
Note Sub-Type	Signatures ▼
Description	<div></div>
Note	<div> 3/30 - Signed "Person Centered Support Plan" Output report attached to this Note record </div>
Status *	Complete ▼
Date Completed	03/30/2018

88. Navigate back to the Tickler Queue to complete the remaining Ticklers:

Filters

Status ▼

Equal To ▼

New ▼

AND ▼

✕

Last Name ▼

Equal To ▼

smith

AND ▼

✕

iConnect ID ▼

+

☐ Apply Alert Days Before Due

Search

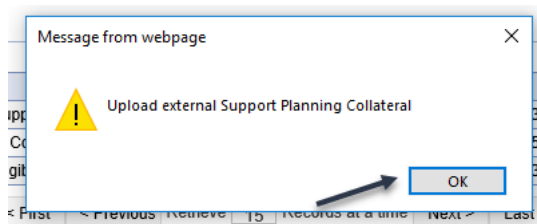
Reset

3 Ticklers record(s) returned - now viewing 1 through 3

<< First
< Previous
Retrieve 15 Records at a time
Next >
Last >>

89. Click on the Tickler called Upload Support Planning Docs to open it.

90. A Message Tickler will open – Upload external Support Planning Collateral. Click **OK**.



91. If the Consumer shared any collateral documentation with the WSC during the AIM, upload it to a Consumer Note by navigating to the consumer's record and clicking **Notes > File > Add Note**.

92. In the new Consumer Note record, update the following fields:

- a. Division = APD
- b. Note Type = Support Plan
- c. Note Subtype = Documentation
- d. Status = Complete

93. When finished, click **File > Save and Close Notes**

File Tools

Notes Details

Division *	APD ▼
Note By *	Reed, Monica ▼
Note Date *	03/30/2018
Program/Provider	▼
Note Type *	Support Plan ▼*
Note Sub-Type	Documentation ▼
Description	<div></div>
Note	<div>3/30 - Attached Support Plan Collateral Documentation below</div>
Status *	Complete ▼
Date Completed	03/30/2018

94. When finished completing the Tickler, hover over the arrow next to it and click **Complete**:

3 Ticklers record(s) returned - now viewing 1 through 3

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Upload Support Planning Docs	03/29/2018	03/29/2018		New	
Smith, Marianne	10043	Complete Cost Plan	03/29/2018	05/13/2018		New	
Smith, Marianne	10043	Waiver Eligibility Worksheet Reminder	03/29/2018	03/29/2019		New	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Cancel
Edit
Reassign
Complete
View Consumers Record

95. Back in the Tickler Queue, click on the next Tickler called Complete Cost Plan to open it.

96. The consumer's Plans List View grid will open. Click on the appropriate Cost Plan record to open it:

File

Workflow Wizard

Complete Cost Plan

Filters

Division

Search Reset

1 Plans record(s) returned - now viewing 1 through 1

Division	Program	Worker	Cost Plan Creation Date	Status	Cost Plan Begin Date	Cost Plan End Date
APD	APD Waiver	Reed, Monica	03/27/2018	Pending	03/27/2018	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

97. Review the planned services, and make updates as needed. Proceed to [Chapter 11|Edit Planned Services](#).

98. Add new planned services as needed. Proceed to [Chapter 11|Add Planned Services](#).

99. When complete, mark the tickler as complete. Back in the Tickler Queue, hover over the arrow next to the Tickler to click **Complete**:

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Complete Cost Plan	03/29/2018	05/13/2018		New	Reed, Monica
Smith, Marianne	10043	Waiver Eligibility Worksheet Reminder	03/29/2018	03/29/2019		New	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Cancel
Edit
Reassign
Complete
View Consumers Record

Support Plan Update

- Throughout the support plan year, the WSC may need to update the existing support plan based on changes in the consumer's needs or desires. The existing

Support plan form will be amended/updated. A new Support Plan form will not be created.

2. Also, the WSC may need to update the consumer's plan as a result of a Provider expansion. The Region Waiver Workstream Lead will monitor their Notes queue on My Dashboard for the Service Plan Impact Notification note. This note instructs Region Waiver Workstream Lead to run the authorization report to identify the impacted consumers.

- a. Navigate to the Reports chapter and select the Active Authorizations by Provider report.

- b. In the report parameters, enter the following:
 - Fund Code = APD
 - Fiscal Year = current and possibly next Fiscal year
 - Program = Select the provider by agency name

- c. Select Run Report.

Report Name	Description
<input type="radio"/> 835 Status Report	This report is intended to show the BPR and Claim Payment Amounts for the most recent 835.
<input type="radio"/> Active Authorizations	Summary list of all Active Authorizations for the selected Fund Code and Fiscal Year. One row will be displayed for each authorized service.
<input type="radio"/> Active Authorizations By ISO	This report shows a summary of the amount authorized by index code and by subobject code.
<input checked="" type="radio"/> Active Authorizations By Provider	This report shows details of authorizations grouped by Provider.
<input type="radio"/> Active Authorizations By Provider and Service Code	In the Service Code parameter, type in the service code exactly as is (ex. G9005:U3). This report shows active authorizations for the selected provider and service code.

- d. The report opens in a new window and can be downloaded as an Excel spreadsheet if needed.

Generated By: Jennifer Buck on 03/23/2020 04:37 PM

Fiscal Year: 2020

Consumer	Case No	Auth	Status	Start/End Dates	Region	Match Source	Service Code	Units	Unit Cost	Auth Amt
Consumer Name	12345	Fully Approved	2/6/2020 - 6/30/2020	Central		G9012:UC	5	\$148.89	\$743.45	
Grand Total Authorized Amount:									\$743.45	

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- e. The Region Waiver Workstream Lead will contact each impacted consumer's WSC to inform them of the approved provider expansion request.

- f. The WSC will update each impacted consumer's plan, planned services and authorizations as a result of the approved provider expansion request.
3. The steps to update the consumer plan are below. The steps to update planned services is in [Chapter 11|Cost Plan](#).
4. The WSC will locate the Support Plan form on the Consumer record > **Forms** tab and select to edit.
5. The form must be in Draft, Pending or Open status to be editable. Forms in Complete status are read only and cannot be edited.

MY DASHBOARD **CONSUMERS** PROVIDERS INCIDENTS CLAIMS SCHEDULER UTILITIES

Sheppard, Alice (10053)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module
Demographics Divisions Consumer Budgets Programs Provider Selections SANS Notes **Forms** Appointments Plans

Filters
Form

20 Forms record(s) returned - now viewing 1 through 15

Form	Review	Review Date	Worker
Person Centered Support Plan	Annual	07/05/2019	Buck, Jennifer
Person Centered Support Plan	Initial	07/05/2018	Buck, Jennifer

6. Update the fields as needed. Click **File > Save and Close Forms**.
7. Every time a form is saved, a snapshot of the form is saved in the History records. Select **File > History** to review previous versions of the support plan.

opd iConnect Alice Sheppard Last Updated by Buck at 7/5/2018 2:39:41 PM **Forms**

File Reports

Copy Shared Response
History
Duplicate Assessment
Spell Check
Save Forms
Save and Close Forms
Print
Close Forms

Worker * Buck, Jennifer Clear Details
Status * Draft
Provider/Program
Approved Date

PERSON CENTERED SUPPORT PLAN

Support Plan Effective Date* 05/01/2018
My Waiver Support Coordinator
WSC Name* Buck, Jennifer

8. If more than one history record exists, click the Next or Last buttons at the bottom of the page to view each one.

File

History Viewer

This record was updated by j buck at 7/5/2018 2:39:41 PM

Person Centered Support Plan

Consumer Forms

Review *	Initial	Worker *	Buck, Jennifer
Review Date *	07/05/2018	Status *	Draft
Division *	APD	Provider/Program	
Approved By		Approved Date	
Note			

PERSON CENTERED SUPPORT PLAN

Support Plan Effective Date* 05/01/2018

My Waiver Support Coordinator

WSC Name*	Buck, Jennifer
WSC Agency Name:	
WSC Phone Number:	
WSC Email:	

<< First < Previous Record 1 of 3 Next > Last >>

Annual Support Plan Review

100. When the Program record was saved with Program = APD waiver and Status = Enrolled, a Workflow Wizard was triggered prompting the Waiver Support Coordinator (Primary Worker) to complete the Annual Support Plan Review due before the expiration of the current Person-Centered Support Plan. The WSC will receive a tickler due 365 days from the APD waiver Program Begin Date, however WSC's usually begin the process 90 days in advance.

iConnect

John Sheppard
Last Updated by j buck
at 5/23/2018 3:37:16 PM

Program

File Tools Word Merge

Program

Program Workers

Notes

Events

Track Disposition

Division *

Worker

Referral Date

Create Date *

Program *

Disposition *

Disposition Date *

Enrollment Type

Program Begin Date *

Expected Deactivated Date

Comments

APD

Buck, Jennifer

05/23/2018

APD Waiver

Enrolled

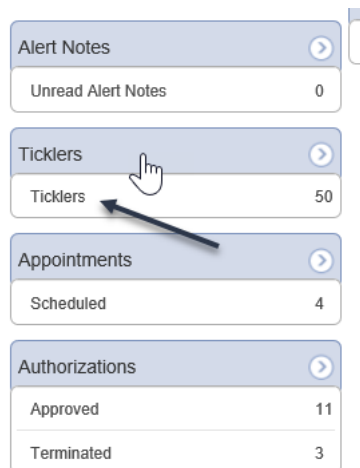
05/23/2018

Pre-Enrollment to Waiver

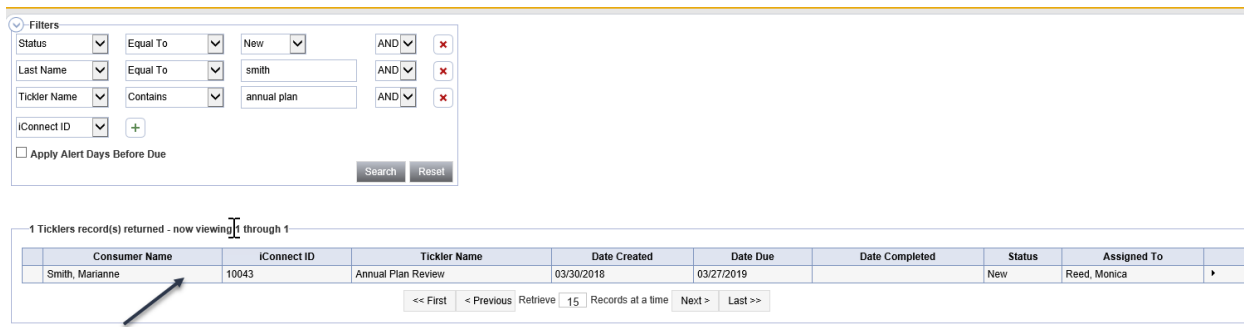
05/23/2018

101. When the tickler above is completed, a second Workflow Wizard will be triggered prompting the Waiver Support Coordinator to complete the Annual Support Plan Review again, 365 days after the first tickler is completed.

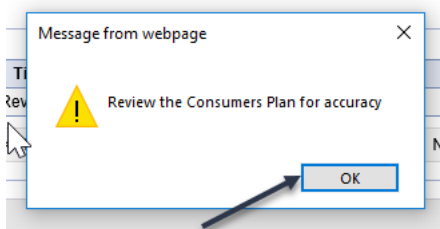
102. Assume one year has passed since the Consumer was enrolled on the waiver, access the Annual Plan Review Tickler by navigating to the **My Dashboard**, finding the consumer's section and scrolling down to the Ticklers Panel. Click on the **Ticklers** link:



103. In the Tickler Queue, use the multi variable search to narrow the results down to the Annual Plan Review Tickler. Click on the Tickler to open it:



104. A Message Tickler will open – Review the Consumers Plan for accuracy. Click **OK**.



105. Navigate to the consumer's record and click on the **Plans** tab. Open the relevant Cost Plan and review it for accuracy.

106. Navigate to the consumer's record and click on the Forms tab. Click the **Person-Centered Support Plan** form with Status = Open.

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER UTILITIES

Sheppard, Alice (10053)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module **Forms** Appointments Plans

Demographics Divisions Consumer Budgets Programs Provider Selections SANS Notes

Filters
Form

20 Forms record(s) returned - now viewing 1 through 15

Form	Review	Review Date	Worker
Person Centered Support Plan	Annual	07/05/2019	Buck, Jennifer
Person Centered Support Plan	Initial	07/05/2018	Buck, Jennifer

107. WSCs should never utilize the same person-centered support plan from year to year. However, some information may not change. While goals, needs, and other important factors must be reviewed and updated each year, WSCs may use the **Duplicate Assessment** feature to copy information such as the social history. However, the WSC must update all section of the support plan with new information and change the effective date of the plan.

108. Click **File > Duplicate Assessment**. A notification window displays. Click OK. The new Person-Centered Support Plan form that is an exact copy of the existing Person-Centered Support Plan form is displayed.

qadconnect

Alice Sheppard
Last Updated by Buck
at 7/5/2018 2:30:41 PM

Forms

File Reports

Copy Shared Response
History
Duplicate Assessment
Spell Check
Save Forms
Save and Close Forms
Print
Close Forms

Initial Worker * Buck, Jennifer
Status * Draft
Provider/Program
Approved Date

PERSON CENTERED SUPPORT PLAN

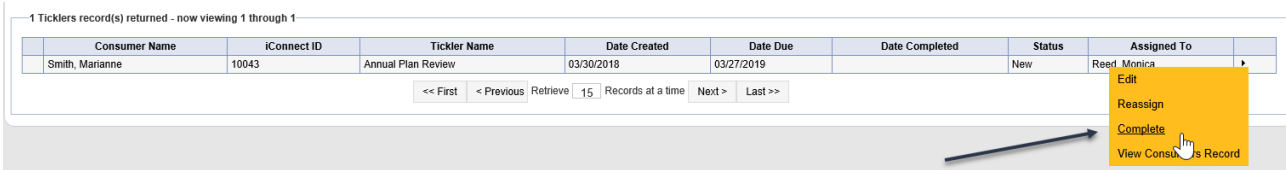
Support Plan Effective Date* 05/01/2018

My Waiver Support Coordinator

WSC Name* Buck, Jennifer
WSC Agency Name:
WSC Phone Number:

109. In the Form header, change the **Review Type** = Annual.
110. Update the support plan effective date.
111. Make updates to goals, needs, and other important factors.
112. When finished, change the **Status** = Open. Click **File > Save and Close Forms**.

- 113. The Forms list view displays. Select the existing (previous year’s) Person-Centered Support Plan form.
- 114. In the header change the **Status** from Open to Complete.
- 115. Click **File > Save and Close Forms**.
- 116. Navigate back to the Tickler Queue and hover over the arrow next to the Tickler to click **Complete**:



Chapter 11 | Cost Plan

Introduction

In iConnect, the 'Cost Plan' consists of one or more 'planned services' the Consumer needs to meet his/her needs. These planned services must be validated against the algorithm amount and other business rules through the plan validation function in iConnect. This same process is followed for individuals who transition to the waiver via crisis, or any other approved waiver enrollment process.

Authorizations cannot be created until the plan is validated successfully. Please review the definitions below:

Planned Services: Planned Services are services, such as respite, support coordination and transportation, that the WSC has added to the consumer record in iConnect. The services are decided based on the QSI results and needs, and information gathered during the AIM or person-centered planning process. A set of Planned Services are contained within a Cost Plan.

Plan Validation: After Planned Services have been added to the Cost Plan, the Cost Plan is validated against business rules, requirements and regulations. iConnect includes a validation tool to perform this function. If validation passes, the WSC can then authorize the Planned Services. If validation does not pass, the WSC and/or regional or state staff make corrections or complete reviews until the Cost Plan has been successfully validated.

Authorizations: Once the Cost Plan has been successfully validated, each Planned Service, both waiver and non-waiver, must be authorized, using the iConnect authorization function. If a provider does not have access to iConnect, the WSC sends the authorizations to the provider. When a provider has access, they can view the authorizations in the application.

Create a New Cost Plan

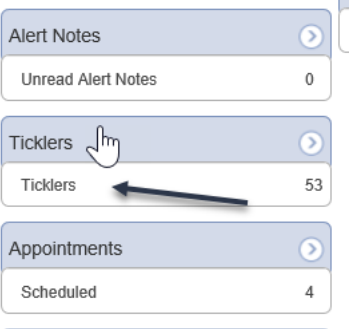
117. Upon enrolling the Consumer into the APD waiver Program (see Chapter on Standard APD Enrollment), a Workflow Wizard triggered the following Ticklers to the Waiver Support Coordinator:

- a. Initiate Cost Plan, due immediately
- b. Complete Cost Plan - *Assigned to WSC*, Due in 45 Days

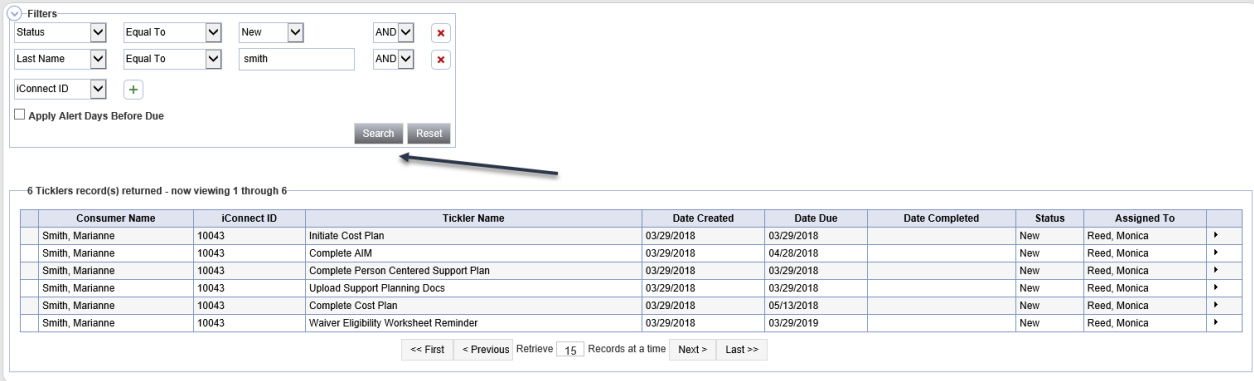
118. To complete the Ticklers, log into iConnect and set Role = WSC/CDC. Click **Go**.

The screenshot shows the iConnect application interface. At the top, there is a header bar with the iConnect logo on the left. In the center, it says 'Welcome, Monica Reed' and '3/29/2018 2:45 PM'. To the right of the welcome message are links for 'My Harmony' and 'Sign Out'. On the far right of the header is a 'Role' dropdown menu currently set to 'WSC/CDC' with a 'GO' button next to it. Below the header is a 'Quick Search' section with a text input field, a 'Consumers' dropdown, a 'Last Name' dropdown, and a 'GO' button. There is also a checkbox labeled 'Participating' which is checked. To the right of the search section is an 'ADVANCED SEARCH' link. A blue arrow points from the 'GO' button next to the 'Role' dropdown to the 'GO' button in the 'Quick Search' section.

119. On the **My Dashboard**, find the Consumers section and scroll down to the Ticklers Panel. Click on **Ticklers** to open the Tickler Queue:

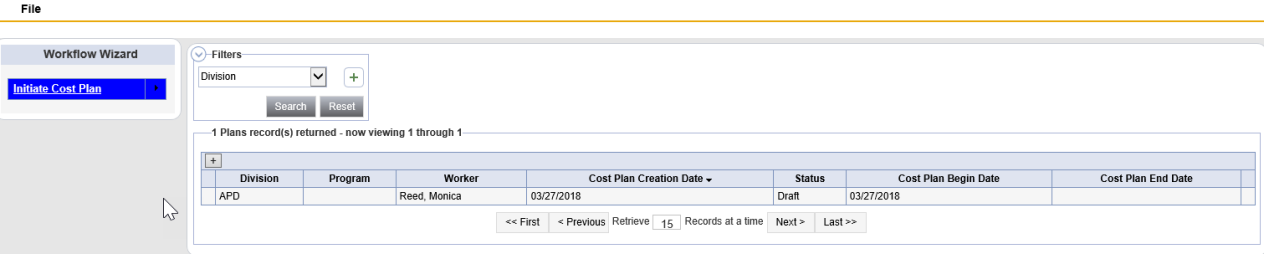


120. Use the multi variable search to narrow down the Tickler Queue. Click **Search**:



121. Click to open the first Tickler called Initiate Cost Plan

a. The consumer’s Cost Plan List View Grid will open. Verify a Plan Record does not already exist. If not, once must be created.



122. Plan records are required before planned services and authorizations can be created.

123. From the tickler flyout menu, select View Consumer Record to open the consumer’s record. Click > the **Plans** tab.

124. Click **File > Add Plan**.

File Ticklers

Add New Demographics Search

Add Plan

Print

Quick Search

Consumers Last Name GO ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS UTILITIES

Kastner, Martin (209730)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Pays

Filters

Division Search Reset

7 Consumers Plans record(s) returned - now viewing 1 through 7

Division	Program	Worker	Cost Plan Creation Date	Review Request Date	Status	Cost Plan Begin Date

125. The Plan Information page displays. Update the following fields:
- Cost Plan Creation Date = today
 - Division, Worker and Status have default values that do not need to be changed.
 - Enter the Cost Plan Begin and End Dates.
 - The remaining non-required fields can be left blank.

opd iConnect

John Sheppard | Plan Information

6/22/2018 11:25 AM

File

Plan Details

Division * APD

Program

Worker Buck, Jennifer

Cost Plan Creation Date * 06/01/2018

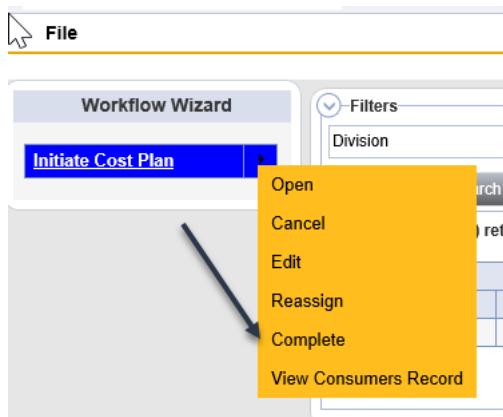
Comments

Status * Draft

Cost Plan Begin Date

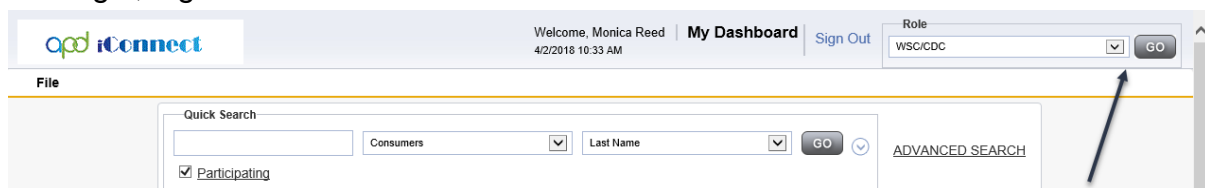
Cost Plan End Date

126. Click **File > Save Plan**. Additional subpages are visible to the left.
127. Proceed to [Adding Planned Services](#) if needed.
128. Hover over the arrow next to the Initiate Cost Plan Tickler to click **Complete**. Then click **File > Close Workflow Wizard**.

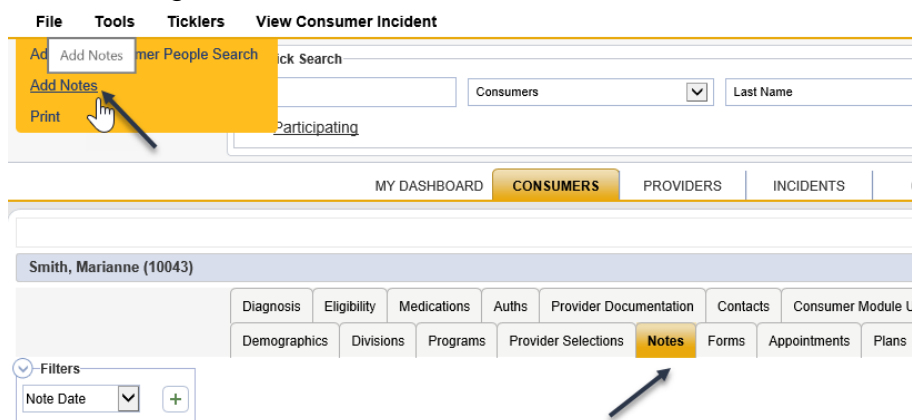


Identify & Select Service Providers

1. The Waiver Support Coordinator or the Pre-Enrollment Support Coordinator will work with the Consumer to identify any available natural and community support for each required Service.
2. To assist the Consumer with selecting Providers, set up Provider interviews and site visits. Then complete the following process for each Provider.
3. Document the Provider interviews and site visits in Consumer Note records. To begin, log into iConnect and set Role = WSC/CDC. Click **Go**.



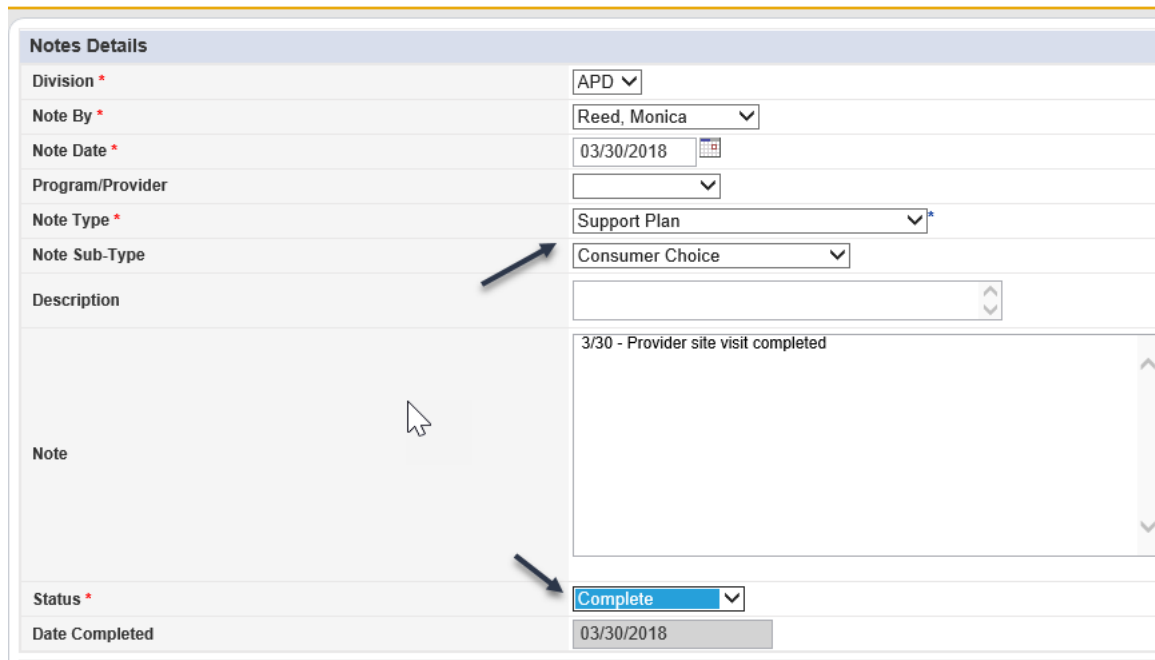
4. Navigate to the consumer's record and click **Notes > File > Add Note**:



5. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Support Plan

- c. Note Subtype = Consumer Choice
- d. Note = Document details of interview/site visit
- e. Status = Complete

6. When finished, click **File > Save and Close Note**.



The screenshot shows the 'Notes Details' form with the following fields and values:

Notes Details	
Division *	APD
Note By *	Reed, Monica
Note Date *	03/30/2018
Program/Provider	
Note Type *	Support Plan
Note Sub-Type	Consumer Choice
Description	
Note	3/30 - Provider site visit completed
Status *	Complete
Date Completed	03/30/2018

Annotations in the image include:

- A blue arrow pointing to the 'Note Sub-Type' dropdown menu.
- A blue arrow pointing to the 'Status' dropdown menu.
- A mouse cursor icon pointing to the 'Note' text area.

7. Once the Provider has provided acknowledgment and the consumer has approved, the Waiver Support Coordinator can give the provider access to the consumer's record. To do so navigate to the consumer's record and click on the **Provider Selections** tab.
8. From the **File** menu, select **Add Provider**.
9. Complete the following fields:
- a. Provider = select the ellipsis to search for and select the provider
 - b. Referral Type = Select applicable value
 - c. Disposition = Referred
 - d. Disposition Date = defaults to today and editable if needed
 - e. Worker = change the default Provider Worker to the actual worker for the provider who indicated they were interested.

oqo iConnect | **Provider**
2/21/2020 3:15 PM

File

Division *	APD ▼
Selected By	Buck, Jennifer ... Clear Details
Selection Date	02/21/2020 [calendar icon]
Provider *	[empty] ... Clear
Referral Type *	▼ *
Disposition *	▼
Disposition Date	02/21/2020 [calendar icon]
Provider Worker *	Buck, Jennifer ... Clear Details
Comments	[text area]
Type of Bed	▼
Bed Capacity	[text field]
Bed Status	▼

10. When finished, from the File menu, select Save and Close Provider.
11. Later in the cost plan approval process, once the provider has been selected and approved by the Consumer, and added to the planned service, the WSC will update the status of the provider's Provider Selection record from Referred to Open.
12. Provider selection records with a status of Referred, opened for more than 30 days will automatically be closed by iConnect, removing the provider's access to the consumer record.

Add Planned Services

1. To add new planned services or update services with the selected provider, the WSC will navigate to the consumer's record and click on the **Plans** tab. Upon doing so, the consumer's Plan List View grid will open.
2. In the consumer's Plan List View grid, open the relevant Plan > click on **Planned Services** subpage


File Reports	
Plan Information	Plan Details
Planned Services	Division * <input type="text" value="APD"/>
Cost Plan Review Notes	Program * <input type="text" value="APD Waiver"/> Details
	Worker <input type="text" value="Buck, Jennifer"/> ... <input type="button" value="Clear"/> Details
	Cost Plan Creation Date * <input type="text" value="01/17/2020"/>
	Comments <input type="text"/>
	Status * <input type="text" value="Draft"/>
	Cost Plan Begin Date * <input type="text" value="07/01/2020"/>
	Cost Plan End Date * <input type="text" value="06/30/2021"/>

3. Click **File > Add Planned Service**.

4. A new Planned Service record opens. Update the following fields:

- a. Fiscal Year Choose the applicable fiscal year.
NOTE: Fiscal Years in iConnect are in yyyy format. This is different than the yy – yy FY format APD is used to. For example: 20 – 21 FY = 2021 in iConnect.
- b. Begin Date Enter the begin and End dates as the dates of service.
- c. End Date Enter the begin and End dates as the dates of service.
NOTE: The Start and End Dates of a Planned Service must be within the Cost Plan Begin and End Dates located on the Plan Information page.
- d. Index/SubObject Code: The ISO is an iConnect term that defines which 'bucket of money' the service is being paid from Statewide and by region.
 - WSCs will select their regional ISO, not 'Statewide.'
- e. Service Ratio: Select the correct ratio only if the service contains a ratio
- f. County: pulls from the consumer demographic page
- g. Geographic Differential: Select Geographic, Non-geographic or Monroe
- h. Provider Rate Type: Select Solo or Agency
- i. Service Code: Search for and select the service code.
- j. Unit Type auto populates when service code selected
- k. Unit Per Enter the identified number of units per period.
 - i. This value will vary depending on the service selected and can vary with time of year.
- l. Unit of Measure
- m. Total No of Units will auto-populate
- n. Provider ID: Search for and select the service provider if known at the time the planned service is added. If not known, can select Pending Provider. A valid provider must be selected before creating an authorization.
- o. Rate will auto populate and depending on the service code may or may not be editable.

- p. Max Amount will auto populate once the service code, rate and provider have been selected.
- q. Amount Requested = used by the Lead when the amount requested does not equal the amount approved
- r. Authorization Notes/Comments = enter notes. This is a required field. Text in this field will be visible on the Auth Service and printed authorization.
- s. Contract Number = enter if applicable.
- t. Non-Taxable = check if applicable.
- u. Planned Service Status = Proposed.

 5/1/2020 4:45 PM | **Planned Service**

File

Planned Services

Division

APD

Fiscal Year *

2021

Begin Date

07/01/2020

End Date

06/30/2021

Index/SubObject Code *

IndexCode	Index Description	SubObject	SubObject Description
Central	Central Region	Waiver	iBudget Waiver

Service Ratio

Consumer County *

Miami-Dade

Geographic Differential *

Geographic

Provider Rate Type *

Solo

Service Code *

G9012:UC

Service Description

(4270) Support Coordination

Unit Type

Month

Units Per *

1

Units of Measure *

Month - Round Up

Total No of Units

12

Provider ID *

14988

Details

Provider

1 HOPE COORDINATION INC

Rate *

\$148.69

Max Amount *

\$1,784.28

Amount Requested

Authorization Notes/Comments *

WSC comments visible on the authorization

5. When finished, click **File > Save and Close Planned Service**.

6. Repeat the steps above for all relevant Providers/Services

7. Planned Services can be created in iConnect prior to the Provider Selection Process if desired. The Provider = Pending Provider should be used until the actual provider is selected. Once the actual provider is selected, remember to update the Provider Selection record for the provider from Referred to Open status.

8. Once the plan contains all necessary planned services, proceed to [Plan Validation](#). However, if services need to be edited or removed, those sections follow.

Edit Planned Services

Planned services may be edited for several reasons. A planned service may exceed the budget and the dates need editing to decrease the amount requested. A planned service may only be partially approved following a region or state office review and the units may need to be decreased. Planned services are edited as a result of an approved provider expansion request. Regardless of the reason, the steps to edit the planned service are the same.

1. The Waiver Support Coordinator will log into iConnect.
2. Navigate to the consumer's record and click the **Plan** tab. Select the APD waiver Plan.

Division	Program	Worker	Cost Plan Creation Date	Review Request Date	Status	Cost Plan Begin Date	Cost Plan End Date	Fiscal Year
APD	APD Waiver	Baer, Sylvia	06/26/2023	07/01/2023	Draft	07/01/2023	06/30/2024	2024
APD	APD Waiver	Baer, Sylvia	07/01/2023		Approved	07/01/2023	06/30/2023	2023

3. The Plan Details page displays. If the Plan has already been validated and reviewed by the Region and/or State, the Status will equal Approved and the Plan will be read only. The WSC will need to Reverse the Status of the Plan before editing the Planned Services and/or adding new.
4. To do so, the WSC must use the WSC Cost Plan Adjustment Role.
5. Select the APD waiver Plan record with status = Approved. The Plan Information Page displays.
6. Click **File > Reverse Status**.

John Sheppard
Last Updated by j buck

Plans Sign Out

Role
WSC Cost Plan Adjustment

FL APD Sandbox - Internet Explorer

https://fwtest.harmonyis.net/FLAPDSandbox/Pages/Harmony.aspx?ChapterID=480&ViewType=SubPageView&PageID=57563&ChapterEntityID=10106&EntityID=198&CallingChapter=Consumers&CallingPage=Plans%20List&ParentEntityID=10106&_popup_=1

opd iConnect

John Sheppard
Last Updated by j buck
at 3/21/2019 12:22:39 PM

Plan Information

File Reports

Duplicate
Spell Check
Save and Validate Plan
Reverse Status
History
Print
Close Plan Information

Details

APD
APD Waiver Details
Reed, Monica
Plan Creation Date *
04/01/2018

7. The record is now editable, and the **Plan Status** equals Draft.

Plan Information

Violet Sheppard
Last Updated by lritchie
at 8/27/2019 12:40:06 PM

File Reports

Plan Details

Division * APD

Program * APD Waiver [Details](#)

Worker Reed, Monica [Clear](#) [Details](#)

Cost Plan Creation Date * 07/01/2018

Comments

Status * Draft

Cost Plan Begin Date * 07/01/2018

Cost Plan End Date * 06/30/2019

8. Click **File > Save Plan**.

9. Click the **Planned Services** subpage.

Planned Services

Violet Sheppard
11/11/2019 12:11 PM

File Tools

Filters

Max Amount [+](#)

[Search](#) [Reset](#)

2 Planned Services record(s) returned - now viewing 1 through 2

Provider	Service Code	Service Description	Unit Type	Rate	Max Amount	Total No of Units	Amount Requested	Begin Date	End Date	Provider Rate Type	Service Ratio
Generic CDC+ Provider	H0043:UC	(4176) Residential Habilitation - Basic (day)	Day	\$39.60	\$1,900.80	48.0000		07/01/2018	06/30/2019	Agency	
WSC Agency1	G9012:UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28	12.0000		07/01/2018	06/30/2019	Solo	
					\$3,685.08	60.0000					

10. Select the planned service that needs to be changed to open the details page.

11. Update the planned service details as needed.

12. For each, change the **Planned Service Status** = Proposed.

13. When finished, click **File > Save and Close Planned Service**

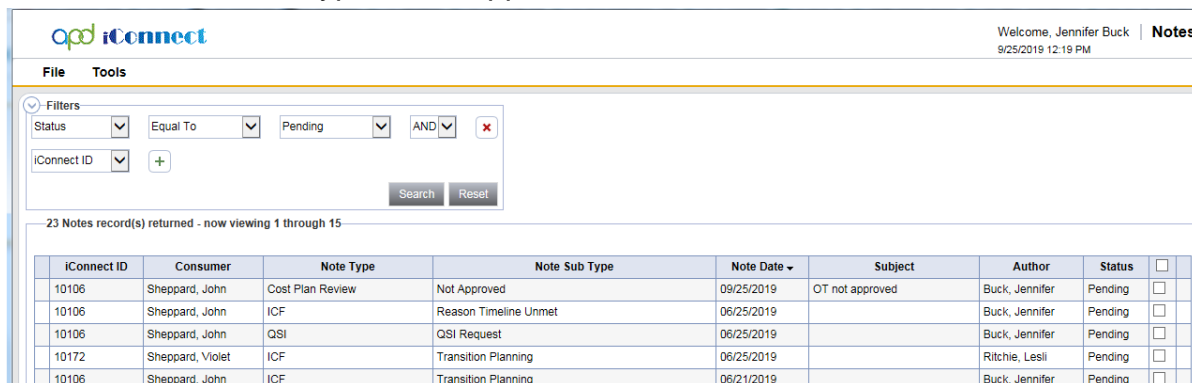
14. Complete [Plan Validation](#).

Remove Planned Services

Planned services may need to be deleted when an error is made or when a planned service is denied. The Planned services must be removed from the Plan to be

excluded from future plan validations. The WSC and other designated staff will have access to the WSC Cost Plan Adjustment role in iConnect. You cannot delete a planned service that has already been pushed to an authorization.

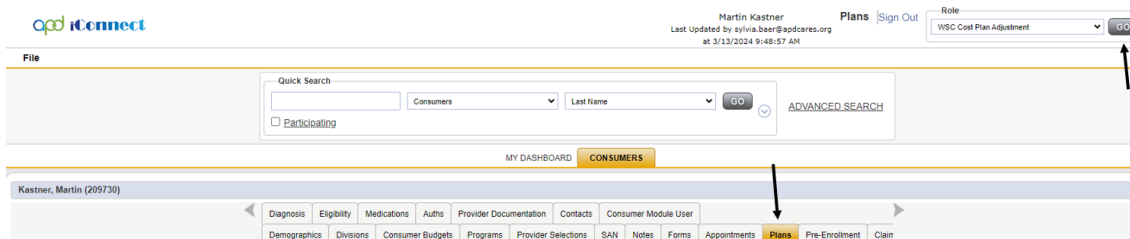
1. When a service is denied by the Region or State Office reviewer, the WSC will be notified by monitoring My Dashboard for incoming Notes. Note Type = Cost Plan Review. Sub Type = Not Approved.



iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status	
10106	Sheppard, John	Cost Plan Review	Not Approved	09/25/2019	OT not approved	Buck, Jennifer	Pending	<input type="checkbox"/>
10106	Sheppard, John	ICF	Reason Timeline Unmet	06/25/2019		Buck, Jennifer	Pending	<input type="checkbox"/>
10106	Sheppard, John	QSI	QSI Request	06/25/2019		Buck, Jennifer	Pending	<input type="checkbox"/>
10172	Sheppard, Violet	ICF	Transition Planning	06/25/2019		Ritchie, Lesli	Pending	<input type="checkbox"/>
10106	Sheppard, John	ICF	Transition Planning	06/21/2019		Buck, Jennifer	Pending	<input type="checkbox"/>

2. To delete a planned service, select the WSC Cost Plan Adjustment Role.

3. Navigate to the consumer's record and select the **Plans** tab.



4. Open the plan record. Select the **Planned Services** subpage.
5. From the Planned Services List view > select the planned service that is denied or added in error. The Plan Service Details page displays.
6. From the **File** menu > select **Delete Planned Service**. The Planned Service Record is deleted. Document details of the planned service that was deleted in error or because it was denied, in a Note.

opd iConnect Violet Sheppard | **Planned Service**
 Last Updated by Iritchie
 at 9/27/2019 12:38:20 PM

File

- Save Planned Service
- Spell Check
- Save and Add Planned Service
- Save and Close Planned Service
- Delete Planned Service
- History
- Delete Planned Service
- Print
- Close Planned Service

APD

2019

07/01/2018

06/30/2019

IndexCode	Index Description	SubObject	SubObject Description
Northeast	Northeastern Region	Waiver	iBudget Waiver

Consumer County * ALACHUA

Provider Rate Type * Solo

Service Code * G9012:UC

Service Description (4270) Support Coordination

Unit Type Month

Units Per * 1.00

Units of Measure * Month - Round Up

Total No of Units 12.0000

Provider ID * 10035 [Details](#)

Provider WSC Agency1

Rate * \$148.69

Max Amount * \$1,784.28

Amount Requested

notes

Authorization Notes/Comments *

7. From the **Plan** record select the **Cost Plan Review Notes** subpage.

8. From the **File** menu > select **Add Note**:

opd iConnect John Sheppard | **Cost Plan Review Notes**
 9/25/2019 12:11 PM

File

Plan Information

Planned Services

Cost Plan Review Notes

Filters

Note Type * Equal To Cost Plan Review AND X

Note Date +

Search Reset

0 record(s) returned

9. In the new Note record, update the following fields:

- Division = APD
- Note By = defaults to self
- Note Date = defaults to today
- Cost Plan Review Note = Yes
- Note Type = Deleted Planned Services

- f. Note = details of the services that were deleted because they were denied, or they were added in error
- g. Status = Complete

10. When finished, click **File > Save and Close Notes**.

Notes

Division * APD

Note By * Buck, Jennifer

Note Date * 09/25/2019

Cost Plan Review Note? * Yes

Note Type * Cost Plan Review

Note SubType Not Approved

Description denied OT

Note Denied OT services - please remove from cost plan

Status * Pending

Date Completed

Attachments

[Add Attachment](#)

Document	Description	Category	Action
There are no attachments to display			

Recipients

Select a new Recipient:

Name	Date Sent	Date Read	Status	Date Signed	
Reed, Monica	9/25/2019		Unread		Remove

11. Edits have been made to the plan, proceed to [Plan Validation](#).

Cost Plan Review Note

- If additional communication is needed between the WSC and Region and or/State Office reviewers, a Note will be created in iConnect.
- Navigate to the consumer's record and click the **Plans** tab. Open the current cost plan record. Select the **Cost Plan Review Notes** tab.
- From the **File** menu > select **Add Note**:

The screenshot shows the iConnect application interface for 'Cost Plan Review Notes'. The top header includes the 'apd iConnect' logo, the user 'John Sheppard' with a timestamp '9/25/2019 12:11 PM', and the page title 'Cost Plan Review Notes'. A sidebar on the left contains 'Plan Information', 'Planned Services', and 'Cost Plan Review Notes' (which is highlighted with an orange button). The main content area has a 'File' tab and a 'Filters' section. The filters include 'Note Type' (set to 'Cost Plan Review'), 'Note Date', and a search bar. The search results show '0 record(s) returned'.

4. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note By = defaults to self
 - c. Note Date = defaults to today
 - d. Cost Plan Review Note = Yes
 - e. Note Type = Cost Plan Review
 - f. Note Subtype = Plan Validation Review
 - g. Note = Describe issues with the Plan
 - h. Status = Pending
 - i. Route the Note to the appropriate Region/State Staff by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
5. When finished, click **File > Save and Close Notes**

oconnect iConnect John Sheppard | **Notes**
9/25/2019 12:44 PM

File Tools

Notes

Division * APD

Note By * Buck, Jennifer

Note Date * 09/25/2019

Program APD Waiver [Details](#)

Cost Plan Review Note? * Yes

NoteType * Cost Plan Review

Note SubType Plan Validation Review

Description

Note

Describe issues with the Plan

Status * Pending

Date Completed

Attachments

[Add Attachment](#)

Document	Description	Category	Action
There are no attachments to display			

Recipients

Select a new Recipient:

Name	Date Sent	Date Read	Status	Date Signed	
Reed, Monica	9/25/2019		Unread		Remove

6. The Region/State Staff will monitor their **My Dashboard** for new Pending Note records.
7. To do so, log into iConnect and set Role = Region Waiver Workstream Worker OR State Office Worker. Click **Go**.
8. Find the consumer's Panel and click on the link for Notes with Status = Pending. Click on the **Pending** link to open the Notes Queue:

Ticklers	
Ticklers	134

Plans	
Approved	1
Draft	1
Pending	1

Appointments	
Scheduled	1

9. In the Notes Queue, open the Note record with Note Type = Cost Plan and Note Subtype = Plan Validation Review

File

Filters

Status Equal To Pending AND

Fund Code

1 Plans record(s) returned - now viewing 1 through 1

Consumer	Fund Code	Program	Open Date	Closed Date	Worker	Status
Smith, Marianne	APD		03/30/2018		Tierney, Jacqueline	Pending

<< First < Previous Retrieve 15 Records at a time Next > Last >>

10. Review the contents of the Note to understand the issues identified in the consumer's Plan.
11. If needed, view the Plan Validation Report. Navigate to the consumer's record and click on **Plans** tab > select the Plan to open. From the **Reports** menu in the toolbar select > **Plan Validation Report**.

opd iConnect

QSI Assessor

John Sheppard
Last Updated by j buck
at 8/23/2018 4:36:39 PM

Plan Information

File Reports

Consumer Plan

Plan Info: Plan Validation Report

Planned Services

QSI Needs

Plan Notes

Program * APD

APD Waiver

Worker Buck, Jennifer

Cost Plan Creation Date * 04/01/2018

Comments

Status * Draft

Cost Plan Begin Date 07/01/2018

Cost Plan End Date 06/30/2020

12. The Region/State staff will document the request or other details as appended text to the Cost Plan Review Note.
13. Navigate to the Notes tab of the Consumer Record. Select the Note record with Note Type = Cost Plan and Note Subtype = Plan Validation Review to Open.
14. Update the following fields:
- Notes = Append Notes with details

- b. Status = Complete. Keep Status Pending if expecting a response from the recipient.
- c. Note Recipient = Search for and select the Waiver Support Coordinator.

15. From the **File** menu > **select Save and Close Notes**.

16. The WSC will monitor his/her **My Dashboard** for new Note records and address issues as noted.

Plan Validation

1. After adding all Providers/Services to the consumer's Cost Plan and/or edits to the Planned Services, *validate* the Cost Plan by clicking **File > Save and Validate Plan**:



Key Point

Make sure a Program is selected on the Plan Information page, otherwise plan validation option will not be visible.

2. The system will automatically apply relevant business rules to validate that the plan complies with all requirements and regulations

Plan Passes Validation

1. If the Plan Passes Validation the system will display a message will be displayed indicating Plan has passed validation. Click OK.
2. On the **Plan Information** page, the WSC will change the Plan Status from Draft to No Review Required.
3. The Region or State Review field on the Plan Information page can remain blank.

Plan Information

Last Updated by j buck@apdcares.org at 4/29/2020 12:01:52 PM

File Reports

Plan Details

Division * APD

Program * APD Waiver Details

Worker Buck, Jennifer Clear Details

Cost Plan Creation Date * 06/01/2020

Comments

Status * No Review Required

Cost Plan Begin Date * 07/01/2020

Cost Plan End Date * 06/30/2021

Region or State Review

4. If these are new Planned Services, the **Create Authorizations** menu option will appear on the **Planned Services** tab. Proceed to section [Create Authorizations](#).
5. If these are changes made to existing Planned Services that are linked to existing authorizations, the Update Authorizations menu option will appear on the Planned Services tab. Proceed to section [Update Authorizations](#)

Plan Fails Validation

1. If the Plan Fails Validation the system will return a message indicating that issues were identified.
2. If the Plan Failed Validation, identify issues with the Plan. Click **View Issues > Okay**.
 - a. A Report will appear that identifies issues that caused the Plan to fail Validation
 - b. The WSC will correct all services that failed validation that do not require Region or State Office review.
 - c. When finished, click **Save and Validate Plan** again to verify all services that originally failed validation are now resolved. The Plan will either pass Validation or require Region and/or State Office review.
3. If the Plan now passes Validation, and Region nor State Office review is required, the WSC will update the following fields:
 - a. On the **Planned Services** subpage, the WSC will update the **Planned Service Status** from Proposed to Approved for each planned service.
 - b. On the **Plan Information** page, the WSC will change the **Plan Status** from Draft to No Review Required.
 - c. Region or State Review is left blank.

d. On the Plan Information page, Select **Save Plan**.

e. Proceed to section [Create Authorizations](#).

The screenshot displays the iConnect application interface. At the top, the logo 'iConnect' is on the left, and the text 'Last Updated by j buck@apdcares.org at 4/29/2020 12:01:52 PM' is on the right. Below the logo, there are tabs for 'File' and 'Reports'. The main content area is titled 'Plan Information' and contains a 'Plan Details' section. This section includes several fields: 'Division' (APD), 'Program' (APD Waiver with a 'Details' link), 'Worker' (Buck, Jennifer with a 'Clear' button and 'Details' link), 'Cost Plan Creation Date' (06/01/2020), 'Comments' (a text area), 'Status' (No Review Required), 'Cost Plan Begin Date' (07/01/2020), 'Cost Plan End Date' (06/30/2021), and 'Region or State Review' (a dropdown menu).

4. If the Plan fails validation for Region Review, the WSC will update the following fields on the Plan Information page:
 - a. Change the **Worker** from the WSC to the Region reviewer, to route this plan to the Region reviewer's My Dashboard > Consumer Plans Queue for review.
 - b. Change the **Plan Status** from Draft to Pending.
 - c. Region or State Review: Select the region that will be completing the review. In addition to routing this plan to the Region reviewer, it will also be routed to a generic pending plans queue where it can be reviewed by more than one regional reviewer, in case back up is needed.
5. Click **File > Save and Close Plan**.
6. Proceed to section [Region Review](#).

The screenshot shows the 'iConnect' application interface. At the top, the logo is on the left, and the text 'Last Updated by j buck@apdcares.org at 4/29/2020 12:01:52 PM' is on the right. Below the logo is a 'Plan Information' header. The main content area is titled 'Plan Details' and contains several fields: 'Division' (APD), 'Program' (APD Waiver), 'Worker' (Buck, Jennifer), 'Cost Plan Creation Date' (06/01/2020), 'Comments' (empty), 'Status' (Pending), 'Cost Plan Begin Date' (07/01/2020), 'Cost Plan End Date' (06/30/2021), and 'Region or State Review' (Central). A dropdown menu is open for 'Region or State Review', showing options: Central, Northeast, Northwest, Southern, Southeast, Suncoast, and State Office.

7. If the Plan fails validation for Region AND State Office review, the Region review will be completed first, then routed to the State for review.
8. The WSC will update the following fields on the Plan Information page:
 - a. Change the **Worker** from the WSC to the Region reviewer, to route this plan to the Region reviewer's My Dashboard > Consumer Plans Queue for review.
 - b. Change the **Plan Status** from Draft to Pending.
 - c. Region or State Review: Select the region that will be completing the review. In addition to routing this plan to the Region reviewer, it will also be routed to a generic pending plans queue where it can be reviewed by more than one regional reviewer, in case back up is needed.
9. Click **File > Save and Close Plan**.
10. Proceed to section [Region Review](#).

apd iConnect Last Updated by j buck@apdcares.org at 4/29/2020 12:01:52 PM **Plan Information**

File Reports

Plan Information

Planned Services

Cost Plan Review Notes

Plan Details

Division * APD

Program * APD Waiver Details

Worker Buck, Jennifer Clear Details

Cost Plan Creation Date * 06/01/2020

Comments

Status * Pending

Cost Plan Begin Date * 07/01/2020

Cost Plan End Date * 06/30/2021

Region or State Review * Central
Northeast
Northwest
Southern
Southeast
Suncoast
State Office

11. If the Plan fails validation for State Office review the WSC will update the following fields on the Plan Information page:

- Change the **Worker** from the WSC to the State Office reviewer, to route this plan to the State Office reviewer's My Dashboard > Consumer Plans Queue for review.
- Change the **Plan Status** from Draft to Pending.
- Region or State Review: Select State Office who will be completing the review. In addition to routing this plan to the State Office reviewer, it will also be routed to a generic pending plans queue where it can be reviewed by more than one State Office reviewer, in case back up is needed.

12. Click **File > Save and Close Plan**.

13. Proceed to section [State Office Review](#).

apd iConnect Last Updated by j buck@apdcares.org at 4/29/2020 12:01:52 PM **Plan Information**

File Reports

Plan Information

Planned Services

Cost Plan Review Notes

Plan Details

Division * APD

Program * APD Waiver Details

Worker Buck, Jennifer Clear Details

Cost Plan Creation Date * 06/01/2020

Comments

Status * Pending

Cost Plan Begin Date * 07/01/2020

Cost Plan End Date * 06/30/2021

Region or State Review * State Office

Region Review

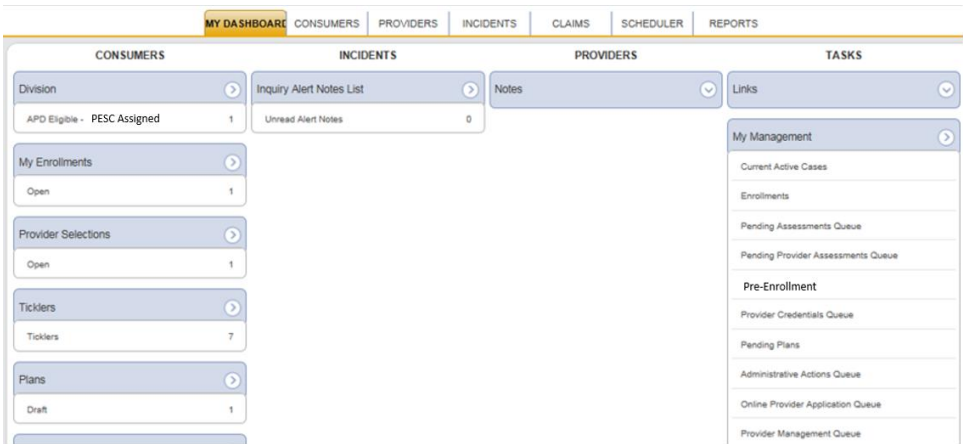
- 1. The plan failed has failed validation and requires Region review for one or more services.
- 2. The WSC has assigned the Region reviewer as the worker on the Plan Information page and the status of the plan is pending.
- 3. The WSC has also specified the region completing the review which allows more than the assigned Region reviewer access to review this plan, in case back up is needed.
- 4. The Region Reviewer will monitor his/her **My Dashboard** for new Pending Plans.
- 5. To do so, log into iConnect and Set Role = Region Waiver Workstream Worker. Click **Go**.
- 6. Find the consumer's Panel and click on the link for Plans with Status = Pending. Click on the **Pending** link to open the Plans queue. Skip to step 9.

Ticklers		>
Ticklers	134	

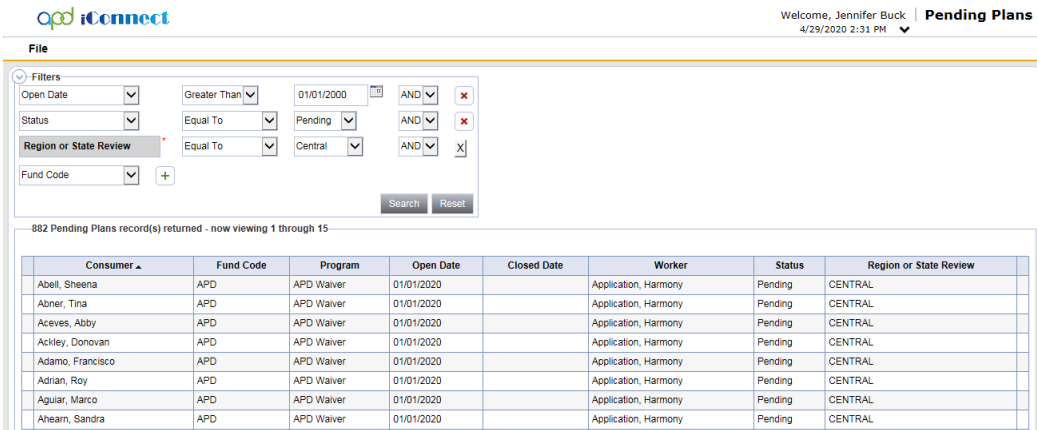
Plans		>
Approved	1	
Draft	1	
Pending	1	

Appointments		>
Scheduled	1	

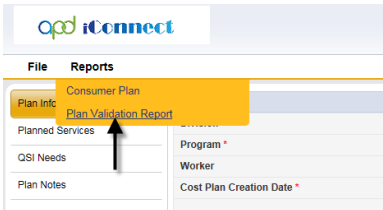
- 7. To monitor all plans that require review by region, from **My Dashboard**, Under the Tasks panel, select **My Management**, then **Pending Plans**.



8. The Pending Plans queue defaults to display plans with a status of Pending and requires the reviewer to select a Region search filter. Select Search to display the plans that require review for the selected region.



9. From the Plans queue, select the plan to open the Plan Information page.
10. View the Plan Validation Report. In the **Plan** Record > from the **Reports** menu in the toolbar select > **Plan Validation Report**.



11. The Report opens in a new window. View the most current validation and validation history.



Plan Validation Report

Consumer: Violet Sheppard **Program:** APD Waiver
Case No: 10172 **Plan Start Date:** 7/1/19
Division: APD **Plan End Date:** 6/30/20

Current Validation Results

Service	Proposed	Problem(s)
n/a	n/a	<ul style="list-style-type: none"> • All initial plans require Regional review. • This consumer does not have a consumers budget linked.
(4270) Support Coordination	Units Per: 1.00 Units of Measure: Month - Round Up Total Units: 12.0000 Total Cost: \$1,784.28	<ul style="list-style-type: none"> • The planned services are not allowed to be prior dates.

Validation History

Validation Date Time	User	Action	Reason
3/7/19 10:41 AM	Jennifer Buck	Failed - View Report	

12. Complete the Region review for each Planned Service that failed Validation and requires Region review.

- If the service is approved, change the **Planned Service Status** = Region Review Approved.
- If the service is partially approved, edit the planned service details to decrease the max amount. Change the **Planned Service Status** = Region Review Partially Approved
- If the service is Denied, change the **Planned Service Status** = Region Review Denied. The Region Reviewer will send a Note to the WSC with details of the Denied services and the WSC will Delete the denied planned services from the Plan. Proceed to section [Services Not Approved](#).

13. Enter a supporting comment in the **Region/State Office review Comments (REQUIRED)** field. Select **Append Text to Note**.

File

Provider: Pending Provider

Rate: \$7.81

Max Amount: \$8,575.38

Amount Requested:

Authorization Notes/Comments: Notes from the WSC are entered here. These notes will also display on the authorization.

Contract Number:

Non-Taxable: ☐

Planned Service Status: Region Review Approved

Region/State Review Comments (REQUIRED): On 10/21/2019 at 9:22 AM, Jennifer Buck wrote: Region review comments are entered here. These comments do NOT show on the Authorization nor are they visible to the WSC.

Append Text to Note

Corresponding Auth No.:

14. Enter any comments that need to display on the authorization into the **Authorization Notes/Comments** field, in addition to the existing comments from the WSC.
15. Click **File > Save and Close Planned Service**.
16. The reviewer will complete this process for all planned services that require region review.
17. When the Region review is complete, and if there are no services that require State Office review, route the plan back to the WSC. The Region reviewer will update the following fields on the **Plan Information** Page:
 - a. Change the **Worker** from the Region Reviewer to the WSC, to route this plan to the WSC's My Dashboard > Consumer Plans Queue for review.
 - b. Change the **Plan Status** from Pending to Approved. When the Plan Status = Approved, the plan is read only but authorizations can still be created for plans that pass validation.
 NOTE: The overall cost plan is approved, but there may be some planned services in the cost plan that were partially approved and therefore reduced or denied.
 - c. Region or State Review: can remain as is. No changes are needed.

18. On the **Plan Information** Page, select **File > Save and Validate Plan**.
19. The Plan will pass validation if no services were denied. Proceed to section [Create Authorizations](#).
20. The Plan will not pass validation if services were denied. The WSC will delete the denied planned service before the plan will pass validation. Proceed to section [Services Not Approved](#).

The screenshot displays the 'iConnect' application interface. At the top, the logo 'apd iConnect' is on the left, and the text 'Last Updated by jrbuck@apdcares.org at 4/29/2020 12:01:52 PM' is on the right. The 'Plan Information' tab is active. The left sidebar contains 'Plan Information' (highlighted), 'Planned Services', and 'Cost Plan Review Notes'. The main area is titled 'Plan Details' and contains the following fields:

Division *	APD
Program *	APD Waiver Details
Worker	Buck, Jennifer ... Clear Details
Cost Plan Creation Date *	06/01/2020 Calendar Icon
Comments	<div></div>
Status *	Approved ▼
Cost Plan Begin Date *	07/01/2020 Calendar Icon
Cost Plan End Date *	06/30/2021 Calendar Icon
Region or State Review	Central ▼

21. If there are services that require State Office review, route the plan to State Office reviewer. The Region reviewer updates the following fields on the Plan Information page:
 - a. Change the **Worker** from the Region reviewer to the WSC.
 - b. Keep the **Plan Status** as Pending.
 - c. Region or State Review: change to State Office
22. Click **File > Save and Close Plan**
23. Proceed to section [State Office review](#).

Plan Information

Last Updated by j buck@apdcares.org at 4/29/2020 12:01:52 PM

File Reports

Plan Information

Planned Services

Cost Plan Review Notes

Plan Details

Division * APD

Program * APD Waiver [Details](#)

Worker Buck, Jennifer [Clear](#) [Details](#)

Cost Plan Creation Date * 06/01/2020

Comments

Status * Pending

Cost Plan Begin Date * 07/01/2020

Cost Plan End Date * 06/30/2021

Region or State Review * State Office

State Office Review

1. The plan failed has validation and requires State Office review for one or more services. The WSC or the Region Reviewer has Updated the APD waiver Plan with Status = Pending and Region or State Review = State Office.
2. The State Office reviewer will monitor his/her **My Dashboard** for new Pending Plans.
3. To do so, log into iConnect and Set Role = State Office Process Owner. Click **Go**.
4. Find the consumer's Panel and click on the link for Plans with Status = Pending. Click on the **Pending** link to open the Plans queue.
 - a. If there are none, proceed to step 6, locating all plans waiting for State Office review.

Ticklers	
Ticklers	134
Plans	
Approved	1
Draft	1
Pending	1
Appointments	
Scheduled	1

5. Find the consumer's Panel and click on the link for Plans with Status = Pending. Click on the **Pending** link to open the Plans queue. Skip to step 8.

Ticklers	
Ticklers	134

Plans	
Approved	1
Draft	1
Pending	1

Appointments	
Scheduled	1

6. To monitor all plans that require State Office review, from **My Dashboard**, Under the Tasks panel, select **My Management**, then **Pending Plans**.

MY DASHBOARD				CONSUMERS	PROVIDERS	INCIDENTS	CLAIMS	SCHEDULER	REPORTS
CONSUMERS		INCIDENTS		PROVIDERS		TASKS			
Division		Inquiry Alert Notes List		Notes		Links			
APD Eligible - PESC Assigned		Unread Alert Notes							
1		0							
My Enrollments						My Management			
Open						Current Active Cases			
1						Enrollments			
Provider Selections						Pending Assessments Queue			
Open						Pending Provider Assessments Queue			
1						Pre-Enrollment			
Ticklers						Provider Credentials Queue			
Ticklers						Pending Plans			
7						Administrative Actions Queue			
Plans						Online Provider Application Queue			
Draft						Provider Management Queue			
1									

7. The Pending Plans queue defaults to display plans with a status of Pending and requires the reviewer to select a State Office search filter. Select Search to display the plans that require review for the selected region.

Filters

Open Date

Greater Than

01/01/2000

AND

X

Status

Equal To

Pending

AND

X

Region or State Review

Equal To

State Office

AND

X

Fund Code

+

Search

Reset

8. From the Plans queue, select the plan to open the Plan Information page.

9. In the Plans queue, open the Plan Record.

10. View the Plan Validation Report. In the **Plan** Record > from the **Reports** menu in the toolbar select > **Plan Validation Report**.

The screenshot shows the iConnect software interface. At the top right, it says "John Sheppard | Plan Information" and "Last Updated by j buck at 3/18/2019 2:34:50 PM". The main menu bar has "File" and "Reports". The "Reports" dropdown is open, showing options: "AIM Worksheet", "Consumer Plan", "Notice of iBudget Amount", "Notice of iBudget Amount - Automatic Award", "Notice of Initial iBudget Amount", and "Plan Validation Report" (which is highlighted in orange). Below the menu, there is a form with fields for "APD", "APD Waiver" (with a "Details" link), "Reed, Monica" (dropdown), "04/01/2018" (calendar icon), "Status" (dropdown set to "Draft"), "Cost Plan Begin Date" (07/01/2018, calendar icon), and "Cost Plan End Date" (06/30/2019, calendar icon). There is also a "Comments" section.

11. The Report opens in a new window. View the most current validation and validation history.

The screenshot shows the "Plan Validation Report" window. At the top left is the "harmony INFORMATION SYSTEMS, INC." logo. The title is "Plan Validation Report". Below this, there is a summary section with the following information:

Consumer:	Violet Sheppard	Program:	APD Waiver
Case No:	10172	Plan Start Date:	7/1/19
Division:	APD	Plan End Date:	6/30/20

Below this is the "Current Validation Results" section, which contains a table:

Service	Proposed	Problem(s)
(4142) Personal Supports	Units Per: 8.00 Units of Measure: Calendar Day Total Units: 2920.0000 Total Cost: \$ 29200.00	• This service requires State review due to the amount of the total service amount

Below the table is the "Validation History" section, which contains a table:

Validation Date Time	User	Action	Reason
3/7/19 10:41 AM	Jennifer Buck	Failed - View Report	

12. Complete the State Office review for each Planned Service that failed Validation and requires State Office review.

- If the service is approved, change the **Planned Service Status** = State Office review Approved.
- Enter supporting comments in the **Region/State Office review Comments** field. Select **Append Text to Note**.

- c. Enter any comments that need to display on the authorization into the Comments field, in addition to the existing comments from the WSC and/or Region.
- d. If the service is partially approved, edit the planned service details to decrease the max amount. Change the **Planned Service Status** = State Office review Partially Approved.
- e. Enter supporting comments in the **Region/State Office review Comments** field. Select **Append Text to Note**.

Service Code *	92507 UC
Service Description	(4260) Speech Therapy
Unit Type	15 mins
Units Per *	4.00
Units of Measure *	Calendar Day
Total No of Units	1460.0000
Provider ID *	10017 Details
Provider	Achieving Independence
Rate *	\$16.02
Max Amount *	\$23,389.20
Amount Requested	
Authorization Notes/Comments	regular comments field for WSC - displays on Auth.
Contract Number	
Non-Taxable	<input type="checkbox"/>
Planned Service Status	State Review Approved
Region Review Comments from Planned Services	On 10/29/2019 at 4:18 PM, Jennifer Buck wrote: State Review Comments
Region/State Review Comments (REQUIRED)	New Text
	Append Text to Note

- a. If the service is Denied, change the **Planned Service Status** = State Office review Denied. The State Office reviewer will send a Note to the WSC with details of the Denied services and the WSC will Delete the denied planned services from the Plan.

13. Click **File > Save and Close Planned Service**.

14. The reviewer will complete this process for all planned services that require State Office review.

15. When the State Office review is complete for all services that require State Office review, the State Office reviewer will route the plan back to the WSC.

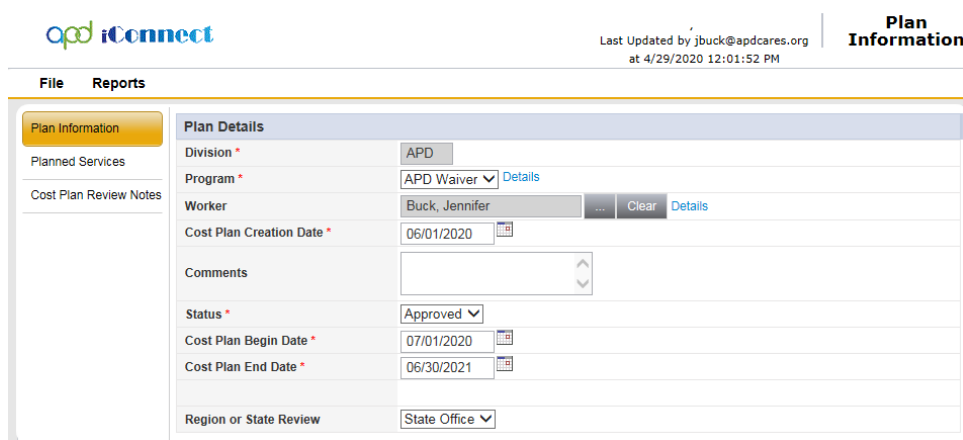
16. The State office reviewer will update the following fields on the **Plan Information** Page:

- a. Change the **Worker** from the State Office reviewer to the WSC, to route this plan to the WSC's My Dashboard > Consumer Plans Queue for review.
- b. Change the **Plan Status** from Pending to Approved. When the Plan Status = Approved, the plan is read only but authorizations can still be created for plans that pass validation.
NOTE: The overall cost plan is approved, but there may be some planned services in the cost plan that were partially approved and therefore reduced or denied.
- c. Region or State Review: can remain as is. No changes needed.

17. On the **Plan Information** Page, select **File > Save and Validate Plan**.

18. The Plan will pass validation if no services were denied. Proceed to section [Create Authorizations](#).

19. The Plan will not pass validation if services were denied. The WSC will delete the denied planned service before the plan will pass validation. Proceed to section [Services Not Approved](#).



The screenshot shows the iConnect web application interface. At the top, the logo 'iConnect' is on the left, and 'Last Updated by jibuck@apdcares.org at 4/29/2020 12:01:52 PM' is on the right. Below the logo is a navigation bar with 'File' and 'Reports' tabs. The main content area is titled 'Plan Information' and contains a 'Plan Details' form. The form fields are as follows:

Division *	APD
Program *	APD Waiver Details
Worker	Buck, Jennifer Clear Details
Cost Plan Creation Date *	06/01/2020
Comments	<div></div>
Status *	Approved
Cost Plan Begin Date *	07/01/2020
Cost Plan End Date *	06/30/2021
Region or State Review	State Office

Services Not Approved

1. The WSC has submitted a plan for Region and/or State Office review and one or more planned services in the plan has been Denied.
2. The Region or State Office reviewer has changed the Planned Service Status for the service not approved to Region or State Office review Denied.

3. The Region or State Office reviewer will notify the WSC of the denied services via a Note and the WSC will delete the planned service from the plan so Plan Validation will pass, and authorizations can be created for the remaining approved services on the plan.
4. The Region or State Office reviewer will navigate to the consumer's record, click on **Plans** > select the **Plan** record to open the Plan Information subpage. Select the **Cost Plan Review Notes** subpage.

5. From the **File** menu > select **Add Note**:

The screenshot displays the iConnect system interface. On the left sidebar, under the 'File' menu, the 'Cost Plan Review Notes' option is highlighted. The main content area shows a 'Filters' section with the following settings: 'Note Type' is set to 'Cost Plan Review', and 'Note Date' is set to 'Equal To'. Below the filters, it indicates '0 record(s) returned'. The top right corner of the interface shows the user 'John Sheppard' and the date '9/25/2019 12:11 PM'.

6. In the new Note record, update the following fields:
 - h. Division = APD
 - i. Note By = defaults to self
 - j. Note Date = defaults to today
 - k. Cost Plan Review Note = Yes
 - l. Note Type = Cost Plan Review
 - m. Note Subtype = Not Approved
 - n. Note = Explain why Plan is not approved
 - o. Status = Complete or Pending if a response has been requested from the WSC.
 - p. Route the Note to the appropriate WSC/Pre-Enrollment Support Coordinator by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

In the event the full cost plan is not approved, route the Note to the appropriate Region staff.

The Region Staff will issue a notice and check if the Consumer exercises Due Process.
7. When finished, click **File > Save and Close Notes**.

apd iConnect John Sheppard | Notes
9/25/2019 12:14 PM

File Tools

Notes

Division * APD

Note By * Buck, Jennifer

Note Date * 09/25/2019

Cost Plan Review Note? * Yes

Note Type * Cost Plan Review

Note SubType Not Approved

Description denied OT

Note Denied OT services - please remove from cost plan

Status * Pending

Date Completed

Attachments

[Add Attachment](#)

Document	Description	Category	Action
There are no attachments to display			

Recipients

Select a new Recipient:

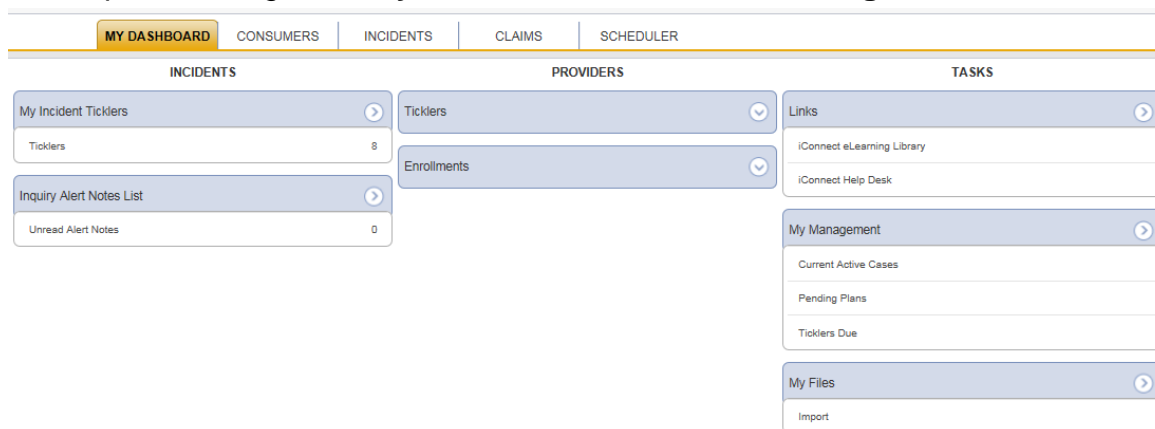
Name	Date Sent	Date Read	Status	Date Signed	
Reed, Monica	9/25/2019		Unread		Remove

8. The WSC will monitor My Dashboard for incoming Notes and review the Cost Plan Review > Not Approved Note.
9. The WSC will navigate to the consumer's record and delete the denied planned services from the cost plan.
10. Proceed to section [Remove Planned Services.](#)
11. When the full cost plan is not approved, The Region Staff will monitor My Dashboard for incoming Notes. After reviewing the note, the regional staff issue a notice and check if the Consumer exercises Due Process.
12. To issue the notice, from the consumer's **Demographics** tab, click on the **Word Merge** menu and generate the appropriate notice.

13. In the Word Merge preview screen, click **Open Document** to open the letter in Microsoft Word. Edit and print the document. Then save it to your computer.
14. Back in the Word Merge preview screen, click **Upload and Save to Note** > select the appropriate document to attach to the Note record. In the new Consumer Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Cost Plan Review
 - c. Note Subtype = Not Approved
 - d. Status = Complete
15. When finished, click **File > Save and Close Note**

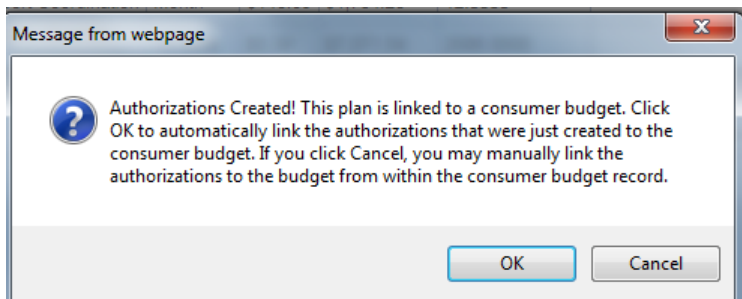
Create Authorizations

1. Once the Planned services have passed Plan validation or have been reviewed by the Region or State Office reviewer and approved, the Create Authorization option will be visible to the user. The WSC will create the authorizations.
2. If the plan passed validation and did not require Region or State Office review, skip to step 6.
3. The WSC will monitor the Pending Plans queue on My Dashboard for approved plans. Navigate to **My Dashboard > Tasks > Pending Plans Queue**.



4. Filter the pending plans queue for those with status equal to Approved, and possibly additional date filters to display only recent plans.

10. The message also describes the plan is linked to a budget and the application will automatically link these authorizations to the budget.



Authorization Interface

1. Navigate to the **Authorization** tab to view your newly created Auth.
2. Once you locate your Auth, click on the expansion row that shows the auth information & view the **Auth EDI Status = Ready to Send**

File Reports Ticklers View Consumer Incident

Diagnosis Eligibility Medications **Auths** Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Payers

Filters
Division: [v] +
Search Reset

13 Auths record(s) returned - now viewing 1 through 13

Auth ID	Service Code	Service	Start Date	Unit Type	End Date	Auth Service EDI Status	Max Units	Status	Rate	Amount Approved	Cancelled	Provider Rate Type	Consumer County	Service Ratio
140094	92507:UC	(4260) Speech Therapy	05/13/2019	15 mins	06/30/2019	Ready to Send	140	Approved	\$16.02	\$2,242.80	No	Agency	Hernando	
140093	S5130:UC	(4140) Personal Supports	05/01/2019	15 mins	06/30/2019	Ready to Send	172	Approved	\$3.82	\$657.04	No	Agency	Hernando	1:1

3. The Authorization interfaces are scheduled to run at least daily. The **Auth Service EDI Status** is updated.

Diagnosis Eligibility Medications **Auths** Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Payers

Filters
Division: [v] +
Search Reset

13 Auths record(s) returned - now viewing 1 through 13

Auth ID	Service Code	Service	Start Date	Unit Type	End Date	Auth Service EDI Status	Max Units	Status	Rate	Amount Approved	Cancelled	Provider Rate Type	Consumer County	Service Ratio
140094	92507:UC	(4260) Speech Therapy	05/13/2019	15 mins	06/30/2019	Sent	140	Approved	\$16.02	\$2,242.80	No	Agency	Hernando	
140093	S5130:UC	(4140) Personal Supports	05/01/2019	15 mins	06/30/2019	Sent	172	Approved	\$3.82	\$657.04	No	Agency	Hernando	1:1

- When the **Auth response** comes back from **FMMIS**, the system again updates the **Auth Status**, **Auth Service Status** and **Auth Service EDI Status**.
- If there was an issue with sending the Auth to **FMMIS**, the **Auth Service EDI Status** will be updated to **Unable to Send**.

Division	Provider	Auth ID	Start Date	End Date	Status	Cancelled
APD	Pending Provider	232432	06/05/2019	06/30/2019	Approved	No
APD		232433	06/05/2019	06/30/2019	Approved	No
APD		232434	06/05/2019	06/30/2019	Approved	No
APD		177960	01/01/2019	06/30/2019	Approved	No
APD		177968	01/01/2019	06/30/2019	Approved	No
APD		188925	01/01/2019	06/30/2019	Approved	No
APD		232750	01/01/2019	06/30/2019	Fully Approved	No
APD		232141	07/01/2018	06/30/2019	Terminated	Yes
APD		232152	07/01/2018	06/30/2019	Fully Approved	No
APD		232153	07/01/2018	06/30/2019	Fully Approved	No
APD		232154	07/01/2018	06/30/2019	Fully Approved	No
APD	A TEST Provider	232231	07/01/2018	11/30/2018	Approved	No

6. Reasons an Auth is unable to send:

- Waiver Consumer Medicaid ID is blank
- Max amount cannot be 0.00
- Unit cost cannot be 0.00
- Waiver Consumer does not have Active Medicaid Eligibility record
- Provider ID not Active

- For authorizations that are rejected or unable to send, the reason is visible on the **Error Message** subpage on the Auth Service details page.

File | AuthService | at 3/21/2019 2:10:25 PM

The authorized service is out of sync with the planned service to which it is linked.

Authorized Service

PA Number: [blank]
 Start Date: 07/01/2018
 End Date: 11/30/2018

Index/SubObject: [blank]

Service Code: S5102 UC
 Secondary Code: S5102 UC
 Service Description: (4082) Life Skills Development - Level 3 (ADT) - Facility Based
 Unit Type: Hour
 Units Per: 6.00
 Units of Measure: Calendar Day
 Max. Units: 918
 Rate: \$15.85
 Amount Approved: \$14,550.30

Auth Service EDI Status: Unable to Send
Status: Resubmitted

Worker: [blank]
 Date Approved: [blank]
 Comments: [blank]
 Diagnosis1: [blank]
 Diagnosis2: [blank]

8. A list view of the error message details displays.

opd iConnect 5/21/2020 2:00 PM | Error Message

File

AuthService
Error Message

1 Error Message record(s) returned - now viewing 1 through 1

Date	Source	Code	Error Message	Code Type	Action Code	Action Message
5/14/2020 4:53:23 PM	FMMIS	06	RECIPIENT NOT ELIGIBLE			

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Authorization Service Approved

1. Example of an Approved Auth

opd iConnect at 5/21/2019 2:07:01 PM

File

Diagnosis Eligibility Medications **Auths** Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Payers

Filters: Division: [v] +

13 Auths record(s) returned - now viewing 1 through 13

Division	Provider	Auth ID	Start Date	End Date	Status	Cancelled
APD	Pending Provider	233432	06/05/2019	06/30/2019	Approved	No
APD		233433	06/05/2019	06/30/2019	Approved	No
APD		233434	06/05/2019	06/30/2019	Approved	No
APD		177980	01/01/2019	06/30/2019	Approved	No
APD		178648	01/01/2019	06/30/2019	Approved	No
APD		185935	01/01/2019	06/30/2019	Approved	No
APD	A Test Provider	232250	01/01/2019	06/30/2019	Fully Approved	No

Auth Service ID	Service Code	Service	Start Date	Unit Type	End Date	Auth Service EDI Status	Max Units	Status	Rate	Amount Approved	Cancelled	Provider Rate Type	Consumer County	Service Rate
13985	T2003 UC	(4320) Transportation - Trip	01/01/2019	Trip	06/30/2019	Approved	480	Approved	\$20.00	\$9,600.00	No	Agency	Hernando	

opd iConnect at 5/21/2019 2:07:01 PM

File

Authorization

AuthService

This authorization and/or one of its authorized services are out of sync with the planned service(s) to which they are linked.

Authorization

Start Date: 01/01/2019

End Date: 06/30/2019

Division: APD

Fiscal Year: 2019

Provider: A Test Provider

Date Authorized: 03/21/2019

AuthID: 232250

Status: Fully Approved

Requested By:

Requested Date:

Comments:

Cancel: ☐

opd iConnect at 5/1/2019 12:17:35 PM

File

AuthService

Error Message

Authorized Service

PA Number: 5119119010

Start Date: 01/01/2019

End Date: 06/30/2019

IndexCode	Index Description	SubObject	SubObject Description
Central	Central Region	Waiver	iBudget Waiver

Service Code: T2003 UC

Secondary Code: T2003 UC

Service Description: (4320) Transportation - Trip

Unit Type: Trip

Units Per: 80.00

Units of Measure: Month - Round Up

Max. Units: 480

Rate: \$20.00

Amount Approved: \$9,600.00

Auth Service EDI Status: Approved

Status: Approved

Worker:

Print the Authorization

1. To print the authorization, navigate to the Authorizations tab.
2. Locate the Authorization and select the + link to display the AuthService detail.
3. Select the authorized Service.

MY DASHBOARD **CONSUMERS** PROVIDERS INCIDENTS CLAIMS SCHEDULER

Sheppard, John (10106)

Diagnosis Eligibility Medications **Auths** Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SANs Notes Forms Appointments Plans Pre-Enrollment Payers

Filters: Auth Service EDI Status Equal To Ready to Send AND

Division +

Search Reset

Auths record(s) returned - now viewing 1 through 3

Auth Service ID	Division	Provider	Auth ID	Start Date	End Date	Status	Cancelled
219	APD	WSC Agency1	140841	07/01/2018	09/22/2018	Approved	No

Auth Service ID	Service Code	Service	Start Date	End Date	Unit Type	Auth Service EDI Status	Max Units	Status	Rate	Provider Rate Type	Consumer County	Service Ratio	Amount Approved	Cancelled
219	G9012 UC	(4270) Support Coordination	07/01/2018	09/22/2018	Month	Ready to Send	3	Approved	\$148.69	Agency	BAKER		\$446.07	No

4. From the toolbar, click File > Print.
5. A separate window opens and a print dialog window.
6. Select the printer or PDF Writer and click OK to print.

John Sheppard - Authorization ID 140841 | AuthService

Last Updated by Juck at 11/8/2018 11:53:32 AM

File: Save and Close, Spell Check, Save AuthService, **Print**, Close AuthService

Authorized Service

PA Line Number: 125894

Start Date: 07/01/2018

End Date: 09/22/2018

Index/SubObject: IndexCode: SunCoast, Index Description: SunCoast Region, SubObject: Waiver, SubObj: iBudget Waiver

Service Code: G9012 UC

Secondary Code: G9012 UC

Service Description: (4270) Support Coordination

Unit Type: Month

Units Per: 1.00

Units of Measure: Month - Round Up

Max. Units: 3

Rate: \$148.69

Amount Approved: \$446.07

Auth Service EDI Status: Ready to Send

Status: Approved

Worker: [dropdown]

Date Approved: [dropdown]

Comments: planned service comments

Diagnosis1: [dropdown]

Diagnosis2: [dropdown]

Print Dialog: Select Printer, Add Printer, EPSON WF-3520 Series, CUTEPDF Writer, EPSON WF-3520 Series, HP Fax

Status: Offline, Print to file, Preferences, Find Printer...

Page Range: All, Selection, Current Page, Pages: 1, Enter either a single page number or a single page range. For example, 5-12

Number of copies: 1, Collate, 1, 2, 3

Print, Cancel, Apply

7. The Auth Service detail page can now be closed.
8. When the service providers are live in iConnect, they will be able to log into iConnect and view the authorizations associated to their provider record.

MY DASHBOARD CONSUMERS **PROVIDERS** INCIDENTS CLAIMS SCHEDULER

A TEST Provider (10002)

Workers Services Provider ID Numbers Beds Linked Providers Service Area

Providers CAP Forms Contracts Enrollments **Authorizations** Notes Appointments Credentials

Filters
Division: [v] [Search] [Reset]

73 Authorizations record(s) returned - now viewing 1 through 15

	Division	Case No	Consumer	Auth ID	Auth Start Date	Auth End Date	Auth Status	Last Updated
	APD	10002	Reed,Test	140629	10/18/2017	10/31/2017	Terminated	10/18/2017 6:15:01 PM
	APD	10002	Reed,Test	140630	11/03/2017	11/04/2017	Approved	5/2/2018 2:15:26 PM
	APD	10007	Peabody,Layla	140632	11/21/2017	06/30/2018	Approved	11/21/2017 5:12:30 PM
	APD	10017	Sample,Thomas	140634	11/29/2017	06/30/2018	Terminated	12/7/2017 11:44:16 AM
	APD	10019	Sample,CDC	140635	12/01/2017	06/30/2018	Approved	11/30/2017 1:57:10 PM
	APD	10022	Sample,Transfer	140637	12/07/2017	06/30/2018	Terminated	12/7/2017 12:08:35 PM
	APD	10023	Sample,Transfer Two	140639	12/07/2017	06/30/2018	Approved	12/7/2017 9:00:43 AM

Authorization Service Rejected

1. FMMIS may reject all or some of the services on an authorization. If all services on the authorization are rejected the FMMIS Auth interface will change the Auth Status to Rejected.
2. If one or more services on the authorization are rejected but at least one is approved, the FMMIS Auth interface will change the Auth Status to Partially Approved.
3. The next steps the WSC take depends on the reason for the rejection.
4. The reason for the rejection is visible on the Authorization. Navigate to the Authorization tab and selected the rejected authorization.

Diagnosis Eligibility Medications **Auths** Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Payers

Filters
Division: [v] [Search] [Reset]

13 Auths record(s) returned - now viewing 1 through 13

	Division	Provider	Auth ID	Start Date	End Date	Status	Cancelled
	APD	Pending Provider	232432	06/05/2019	06/30/2019	Approved	No
	APD		232433	06/09/2019	06/30/2019	Approved	No
	APD		232434	06/09/2019	06/30/2019	Approved	No
	APD		177980	01/01/2019	06/30/2019	Approved	No
	APD		178648	01/01/2019	06/30/2019	Approved	No
	APD		189335	01/01/2019	06/30/2019	Approved	No
	APD		232250	01/01/2019	06/30/2019	Fully Approved	No
	APD		232141	07/01/2018	06/30/2019	Terminated	Yes
	APD		232152	07/01/2018	06/30/2019	Fully Approved	No
	APD		232153	07/01/2018	06/30/2019	Fully Approved	No
	APD		232154	07/01/2018	06/30/2019	Fully Approved	No
	APD	A TEST Provider	232231	07/01/2018	11/30/2018	Approved	No
	APD	A TEST Provider	232248	07/01/2018	06/30/2019	Rejected	No

Auth Service ID	Service Code	Service	Start Date	Unit Type	End Date	Auth Service ID# Status	Max Units	Status	Rate	Amount Approved	Cancelled	Provider Rate Type	Consumer Cost
13883	14335-UC	HA33: Disposable Linen/Sheet/Cover/Pad Undergarment, for Incontinence	07/01/2018	Item	06/30/2019	Rejected	2400	Rejected	\$1.44	\$1,056.00	No	Agency	Remainder

5. The Authorization details page displays. Select the Auth Service subpage. The Auth Services list view displays.
6. Select the Auth Service. The Auth Services Details page displays. Click the **Error Message** subpage to view the Error Message from FMMIS.

Authorized Service

PIA Number: [Field]
 Start Date: 6/7/1/2018
 End Date: 6/6/30/2019

Index/Code	Index Description	SubObject	SubObject Description
Central	Central Region	Waiver	iBudget Waiver

Service Code: T4535 UC
 Secondary Code: T4535 UC
 Service Description: (4433) Disposable Liner/Shield/Guard Pad/Undergarment, for Incontinence
 Unit Type: Item
 Units Per: 200.00
 Units of Measure: Month - Round Up
 Max. Units: 2400
 Rate: \$0.44
 Amount Approved: \$1,056.00

Auth Service EDR Status: Rejected
Status: Rejected
 Worker: [Field]
 Date Approved: [Field]
 Comments: Test
 Diagnosis: [Field]

Error Message

6/13/2019 12:00 PM

1 Error Message record(s) returned - now viewing 1 through 1

Date	Source	Code	Error Message	Code Type	Action Code	Action Message
6/11/2019 12:17:35 PM	FMMIS	L5	INVALID UNIT RATE			

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Do Not Correct the Rejection

1. If the WSC will not correct the rejection, then the planned service and associated auth service will be zeroed out.
2. The plan has already been validated and reviewed by the Region and/or State, the plan status is approved, and the plan is read only. The WSC will need to reverse the status of the plan before updating the service.
3. To do so, the WSC must use the WSC Cost Plan Adjustment Role.
4. Select the APD waiver Plan record with status = Approved. The Plan Information Page displays.
5. Click **File > Reverse Status**.

John Sheppard | Plans | Sign Out | Role: WSC Cost Plan Adjustment

FL APD Sandbox - Internet Explorer

https://test.harmonys.net:FLAPDSandbox/Pages/Harmony.aspx?ChapterID=480&ViewType=SubPageView&PageID=57563&ChapterEntityID=10106&EntityID=198&CallingChapter=Consumers&CallingPages=Plans%20List&ParentEntityID=10106&_popup_=1

Plan Information

John Sheppard
Last Updated by j buck
at 3/21/2019 12:22:39 PM

File Reports

Duplicate
 Spell Check
 Save and Validate Plan
Reverse Status
 History
 Print
 Close Plan Information

Details

on: APD
 am: APD Waiver
 or: Reed, Monica
 Plan Creation Date: 04/01/2018
 ents: [Field]

6. The record is now editable, and the **Plan Status** equals Draft.

The screenshot shows the iConnect web application interface. At the top left is the iConnect logo. At the top right, it says 'Violet Sheppard', 'Last Updated by Iritchie', and 'at 8/27/2019 12:40:06 PM'. Below this is a 'Plan Information' tab. On the left side, there is a sidebar with 'Plan Information' (highlighted), 'Planned Services', and 'Cost Plan Review Notes'. The main area is titled 'Plan Details' and contains the following fields:

Division *	APD
Program *	APD Waiver Details
Worker	Reed, Monica Clear Details
Cost Plan Creation Date *	07/01/2018
Comments	
Status *	Draft
Cost Plan Begin Date *	07/01/2018
Cost Plan End Date *	06/30/2019

7. Click **File > Save Plan**.

8. Click the **Planned Services** subpage.

9. Select the planned service that needs to be changed to open the details page. Update the following fields:

- Total No of Units = change to 0 which will change Max Amount to \$0.
- Planned Service Status = Do Not Change.

10. When finished, select **File > Save and Close Planned Service**.

11. Complete [Plan Validation](#). The edited planned service must pass plan validation.

12. If the plan passes validation and does not require review, the WSC will change the Plan Status to No Review required, then save the Plan record. Skip to step 16.

13. If the plan fails validation for Region or State Office review, the review must be completed, and the plan approved. (see the [Region Review](#) or [State Office review sections](#) for more details.)

14. Then the WSC will monitor the Pending Plans queue on My Dashboard for approved plans. Navigate to **My Dashboard > Tasks > Pending Plans Queue**.

The screenshot shows a dashboard with three main sections: INCIDENTS, PROVIDERS, and TASKS. The INCIDENTS section includes 'My Incident Ticklers' (8) and 'Inquiry Alert Notes List' (0). The PROVIDERS section includes 'Ticklers' and 'Enrollments'. The TASKS section includes 'Links' (iConnect eLearning Library, iConnect Help Desk), 'My Management' (Current Active Cases, Pending Plans, Ticklers Due), and 'My Files' (Import).

15. Filter the pending plans queue for those with status equal to Approved, and possibly additional date filters to display only recent plans. Select a plan to display the Plan Information page.

16. The WSC will add a Note assigned to the Region Worker notifying them to manually update the auth service so the dollars from the rejected authorization are credited back to the consumer's budget.

17. From the plan record, the WSC will select the **Cost Plan Review Notes** subpage.

The screenshot shows the 'Plan Information' page. The 'Plan Details' section includes fields for Division (APD), Program (APD Waiver), Worker, Cost Plan Creation Date (04/22/2020), and Comments. The 'File' menu is open, showing 'Plan Information', 'Planned Services', and 'Cost Plan Review Notes'.

18. From the **File** menu, select **Add Note**.

The screenshot shows the 'Cost Plan Review Notes' page. The 'File' menu is open, showing 'Add Note', 'Print', 'Close Cost Plan Review Notes', and 'Cost Plan Review Notes'. The search filters are set to 'Equal To', 'Cost Plan Review', and 'AND'. The 'Search' and 'Reset' buttons are visible.

19. In the new Note record, update the following fields:

- a. Division = APD
- b. Note By = defaults to self
- c. Note Date = defaults to today
- d. Cost Plan Review Note = Yes
- e. Note Type = Cost Plan Review
- f. Note Subtype = Rejected Authorization
- g. Note = Describe the request
- h. Status = Pending
- i. Route the Note to the appropriate Region Waiver Worker or Lead by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

20. When finished, click **File > Save and Close Notes**

The screenshot shows the 'Notes' form in the iConnect system. The form is titled 'Notes' and has a 'File' menu and 'Tools' button. The form fields are as follows:

- Division: APD
- Note By: Buck, Jennifer
- Note Date: 05/19/2020
- Program: (empty)
- Cost Plan Review Note?: Yes
- Note Type: Cost Plan Review
- Note SubType: Rejected Authorization
- Description: (empty)
- Note: (Rich text editor with the text 'please restore this auth service')
- Status: Pending
- Date Completed: (empty)

21. The Region staff will monitor their **My Dashboard** for new Pending Note records.

22. To do so, log into iConnect and set Role = Region Waiver Workstream Worker OR Region Waiver Workstream Lead. Click **Go**.

23. Find the consumer's Panel and click on the link for Notes with Status = Pending. Click on the **Pending** link to open the Notes Queue:

Ticklers	
Ticklers	134
Plans	
Approved	1
Draft	1
Pending	1
Appointments	
Scheduled	1

24. In the Notes Queue, open the Note record with Note Type = Cost Plan Review and Note Subtype = Rejected Authorization

opd iConnect Welcome, Jennifer Buck | Notes
5/19/2020 1:32 PM

File Tools

Filters

Status Equal To Pending AND

iConnect ID +

Search Reset

2 Notes record(s) returned - now viewing 1 through 2

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status	
34191		Cost Plan Review	Rejected Authorization	05/19/2020		Buck, Jennifer	Pending	<input type="checkbox"/>
59217		IFS Request		05/04/2020		Buck, Jennifer	Pending	<input type="checkbox"/>

<< First < Previous Retrieve 15 Records at a time Next > Last >>

25. Review the contents of the Note to understand the request then close the note.

26. Navigate to the consumer record and select the **Auths** tab.

27. Select the authorization and then the auth service that needs to be updated. The Auth Service Details page displays. Update the following fields:

- Max Units = change to zero which changes the Amount Approved to zero.
- Auth Service EDI = remains Rejected
- Auth Service Status = remains Rejected.

28. From the **File** menu, select **Save and Close**.

29. The authorization is updated manually instead of using the Update Auth functionality from the Planned Service page. This is because you do NOT want the rejected

auth service to be sent to FMMIS again. FMMIS has already rejected this auth service, the WSC chose not to correct it. The Auth statuses will remain Rejected.

30. The authorization will remain linked to the budget. When the auth service amount is updated, the application automatically updates the amount unauthorized on the consumer budget. This is when the dollars are credited back to the consumer's budget.

31. Notify the WSC the auth service has been updated by updating the Cost Plan Review note. From the Cost Plan Review Notes subpage in the plan record, select the Cost Plan Review Note with SubType = Rejected Authorization.

Filters

Status Equal To Pending AND

iConnect ID

2 Notes record(s) returned - now viewing 1 through 2


iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status	<input type="checkbox"/>
34191		Cost Plan Review	Rejected Authorization	05/19/2020		Buck, Jennifer	Pending	<input type="checkbox"/>
59217		IFS Request		05/04/2020		Buck, Jennifer	Pending	<input type="checkbox"/>

<< First < Previous Retrieve 15 Records at a time Next > Last >>

32. The Note Details page displays. Update the following fields.

- Note = describe the update that was completed and select Append Text to Note.
- Status = Complete
- Route the Note to the WSC by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

33. From the **File** menu, select **Save and Close Note**.



Notes
 Last Updated by jlbuck@apdcare.org
 at 5/19/2020 1:31:56 PM

File
Tools

Notes

Division *	APD
Note By *	Buck, Jennifer
Note Date *	05/19/2020
Program	<div style="border: 1px solid #ccc; height: 15px; width: 100%;"></div>
Cost Plan Review Note? *	Yes ▼
Note Type *	Cost Plan Review ▼
Note SubType	Rejected Authorization ▼
Description	<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>

Note

On 5/19/2020 at 1:31 PM, Jennifer Buck wrote:
please restore this auth service

On 5/19/2020 at 1:45 PM, Jennifer Buck wrote:
I have restored this auth service.

New Text

B *I* U 13px ▼ A ▼

Append Text to Note

Status *	Complete ▼
Date Completed	05/19/2020

34. The WSC will monitor My Dashboard for incoming notes and notification the update is complete, but no further action is needed. The planned service and the auth service are both updated.

Update the Planned Service to Correct the Rejection

1. If the planned service needs to be updated to correct the rejection, the WSC will update the planned service, the updated plan must pass validation, and then the authorization will be updated.

2. The plan has already been validated and reviewed by the Region and/or State, the plan status is approved, and the plan is read only. The WSC will need to reverse the status of the plan before updating the service.
3. To do so, the WSC must use the WSC Cost Plan Adjustment Role.
4. Select the APD waiver Plan record with status = Approved. The Plan Information Page displays.
5. Click **File > Reverse Status**.

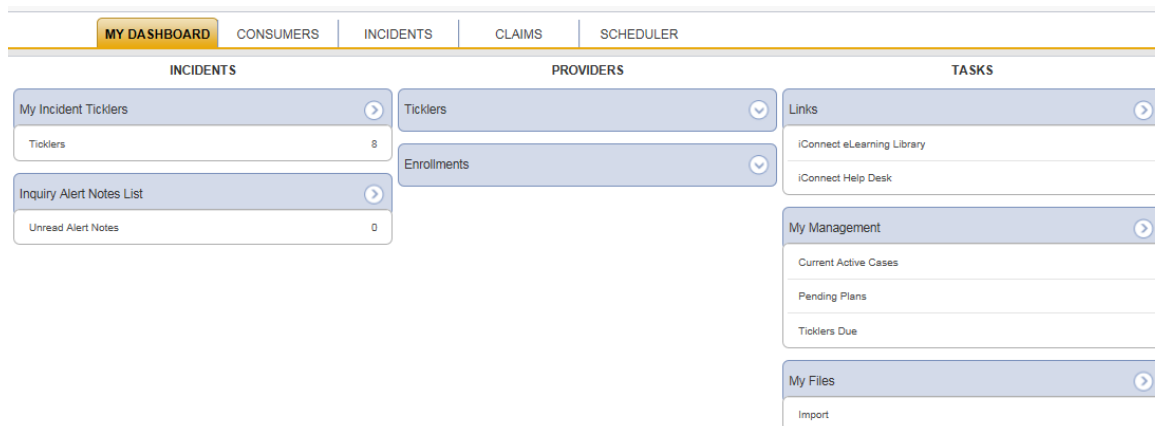
The screenshot shows the iConnect web application interface. At the top, the user is John Sheppard, Last Updated by j buck. The role is WSC Cost Plan Adjustment. The page title is 'Plan Information'. On the left, there is a 'File' menu with options: Duplicate, Spell Check, Save and Validate Plan, **Reverse Status** (highlighted), History, Print, and Close Plan Information. The main area shows 'Plan Details' for an APD Waiver plan created on 04/01/2018 by Reed, Monica.

6. The record is now editable, and the **Plan Status** equals Draft.

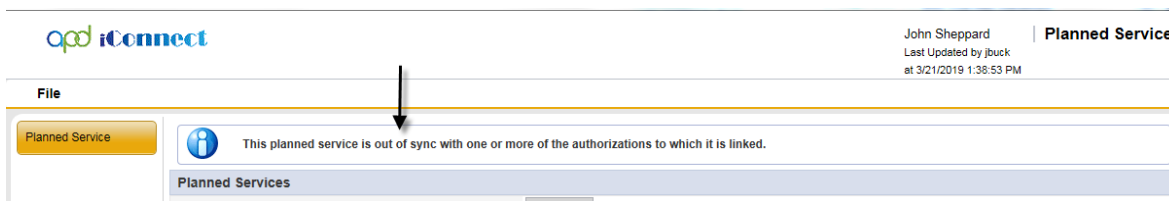
The screenshot shows the iConnect web application interface. At the top, the user is Violet Sheppard, Last Updated by lritchie, at 8/27/2019 12:40:06 PM. The page title is 'Plan Information'. On the left, there is a 'File' menu with options: Plan Information (highlighted), Planned Services, and Cost Plan Review Notes. The main area shows 'Plan Details' for an APD Waiver plan created on 07/01/2018 by Reed, Monica. The 'Status' is set to 'Draft'.

7. Click **File > Save Plan**.
8. Click the **Planned Services** subpage.
9. Select the planned service that needs to be updated to display the Planned Service Details page. Update the following fields:
 - a. This varies depending on the rejection reason
 - b. Planned Service Status = Do Not Change.

10. When finished, select **File > Save and Close Planned Service**.
11. Complete [Plan Validation](#). The edited planned service must pass plan validation.
12. If the plan passes validation and does not require review, the WSC will change the Plan Status to No Review required, then save the Plan record. Skip to step 16.
13. If the plan fails validation for Region or State Office review, the review must be completed, and the plan approved. (see the [Region Review](#) or [State Office review sections](#) for more details.)
14. Then the WSC will monitor the Pending Plans queue on My Dashboard for approved plans. Navigate to **My Dashboard > Tasks > Pending Plans Queue**.

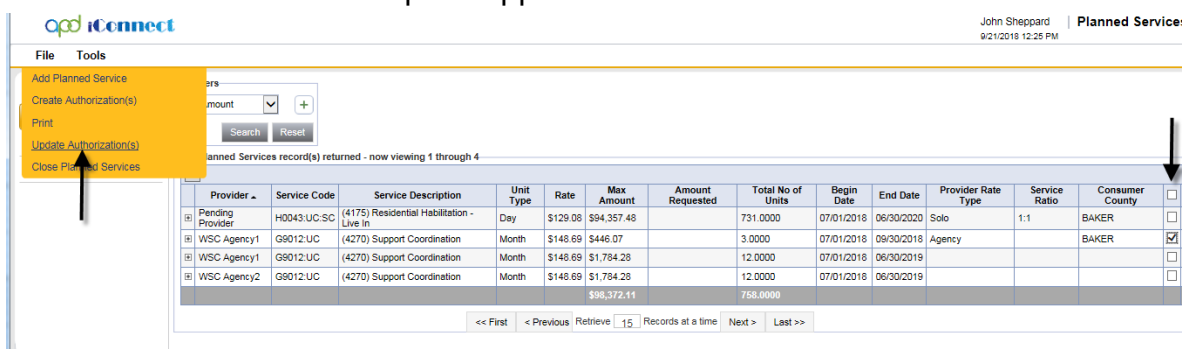


15. Filter the pending plans queue for those with status equal to Approved, and possibly additional date filters to display only recent plans. Select a plan to display the Plan Information page.
16. Navigate to the Planned Services subpage.
17. Once the edited planned service has passed validation, the changes must also be made to the authorization using the **Update Authorization** functionality in iConnect. On the planned services details page, a message will display to the user until this update is completed.



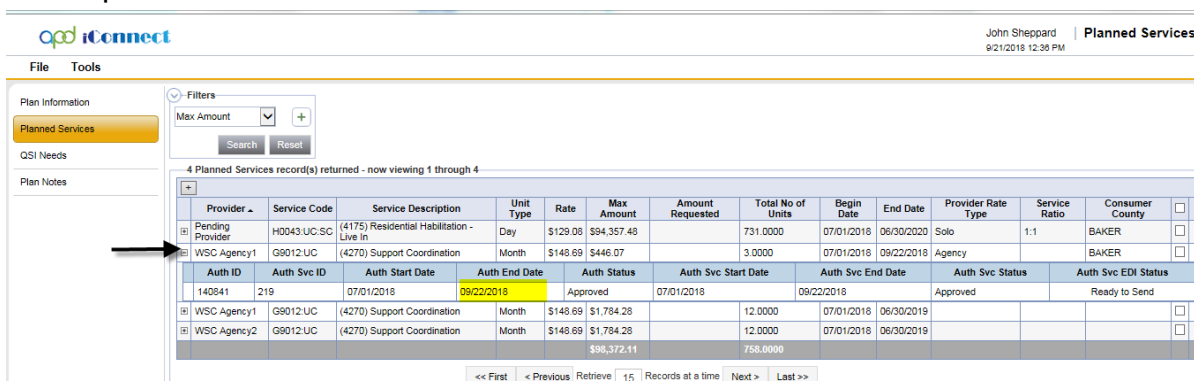
18. Click the checkbox next to the planned service that was updated.

19. Click **File > Update Authorization**. A success notification window displays, and the authorization is updated. Only after passing Plan Validation, will the Update Authorization menu option appear on the Planned Services tab.



20. The application automatically updates the authorization that is linked to the budget.

21. The authorization details can be viewed by selecting the + next to the edited planned service or from the Authorization tab.



Sheppard, Alice (10053)

Auths

Filters

Auth Service EDI Status: Ready to Send

Division: APD

Search Reset

3 Auths record(s) returned - now viewing 1 through 3

	Division	Provider	PA Number	Auth ID	Start Date	End Date	Status	Cancelled
<input checked="" type="checkbox"/>	APD	WSC Agency1		140676	04/01/2018	06/30/2018	Approved	No
<input type="checkbox"/>	APD	APD Test Provider		140675	04/01/2018	06/30/2018	Approved	No
<input type="checkbox"/>	APD	A Test Provider		140669	04/01/2018	06/30/2018	Approved	No

22. The Update Authorization functionality in iConnect will reset the Auth Svs EDI Status back to Ready to Send so the updates will be sent to FMMIS via the authorization interface. Proceed to [Authorization Interface section](#).

Update the Consumer or Provider Record to Correct the Rejection (i.e. invalid Provider ID)

1. To correct a rejection by updating data on the consumer's or provider's record, the WSC will work with the appropriate parties for the corrections to be made. Once complete, the WSC will trigger the authorization to be sent back to FMMIS for approval, using the Update Auth functionality on the plan record.
2. The WSC is notified the corrections to the consumer and/or provider record have been made.
3. Navigate to the consumer record and select the Plans tab.
4. Select the approved plan to display the Plan Information page.
5. The WSC does not make any changes to the plan record.
6. Select the Planned Services subpage.
7. Click the checkbox next to the planned service that needs to be resent to FMMIS.

8. Click **File > Update Authorization**. A success notification window displays, and the authorization is updated.

John Sheppard | Planned Services
9/21/2018 12:25 PM

File Tools

Add Planned Service
Create Authorization(s)
Print
Update Authorization(s)
Close Planned Services

Planned Services record(s) returned - now viewing 1 through 4

Provider	Service Code	Service Description	Unit Type	Rate	Max Amount	Amount Requested	Total No of Units	Begin Date	End Date	Provider Rate Type	Service Ratio	Consumer County
Pending Provider	H0043.UC.SC	(4175) Residential Habilitation - Live In	Day	\$129.08	\$94,357.48		731.0000	07/01/2018	06/30/2020	Solo	1:1	BAKER
WSC Agency1	G9012.UC	(4270) Support Coordination	Month	\$148.69	\$446.07		3.0000	07/01/2018	09/30/2018	Agency		BAKER
WSC Agency1	G9012.UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28		12.0000	07/01/2018	06/30/2019			
WSC Agency2	G9012.UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28		12.0000	07/01/2018	06/30/2019			
					\$98,372.11		758.0000					

<< First < Previous Retrieve 15 Records at a time Next > Last >>

9. Because no changes were made to the planned service, no changes are made to the authorization that is linked to the budget and the dollars are still deducted from the budget.

10. The authorization details can be viewed by selecting the + next to the edited planned service or from the Authorization tab.

John Sheppard | Planned Services
9/21/2018 12:35 PM

File Tools

Plan Information
Planned Services
QSI Needs
Plan Notes

Filters
Max Amount
Search Reset

4 Planned Services record(s) returned - now viewing 1 through 4

Provider	Service Code	Service Description	Unit Type	Rate	Max Amount	Amount Requested	Total No of Units	Begin Date	End Date	Provider Rate Type	Service Ratio	Consumer County
Pending Provider	H0043.UC.SC	(4175) Residential Habilitation - Live In	Day	\$129.08	\$94,357.48		731.0000	07/01/2018	06/30/2020	Solo	1:1	BAKER
WSC Agency1	G9012.UC	(4270) Support Coordination	Month	\$148.69	\$446.07		3.0000	07/01/2018	09/22/2018	Agency		BAKER

Auth ID	Auth Svc ID	Auth Start Date	Auth End Date	Auth Status	Auth Svc Start Date	Auth Svc End Date	Auth Svc Status	Auth Svc EDI Status
140841	219	07/01/2018	09/22/2018	Approved	07/01/2018	09/22/2018	Approved	Ready to Send
WSC Agency1	G9012.UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28	12.0000	07/01/2018	06/30/2019
WSC Agency2	G9012.UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28	12.0000	07/01/2018	06/30/2019

<< First < Previous Retrieve 15 Records at a time Next > Last >>

opd iConnect Alice Sheppard | Auth: Last Updated by jibuck at 5/9/2018 5:22:54 PM

File Reports Ticklers View Consumer Incidents

Sheppard, Alice (10053)

Diagnosis Eligibility Medications **Auths** Provider Documentation Contacts Consumer Module User

Demographics Divisions Programs Provider Selections Notes Forms Appointments Plans Pre-Enrollment Payers Legal Issues

Filters

Auth Service EDI Status Equal To Ready to Send AND

Division +

Search Reset

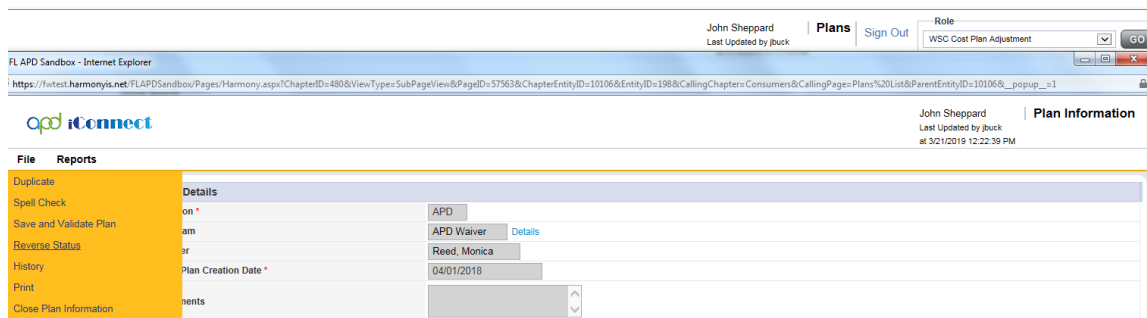
3 Auths record(s) returned - now viewing 1 through 3

	Division	Provider	PA Number	Auth ID	Start Date	End Date	Status	Cancelled
+	APD	WSC Agency1		140676	04/01/2018	06/30/2018	Approved	No
+	APD	APD Test Provider		140675	04/01/2018	06/30/2018	Approved	No
+	APD	A Test Provider		140669	04/01/2018	06/30/2018	Approved	No

11. The Update Authorization functionality in iConnect will reset the Auth Svs EDI Status back to Ready to Send so the updates will be sent to FMMIS via the authorization interface. Proceed to [Authorization Service Approved section](#).

Add New Service to an Approved Plan

1. To add a new service to an approved plan, the user must add a new planned service, relink the plan to the budget, and pass validation.
2. The plan has already been validated and reviewed by the Region and/or State, the plan status is approved, and the plan is read only. The WSC will need to Reverse the Status of the plan before adding a new service.
3. To do so, the WSC must use the WSC Cost Plan Adjustment Role.
4. Select the APD waiver Plan record with status = Approved. The Plan Information Page displays.
5. Click **File > Reverse Status**.



John Sheppard
Last Updated by j buck
at 3/21/2019 12:22:39 PM

Plan Information

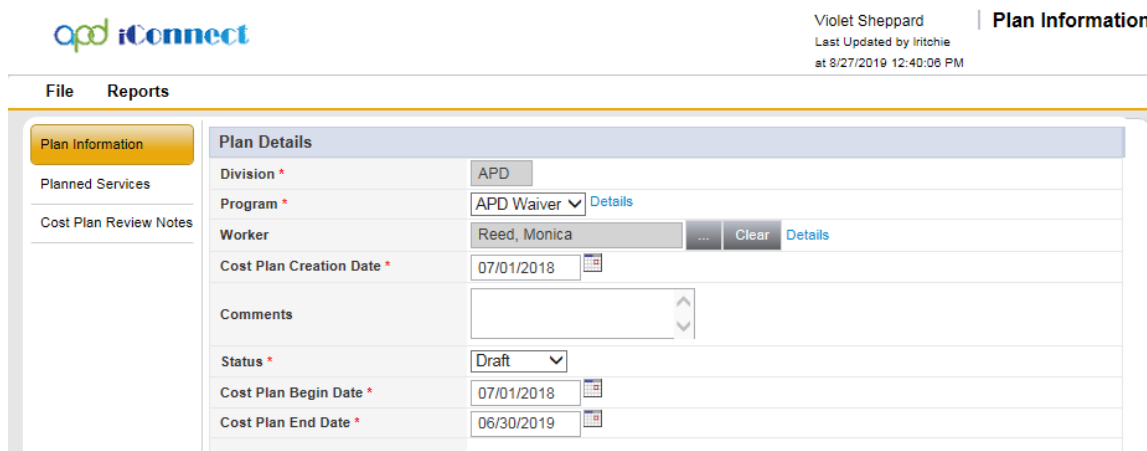
File Reports

Duplicate
Spell Check
Save and Validate Plan
Reverse Status
History
Print
Close Plan Information

Plan Details

Division * APD
Program * APD Waiver Details
Worker Reed, Monica Clear Details
Cost Plan Creation Date * 04/01/2018
Comments
Status * Draft
Cost Plan Begin Date * 07/01/2018
Cost Plan End Date * 06/30/2019

6. The record is now editable, and the **Plan Status** equals Draft.



Violet Sheppard
Last Updated by lritchie
at 8/27/2019 12:40:08 PM

Plan Information

File Reports

Duplicate
Spell Check
Save and Validate Plan
Reverse Status
History
Print
Close Plan Information

Plan Details

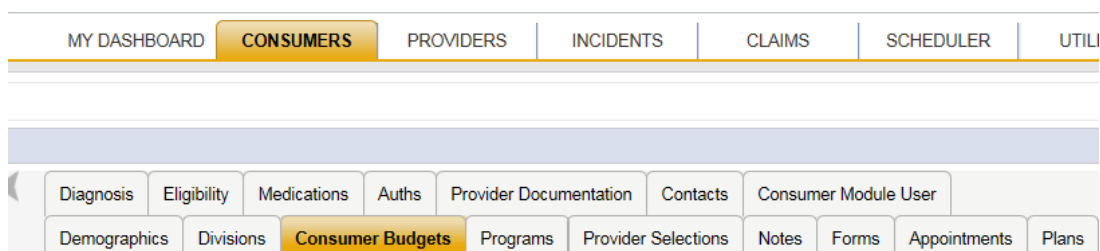
Division * APD
Program * APD Waiver Details
Worker Reed, Monica Clear Details
Cost Plan Creation Date * 07/01/2018
Comments
Status * Draft
Cost Plan Begin Date * 07/01/2018
Cost Plan End Date * 06/30/2019

7. Click **File > Save Plan**.

8. Click the **Planned Services** subpage.

9. Proceed to [Add Planned Services section](#) to add the new service.

10. Once the planned service has been added, navigate to the Consumer Budget tab to relink the updated plan to the budget.



MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER UTILITIES

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User
Demographics Divisions Consumer Budgets Programs Provider Selections Notes Forms Appointments Plans

11. Select the current fiscal year's budget record. The Consumer Budget details page displays.

12. Select the **Linked Plans** subpage.

John Sheppard
Last Updated by jibuck
at 8/25/2018 10:41:22 AM

Consumer Budget Detail

File

Budget ID: 51
Approval Date:
Fiscal Year:
Program(s):
APD Waiver

Approved By:
Division: APD
Start Date: 07/01/2018
End Date: 06/30/2019

13. Select the **checkbox** next to the current fiscal year's plan. From the **Tools** menu, select **Unlink Plan**.

4/28/2020 1:11 PM

Linked Plans

File Tools

Unlink Plan

Budget

Linked Plans

Linked Authorizations

Fund Code:
Search Reset

1 Linked Plans record(s) returned - now viewing 1 through 1

Fund Code	Program	Plan Start Date	Plan End Date	Worker	Status	
APD	APD Waiver	07/01/2020	06/30/2021		Approved	<input checked="" type="checkbox"/>

<< First < Previous Retrieve 15 Records at a time Next > Last >>

14. Unlink successful notification displays. Now, relink the plan.

15. From the **File** menu > Select **Link to Plan**

John Sheppard
8/25/2018 10:42 AM

Linked Plans

File Tools

Link to Plan

Print

Close Linked Plans

Fund Code:
Search Reset

16. A list of existing Plan records is displayed. Select the Link option from the flyout menu next to the selected Plan.

John Sheppard
8/25/2018 10:44 AM

Link to Plan

File Tools

Filters

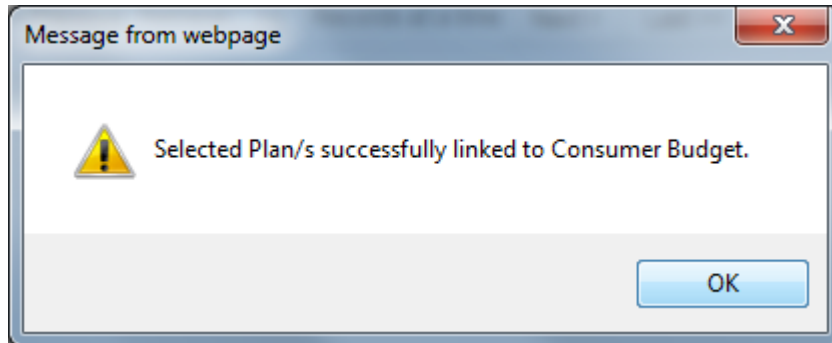
Fund Code:
Search Reset

1 Link to Plan record(s) returned - now viewing 1 through 1

Fund Code	Program	Plan Start Date	Plan End Date	Worker	Status	
APD				Buck, Jennifer	Draft	Link

<< First < Previous Retrieve 15 Records at a time Next > Last >>

17. Link successful notification displays. Click OK. Close the Link to Plan window.



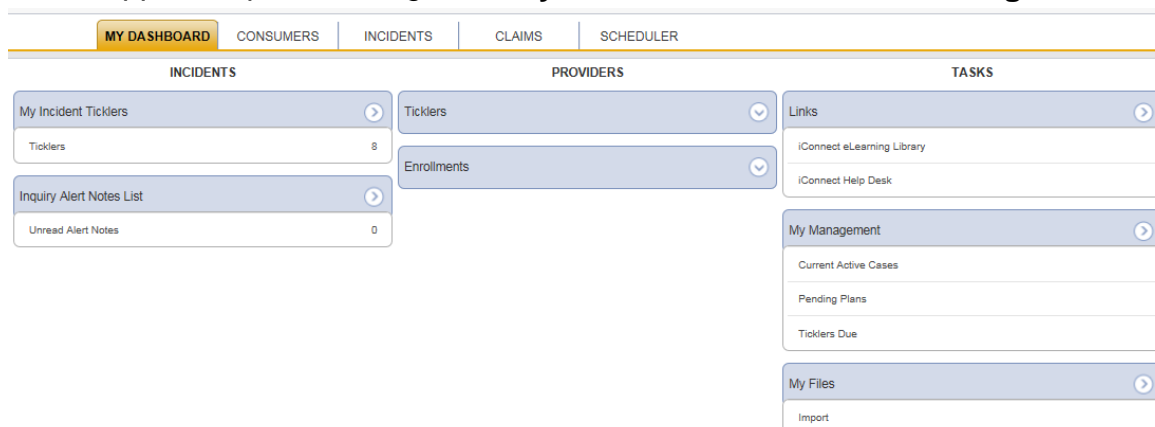
18. The Linked Plans subpage now displays the Plan record that was just re-linked.

19. Return to the plan record that includes the new service that was added. Complete [Plan Validation](#). The edited planned service must pass plan validation.

20. If the plan passes validation and does not require review, the WSC will change the Plan Status to No Review required, then save the Plan record. Skip to step 24.

21. If the plan fails validation for Region or State Office review, the review must be completed, and the plan approved. (see the [Region Review](#) or [State Office review sections](#) for more details.)

22. Then the WSC will monitor the Pending Plans queue on My Dashboard for approved plans. Navigate to **My Dashboard > Tasks > Pending Plans Queue**.

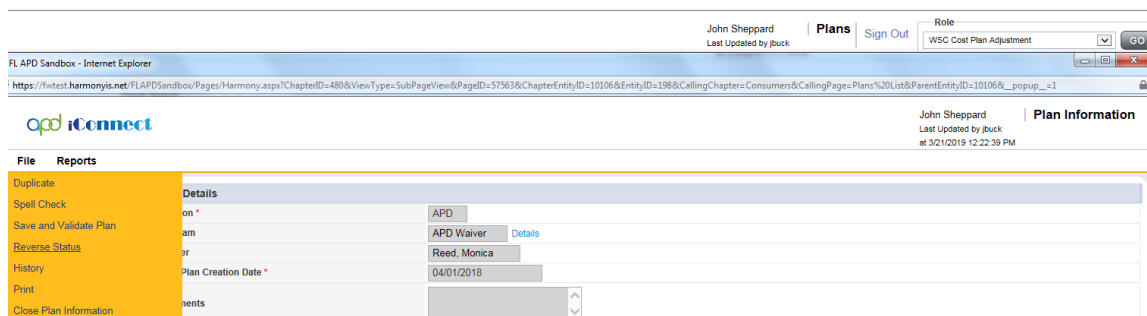


23. Filter the pending plans queue for those with status equal to Approved, and possibly additional date filters to display only recent plans. Select a plan to display the Plan Information page.

24. Once the plan passes validation, the WSC will create the authorization. Proceed to the [Create Authorization section](#).
25. The application will automatically link the new authorization to the budget.
26. The application will automatically include the new authorization in the next FMMIS auth interface file. Proceed to [Authorization Interface section](#).

Update Services on an Approved Plan

1. To update an authorization, the user must first update the planned service, pass validation, and then update the authorization.
2. The plan has already been validated and reviewed by the Region and/or State, the plan status is approved, and the plan is read only. The WSC will need to Reverse the Status of the plan before adding a new service.
3. To do so, the WSC must use the WSC Cost Plan Adjustment Role.
4. Select the APD waiver Plan record with status = Approved. The Plan Information Page displays.
5. Click **File > Reverse Status**.



6. The record is now editable, and the **Plan Status** equals Draft.

Plan Information

Violet Sheppard
Last Updated by lritchie
at 8/27/2019 12:40:06 PM

File Reports

Plan Details

Division * APD

Program * APD Waiver [Details](#)

Worker Reed, Monica [Clear](#) [Details](#)

Cost Plan Creation Date * 07/01/2018

Comments

Status * Draft

Cost Plan Begin Date * 07/01/2018

Cost Plan End Date * 06/30/2019

7. Click **File > Save Plan**.
8. Click the **Planned Services** subpage.
9. Proceed to [Edit Planned Services section](#) to update the service details.
10. Complete [Plan Validation](#). The edited planned service must pass plan validation.
11. If the plan passes validation and does not require review, the WSC will change the Plan Status to No Review required, then save the Plan record. Skip to step 15.
12. If the plan fails validation for Region or State Office review, the review must be completed, and the plan approved. (see the [Region Review](#) or [State Office review sections](#) for more details.)
13. Then the WSC will monitor the Pending Plans queue on My Dashboard for approved plans. Navigate to **My Dashboard > Tasks > Pending Plans Queue**.

MY DASHBOARD CONSUMERS INCIDENTS CLAIMS SCHEDULER

INCIDENTS

My Incident Ticklers [>](#)

Ticklers 8

Inquiry Alert Notes List [>](#)

Unread Alert Notes 0

PROVIDERS

Ticklers [v](#)

Enrollments [v](#)

TASKS

Links [>](#)

iConnect eLearning Library

iConnect Help Desk

My Management [>](#)

Current Active Cases

Pending Plans

Ticklers Due

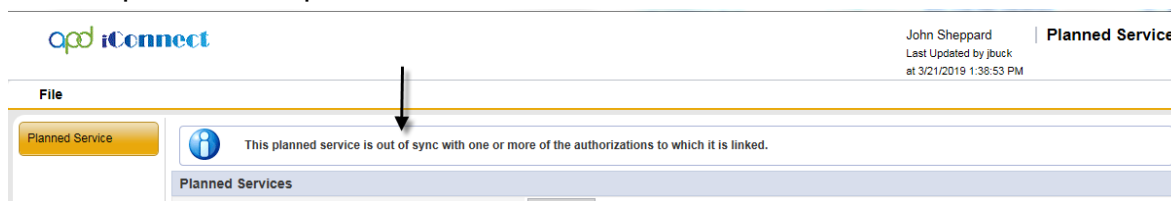
My Files [>](#)

Import

14. Filter the pending plans queue for those with status equal to Approved, and possibly additional date filters to display only recent plans. Select a plan to display the Plan Information page.

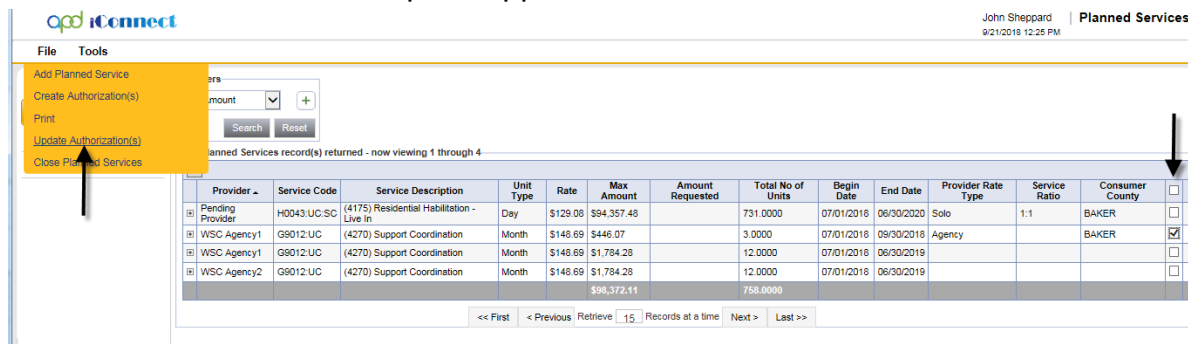
15. Navigate to the Planned Services subpage.

16. Once the edited planned service has passed validation, the changes must also be made to the authorization using the **Update Authorization** functionality in iConnect. On the planned services details page, a message will display to the user until this update is completed.



17. Click the checkbox next to the planned service that was updated.

18. Click **File > Update Authorization**. A success notification window displays, and the authorization is updated. Only after passing Plan Validation, will the Update Authorization menu option appear on the Planned Services tab.



19. The application automatically updates the authorization that is linked to the budget.

20. The authorization details can be viewed by selecting the + next to the edited planned service or from the Authorization tab.

iConnect John Sheppard | **Planned Services**
9/21/2018 12:38 PM

File Tools

Plan Information
Planned Services
QSI Needs
Plan Notes

Filters
Max Amount +
Search Reset

4 Planned Services record(s) returned - now viewing 1 through 4

Provider	Service Code	Service Description	Unit Type	Rate	Max Amount	Amount Requested	Total No of Units	Begin Date	End Date	Provider Rate Type	Service Ratio	Consumer County	
Pending Provider	H0043 UC-SC	(4175) Residential Habilitation - Live In	Day	\$129.08	\$94,357.48		731.0000	07/01/2018	06/30/2020	Solo	1:1	BAKER	<input type="checkbox"/>
WSC Agency1	G9012 UC	(4270) Support Coordination	Month	\$148.69	\$446.07		3.0000	07/01/2018	09/22/2018	Agency		BAKER	<input type="checkbox"/>
	Auth ID	Auth Svc ID	Auth Start Date	Auth End Date	Auth Status	Auth Svc Start Date	Auth Svc End Date	Auth Svc Status	Auth Svc EDI Status				
	140841	219	07/01/2018	09/22/2018	Approved	07/01/2018	09/22/2018	Approved	Ready to Send				<input type="checkbox"/>
WSC Agency1	G9012 UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28		12.0000	07/01/2018	06/30/2019				<input type="checkbox"/>
WSC Agency2	G9012 UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28		12.0000	07/01/2018	06/30/2019				<input type="checkbox"/>
				\$38,372.11		758.0000							

<< First < Previous Retrieve 15 Records at a time Next > Last >>

iConnect Alice Sheppard | **Auths**
Last Updated by j buck
at 5/9/2018 5:22:54 PM

File Reports Ticklers View Consumer Incidents

Sheppard, Alice (10053)

Diagnosis Eligibility Medications **Auths** Provider Documentation Contacts Consumer Module User
Demographics Divisions Programs Provider Selections Notes Forms Appointments Plans Pre-Enrollment Payers Legal Issues

Filters
Auth Service EDI Status Equal To Ready to Send AND
Division +
Search Reset

3 Auths record(s) returned - now viewing 1 through 3

	Division	Provider	PA Number	Auth ID	Start Date	End Date	Status	Cancelled
<input checked="" type="checkbox"/>	APD	WSC Agency1		140676	04/01/2018	06/30/2018	Approved	No
<input checked="" type="checkbox"/>	APD	APD Test Provider		140675	04/01/2018	06/30/2018	Approved	No
<input checked="" type="checkbox"/>	APD	A Test Provider		140669	04/01/2018	06/30/2018	Approved	No

21. The Update Authorization functionality in iConnect will reset the Auth Svs EDI Status back to Ready to Send so the updates will be sent to FMMIS via the authorization interface. Proceed to [Authorization Interface section](#).

Cancel Auth Services

An Auth service can be cancelled only when there has been nothing billed against the consumer's budget. The WSC will check the FMMIS portal and/or iConnect for any claims for the consumer that fall within the budget year. If none exist, in iConnect, the WSC will begin the process by 'zeroing out' the planned service then pushing the update to the associated authorization. The application will automatically send the cancellation request in the FMMIS interface. When the cancellation is approved, FMMIS Auth interface changes the status to Terminated and the Amount Approved for is changed to \$0.00, which is when the consumer's budget is credited back the dollars of the cancelled auth service. When the cancellation is rejected, the FMMIS Auth interface will change the auth statuses to Rejected. The Amount Approved is not changed. Because the Amount Approved is not changed, the dollars are still deducted from the budget.

1. To request an authorization cancellation, using the **WSC Cost Plan Adjustment Role**, navigate to the Plans tab of the consumer record and open the plan with the authorization to be cancelled.
2. From the **File** menu > Select **Reverse Status**. This will make the planned service editable. The status defaults to Draft.
3. Select the **Planned Service** subpage. For each auth service you wish to cancel, select the associated planned service to display the Planned Service details page. Update the following fields:
 - a. Total Number of Units = 0 which will change Max Amount to \$0
Cannot change Rate to \$0 because will trigger plan validation rule
 - b. Authorization Notes/Comments: explain why the authorization is being cancelled.
 - c. Planned Service Status = Terminated

opd iConnect Last Updated by j.buck@apdcares.org at 9/26/2019 10:48:18 AM **Planned Service**

File

Planned Service

Division	APD								
Begin Date	07/01/2019								
Fiscal Year *	2020								
End Date	07/01/2019								
Index/SubObject Code	<table border="1"> <thead> <tr> <th>IndexCode</th> <th>Index Description</th> <th>SubObject</th> <th>SubObject Description</th> </tr> </thead> <tbody> <tr> <td>Central</td> <td>Central Region</td> <td>Waiver</td> <td>Budget Waiver</td> </tr> </tbody> </table>	IndexCode	Index Description	SubObject	SubObject Description	Central	Central Region	Waiver	Budget Waiver
IndexCode	Index Description	SubObject	SubObject Description						
Central	Central Region	Waiver	Budget Waiver						
Service Ratio									
Consumer County *	DUVAL								
Provider Rate Type *	Solo								
Service Code *	97530 UC								
Service Description	(4110) Occupational Therapy								
Unit Type	15 mins								
Units Per *	2.00								
Units of Measure *	Business Day								
Rate *	\$0.00								
Total No of Units	2								
Max Amount	\$0.00								
Amount Requested									
Provider ID *	10055 Details								
Provider	Pending Provider								
Authorization Notes/Comments *	<div> required comments from WSC on the Auth this service always requires region review. </div>								
Non-Taxable	<input type="checkbox"/>								
Planned Service Status	Terminated								
Corresponding Auth No.	121205								

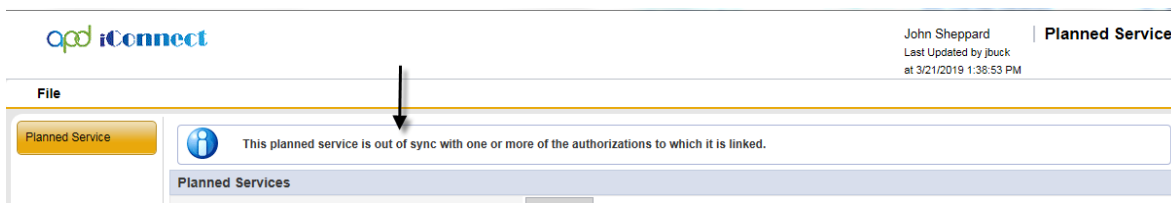
4. From the **File** menu > select **Save and Close Planned Service**.
5. Complete [Plan Validation](#). The edited planned service must pass plan validation.

6. If the plan passes validation and does not require review, the WSC will change the Plan Status to No Review required, then save the Plan record. Skip to step 11.
7. If the plan fails validation for Region or State Office review, the review must be completed, and the plan approved. (see the [Region Review](#) or [State Office review sections](#) for more details.) Region or State involvement in the authorization cancellation process is recommended to verify there have been no claims billed against this authorization before sending the cancellation to FMMIS.
8. Following the review, the reviewer will change the status of the Terminated Planned service to Region or State Office review Approved and the Plan Status = Approved and re-validate the plan.
9. Then the WSC will monitor the Pending Plans queue on My Dashboard for approved plans. Navigate to **My Dashboard > Tasks > Pending Plans Queue**.

The screenshot displays the 'My Dashboard' interface with a navigation bar at the top containing 'MY DASHBOARD', 'CONSUMERS', 'INCIDENTS', 'CLAIMS', and 'SCHEDULER'. The main content area is divided into three columns: 'INCIDENTS', 'PROVIDERS', and 'TASKS'.

- INCIDENTS**: Contains 'My Incident Ticklers' (with a 'Ticklers' sub-item and a count of 8) and 'Inquiry Alert Notes List' (with an 'Unread Alert Notes' sub-item and a count of 0).
- PROVIDERS**: Contains 'Ticklers' and 'Enrollments' sub-items.
- TASKS**: Contains 'Links' (with 'iConnect eLearning Library' and 'iConnect Help Desk'), 'My Management' (with 'Current Active Cases', 'Pending Plans', and 'Ticklers Due'), and 'My Files' (with an 'Import' sub-item).

10. Filter the pending plans queue for those with status equal to Approved, and possibly additional date filters to display only recent plans. Select a plan to display the Plan Information page.
11. Navigate to the Planned Services subpage.
12. Once the updated plan has passed validation, the authorization needs to be updated by using the **Update Authorization** functionality in iConnect. On the planned services details page, the message below will display to the user until this update is completed.

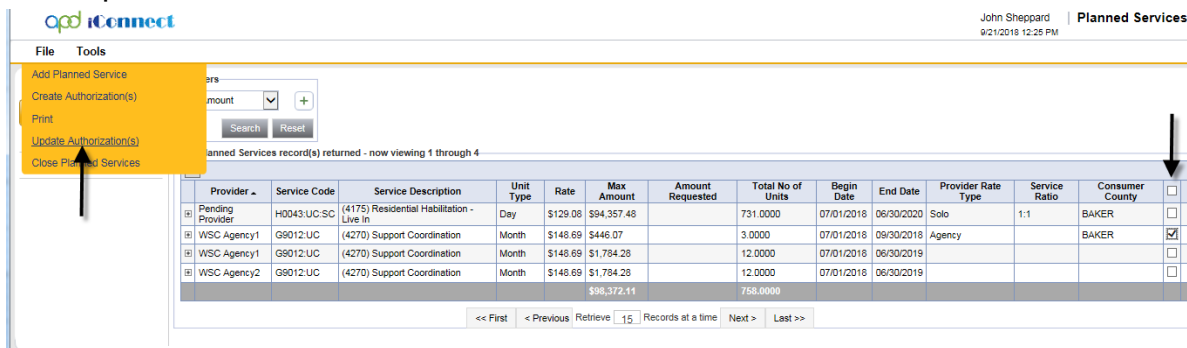


13. Navigate to the Planned Services subpage.

14. Click the checkbox next to the planned service that was updated.

15. Click **File > Update Authorization**. A success notification window displays, and the authorization is updated. Only after passing Plan Validation, will the Update Authorization menu option appear on the Planned Services tab.

16. The authorization details can be viewed by selecting the + next to the edited planned service or from the Authorization tab.



17. The Update Authorization functionality will automatically update the following on the associated auth service:

- Amount Approved = No change. This will not be changed until the cancellation is approved by FMMIS.
- Auth Status = Terminated
- Auth Service Status = Terminated
- Auth Service EDI Status = Ready to Send.
- The status changes will trigger the cancellation to be sent to FMMIS.

Service Description	(4270) Support Coordination
Unit Type *	Month
Units Per	1.00
Units of Measure	Month - Round Up
Max. Units *	0
Rate *	\$148.69
Amount Approved *	\$1,784.28
Auth Service EDI Status	Ready to Send
Status	Terminated

18. Current FMMIS Auth Interface Logic will send the X transaction code to FMMIS for cancelled authorization requests. The WSC must wait approximately 24 hours until the interface has processed and FMMIS has sent a response.

Cancellation Approved

- When the cancellation is approved, the FMMIS Auth interface will change the authorization statuses to Terminated.

Diagnosis Eligibility Medications **Auths** Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Payers

Filters
Division

13 Auths record(s) returned - now viewing 1 through 13

Division	Provider	Auth ID	Start Date	End Date	Status	Cancelled
APD		232248	07/01/2018	06/30/2019	Rejected	No
APD		185935	01/01/2019	06/30/2019	Approved	No
APD	Pending Provider	232432	06/05/2019	06/30/2019	Approved	No
APD		178648	01/01/2019	06/30/2019	Approved	No
APD	A Test Provider	232141	07/01/2018	06/30/2019	Terminated	Yes

Auth Service ID	Service Code	Service	Start Date	Unit Type	End Date	Auth Service EDI Status	Max Units	Status	Rate	Amount Approved	Cancelled	Provider Rate Type	Consumer County	Service Ratio
139768	G9012-UC	(4270) Support Coordination	07/01/2018	Month	06/30/2019	Terminated	12	Terminated	\$148.69	\$0.00	Yes	Agency	Hernando	

- The Amount Approved for each approved cancelled auth service is also changed to \$0.00.
- The money that was originally designated will be added back to the Amount Unauthorized.

File

Budget	Budget ID	34757	Approved By	
Linked Plans	Approval Date		Division *	APD
Linked Authorizations	Fiscal Year *	2021	Start Date *	07/01/2020
	Program(s)	APD Waiver	End Date *	06/30/2021
	Termination Date		Budget Type *	iBudget
	Allocation Algorithm Amount *	\$15,000.00	Current Budget	\$15,000.00
	Budget Status *	Budget Appr	Description	
	WSC		Regional Office Staff	
	Amount Unauthorized	\$15,000.00	State Office Staff	

4. The authorization remains linked to the budget, visible on the Linked Authorizations subpage.

File Tools

Budget

Linked Plans

Linked Authorizations

Filters

Fund Code +

Search Reset

1 Linked Authorizations record(s) returned - now viewing 1 through 1

Fund Code	Provider	Auth ID	Start Date	End Date	Status	
APD	A Test Provider	232141	07/01/2018	06/30/2019	Terminated	<input checked="" type="checkbox"/>

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Cancellation Rejected

1. When the cancellation is rejected, the FMMIS Auth interface will change the Auth statuses to 'Rejected' and make the record editable again.

oconnect iConnect

Last Updated by Admin at 5/14/2020 4:53:23 PM

AuthService

File

AuthService

Error Message

The authorized service is out of sync with the planned service to which it is linked.

Authorized Service

PA Number 7520127403

Start Date 04/01/2020

End Date 05/15/2020

IndexCode	Index Description	SubObject	SubObject Description
Central	Central Region	Waiver	iBudget Waiver

Service Code 92507:UC

Secondary Code 92507:UC

Service Description (4260) Speech Therapy

Unit Type 15 mins

Units Per 10.00

Units of Measure Week

Max. Units 0

Rate \$16.02

Amount Approved \$1,025.28

Auth Service EDI Status Rejected

Status Rejected

2. The Amount Approved is not changed.
3. Because the Amount Approved is not changed, the dollars are still deducted from the budget. The authorization remains linked to the budget.
4. The next steps the WSC take depends on the reason for the rejection.

Rejection: Paid Claims Exist

1. If the cancellation was rejected because paid claims exists, the WSC will contact the provider with request to void the claims. The provider will inform the WSC after the claim has been voided.

2. The WSC will update the authorization from the plan record.
3. Using the WSC role, the WSC will navigate to the consumer record and select the Plans tab.
4. Select the approved plan. The Plan Information page displays. You do not need to reverse the status of the plan because you are not making any changes to the plan or planned services.
5. The trigger to resend the authorization to FMMIS is located on the Planned Services subpage. Select the Planned services subpage.
6. Put a **checkbox** next to the service that needs to be resent to FMMIS.
7. From the **File** menu, select **Update Auth.**

5/14/2020 5:08 PM | **Planned Services**

File Tools

Create Authorization(s)
Print
Update Authorization(s)
Close Planned Services

Search Reset

5 Planned Services record(s) returned - now viewing 1 through 3

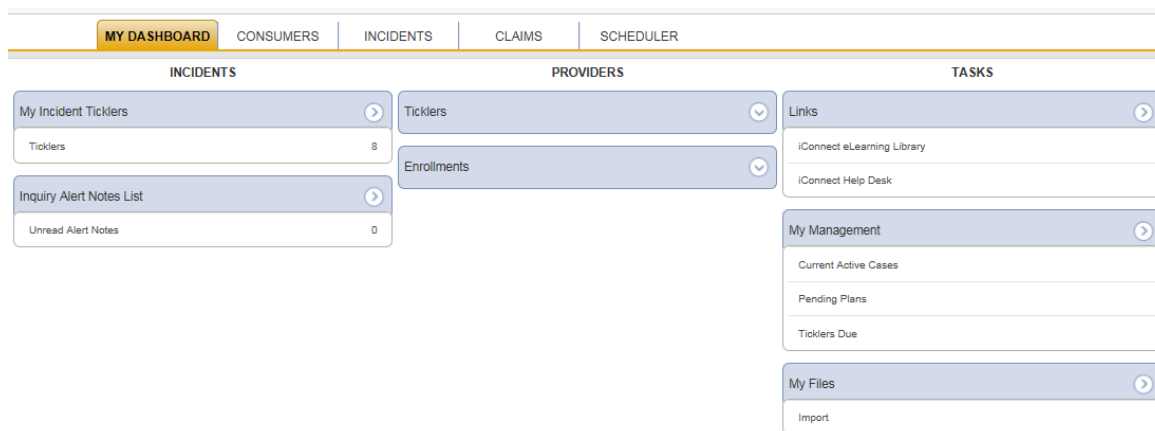
Provider	Service Code	Service Description	Unit Type	Rate	Max Amount	Total No of Units	Amount Requested	Begin Date	End Date	Provider Rate Type	Service Ratio	Consumer County	
A Test Provider	G9012:UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28	12.0000		07/01/2020	06/30/2021	Agency		PALM BEACH	<input checked="" type="checkbox"/>
Pending Provider	S5130:UC	(4140) Personal Supports	15 mins	\$3.86	\$16,026.72	4152.0000		07/01/2020	06/30/2021	Agency	1:1	PALM BEACH	<input type="checkbox"/>
Test Providers	H2019:UC:HP	(4012) Behavior Analysis - Level 1	15 mins	\$20.71	\$7,952.64	384.0000		07/01/2020	06/30/2021	Agency		PALM BEACH	<input type="checkbox"/>
					\$25,763.64	4548.0000							

8. The success notification message displays. Click **OK**.
9. The Auth Service EDI Status changes to Ready to Send and will be included in the next FMMIS Auth interface file.
10. Proceed to [Cancellation Approved section](#).

Rejection: Invalid Begin Date

1. If the cancellation was rejected because of an invalid begin date, the WSC will correct the rejection by updating the planned service.

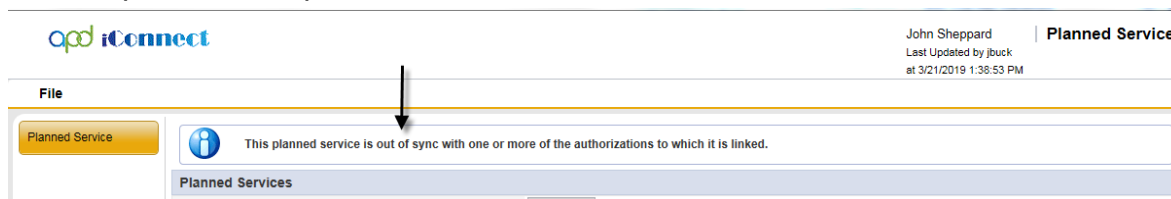
2. Using the WSC Cost Plan Adjustment role, the WSC will navigate to the consumer record and select the Plans tab.
3. Select the approved plan. The Plan Information page displays.
4. From the **File** menu, select **Reverse Status**.
5. The Plan status changes from Approved to Draft.
6. Select the Planned services subpage.
7. Select the service that needs to be updated. The Planned Services details page displays. Update the following fields:
 - a. Start Date = change the start date to a valid begin date
 - b. Planned Service Status = Do not change.
19. From the File menu, select Save and Close Planned Services.
20. Complete [Plan Validation](#). The edited planned service must pass plan validation.
21. If the plan passes validation and does not require review, the WSC will change the Plan Status to No Review required, then save the Plan record. Skip to step 26.
22. If the plan fails validation for Region or State Office review, the review must be completed, and the plan approved. (see the [Region Review](#) or [State Office review sections](#) for more details.)
23. Following the review, the reviewer will change the status of the Terminated Planned service to Region or State Office review Approved and the Plan Status = Approved and re-validate the plan.
24. Then the WSC will monitor the Pending Plans queue on My Dashboard for approved plans. Navigate to **My Dashboard > Tasks > Pending Plans Queue**.



25. Filter the pending plans queue for those with status equal to Approved, and possibly additional date filters to display only recent plans. Select a plan to display the Plan Information page.

26. Navigate to the Planned Services subpage.

27. Once the updated plan has passed validation, the authorization needs to be updated by using the **Update Authorization** functionality in iConnect. On the planned services details page, the message below will display to the user until this update is completed.



28. Navigate to the Planned Services subpage.

29. Click the checkbox next to the planned service that was updated.

30. Click **File > Update Authorization**. A success notification window displays, and the authorization is updated. Only after passing Plan Validation, will the Update Authorization menu option appear on the Planned Services tab.

31. The authorization details can be viewed by selecting the + next to the edited planned service or from the Authorization tab.

John Sheppard | Planned Services
9/21/2018 12:25 PM

File Tools

Add Planned Service
Create Authorization(s)
Print
Update Authorizations
Close Planned Services

Planned Services record(s) returned - now viewing 1 through 4

Provider	Service Code	Service Description	Unit Type	Rate	Max Amount	Amount Requested	Total No of Units	Begin Date	End Date	Provider Rate Type	Service Ratio	Consumer County	
Pending Provider	H0043 UC-SC	(4175) Residential Habilitation - Live In	Day	\$129.08	\$94,357.48		731.0000	07/01/2018	06/30/2020	Solo	1:1	BAKER	<input type="checkbox"/>
WSC Agency1	G9012 UC	(4270) Support Coordination	Month	\$148.69	\$446.07		3.0000	07/01/2018	09/30/2018	Agency		BAKER	<input checked="" type="checkbox"/>
WSC Agency1	G9012 UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28		12.0000	07/01/2018	06/30/2019				<input type="checkbox"/>
WSC Agency2	G9012 UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28		12.0000	07/01/2018	06/30/2019				<input type="checkbox"/>
					\$98,372.11		758.0000						

<< First < Previous Retrieve 15 Records at a time Next > Last >>

32. The Update Authorization functionality will automatically update the following on the associated auth service:

- Amount Approved = No change. This will not be changed until the cancellation is approved by FMMIS.
- Auth Status = Terminated
- Auth Service Status = Terminated
- Auth Service EDI Status = Ready to Send.
- The status changes will trigger the cancellation to be sent to FMMIS.

Service Description	(4270) Support Coordination
Unit Type *	Month
Units Per	1.00
Units of Measure	Month - Round Up
Max. Units *	0
Rate *	\$148.69
Amount Approved *	\$1,784.28
Auth Service EDI Status	Ready to Send
Status	Terminated

33. Current FMMIS Auth Interface Logic will send the X transaction code to FMMIS for cancelled authorization requests. The WSC must wait approximately 24 hours until the interface has processed and FMMIS has sent a response. Proceed to [Cancellation Approved section](#).

Rejection: Cancelled in Error

- If the cancellation was sent in error and rejected, the WSC will return the planned service back to its original state.
- Since the cancellation was never approved, the dollars are still deducted from the budget.

3. The WSC can see the original planned service information from the authorization service details page or the history record on the planned service page.
4. Using the WSC Cost Plan Adjustment role, the WSC will navigate to the consumer record and select the Plans tab.
5. Select the approved plan. The Plan Information page displays.
6. From the **File** menu, select **Reverse Status**.
7. The Plan status changes from Approved to Draft.
8. Select the Planned services subpage.
9. Select the service that needs to be updated. The Planned Services details page displays. Update the following fields:
 - a. Total No of Units = 0. Change back to the original number.
 - b. Max Amount = 0. Updates automatically to the original amount.
 - c. Comments = Terminated. Update to Termination sent in error.
 - d. Planned Service Status = Terminated or Region Review Approved. Change Terminated to Approved. Do not change if Status = Region Review Approved.
10. From the File menu, select Save and Close Planned Services.
11. Complete [Plan Validation](#). The edited planned service must pass plan validation.
12. If the plan passes validation and does not require review, the WSC will change the Plan Status to No Review required, then save the Plan record. Skip to step 17.
13. If the plan fails validation for Region or State Office review, the review must be completed, and the plan approved. (see the [Region Review](#) or [State Office review sections](#) for more details.)
14. Following the review, the reviewer will not need to make any changes to the Planned Service status. The reviewer will change the Plan Status = Approved and re-validate the plan.

15. Then the WSC will monitor the Pending Plans queue on My Dashboard for approved plans. Navigate to **My Dashboard > Tasks > Pending Plans Queue**.

The screenshot shows the 'My Dashboard' interface with a navigation bar at the top containing 'MY DASHBOARD', 'CONSUMERS', 'INCIDENTS', 'CLAIMS', and 'SCHEDULER'. The main content area is divided into three sections: 'INCIDENTS', 'PROVIDERS', and 'TASKS'. Under 'INCIDENTS', there are 'My Incident Ticklers' (8) and 'Inquiry Alert Notes List' (0). Under 'PROVIDERS', there are 'Ticklers' and 'Enrollments'. Under 'TASKS', there are 'Links' (iConnect eLearning Library, iConnect Help Desk), 'My Management' (Current Active Cases, Pending Plans, Ticklers Due), and 'My Files' (Import).

16. Filter the pending plans queue for those with status equal to Approved, and possibly additional date filters to display only recent plans. Select a plan to display the Plan Information page.

22. The WSC will add a Note assigned to the Region Worker notifying them to restore the auth service.

23. From the plan record, the WSC will select the Cost Plan Review Notes subpage.

The screenshot shows the 'Plan Information' page. The top navigation bar includes the 'iConnect' logo and the text 'Last Updated by j.buck@apdcares.org at 5/14/2020 11:06:07 AM'. The main content area has a 'File' menu and a 'Reports' section. The 'Plan Details' section shows fields for 'Division' (APD), 'Program' (APD Waiver), 'Worker' (with a search button and 'Clear' button), 'Cost Plan Creation Date' (04/22/2020), and 'Comments'.

24. From the **File** menu, select **Add Note**.

The screenshot shows the 'File' menu with the 'Add Note' option highlighted. The menu also includes 'Print', 'Close Cost Plan Review Notes', and 'Cost Plan Review Notes'. The 'Cost Plan Review Notes' option is further detailed with a search filter: 'Equal To' (dropdown), 'Cost Plan Review' (dropdown), 'AND' (dropdown), and a search button. The 'Search' and 'Reset' buttons are also visible at the bottom.

25. In the new Note record, update the following fields:

- a. Division = APD
- b. Note By = defaults to self
- c. Note Date = defaults to today
- d. Cost Plan Review Note = Yes
- e. Note Type = Cost Plan Review
- f. Note Subtype = Rejected Authorization
- g. Note = Describe the request
- h. Status = Pending
- i. Route the Note to the appropriate Region Waiver Worker or Lead by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

26. When finished, click **File > Save and Close Notes**

The screenshot shows the iConnect application interface for creating a new Note. The header includes the iConnect logo, the date and time (5/19/2020 1:28 PM), and a 'Notes' tab. Below the header is a 'File Tools' menu. The main form area is titled 'Notes' and contains the following fields:

- Division: APD
- Note By: Buck, Jennifer
- Note Date: 05/19/2020
- Program: (empty)
- Cost Plan Review Note?: Yes
- Note Type: Cost Plan Review
- Note SubType: Rejected Authorization
- Description: (empty)
- Note: (text area containing 'please restore this auth service')
- Status: Pending
- Date Completed: (empty)

27. The Region staff will monitor their **My Dashboard** for new Pending Note records.

28. To do so, log into iConnect and set Role = Region Waiver Workstream Worker OR Region Waiver Workstream Lead. Click **Go**.

29. Find the consumer's Panel and click on the link for Notes with Status = Pending. Click on the **Pending** link to open the Notes Queue:

Ticklers	
Ticklers	134
Plans	
Approved	1
Draft	1
Pending	1
Appointments	
Scheduled	1

30. In the Notes Queue, open the Note record with Note Type = Cost Plan Review and Note Subtype = Rejected Authorization

opd iConnect Welcome, Jennifer Buck | Notes
5/19/2020 1:32 PM

File Tools

Filters

Status Equal To Pending AND

iConnect ID +

Search Reset

2 Notes record(s) returned - now viewing 1 through 2

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status	
34191		Cost Plan Review	Rejected Authorization	05/19/2020		Buck, Jennifer	Pending	<input type="checkbox"/>
59217		IFS Request		05/04/2020		Buck, Jennifer	Pending	<input type="checkbox"/>

<< First < Previous Retrieve 15 Records at a time Next > Last >>

31. Review the contents of the Note to understand the request then close the note.

32. Navigate to the consumer record and select the **Auths** tab.

33. Select the authorization and then the auth service that needs to be updated. The Auth Service Details page displays. Update the following fields:

- Max Units changed from zero back to the original amount.
- Amount approved = no changes
- Auth Service Status = changed to Restored
- Auth Service EDI = remains Rejected. When the record is saved, this will update to Approved.

34. From the **File** menu, select **Save and Close**.

35. Notify the WSC the auth service has been updated by updating the Cost Plan Review note. From the Cost Plan Review Notes subpage in the plan record, select the Cost Plan Review Note with SubType = Rejected Authorization.

opd iConnect

Welcome, Jennifer Buck | Notes
5/19/2020 1:32 PM

File Tools

Filters

Status Equal To Pending AND

iConnect ID +


Search Reset

2 Notes record(s) returned - now viewing 1 through 2

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status	
34191		Cost Plan Review	Rejected Authorization	05/19/2020		Buck, Jennifer	Pending	<input type="checkbox"/>
59217		IFS Request		05/04/2020		Buck, Jennifer	Pending	<input type="checkbox"/>

<< First < Previous Retrieve 15 Records at a time Next > Last >>

36. The Note Details page displays. Update the following fields.
- Note = describe the update that was completed and select Append Text to Note.
 - Status = Complete
 - Route the Note to the WSC by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
37. From the **File** menu, select **Save and Close Note**.



Notes
 Last Updated by jlbuck@apdcares.org
 at 5/19/2020 1:31:56 PM

File
Tools

Notes

Division *	APD
Note By *	Buck, Jennifer
Note Date *	05/19/2020
Program	<div style="border: 1px solid #ccc; height: 15px; width: 100%;"></div>
Cost Plan Review Note? *	Yes ▼
Note Type *	Cost Plan Review ▼
Note SubType	Rejected Authorization ▼
Description	<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>

Note

On 5/19/2020 at 1:31 PM, Jennifer Buck wrote:
please restore this auth service

On 5/19/2020 at 1:45 PM, Jennifer Buck wrote:
I have restored this auth service.

New Text

B
I
U
13px
A

Append Text to Note

Status *	Complete ▼
Date Completed	05/19/2020

38. The WSC will monitor My Dashboard for incoming notes and notification the update is complete.

Complete the Cost Plan

1. Upon enrolling the Consumer into the APD waiver Program (see Chapter on Standard APD Enrollment), a Workflow Wizard triggered the Initiate Cost Plan tickler, due immediately. A second tickler is also triggered to Complete the Cost Plan 45 days later.
2. To complete the Tickler, log into iConnect and set Role = WSC/CDC. Click **Go**.

Quick Search

Consumers Last Name GO

☒ Participating

ADVANCED SEARCH

3. On the **My Dashboard**, find the Consumers section and scroll down to the Ticklers Panel. Click on **Ticklers** to open the Tickler Queue:

Alert Notes

Unread Alert Notes 0

Ticklers 53

Appointments

Scheduled 4

4. Use the multi variable search to narrow down the Tickler Queue. Click **Search**:

Filters

Status Equal To New AND

Last Name Equal To smith AND

iConnect ID +

☐ Apply Alert Days Before Due

Search Reset

6 Ticklers record(s) returned - now viewing 1 through 6

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Initiate Cost Plan	03/29/2018	03/29/2018		New	Reed, Monica
Smith, Marianne	10043	Complete AIM	03/29/2018	04/28/2018		New	Reed, Monica
Smith, Marianne	10043	Complete Person Centered Support Plan	03/29/2018	03/29/2018		New	Reed, Monica
Smith, Marianne	10043	Upload Support Planning Docs	03/29/2018	03/29/2018		New	Reed, Monica
Smith, Marianne	10043	Complete Cost Plan	03/29/2018	05/13/2018		New	Reed, Monica
Smith, Marianne	10043	Waiver Eligibility Worksheet Reminder	03/29/2018	03/29/2019		New	Reed, Monica

<< First < Previous Retrieve 15 Records at a time Next > Last >>

5. In the Tickler Queue, click the Tickler called Complete Cost Plan to Open it.

- a. The consumer's Plans List View grid will open. Verify the Status of the Plan = Approved or No Review Required.

Workflow Wizard

Complete Cost Plan

Filters

Division +

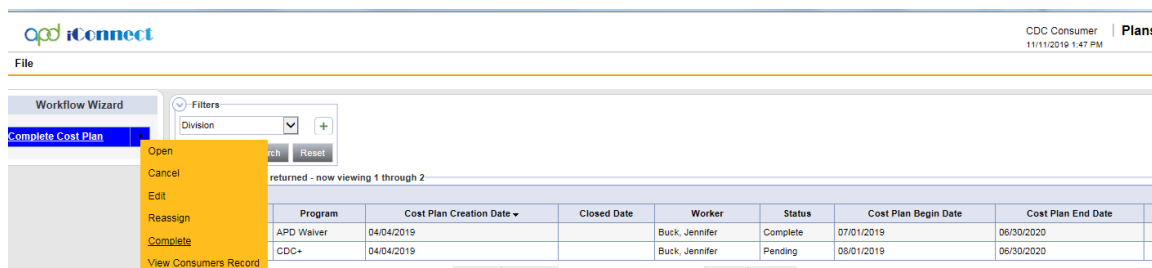
Search Reset

1 Plans record(s) returned - now viewing 1 through 1

Division	Program	Worker	Cost Plan Creation Date	Status	Cost Plan Begin Date	Cost Plan End Date
APD	APD Waiver	Reed, Monica	03/27/2018	Pending	03/27/2018	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

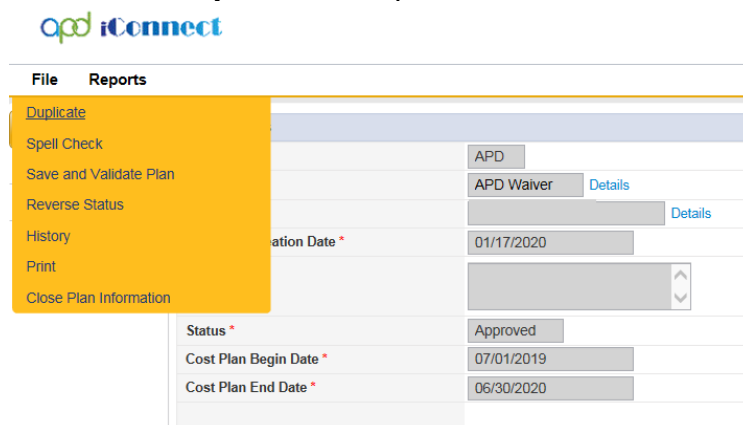
6. When finished, mark the tickler as complete. From the open tickler window, hover over the arrow next to the Tickler and click **Complete**.



Duplicating the Cost Plan

The Waiver Support Coordinator will create a new cost plan for each consumer for each fiscal year. iConnect has a Duplicate functionality that the WSC will use.

1. Navigate to the consumer record and select the Plans tab.
2. Select the existing APD waiver plan to open it.
3. Click **File> Duplicate** to duplicate the Plan.



4. The duplicate Plan record will automatically open.
5. In the new plan, update the following fields:
 - a. Select today's date as the Cost Plan Creation Date.
 - b. Select APD waiver as the Program if the individual is enrolled on the iBudget waiver.
 - c. Select CDC+ when the consumer is enrolled in CDC+.
 - d. When the individual receives IFS-funded services, you will select Non-waiver. This will be and only when an individual has immediate health and safety needs that cannot be addressed with their waiver services, or in cases in which

individuals receive in-home subsidies, or receive monthly bus passes through IFS.

- e. Division, Worker, and status have default values that do not need to be changed.
- f. Enter the cost plan Begin and End Dates.

The screenshot shows the 'iConnect' application interface. At the top, there's a header with the 'iConnect' logo and a 'Plan Information' tab. Below the header, there's a sidebar with three tabs: 'Plan Information' (selected), 'Planned Services', and 'Cost Plan Review Notes'. The main content area is titled 'Plan Details' and contains several form fields. The 'Division' field is set to 'APD'. The 'Program' field is a dropdown menu showing 'APD Waiver' with a 'Details' link. The 'Worker' field is a text input showing 'Buck, Jennifer' with a 'Clear' button and a 'Details' link. The 'Cost Plan Creation Date' field is a date picker showing '01/17/2020'. The 'Comments' field is a text area. The 'Status' field is a dropdown menu showing 'Draft'. The 'Cost Plan Begin Date' field is a date picker showing '07/01/2019'. The 'Cost Plan End Date' field is a date picker showing '06/30/2020'. The 'Region or State Review' field is a dropdown menu.

6. When finished, click **File > Save Plan**
7. In the new plan, click on the **Planned Services** tab, and then click into each existing Planned Service.
8. Update each planned service to reflect the consumers' needs for the next fiscal year.
 - a. When a consumer changes programs from iBudget to CDC or CDC to iBudget, the WSC must end all planned services using the date directly prior to the new program enrollment date and reduce total number of units accordingly.
 - b. The WSC would then create new planned services for the remainder of the fiscal year; select correct provider for iBudget or generic CDC provider for consumers enrolling on CDC and enter the prorated number of units needed for the remainder of the fiscal year.
 - c. Consumers who are enrolling on CDC must create planned service screens and cannot leave the funds as unencumbered for the monthly budget to be accurately calculated.
9. When finished, click **File > Save Planned Service**.
10. Proceed to [Plan Validation](#).

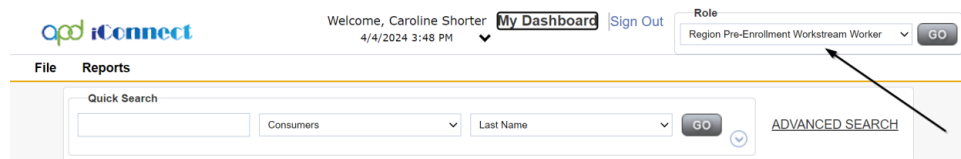
Chapter 12 | Non-Standard APD Waiver Enrollments

Introduction

There are various methods to initiate an enrollment into the APD iBudget Waiver. Amongst those methods are non-standard types of enrollments such as Crisis, Transition from ICF/SNF, CBC Pre-Enrollment, Military Family, and/or Phelan McDermid Syndrome. These enrollments often warrant a more expeditious process to accommodate the Consumers' need(s). There are independent prerequisite processes relative to each entry. The Non-Standard Waiver Enrollments and their respective prerequisite processes are outlined in this Chapter. Upon completion of the respective prerequisites, the user will continue the process of Waiver Enrollment.

APD Waiver Enrollment – Crisis

1. To begin, the Pre-Enrollment Support Coordinator will log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.



The screenshot shows the iConnect system interface. At the top, it says "Welcome, Caroline Shorter" with a dropdown arrow, "My Dashboard", and "Sign Out". Below this is the date and time "4/4/2024 3:48 PM". To the right, there is a "Role" dropdown menu currently set to "Region Pre-Enrollment Workstream Worker" and a "GO" button. An arrow points to the "GO" button. Below the welcome message, there is a "File" and "Reports" tab. Under the "File" tab, there is a "Quick Search" section with a text input field, a "Consumers" dropdown, a "Last Name" dropdown, a "GO" button, and a "ADVANCED SEARCH" link.

2. To begin the crisis, request process, navigate to the consumer's record and click on the **Programs** tab and click **File > Add Program**.
3. On the new Program record, update the following fields:
 - a. Division = Defaults to APD
 - b. Worker = search for and Select the Pre-Enrollment Workstream Lead
 - c. Program = APD waiver
 - d. Disposition = Crisis Request
 - e. Disposition Date = the date the Agency first became aware of the potential crisis and must be entered the same day the request was made
 - f. Enrollment Type = Crisis
 - g. Program Begin Date = Update as appropriate
4. When finished, click **File > Save and Close Program**

File	Tools	Word Merge
Program	Division *	APD
Program Workers	Worker	State, Worker ... Clear Details
Notes	Referral Date	03/01/2018
Events	Create Date *	04/03/2018
Track Disposition	Program *	APD Waiver Details
	Disposition *	Crisis Request
	Disposition Date *	04/03/2018
	Enrollment Type	Crisis
	Program Begin Date	04/03/2018
	Expected Deactivated Date	

5. Upon saving the APD waiver Program record with Disposition = Crisis Request and Enrollment Type = Crisis, a Workflow Wizard will trigger with the following Ticklers, all due immediately:

Assigned to the Primary Worker (Program) Pre-Enrollment Workstream Lead:

- Initiate or Verify QSI, Primary Worker (Program) *Assigned to Pre-Enrollment Workstream Lead*, Due Immediately
- Verify Allocation Algorithm Amount (via EZ iBudget), *Assigned to Primary Worker (Program) Pre-Enrollment Workstream Lead*, Due Immediately

Assigned to Self (Pre-Enrollment Support Coordinator):

- Complete Crisis Identification Tool

Assigned to the Primary Worker (Division) Pre-Enrollment Support Coordinator

- Note to ABA/MCM as indicated by crisis situation to complete their portion
- Notify ROM to Review Case for possible home visit
- Verify Eligibility for APD
- Verify Consumer is not enrolled in another Waiver
- Complete LOC
- Convene Crisis Committee

6. The Pre-Enrollment Workstream Lead will monitor their **My Dashboard** for Ticklers related to Crisis. To begin, log into iConnect and set Role = Pre-Enrollment Workstream Lead. Click **Go**.
7. To access the Crisis Ticklers, the Pre-Enrollment Workstream Lead will locate the Consumers Section and scroll down to the **Ticklers** Panel.

8. Click on the **Ticklers Due** link to access the Tickler Queue:

Alert Notes

Unread Alert Notes0

Ticklers

Ticklers11

Plans

Approved1

Pending1

a. Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.

File

Filters

Status

Equal To

New

AND

Last Name

Equal To

smith

AND

iConnect ID

+

☐ Apply Alert Days Before Due

SearchReset

8 Ticklers record(s) returned - now viewing 1 through 8

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Initiate or Verify QSI	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	Verify Allocation Algorithm Amount (via EZ iBudget)	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	Notify ROM to review case for possible home visit	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	MCM/ABA Crisis Report Request	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	Verify Eligibility for APD	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	Complete LOC	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	Verify Consumer is not enrolled in another Waiver	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	Convene Crisis Committee	04/03/2018	04/03/2018		New	WaiverWSL, Stanley

<< First

< Previous

Retrieve 15

Records at a time

Next >

Last >>



Tip
*When searching for a future Tickler, remember to clear the check box next to **Apply Alert Days Before Due** prior to clicking **Search**.*

9. In the search results, click to open the Tickler called Initiate or Verify QSI

10. The consumer's Forms List View Grid will open.

11. In the Forms List View grid, open the most recent QSI Assessment to review results. If these forms have not yet been completed, refer to the process outlined in the [Chapter on QSI Assessment](#) to complete these forms.

Workflow Wizard

Initiate or Verify QSI and Budget

Filters

Form [v] +

Search Reset

6 Forms record(s) returned - now viewing 1 through 6

Form	Review	Review Date	Worker	Division	Status
HCBS Waiver Eligibility Worksheet	Annual	04/03/2018	Regional, Jim	APD	Complete
Questionnaire Situational Information	Initial	03/27/2018	Clinical/WSL, Tony	APD	Complete
EZ iBudget Calculator	Initial	03/26/2018	State, Worker	APD	Draft
HCBS Waiver Eligibility Worksheet	Initial	03/23/2018	Reed, Monica	APD	Complete
Support Plan Short Form	Initial	03/23/2018	WaiverWSL, Stanley	APD	Draft
Family Risk Factors	Initial	03/23/2018	WaiverWSL, Stanley	APD	Draft

<< First < Previous Retrieve 15 Records at a time Next > Last >>

12. When finished, click **File > Close Forms** and **File > Close Workflow Wizard**

13. Hover over the arrow next to the Tickler to click **Complete**

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Initiate or Verify QSI	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	Notify ROM to review case for possible home visit	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	MCM/ABA Crisis Report Request	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	Verify Eligibility for APD	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	Complete LOC	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	Verify Consumer is not enrolled in another Waiver	04/03/2018	04/03/2018		New	WaiverWSL, Stanley
Smith, Marianne	10043	Convene Crisis Committee	04/03/2018	04/03/2018		New	WaiverWSL, Stanley

14. Back in the Tickler Queue, click to open the Tickler called Verify Allocation Algorithm Amount (via EZ iBudget)

15. The consumer's Forms List View Grid will open.

16. In the Forms List View grid, open the most recent EZ iBudget to review the Allocation Algorithm Amount

17. When finished, click **File > Close Forms** and **File > Close Workflow Wizard**

18. Hover over the arrow next to the Tickler to click **Complete**

Assigned to the Primary Worker (Division) Pre-Enrollment Support Coordinator:

19. The Pre-Enrollment Support Coordinator will monitor their **My Dashboard** for the remaining Crisis Ticklers. To do so, log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.

20. Click on the **Ticklers Due** link to access the Tickler Queue:

Alert Notes

Unread Alert Notes0

Ticklers

Ticklers11

Plans

Approved1

Pending1

a. Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.

Filters

Status

Equal To

New

AND

Last Name

Equal To

smith

AND

iConnect ID

+

☐ Apply Alert Days Before Due

Search

Reset

7 Ticklers record(s) returned - now viewing 1 through 7

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	view and Document Health and Safety Checklist for Completion	03/30/2018	03/30/2018		New	Reed, Monica
Smith, Marianne	10043	Notify ROM to review case for possible home visit	04/03/2018	04/03/2018		New	Reed, Monica
Smith, Marianne	10043	Verify Eligibility for APD	04/03/2018	04/03/2018		New	Reed, Monica
Smith, Marianne	10043	Complete LOC	04/03/2018	04/03/2018		New	Reed, Monica
Smith, Marianne	10043	Verify Consumer is not enrolled in another Waiver	04/03/2018	04/03/2018		New	Reed, Monica
Smith, Marianne	10043	Convene Crisis Committee	04/03/2018	04/03/2018		New	Reed, Monica
Smith, Marianne	10043	Complete Crisis Identification Tool	04/03/2018	04/03/2018		New	Reed, Monica

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Tip
When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.

- 21. In the search results, click to open the Tickler called Complete Crisis Identification Tool to open it.
- 22. A new Crisis Identification Tool form will open.
- 23. Complete all relevant sections of the Crisis Identification Tool.
- 24. In the header, update Review = Initial and Status = Draft
- 25. When finished, click **File > Save Forms** and **File > Close Workflow Wizard**

File

Workflow Wizard

Complete Crisis Identification Tool

Please Select Type: **Crisis Identification Tool**

Consumer Forms

Review * Initial

Review Date * 04/04/2018

Division * APD

Approved By

Worker * Reed, Monica

Status * Draft

Program

Approved Date

CRISIS IDENTIFICATION TOOL

Date of Crisis Request: 04/04/2018

CONSUMER'S NAME:

First Name: Marianne

Middle Name: M

Last Name: Smith

Suffix: Sr

Region: Central

26. In the Tickler Queue, select the Tickler called MCM/ABA Crisis Report Request to open it
27. A new Consumer Note record will open. In the Note, update the following fields:
- Division = APD
 - Note Type = Crisis
 - Note Subtype = MCM/ABA Crisis Report Request
 - Note = Detail the request to complete sections of the Crisis Identification Tool
 - Status = Pending
 - Route the Note record to the MCM or the ABA by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
28. When finished, click **File > Save Notes** and **File > Close Workflow Wizard**
29. The MCM will proceed to the next section, MCM Crisis Report Request.

The screenshot shows the 'Notes Details' form in the Case Management Module. The 'Workflow Wizard' on the left has a button labeled 'MCM/ABA Crisis Report Request'. The 'Notes Details' form on the right has the following fields:

- Division *: APD
- Note By *: WaiverWSL, Stanley
- Note Date *: 04/04/2018
- Program/Provider: [Empty]
- Note Type *: Crisis
- Note Sub-Type: MCM/ABA Crisis Report Request
- Description: [Empty]
- Note: [Empty]
- Status *: Pending

A blue arrow points to the 'Note Type' dropdown menu.

30. Back in the Tickler Queue, click to open the Tickler called Notify ROM to Review Case for possible home visit

31. A new Consumer Note record will open. Update the following fields:

- Division = APD
- Plan = Crisis
- Note Subtype = ROM Review
- Note = Detail the request to review the case for a possible home visit
- Route the Note to the ROM by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
- Status = Pending

32. When finished, click **File > Save Notes** and **File > Close Workflow Wizard**

File Tools

Workflow Wizard

Notify ROM to review case for possible home visit

Notes Details

Division * APD

Note By * Reed, Monica

Note Date * 04/04/2018

Program/Provider

Note Type * Crisis

Note Sub-Type ROM Review

Description

Note

4/4 - Please review the Consumer's record to decide if a home visit is necessary |

Status * Pending

33. Back in the Tickler Queue, click to open the Tickler called Verify Eligibility for APD.

34. The consumer's Forms List View Grid will open

35. In the Forms List View Grid, click to open and review all relevant Forms to verify if the Consumer is eligible for APD

36. If the Consumer is not APD eligible, proceed to [Chapter 2 – Application Review](#)

37. When finished, click **File > Close Forms** and **File > Close Workflow Wizard**

File Tools

Workflow Wizard

Verify Eligibility for APD

Filters

Form

Search Reset

7 Forms record(s) returned - now viewing 1 through 7

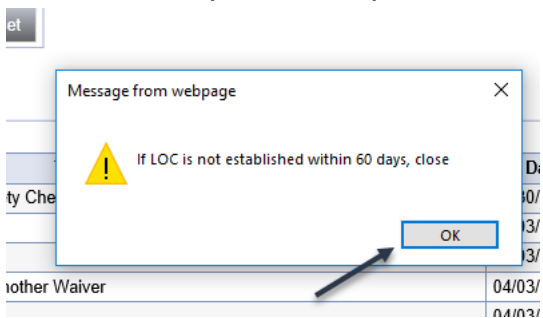
Form	Review	Review Date	Worker	Division	Status
Crisis Identification Tool	Initial	04/04/2018	Reed, Monica	APD	Draft
HCBS Waiver Eligibility Worksheet	Annual	04/03/2018	Regional, Jim	APD	Complete
Questionnaire Situational Information	Initial	03/27/2018	ClinicalWSL, Henry	APD	Complete
EZ iBudget Calculator	Initial	03/26/2018	State, Worker	APD	Draft
HCBS Waiver Eligibility Worksheet	Initial	03/23/2018	Reed, Monica	APD	Complete
Support Plan Short Form	Initial	03/23/2018	WaiverWSL, Stanley	APD	Draft
Family Risk Factors	Initial	03/23/2018	WaiverWSL, Stanley	APD	Draft

<< First < Previous Retrieve 15 Records at a time Next > Last >>

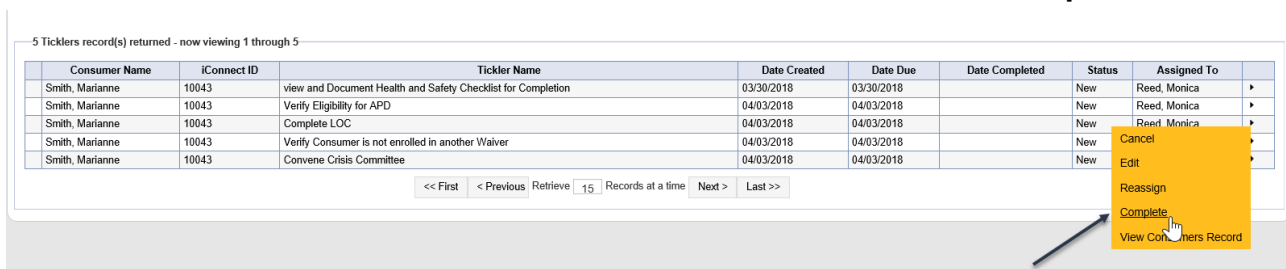
38. Back in the Tickler Queue, click to open the Tickler called Complete LOC

39. Upon doing so, a Message Tickler will open that says If LOC is not established within 60 Days, close Case

40. To complete LOC, proceed to [Chapter 7|Level of Care.](#)



41. When finished, hover over the arrow next to the Tickler to click **Complete**.

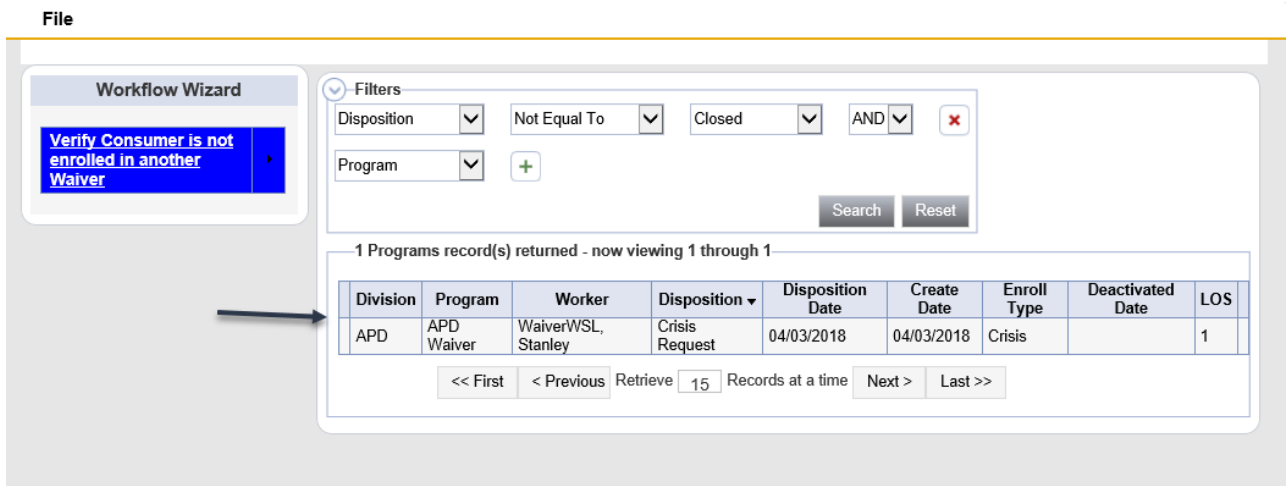


42. Back in the Tickler Queue, click to open the Tickler called Verify Consumer is not enrolled in another Waiver.

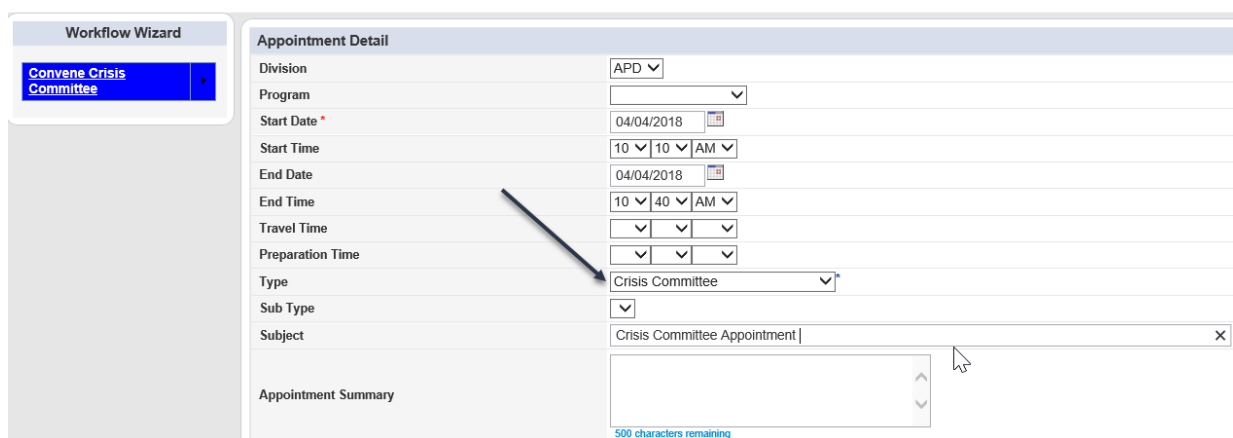
43. Upon doing so, the consumer’s Program List View Grid will open.

44. In the consumer’s Program List View Grid, ensure that the Consumer does not have any other active Waiver Program enrollment records.

45. When finished, click **File > Close Programs** and **File > Close Workflow Wizard**.



46. Hover over the arrow next to the Tickler to click **Complete**.
47. Back in the Tickler Queue, click to open the Tickler called Convene Crisis Committee.
48. Upon doing so, the consumer's Appointment List View Grid will open allowing the user to add a new Appointment record.
49. In the Appointment List View Grid, click **File > Add Appointment**. Set Type = Crisis Committee.
50. When finished, click **File > Save Appointment** and **File > Close Workflow Wizard**.



The screenshot shows the 'Workflow Wizard' interface. On the left, a sidebar contains a button labeled 'Convene Crisis Committee'. The main area is titled 'Appointment Detail' and contains the following fields:

- Division: APD (dropdown)
- Program: (empty dropdown)
- Start Date: 04/04/2018 (calendar icon)
- Start Time: 10:10 AM (time picker)
- End Date: 04/04/2018 (calendar icon)
- End Time: 10:40 AM (time picker)
- Travel Time: (empty dropdown)
- Preparation Time: (empty dropdown)
- Type: Crisis Committee (dropdown)
- Sub Type: (empty dropdown)
- Subject: Crisis Committee Appointment (text field with clear button)
- Appointment Summary: (text area with 500 characters remaining)

A blue arrow points to the 'Type' dropdown menu, which is currently set to 'Crisis Committee'.

51. If the Consumer is APD Eligible but there is not enough information to determine if the Consumer is in crisis, update the consumer's APD waiver Program record accordingly.
52. To do so, navigate to the consumer's record and click on the **Programs** tab and open the consumer's APD waiver Program record. Update the following fields:
 - a. Enrollment Type = Crisis
 - b. Disposition = Pend
53. When finished, click **File > Save and Close Programs**.
54. Continue to gather information to make determination if Consumer is in crisis.

File	Tools	Word Merge
Program	Division *	APD
Program Workers	Worker	State, Worker ... Clear Details
Notes	Referral Date	03/01/2018
Events	Create Date *	04/03/2018
Track Disposition	Program *	APD Waiver Details
	Disposition *	Pend
	Disposition Date *	04/04/2018
	Enrollment Type	Crisis
	Program Begin Date	
	Expected Deactivated Date	

MCM Crisis Report Request

1. The MCM/ABA will monitor their **My Dashboard** for Pending Notes related to MCM Crisis Report Requests. To do so, log into iConnect and set Role = Clinical Workstream Worker Role. Click **Go**.
2. On the **My Dashboard**, find the Consumers Section and scroll down to the Notes Panel. Click on the **Pending** link to open the Notes Queue:

CONSUMERS	
Division	>
APD Eligible - ICF/IID	1
My Enrollments	>
Admitted	2
Closed	1
Notes	>
Pending	1
Alert Notes	>
Unread Alert Notes	0
Ticklers	>
Ticklers	1

3. Use the multi variable search to find the Note with Note Type = Crisis and Note Subtype = MCM/ABA Crisis Report Request

File

Filters

Status Equal To Pending AND

iConnect ID

1 Notes record(s) returned - now viewing 1 through 1

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10043	Smith, Marianne	Crisis	MCM/ABA Crisis Report Request	04/04/2018		WaiverWSL, Stanley	Pending

<< First < Previous Retrieve 15 Records at a time Next > Last >>

- Review the contents of the Note.
- Navigate to the consumer's record and click on the **Forms** tab.
- In the List view grid, locate the existing **Crisis Identification Tool**. Click to Open.
- Complete all relevant sections of the Form and set Status = Draft
- When finished, click **File > Save and Close Forms**

ROM Review - Crisis

- The Region Operations Manager (ROM) will also monitor their **My Dashboard** for Pending Notes related to crisis committee. To begin, log into iConnect and set Role = ROM/Deputy ROM. Click **Go**.

apd iConnect

Welcome, Jacqueline Tierney | **My Dashboard** [Sign Out](#)

Role: ROM/Deputy ROM

File

Quick Search

Consumers Last Name

[ADVANCED SEARCH](#)

- On the **My Dashboard**, find the Consumers Section and scroll down to the Notes Panel. Click on the **Pending** link to open the Notes Queue:

CONSUMERS

Division

APD Eligible - ICF/IID

1

My Enrollments

Admitted

2

Closed

1

Notes

Pending

1

Alert Notes

Unread Alert Notes

0

Ticklers

Ticklers

1

3. Use the multi variable search to find the Note with Note Type = Crisis and Note Subtype = ROM Review:

File

Filters

Status

Equal To

Pending

AND

iConnect ID

Search

Reset

4 Notes record(s) returned - now viewing 1 through 4

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10043	Smith, Marianne	OSI	OSI Status Complete	03/26/2018		Assessor, George	Pending
10043	Smith, Marianne	Waiver Enrollment	Waiver Enrollment Request	03/29/2018		Regional, Jim	Pending
10043	Smith, Marianne	Cost Plan Review	Plan Validation Review	04/02/2018		Reed, Monica	Pending
10043	Smith, Marianne	Crisis	ROM Review	04/04/2018		Reed, Monica	Pending

<< First

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Retrieve 15 Records at a time

Next >

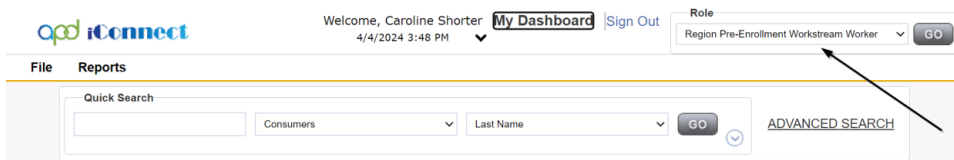
Last >>

4. Review the contents of the Note.
5. Navigate to the consumer’s record and review all relevant tabs to determine if a Home Visit is required.
6. Return to the Notes tab. Select the Note Type = Crisis and Sub Type = ROM Review to open the Note.
7. Append Text to the note with details about the Home Visit.
8. Search for and select the Pre-Enrollment Support Coordinator as a Note recipient as needed.

9. The note will stay in Pending status (editable) until Complete. When complete, change the Note Status = Complete.

Crisis Committee Process

1. The Crisis Committee will convene and decide if the Consumer is in Crisis.
2. To begin, the Pre-Enrollment Support Coordinator will log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.



The screenshot shows the iConnect system interface. At the top, there is a header with the iConnect logo, a welcome message 'Welcome, Caroline Shorter', the date and time '4/4/2024 3:48 PM', and links for 'My Dashboard' and 'Sign Out'. Below this, there is a 'Role' dropdown menu set to 'Region Pre-Enrollment Workstream Worker' with a 'GO' button next to it. An arrow points to this 'GO' button. Below the header, there is a navigation bar with 'File' and 'Reports' tabs. Under the 'File' tab, there is a 'Quick Search' section with a text input field, a 'Consumers' dropdown menu, a 'Last Name' dropdown menu, a 'GO' button, and an 'ADVANCED SEARCH' link.

3. The Pre-Enrollment Support Coordinator will record the Crisis Committee's decision in a Consumer Note record. To do so, navigate to the consumer's record and click **Notes > File > Add Note**.
4. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Crisis
 - c. Note Subtype = Crisis Committee Decision
 - d. Note = Detail request for ROM approval
 - e. Status = Pending
 - f. Route the Note record to the ROM by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
5. When finished, click **File > Save and Close Note**

Notes Details

Division *	APD ▼
Note By *	Reed, Monica ▼
Note Date *	04/04/2018
Program/Provider	▼
Note Type *	Crisis ▼*
Note Sub-Type	Crisis Committee Decision ▼
Description	
Note	<p>Crisis Committee convened and decided that the Consumer is in crisis.</p> <p>Please provide ROM approval/disapproval of Crisis Committee decision.</p>
Status *	Pending ▼
Date Completed	

6. The Pre-Enrollment Support Coordinator will also mark the Crisis Identification Tool form as complete. To do so, navigate to the **Forms** Tab.

7. Select the existing **Crisis Identification Tool** form.

MY DASHBOARD **CONSUMERS** PROVIDERS INCIDENTS CLAIMS SCHEDULER UTILITIES

Sheppard, John (10106)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User
Demographics Divisions Consumer Budgets Programs Provider Selections SANS Notes **Forms** Appointments Plans

Filters
Form ▼ +
Search Reset

21 Forms record(s) returned - now viewing 1 through 15

Form	Review	Review Date ▼	Worker	
Crisis Identification Tool	Initial	11/14/2018	Buck, Jennifer	APD
EZ iBudget Calculator	Initial	11/09/2018	Buck, Jennifer	APD
Residential Planning Referral	Initial	10/15/2018	Buck, Jennifer	APD

8. In the header, change the **Status** = Complete. This makes the form read only.

9. Click **File > Save and Close Forms**.

10. The Region Operations Manager (ROM) will also monitor their **My Dashboard** for Pending Notes related to Crisis Committee Decisions. To begin, log into iConnect and set Role = ROM/Deputy ROM. Click **Go**.

11. On the **My Dashboard**, find the Consumers Section and scroll down to the Notes Panel. Click on the **Pending** link to open the Notes Queue:

- a. Use the multi variable search to find the Note with Note Type = Crisis and Note Subtype = Crisis Committee Decision

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10043	Smith, Marianne	QSI	QSI Status Complete	03/26/2018		Assessor, George	Pending
10043	Smith, Marianne	Waiver Enrollment	Waiver Enrollment Request	03/29/2018		Regional, Jim	Pending
10043	Smith, Marianne	Cost Plan Review	Plan Validation Review	04/02/2018		Reed, Monica	Pending
10043	Smith, Marianne	Crisis	ROM Review	04/04/2018		Reed, Monica	Pending
10043	Smith, Marianne	Crisis	Crisis Committee Decision	04/04/2018		Reed, Monica	Pending

12. Review the contents of the Note. Update the following fields:

- Note: Denote the approval/disapproval of the Crisis Committee's Decision.
- Status = Complete

- c. Route the Note back to the appropriate Pre-Enrollment Support Coordinator by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

13. When finished, click **File > Save and Close Notes**

Notes Details

Division * APD

Note By * Reed, Monica

Note Date * 04/04/2018

Program/Provider

Note Type * Crisis

Note Sub-Type Crisis Committee Decision

Description

On 4/4/2018 at 11:04 AM, Monica Reed wrote: Crisis Committee convened and decided that the Consumer is in crisis.

Please provide ROM approval/disapproval of Crisis Committee decision.

On 4/4/2018 at 11:07 AM, Jacqueline Tierney wrote: ROM - Crisis Committee Decision Approved

Note

New Text

Append Text to Note

Status * Complete

Date Completed 04/04/2018

14. The Pre-Enrollment Coordinator will monitor their **My Dashboard** for Complete Notes related to the Crisis Committee Decision approval or disapproval. To do so, log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.

Welcome, Caroline Shorter 4/4/2024 3:48 PM

[My Dashboard](#) [Sign Out](#)

Role
Region Pre-Enrollment Workstream Worker [GO](#)

File Reports

Quick Search

Consumers Last Name [GO](#) [ADVANCED SEARCH](#)

15. On the **My Dashboard**, find the Consumers Section and scroll down to the Notes Panel. Click on the **Pending** link to open the Notes Queue:

CONSUMERS

Division

APD Eligible - ICF/IID

1

My Enrollments

Admitted

2

Closed

1

Notes

Pending

1

Alert Notes

Unread Alert Notes

0

Ticklers

Ticklers

1

- a. Use the multi variable search to find the Note with Note Type = Crisis and Note Subtype = Crisis Committee Decision

File

Filters

Status

Equal To

Complete

AND

ICConnect ID

+

Search

Reset

7 Notes record(s) returned - now viewing 1 through 7

ICConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10010	Doe, Jim	ICF	ICF Response-Accepted	11/25/2017	ICF Accept	Admission, Central	Complete
10010	Doe, Jim	ICF	ICF Response-Admitted	11/25/2017	Admission into ICF	Admission, Central	Complete
10010	Doe, Jim	ICF	Admission Process Completed	11/25/2017	ICF Process Complete	Admission, Central	Complete
10016	Patrick, Lucy	Waiver Enrollment	CBC to Waiver	11/30/2017	CBC to Waiver Note	WLSuper, Robert	Complete
10017	Sample, Thomas	QSI	QSI Status Complete	11/29/2017	QSI Status Complete with Consumer	Thomas, Valerie	Complete
10043	Smith, Marianne	Pre-Enrollment Category	Cat. 3 or 4-Approval Request	03/26/2018		WLCordinator, Sue	Complete
10043	Smith, Marianne	Crisis	Crisis Committee Decision	04/04/2018		Ried, Monica	Complete

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16. Review the contents of the Note to view the ROM's approval or disapproval of the Crisis Committee's decision:
- a. If the Consumer is in Crisis, proceed below.
 - b. If the Consumer is NOT in Crisis, proceed to the Section below called Crisis Committee Concludes Consumer Not in Crisis

Crisis Committee Concludes Consumer in Crisis



Remember!

If the Consumer is on the Pre-Enrollment and is now in Crisis, he/she will be removed from the Pre-Enrollment after the crisis is approved and the enrollment is completed by the State Office. This occurs via system automation when the APD waiver Program enrollment record disposition is changed to Enrolled.

1. If the Crisis Committee and ROM agree that the Consumer is in Crisis and is eligible for Crisis Waiver enrollment, the Pre-Enrollment Support Coordinator will navigate to the consumer's record and click on **Programs** > click to open the appropriate Program record > **Word Merge** and select the **Notice of Approval of CWE**

APD iConnect

File Open and fill the word merge template Notice of Approval of Crisis Waiver Enrollment

Program **Notice of Approval of Crisis Waiver Enrollment**

Program Workers

Notes

Events

Track Disposition

Worker APD

Referral Date State, Worker ... Clear Details

Create Date * 03/01/2018

Program * 04/03/2018

Disposition * APD Waiver Details

Disposition Date * Crisis Request

Enrollment Type 04/03/2018

Program Begin Date Crisis

Expected Deactivated Date 04/03/2018

2. The Notice of Approval of Crisis Waiver Enrollment letter will open in the Word Merge preview screen.
3. Click **Open Document** to open and edit the letter in Microsoft word.

File

Generate Merge Document
Click the "Open Document" button to open the Merge Document for editing.
Open Document

Save to Note
If no changes have been made to the Merge Document, click "Save to Note". The current word merge template will be uploaded to a note record with the merge fields populated.
Save to Note

Upload and Save to Note
If changes were made to the Merge Document, click "Upload and Save to Note" to select the saved file and upload that document to a note record. Don't forget to delete the saved document after you have attached it to the note record.

Preview (read-only)
This is a preview of your merge document and is not editable.

agency for persons with disabilities
State of Florida

NOTICE OF APPROVAL OF CRISIS WAIVER ENROLLMENT
November 22, 2017

Ron DeSantis
Governor

Taylor Hatch
Director

State Office
4030 Esplanade Way
Suite 380

C/O Guardian Name (if applicable)



Dear Mrs. :

4. When finished, print and mail the letter to the Consumer, and save the letter to your desktop
5. Back in the Word Merge preview screen, click **Upload and Save to Note**. In the new Consumer Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Crisis
 - c. Note Subtype = Notice of Crisis Approval
 - d. Status = Complete
6. When finished, click **File > Save and Close Notes**

File Tools Reports

Notes

Notes Details

Division *	APD ▼
Note By *	Tierney, Jacqueline
Note Date *	04/04/2018 
Program/Provider	APD Waiver ▼ Details
Note Type *	Crisis ▼*
Note Sub-Type	Notice of Crisis Approval ▼
Description	Word Merge Template 
Note	<div><div></div><div>New Text</div><div></div><div>Append Text to Note</div></div>
Status *	Complete ▼

7. Then, click on the consumer's **Demographics** tab > **Word Merge** to generate these letters. Follow the process outlined above to edit the documents in Microsoft Word, print and mail them to the Consumer, and upload them to Consumer Note records.
 - a. Waiver Support Coordination Selection Packet
 - b. WSC Selection Form

8. Navigate to the consumer's record and click on the **Programs** tab and click on the APD waiver Program record.

9. Update the following fields:

- Program = APD waiver
- Disposition = Pursuing APD waiver Services
- Enrollment Type = Crisis
- Program Begin Date = Update as appropriate

10. When finished, click **File > Save and Close Programs**

File	Tools	Word Merge
Program	Division *	APD
Program Workers	Worker	State, Worker ... Clear Details
Notes	Referral Date	03/01/2018
Events	Create Date *	04/03/2018
Track Disposition	Program *	APD Waiver Details
	Disposition *	Pursuing APD Waiver Services
	Disposition Date *	04/04/2018
	Enrollment Type	Crisis
	Program Begin Date	04/03/2018
	Expected Deactivated Date	

11. Upon saving the Program record, a Workflow Wizard with the following Ticklers:

- Verify Medicaid Eligibility and Type - *Assigned to Pre-Enrollment Support Coordinator, Due Immediately*

12. Click to open the Tickler called Verify Medicaid Eligibility and Type

Workflow Wizard

Verify Medicaid Eligibility and Type


- Open
- Cancel
- Edit
- Reassign
- Complete
- View Consumers Record

13. The consumer's Pay List View Grid will open. Confirm that the Consumer has a Medicaid Payer record

14. When finished, hover over the arrow next the Tickler to click **Complete**
15. Click **File > Close Workflow Wizard**
16. If the Consumer is Medicaid eligible, send a Waiver Enrollment Approval Request to the State Office Worker. To do so, navigate to the consumer's record and click **Notes > File > Add Note:**
17. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Waiver Enrollment
 - c. Note Subtype = Waiver Enrollment Request
 - d. Note = Include details of Waiver enrollment
 - e. Status = Pending
 - f. Route the Note record to the State Office Worker by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
18. When finished, click **File > Save and Close Note**

File Tools

Notes Details

Division *	APD ▼
Note By *	Tierney, Jacqueline ▼
Note Date *	04/04/2018 
Program/Provider	APD Waiver ▼ Details
Note Type *	Waiver Enrollment ▼*
Note Sub-Type	Waiver Enrollment Request ▼
Description	<div></div>
Note	<div>4/4/ - Waiver Enrollment Request</div>
Status *	Pending ▼
Date Completed	

19. The State Office Worker will monitor their **My Dashboard** for Pending Notes related to Waiver Enrollment. To do so, log into iConnect and set Role = State Office Enrollment. Click **Go**.

John Sheppard
Last Updated by j buck
at 10/11/2018 9:56:33 AM

Forms | Sign Out

Role
State Office Enrollment

GO

File Tools Ticklers View Consumer Incident

Quick Search

Consumers Last Name GO ADVANCED SEARCH

20. On the **My Dashboard**, find the Consumers Section and scroll down to the Notes Panel. Click on the **Pending** link to open the Notes Queue:

CONSUMERS

Division
APD Eligible - ICF/IID 1

My Enrollments
Admitted 2
Closed 1

Notes
Pending 1

Alert Notes
Unread Alert Notes 0

Ticklers
Ticklers 1

21. Use the multi variable search to find the Note with Note Type = Waiver Enrollment and Note Subtype = Waiver Enrollment Request

File

Filters

Status Equal To Pending AND iConnect ID

Search Reset

1 Notes record(s) returned - now viewing 1 through 1

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10043	Smith, Marianne	Waiver Enrollment	Waiver Enrollment Request	04/04/2018		Tierney, Jacqueline	Pending

<< First < Previous Retrieve 15 Records at a time Next > Last >>

22. In the Notes Queue, open the Note record with Note Type = Waiver Enrollment and Note Subtype = Waiver Enrollment Request. Review the contents of the Note and then click **File > Close Notes**.

23. Navigate consumer's record and click on the **Divisions** tab. In the Divisions List View Grid, open the consumer's APD Division record:

Kastner, Martin (209730)

Filters: Disposition: Not Equal To, Closed, AND, Open Date: Greater Than, MM/DD/YYYY, AND, Division: +

1 Consumers Divisions record(s) returned - now viewing 1 through 1

Division	Disposition	Primary Worker	Secondary Worker	Open Date
APD	APD Eligible - PESC Assigned	Baer, Sylvia	Brown-Ferrier, Mollie	01/01/2020

24. In the APD Division record, update the following fields:

- Primary Worker = Waiver Support Coordinator (or designated regional worker if the Consumer has not yet selected a WSC)
- Secondary Worker = Waiver Workstream Lead
- Disposition = APD Eligible – Waiver

25. When finished, click **File > Save and Close Division**

File Word Merge

Division

Events

Track Disposition

Events

Division * APD

Disposition * APD Eligible - Waiver

Disposition Date 03/29/2018

Open Date 03/21/2018

Data Entry Date 03/21/2018

Primary Worker * Reed, Monica

Secondary Worker WaiverWSL, Stanley

Application Received Date * 03/21/2018

Interested in ICF/IID No

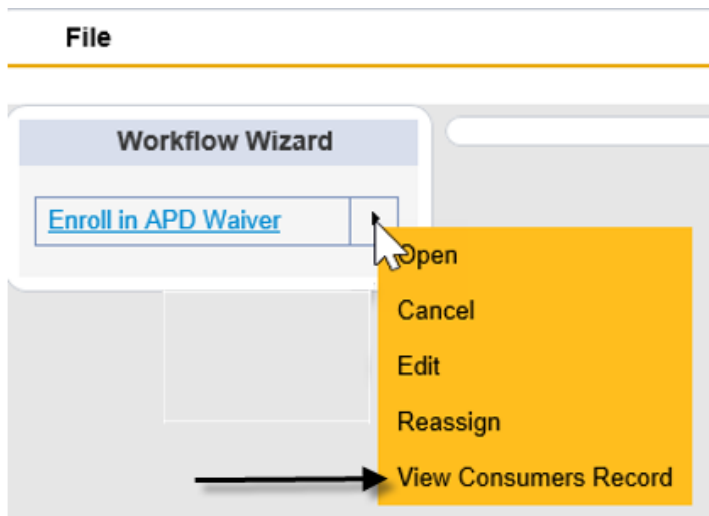
Age Category at Time of Application * 6 and Above

26. Upon saving the APD Division record with Disposition = APD Eligible - Waiver, a Workflow Wizard triggers with the following Tickler:

- Enroll in APD waiver - *Assigned to the State Office Worker, Due Immediately*

27. Select the tickler to open. A message tickler displays: Create/Update the APD waiver Program Record with Disposition = Enrolled.

28. Hover over the arrow next to the Tickler called Enroll in APD waiver to and click **View consumer's Record**:



29. The consumer record opens in a new window.

30. Select the Programs that locate the APD waiver program record and click to Open.

Update the following fields:

- a. Program = APD waiver
- b. Disposition = Enrolled
- c. Enrollment Type = Crisis

NOTE: The Enrollment type can vary depending on the type of enrollment: Crisis, ICF/IDD, etc.

- d. Primary Worker on the Division tab = Waiver Support Coordinator
- e. Program Begin Date = update as appropriate

31. When finished, click **File > Save and Close Program**.

The screenshot shows the 'iConnect' software interface for managing a program. The top navigation bar includes 'File', 'Tools', and 'Word Merge'. The user is logged in as John Sheppard, last updated by j buck at 11/14/2018 2:02:06 PM. The left sidebar has a 'Program' button highlighted, along with 'Program Workers', 'Notes', 'Events', and 'Track Disposition'. The main form area is titled 'Program' and contains the following fields:

- Division *: APD
- Referral Date: [empty]
- Create Date *: 05/23/2018
- Program *: APD Waiver (with a 'Details' link)
- Disposition *: Enrolled (dropdown menu)
- Disposition Date *: 09/18/2018
- Enrollment Type *: Crisis (dropdown menu)
- Program Begin Date: 05/23/2018
- Expected Deactivated Date: [empty]
- Comments: [large text area]
- LOC Completed Prior To Enrollment: ☐

32. Return to the Open Workflow Wizard window. From the tickler flyout menu select Complete.

33. Also, upon saving the Program record, a Workflow Wizard triggers with six Ticklers assigned to the Waiver Support Coordinator and will be outlined in the section on [Cost Plans. and Support Plan](#)

- a. Initiate Cost Plan - *Assigned to WSC, Due Immediately*
- b. Complete Person-Centered Support Plan - *Assigned to WSC, Due Immediately*
- c. Complete Amount Implementation Meeting - *Assigned to WSC, Due Immediately*
- d. Upload Support Planning Collateral Documents to Note - *Assigned to WSC, Due Immediately*
- e. Complete Cost Plan - *Assigned to WSC, Due in 45 Days*
- f. Eligibility Worksheet Reminder - *Assigned to WSC, Due in 45 Days*

34. If the Consumer is NOT Medicaid eligible, initiate the process to help the Consumer to become Medicaid eligible

35. If the Consumer will never be Medicaid eligible, navigate to the consumer's record, click **Programs** > click to open the APD Program Enrollment record.

36. Update the following fields:

- a. Enrollment Type = Crisis
- b. Disposition = Withdrawn

37. When finished, click **File > Save and Close Programs**

Crisis Committee Concludes Consumer Not in Crisis

1. If the Crisis Committee and ROM agree that the Consumer is NOT Crisis and is not eligible for Crisis Waiver enrollment, the Pre-Enrollment Support coordinator will navigate to the consumer's record and click on **Programs** and open the consumer's APD waiver program record with Disposition = Crisis Request.

MY DASHBOARD **CONSUMERS** PROVIDERS INCIDENTS CLAIMS SCHEDULER UTILITIES

Sheppard, John (10106)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets **Programs** Provider Selections SANS Notes Forms Appointments Plans

Filters

Disposition Not Equal To AND

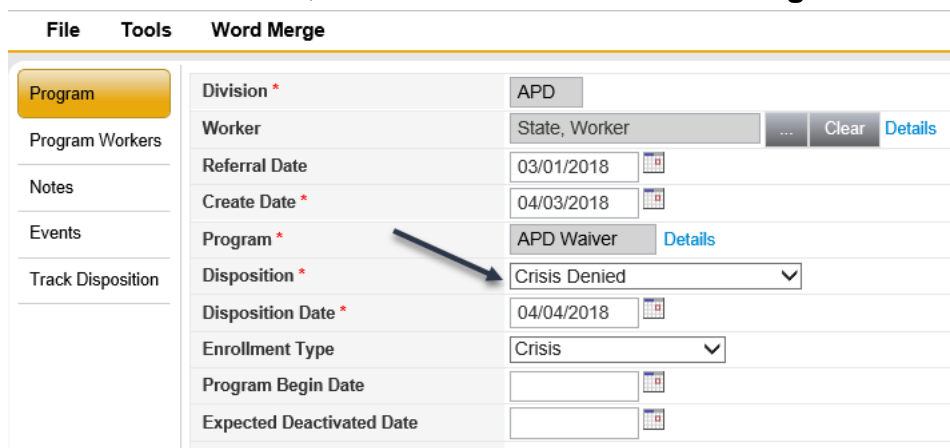
Program

Division	Program	Worker	Disposition	Disposition Date	Create Date	Enroll Type
APD	APD Waiver	Buck, Jennifer	Crisis Request	11/14/2018	05/23/2018	Crisis

2. Click **Word Merge** and generate the **Notice of Denial of CWE** letter
3. The Notice of Denial of CWE letter will open in the Word Merge preview screen.
4. Click **Open Document** to open and edit the letter in Microsoft word.
5. When finished, print and mail the letter to the Consumer, and save the letter to your desktop
6. Back in the Word Merge preview screen, click **Upload and Save to Note**. In the new Consumer Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Crisis
 - c. Note Subtype = Notice of Crisis Denial
 - d. Status = Complete
7. When finished, click **File > Save and Close Notes**
8. Navigate to the consumer's record and click on the **Programs** tab and click on the APD waiver Program record.

9. Update the following fields:
 - a. Program = APD waiver
 - b. Disposition = Crisis Denied
 - c. Enrollment Type = Crisis

10. When finished, click **File > Save and Close Programs**

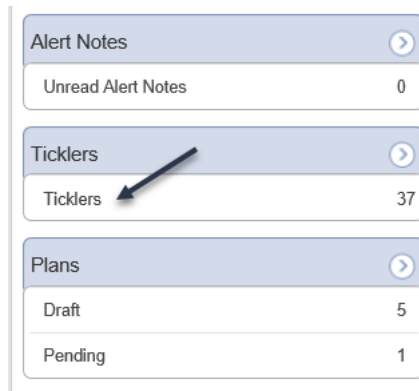


File	Tools	Word Merge
Program	Division *	APD
Program Workers	Worker	State, Worker ... Clear Details
Notes	Referral Date	03/01/2018
Events	Create Date *	04/03/2018
Track Disposition	Program *	APD Waiver Details
	Disposition *	Crisis Denied
	Disposition Date *	04/04/2018
	Enrollment Type	Crisis
	Program Begin Date	
	Expected Deactivated Date	

11. Upon saving the program record, a Workflow Wizard will trigger with the following Ticklers:
 - a. Close Crisis Waiver Request Program - *Assigned to Pre-Enrollment Support Coordinator*, Due in 35 days after date the Program Disposition changed to Crisis Denied

12. The Pre-Enrollment Support Coordinator can access this Tickler via the **My Dashboard**.

13. Find the Consumers Section and scroll down to the Ticklers Panel. Click on the **Ticklers** link to open the Tickler Queue:



Alert Notes		>
Unread Alert Notes	0	
Ticklers		>
Ticklers	37	
Plans		>
Draft	5	
Pending	1	

- a. Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.

**Tip**

*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

14. In the search results, click to open the Tickler called Close Crisis Waiver Request Program.
15. Upon doing so, the consumer's Program List View Grid will open.
16. Click to open the APD waiver Program record and update Disposition = Closed. This will close the Crisis Request program enrollment record created by the Pre-Enrollment Support Coordinator to initiate the Crisis request process.
17. When finished, click **File > Save and Close Program**.

The screenshot shows the iConnect system interface. At the top, there is a header with the iConnect logo on the left, the user name 'Marianne Smith' and date '4/4/2018 1:13 PM' on the right, and a 'Program' tab. Below the header is a 'File Tools' menu. The main area displays a form for a 'Program' record. The form has several fields: 'Division' (APD), 'Worker' (Tierney, Jacqueline), 'Referral Date' (03/03/2018), 'Create Date' (04/04/2018), 'Program' (APD Waiver), 'Disposition' (Closed), 'Disposition Date' (04/04/2018), 'Enrollment Type' (Crisis), and 'Primary Worker' (WaiverWSL, Stanley). An arrow points to the 'Disposition' dropdown menu, which is currently set to 'Closed'. There are 'Clear' and 'Details' buttons next to several fields.

18. If the Consumer elects to exercise Due Process, proceed to [Chapter on Due Process](#).

As Needed: Attach Supporting Documentation to a Note

If Supporting Documentation needs to be attached to the consumer's record in iConnect, the Pre-Enrollment Workstream Worker will upload attachments into iConnect using the Notes tab.

1. The Pre-Enrollment Workstream Worker will navigate to the consumer's record and click **Notes > File > Add Note**.
 - a. In the new Note record, update the following fields:

- i. Division = APD
 - ii. Note Type = Crisis
 - iii. Note Subtype = Additional Documents
 - iv. Note = Describe the attached documents
 - v. Status = Complete
- b. Attach the documents



Remember!!

If the Documentation that is being attached is Confidential, then use a separate note, updating the following fields:

- c. Note Type = **Confidential Documentation**
- d. Note Subtype = N/A

An example of Confidential Documentation is DCF Abuse Reports.

Notes Details	
Division *	APD ▼
Note By *	Samantha ▼
Note Date *	01/25/2022
Program/Provider	▼
Note Type *	Confidential Documentation ▼*
Note Sub-Type	▼
Description	DCF Abuse Reports
<div> B <i>I</i> <u>U</u> 10pt ▼ A ▼ </div>	

2. When finished, click **File > Save and Close Notes**

Forensic Discharge to APD waiver Enrollment – Crisis

1. Facilities will notify the State Office Forensic Coordinator of Consumers that require Waiver services upon discharge. These Consumers will enter the APD waiver via the Crisis Enrollment Process
2. The State Office Forensic Coordinator will begin by logging into iConnect and setting Role State Office Process Owner Then click **Go**.
3. Confirm if the Consumer is already an APD Consumer. To do so, click on the **Consumers** chapter and use the **Advanced Search** to search for the individual by First Name, Last Name, DOB, SSN, etc.

Quick Search

Consumers Last Name GO ADVANCED SEARCH

MY DASHBOARD **CONSUMERS** PROVIDERS INCIDENTS CLAIMS SCHEDULER UTILITIES REPORTS

Filters

Last Name Begins With smith AND

First Name Begins With m AND

iConnect ID +

Search Reset

6 Advanced Search record(s) returned - now viewing 1 through 6

iConnect ID ▲	Last Name	First Name	DOB	Status
10003	Smith	Alan	01/29/1983	Active
10008	Smith	June	10/14/1975	Active
10027	Smith	Jennifer	10/26/1960	Active
10031	Smith	Landon	07/07/2009	Active
10042	Smith	Mary	03/01/2006	Active
10043	Smith	Marianne	03/04/2004	Active

<< First < Previous Retrieve 15 Records at a time Next > Last >>


- In the search results, verify if the Consumer has a matching record in the system and if the Consumer is open to APD:

If the Consumer has a record and is an APD Consumer:

- If the search returns a matching result and that Consumer is already in APD, click on the match to open consumer's record and click **Notes > File > Add Note**.
- In the new Note record, update the following fields:
 - Division = APD
 - Note Type = Forensic
 - Note Subtype = Forensic Transition
 - Status = Pending
 - Attach any documents received from the Facility
 - Route the Note to the appropriate Region Forensic Worker
- When finished, click **File > Save and Close Notes**

File Tools

Notes Details

Division *	APD ▼
Note By *	Tierney, Jacqueline ▼
Note Date *	04/04/2018 
Program/Provider	▼
Note Type *	Forensic ▼*
Note Sub-Type	Forensic Transition ▼
Description	<div>Request for Regional Forensic Worker to review Consumer's record. </div>
Note	
Status *	Pending ▼
Date Completed	

8. If all required documentation is complete, proceed to the [Chapter on APD waiver Enrollment - Crisis](#).

If the Consumer has a record but is NOT an APD Consumer:

9. If the search returns a matching result and that Consumer is NOT already in APD, click on the match to open consumer's record and click **Divisions > File > Add Division**.
10. Update the following fields:
- a. Division = APD
 - b. Disposition = Forensic to Crisis Transition
 - c. Primary Worker = Region Pre-Enrollment Workstream Worker
11. When finished, click **File > Save and Close Division**.

The screenshot shows the iConnect system interface. At the top, the logo 'iConnect' is on the left, and user information 'Marianne Smith', 'Last Updated by WLWorker', and 'at 4/3/2018 10:23:13 AM' is on the right. Below this is a navigation bar with 'File' and 'Word Merge' tabs. On the left side, there is a sidebar with 'Division' (highlighted in orange), 'Events', and 'Track Disposition'. The main area is titled 'Events' and contains a form with the following fields:

Division *	APD			
Disposition *	Forensic to Crisis Transition			
Disposition Date	04/04/2018			
Open Date				
Data Entry Date	03/21/2018			
Primary Worker *	Regional, Jim	...	Clear	Details
Secondary Worker	Tierney, Jacqueline	...	Clear	Details
Application Pending Due Date				

12. Navigate to the consumer's record and click on **Notes > File > Add Note**. In the new Note record, update the following fields:
- Division = APD
 - Note Type = Forensic
 - Note Subtype = Forensic Transition
 - Status = Pending
 - Attach any documents received from the Facility
 - Route the Note to the appropriate Region Forensic Worker by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
13. When finished, click **File > Save and Close Notes**

Notes Details

Division * APD

Note By * Tierney, Jacqueline

Note Date * 04/04/2018

Program/Provider

Note Type * Forensic

Note Sub-Type Forensic Transition

Description

Note

Status * Pending

Date Completed

14. If all required documentation and the application process is complete, proceed to the [Chapter on Eligibility Determination](#) and then to the [Chapter APD waiver Enrollment - Crisis](#)

If the Consumer is not found in the Search:

15. If the search results do not return a matching Consumer, click on **File > Add New Consumer People Search**.

File

Add New Consumer People Search

Print

Consumers

Last Name

GO

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER U

Filters

Last Name Begins With AND

iConnect ID

Search Reset

v8.3.1.0

16. Search for the Consumer and then click **Add New**

File

Filter

First Name

Equal To

unicorn

AND

People ID

+

Search

Reset

Add New

Search Results for Harmony People

People ID	First Name	Last Name	Middle Name	Suffix	Race	SSN	Person Type
No records to display.							

17. On the consumer's new record, update all Demographic fields and set Initial Division = APD

File Tools Reports

Basic Demographics

Salutation

Mr.

Last Name *

Smith

First Name *

Manuelo

Consumer Photo

Middle Name

M

Suffix

Alias

Title

Date of Birth *

04/08/2008

Age

Date of Death

Cause of Death

DOD Action

DOD File Number

Gender *

Male

Race

Other

Ethnicity

Cuba

Suspected Developmental Disability

Autism

Cerebral Palsy

Unknown

Prader-Willi Syndrome

Spina Bifida

Down Syndrome

Phelan McDermid Syndrome

Intellectual Disability

Competency

Incompetent, Guardian Available

Marital Status

Divorced

Living Setting

Hospital

Referral Source

Law Enforcement

SSN *

XXX-XX-5885

Medicaid ID

Medicare ID

Medicare Type

Initial Division *

APD

ABC PIN

CBC Flag

Demographics Verified On

18. When finished, click **File > Save and Close Demographics**

19. Upon saving, the consumer's Division page will open with Division = APD.

20. Update the following fields:

- a. Disposition = Forensic to Crisis Transition

21. When finished, click **File > Save and Close Division**

NOTE: The Application process needs to be completed to see if the Consumer meets eligibility criteria. If they are found to meet eligibility criteria, the forensic transition to crisis process would resume. However, if they are found ineligible, the notice of ineligibility needs to be sent and the due process time frames observed. If the applicant does not exercise due process, the facility would have to make alternative discharge arrangements, and proceed to closing the APD Division record.

The screenshot shows a web application interface with a top navigation bar containing 'File' and 'Word Merge'. On the left, there is a sidebar with three tabs: 'Division' (highlighted in orange), 'Events', and 'Track Disposition'. The main content area is titled 'Events' and contains a form with the following fields:

Division *	APD
Disposition *	Forensic to Crisis Transition
Disposition Date	04/04/2018
Open Date	04/04/2018
Data Entry Date	04/04/2018
Primary Worker *	Tierney, Jacqueline
Secondary Worker	
Application Pended Due Date	

Buttons for 'Clear' and 'Details' are visible next to the worker names. An arrow points to the 'Disposition' dropdown menu.

22. Navigate to the consumer's record and click on **Notes > File > Add Note**.

23. In the new Note record, update the following fields:

- a. Division = APD
- b. Note Type = Forensic
- c. Note Subtype = Forensic Transition
- d. Status = Pending
- e. Attach any documents received from the Facility
- f. Route the Note to the appropriate Region Forensic Worker by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

24. When finished, click **File > Save and Close Notes**

Marianne Smith
4/4/2018 1:51 PM

Notes

File

Tools

Notes Details

Division *

APD

Note By *

Tierney, Jacqueline

Note Date *

04/04/2018

Program/Provider

Note Type *

Forensic

Note Sub-Type

Forensic Transition

Description

Note

Request for Regional Forensic Worker to review this Consumer for Forensic Transition

Status *

Pending

Date Completed

25. If all required documentation is complete, proceed to [APD waiver Enrollment - Crisis](#)

CBC Pre-Enrollment to Waiver

- 1. The process for moving a CBC Consumer from the Pre-Enrollment to Waiver begins with a Court Order for Permanency, adoption, reunification, permanent guardianship, or documentation that the Consumer is turning 18.
- 2. Once it is determined that the Consumer meets the criteria to come off the Pre-Enrollment, the CBC will notify the Region at least 90 days prior to achieving permanency or immediately upon receipt of a Court Order
- 3. To begin, the Pre-Enrollment Workstream Lead will log into iConnect and set Role = Region Pre-Enrollment Workstream Lead. Click **Go**.

Welcome, Caroline Shorter
4/4/2024 3:48 PM

My Dashboard | Sign Out

Role
Region Pre-Enrollment Workstream Worker

GO

File

Reports

Quick Search

Consumers

Last Name

GO

ADVANCED SEARCH

4. Navigate to the consumer's record and click **Notes > File > Add Note**.

The screenshot shows the Case Management Module interface. At the top, there is a navigation bar with 'File', 'Tools', 'Reports', and 'Ticklers'. Below this, there is a 'Quick Search' section with a search bar, a dropdown menu set to 'Consumers', and a 'Last Name' field. To the left of the search bar, there is a sidebar with 'Add New Demographics Search', 'Add Notes', and 'Print'. An arrow points to the 'Add Notes' button. Below the search bar, there is a 'MY DASHBOARD' section with tabs for 'CONSUMERS' and 'PROVIDERS'. Below this, there is a 'Kastner, Martin (209730)' section with various tabs: 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation', 'Contacts', 'Consumer Module User', 'Demographics', 'Divisions', 'Consumer Budgets', 'Programs', 'Provider Selections', 'SAN', 'Notes', 'Forms', 'Appointments', 'Plans', 'Pre-Enrollment', and 'Paye'. An arrow points to the 'Notes' tab. Below the tabs, there is a 'Filters' section with a 'Note Date' dropdown and a 'Search' button. Below the filters, there is a table with 8 columns: 'Note Date', 'Note By', 'Note Type', 'Note Sub-Type', 'Description', 'Status', 'Date Completed', and 'Attachment'. The table contains one row of data.

Note Date	Note By	Note Type	Note Sub-Type	Description	Status	Date Completed	Attachment
04/08/2024	Baer, Sylvia	ICF	Reason Timeline Unmet		Complete	04/08/2024	No

5. In the new Note record, update the following fields:

- Division = APD
- Note Type = Waiver Enrollment
- Note Subtype = CBC to Waiver
- Status = Pending
- Attach all documentation including the Court order
- Route the Note record to the Pre-Enrollment Support Coordinator and the State Office Enrollment Coordinator by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

6. When finished, click **File > Save and Close Notes**

File Tools

Notes Details

Division *

APD

Note By *

WLSuper, Robert

Note Date *

04/06/2018

Program/Provider

Note Type *

Waiver Enrollment

Note Sub-Type

CBC to Waiver

Description

Note

CBC to Waiver

Status *

Pending

Date Completed

Attachments

[Add Attachment](#)

Document	Description	Category	Action
There are no attachments to display			

Note Recipients

Add Note Recipient:

...

Clear

Name	Date Sent	Date Read	Status	Date Signed	
Tierney, Jacqueline	4/6/2018		Unread		Remove
WLCordinator, Sue	4/6/2018		Unread		Remove

7. Proceed to the [Chapter on Pre-Enrollment processes](#) to proceed with the Waiver Enrollment Process

Military Family Application

1. Upon receiving an application from a potential Military to Waiver Candidate, the Eligibility Determination Specialist will review the application and all collateral documents to ensure that the applicant is a dependent of an active duty military service member, and that the applicant received waiver services in the state that they moved from
2. To begin, log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.

Welcome, Caroline Shorter
4/4/2024 3:48 PM

[My Dashboard](#) | [Sign Out](#)

Role

Region Pre-Enrollment Workstream Worker

GO

File Reports

Quick Search

Consumers

Last Name

GO

[ADVANCED SEARCH](#)

3. Create a Contact record for the applicant's Legal Representative.

4. To do so, navigate to the consumer's record and click **Contacts > File > Add New Contacts Search**. iConnect requires the user to first search the database for existing contact records before being able to add a new record.

- a. Use the multi variable search to verify if the Legal Representative already has a record in iConnect. Click **Search**.

- i. If the search returns a matching result, click on the matching record to add it as a Contact on the consumer's record
- ii. If the search does not return a matching result, click Add New to create a new Contact on the consumer's record

5. In the Legal Representative's Contact record, update the following fields:
- a. Primary Relationship = select Legal Representative
 - b. Relationship(s) = select a value if multiple relationships exist
 - c. Active Military status = checked
 - d. Active = checked (this activates/inactivates the Contact record in iConnect)

File

Contact Detail

Primary Relationship *	Legal Representative	Designated By Person (POA/DPO)
Relationship(s)	Advocate Attorney Aunt Boyfriend Brother Care Planning Participant Care Provider	
Active Military Status	<input checked="" type="checkbox"/>	
Active	<input checked="" type="checkbox"/>	
Comments		

6. When finished, click **File > Save and Close Contacts**.

7. Update the consumer's Division record. To do so, navigate to the consumer's record and click on the **Divisions** tab > open the APD Division record.

8. Update the following fields:

- Disposition = APD Eligible – Bypass PE
- Primary Worker = Pre-Enrollment Workstream Lead
- Secondary Worker = Clinical Workstream Lead

9. When finished, click **File > Save and Close Division**.

apd iConnect

Marianne Smith
Last Updated by walverwsl
at 4/5/2018 1:48:01 PM

Division

File Word Merge

Division

Events

Division *	APD
Disposition *	APD Eligible -Non-Pre-Enrollment
Disposition Date	04/06/2018
Open Date	04/04/2018
Data Entry Date	03/21/2018
Primary Worker *	WLSuper, Robert
Secondary Worker	ClinicalWLSL, Tony
Application Received Date *	04/04/2018
Interested in ICF/IID	Yes
Age Category at Time of Application *	6 and Above

10. Upon saving the APD Division record with Disposition = APD Eligible Bypass PE, a Workflow Wizard will trigger:

- Merge/Mail Applicable Notice – *Assigned to Eligibility Determination Specialist, Due Immediately*

- b. Assign Initial QSI – *Assigned to Clinical Work Stream Lead, Due Immediately*
 - c. Complete Family Risk Factor - *Assigned to Clinical Workstream Lead, Due in 45 days*
 - d. Complete Waiver Eligibility Worksheet – *Assigned to Pre-Enrollment Workstream Lead – Due in 45 Days*
 - e. Complete Support Plan Short Form - *Assigned to Pre-Enrollment Workstream Lead – Due in 45 Days*
 - f. Verify Mental Health Diagnosis - *Assigned to Pre-Enrollment Workstream Lead – Due in 45 Days*
11. Proceed to [Chapter 3 | Applicant Deemed Eligible and Bypasses Pre-Enrollment](#), to complete these enrollment ticklers.

Phelan McDermid

1. Upon receiving an application from an applicant considered to have Phelan McDermid Syndrome, the Eligibility Determination Specialist will review the application to ensure that it includes documentation from an approved professional
2. To begin, log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.

Quick Search: Consumers Last Name [ADVANCED SEARCH](#)

3. Navigate to the consumer's record and click **Notes > File > Add Note**.

MY DASHBOARD **CONSUMERS** PROVIDERS INCIDENTS CLAIMS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module Use

Demographics Divisions Programs Provider Selections **Notes** Forms Appointments Plans

Filters: Note Date

47 Notes record(s) returned - now viewing 1 through 15

Note Date	Note By	Note Type	Note Sub-Type	Des
04/06/2018	WLSuper, Robert	Waiver Enrollment	CBC to Waiver	

4. In the new Note record, update the following fields:

- a. Division = APD
- b. Note Type = Waiver Enrollment
- c. Note Subtype = Phelan McDermid Syndrome Verification
- d. Status = Complete
- e. Attach any supporting documentation

5. When finished, click **File > Save and Close Notes**

The screenshot shows the 'iConnect' software interface. At the top, there is a header bar with the 'iConnect' logo on the left and the user name 'Marianne Smith' and date '4/6/2018 3:45 PM' on the right. Below the header is a navigation bar with 'File' and 'Tools' menus. The main area is titled 'Notes Details' and contains a form with the following fields:

- Division *: APD (dropdown)
- Note By *: Eligibility, Michelle (dropdown)
- Note Date *: 04/06/2018 (calendar icon)
- Program/Provider: (dropdown)
- Note Type *: Waiver Enrollment (dropdown, highlighted with a blue arrow)
- Note Sub-Type: Phelan McDermid Syndrome Verification (dropdown)
- Description: (text area)
- Note: (text area, containing 'Phelan McDermid Syndrome Verification')
- Status *: Complete (dropdown)
- Date Completed: 04/06/2018 (calendar icon)

6. Update the consumer's Division record. To do so, navigate to the consumer's record and click on the **Divisions** tab > open the APD Division record.
7. Update the following fields:
 - a. Disposition = APD Eligible - Non-Pre-Enrollment
 - b. Primary Worker = Pre-Enrollment Workstream Lead
 - c. Secondary Worker = Clinical Workstream Lead
8. When finished, click **File > Save and Close Division**

The screenshot shows the iConnect system interface. At the top, the logo 'iConnect' is visible. The user 'Marianne Smith' is logged in, with the last update by 'waiverwsl' at 4/5/2018 1:48:01 PM. The 'Division' field is set to 'APD'. The 'Disposition' dropdown menu is highlighted with a blue arrow and is set to 'APD Eligible -Non-Pre-Enrollment'. Other fields include 'Disposition Date' (04/06/2018), 'Open Date' (04/04/2018), 'Data Entry Date' (03/21/2018), 'Primary Worker' (WLSuper, Robert), 'Secondary Worker' (ClinicalWSL, Tony), 'Application Received Date' (04/04/2018), 'Interested in ICF/ID' (Yes), and 'Age Category at Time of Application' (6 and Above).

9. Upon saving the APD Division record with Disposition = APD Eligible Bypass PE, a Workflow Wizard will trigger:
 - a. Merge/Mail Applicable Notice – *Assigned to Eligibility Determination Specialist, Due Immediately*
 - b. Assign Initial QSI – *Assigned to Clinical Work Stream Lead, Due Immediately*
 - c. Complete Family Risk Factor - *Assigned to Clinical Workstream Lead, due in 45 days*
 - d. Complete Waiver Eligibility Worksheet – *Assigned to Pre-Enrollment Workstream Lead – Due in 45 Days*
 - e. Complete Support Plan Short Form - *Assigned to Pre-Enrollment Workstream Lead – Due in 45 Days*
 - f. Verify Mental Health Diagnosis - *Assigned to Pre-Enrollment Workstream Lead – Due in 45 days*
10. Proceed to [Chapter 3 | Applicant Deemed Eligible and Bypasses Pre-Enrollment](#), to complete the Waiver Eligible Bypass PE Process

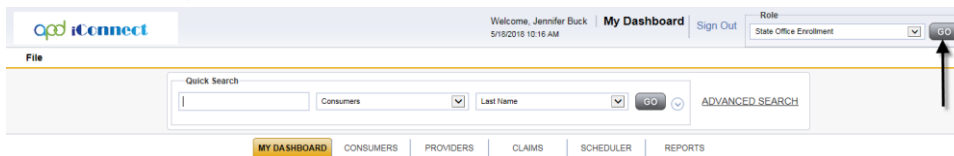
CDC+ Enrollment

1. A Consumer can express interest in the CDC+ Program. If the consumer's current Waiver Support Coordinator is not a CDC+ Consultant, the Consumer can contact the Region Office to obtain a list of CDC+ Consultants who are available. If the Consumer cannot direct their own services, the decision on who will act on their behalf as their CDC+ Representative will be made.
2. The Consumer or their Representative must take and pass the Readiness Review by 85% before completing and submitting the Application to enroll in CDC+.
3. Upon receiving the consumer's application, the CDC+ staff will review all application documentation for accuracy. The CDC+ Enrollment staff then enters application information into the CDC+ System (not iConnect).

4. Upon submitting a new Start Purchasing Plan and all required documentation, the CDC+ staff will review the documentation and determine who will be enrolled each month.

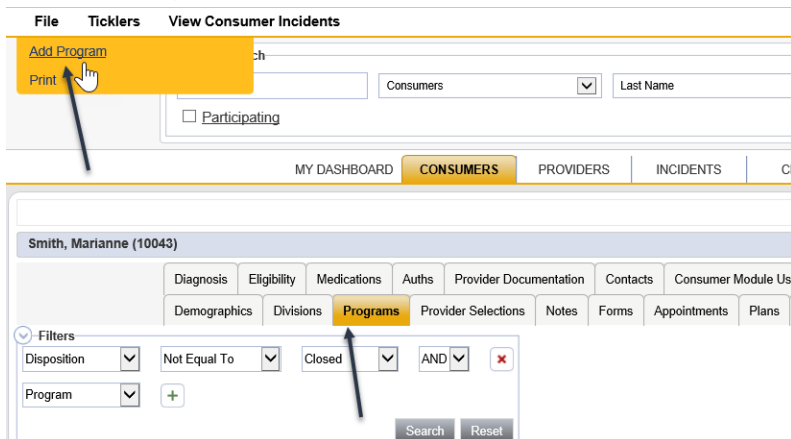
CDC+ Program Enrollment

1. To enroll a Consumer in the CDC+ Program in iConnect, the CDC+ staff member will log in and set Role = State Office Enrollment. Click **Go**.



The screenshot shows the iConnect login interface. At the top, there's a header with the iConnect logo, a welcome message for Jennifer Buck, and links for 'My Dashboard' and 'Sign Out'. Below this is a 'File' section with a 'Quick Search' bar containing fields for 'Consumers' and 'Last Name', and a 'GO' button. To the right of the search bar is a 'Role' dropdown menu set to 'State Office Enrollment' and a 'GO' button. A red arrow points to the 'GO' button next to the role dropdown.

2. Navigate to the consumer's record and click on **Programs > File > Add Program**.




The screenshot shows the iConnect consumer record page for Marianne Smith (10043). The 'File' tab is selected, and the 'Add Program' button is highlighted with a red arrow. Below the 'Add Program' button is a 'Print' button. The 'Consumers' dropdown menu is set to 'Consumers' and the 'Last Name' field is empty. The 'Participating' checkbox is unchecked. The 'MY DASHBOARD' tab is selected, and the 'CONSUMERS' tab is highlighted. Below the tabs is a section for 'Smith, Marianne (10043)' with various sub-tabs: 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation', 'Contacts', 'Consumer Module Use', 'Demographics', 'Divisions', 'Programs', 'Provider Selections', 'Notes', 'Forms', 'Appointments', and 'Plans'. The 'Programs' sub-tab is highlighted. Below the sub-tabs is a 'Filters' section with a 'Disposition' dropdown set to 'Not Equal To', a 'Closed' checkbox, and an 'AND' dropdown. The 'Program' dropdown is set to 'Program'. The 'Search' and 'Reset' buttons are at the bottom.

3. In the new Program record, update the following fields:
 - a. Program = CDC+
 - b. Disposition = Enrolled in CDC+
 - c. Referral Date = Date that APD received notification of interest in CDC+
 - d. Enrollment Type = leave blank. NA for CDC+
 - e. Primary Worker = Waiver Support Coordinator (CDC+ Consultant)
 - f. Program Begin Date = Projected effective date for CDC program to begin.
4. When finished, click **File > Save and Close Programs**.
 - a. This consumer will now have one APD waiver Program record and one CDC+ program record.

The screenshot displays the iConnect software interface. At the top left is the 'iConnect' logo. Below it is a navigation bar with 'File', 'Tools', and 'Word Merge' tabs. On the left side, there is a sidebar menu with options: 'Program' (highlighted in orange), 'Program Workers', 'Notes', 'Events', and 'Track Disposition'. The main area shows a form for the 'Program' record. The form fields are as follows:

Division *	APD
Referral Date	
Create Date *	07/18/2018
Program *	CDC+ Details
Disposition *	Enrolled in CDC+ ▼
Disposition Date *	06/10/2019
Enrollment Type	N/A - Enrolled onto Waiver Prior to iConnect ▼
Program Begin Date *	06/01/2019
Expected Deactivated Date	
Comments	
LOC Completed Prior To Enrollment	<input type="checkbox"/>

5. Navigate to the consumer's record and click on **Notes > File > Add Note**.
6. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Program = CDC+
 - c. Note Type = CDC+
 - d. Note Subtype = New Start
 - e. Status = Pending
 - f. Route the Note record to the CDC+ Consultant by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
7. When finished, click **File > Save and Close Notes**

Notes Details	
Division *	APD ▼
Note By *	Tierney, Jacqueline ▼
Note Date *	04/09/2018 
Program/Provider	CDC+ ▼ Details
Note Type *	CDC+ ▼*
Note Sub-Type	New Start ▼
Description	<div></div>
Note	<div></div>
Status *	Pending ▼
Date Completed	<div></div>

End Date APD waiver Plan and Services

1. The CDC+ Consultant will monitor their **My Dashboard** for Note records related to CDC+. To begin, log into iConnect and set Role = WSC/CDC. Click **Go**.
2. On the **My Dashboard**, find the Consumers section and scroll down to the Notes Panel. Click on the **Pending** link to open the Notes Queue
3. In the Notes Queue, open the Note record with Note Type = CDC+ and Note Subtype = New Start and review the contents of the Note.
4. The CDC+ Consultant confirms what has been billed and what is yet to be billed on the APD waiver authorizations.
5. The CDC+ Consultant will update each planned service. On the consumer's record, click on the **Plans** tab > open the existing APD waiver Plan.

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Programs Provider Selections Notes Forms Appointments **Plans** Pre-Enrollment Payers Legal Issues

Filters
Division
Search Reset

2 Plans record(s) returned - now viewing 1 through 2

Division	Program	Worker	Cost Plan Creation Date	Status	Cost Plan Begin Date	Cost Plan End Date
APD	APD Waiver	Tierney, Jacqueline	03/30/2018	Pending		
APD	APD Waiver	WLSuper, Robert	03/27/2018	Approved	03/27/2018	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

- If the Plan has already been validated and reviewed by the Region and/or State, the Status will equal Approved or No Review Required and the Plan will be read only. The CDC+ Consultant will need to Reverse the Status of the Plan before editing the Planned Services and/or adding new.
- To do so, the CDC+ Consultant must use the WSC Cost Plan Adjustment Role.
- Select the APD waiver Plan record with status = Approved or No Review Required. The Plan Information Page displays.
- Click **File > Reverse Status**.

John Sheppard
Last Updated by j buck

Plans Sign Out

Role
WSC Cost Plan Adjustment

FL APD Sandbox - Internet Explorer

https://tvttest.harmonyis.net:FLAPDSandbox/Pages/Harmony.aspx?ChapterID=485&viewType=SubPageView&PageID=57563&ChapterEntityID=10106&EntityID=198&CallingChapter=Consumers&CallingPage=Plans%20List&ParentEntityID=10106&_popup_=1

opd iConnect

John Sheppard
Last Updated by j buck
at 3/21/2019 12:22:39 PM

Plan Information

File Reports

Duplicate
Spell Check
Save and Validate Plan
Reverse Status
History
Print
Close Plan Information

Details

on *
am
er
Plan Creation Date *
ents

APD
APD Waiver
Reed, Monica
04/01/2018

- The record is now editable, and the **Plan Status** equals Draft.
- Click the **Planned Services** subpage.

APD iConnect Alice Sheppard | **Planned Services**
5/9/2018 5:43 PM

File Tools

Plan Information
Planned Services
QSI Needs
Plan Notes

Filters
Max Amount +
Search Reset

5 Planned Services record(s) returned - now viewing 1 through 5

Provider	Service Code	Service Description	Total No of Units	Unit Type	Rate	Max Amount	Begin Date	End Date	Auth ID	
	4250	Specialized Mental Health Counseling Assessment	1.0000	Units	\$128.21	\$128.21	04/01/2018	06/30/2018		<input type="checkbox"/>
APD Test Provider	4083	Life Skills Development - Level 2 (Supported Employment - Individual)	260.0000	15 mins	\$9.56	\$2,485.60	04/01/2018	06/30/2018		<input type="checkbox"/>
Generic CDC+ Provider	4446	Consumable Medical Supplies (non-CDC)	36.0000	Item	\$2.00	\$72.00	04/01/2018	04/09/2018		<input type="checkbox"/>
Generic CDC+ Provider	4400	Consultant - CDC	3.0000	Month	\$148.69	\$446.07	04/02/2018	06/30/2018		<input type="checkbox"/>

12. For each planned service, select to open the details page. Update the following fields:

- End Date = date before the CDC+ start date.
- Ensure there are adequate units left in the APD waiver planned service falling within the start date and the new end date that has been updated.
- Planned Service Status = do not change.

13. When finished, click **File > Save and Close Planned Service**.

APD iConnect John Sheppard | **Plan Information**
Last Updated by j buck
at 3/21/2019 1:31:58 PM

File Reports

Plan Information
Planned Services
QSI Needs
Plan Notes

Plan Details

Division * APD

Program APD Waiver [Details](#)

Worker Reed, Monica

Cost Plan Creation Date * 04/01/2018

Comments

Status * Draft

Cost Plan Begin Date * 07/01/2018

Cost Plan End Date * 06/30/2019

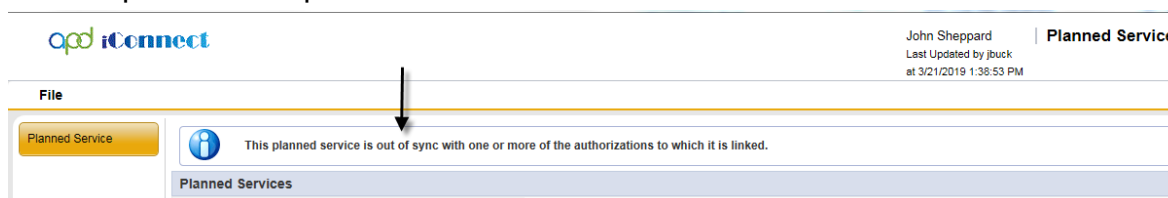
14. Select the **Plan Information** subpage. Update the following fields:

- Cost Plan End Date = date before the CDC+ start date.

15. Click **File > Save and Validate Plan**.

16. Complete [Plan Validation](#).

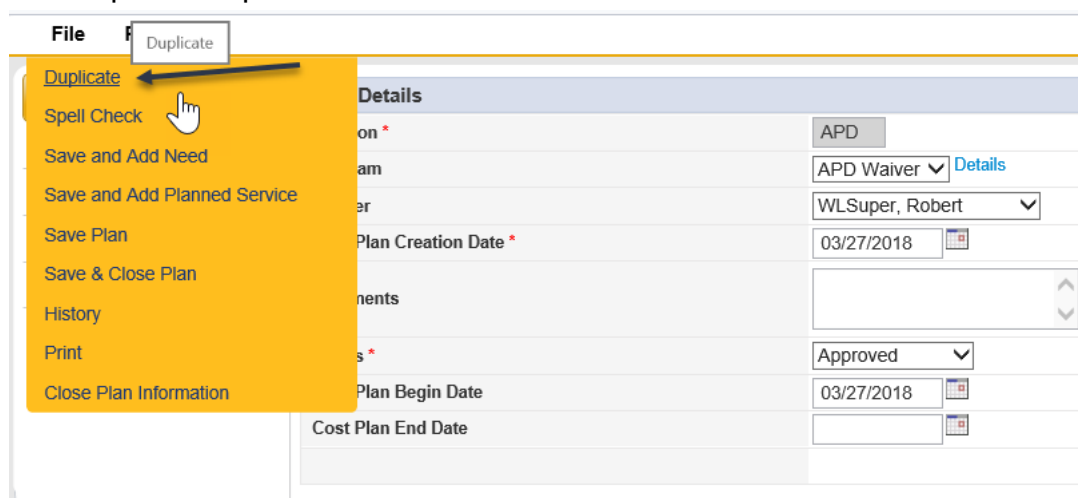
17. Once the plan has passed validation, the changes must also be made to the authorization using the **Update Authorization** functionality in iConnect. This will end date authorizations and update the amount unauthorized on the budget details screen.
18. On the planned services details page, a message will display to the user until this update is completed.



19. Navigate to the Planned Services subpage.
20. Click the checkbox next to the planned service that was updated.
21. Click **File > Update Authorization**. A success notification window displays, and the authorization is updated. Only after passing Plan Validation, will the Update Authorization menu option appear on the Planned Services tab.

Create the CDC+ Plan and Services

1. Create a new plan record to house the CDC+ services. To do so, in the existing APD waiver Plan, click **File > Duplicate** to duplicate the Plan. This copies the APD waiver plan and planned services.



2. The new copied plan record will automatically open. Update the following fields:
 - a. Program = CDC+

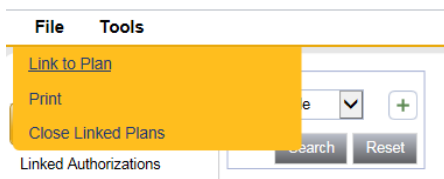
- b. Cost Plan Begin Date = CDC+ program begin date
- c. Cost Plan End Date = End of Fiscal Year
- d. Status = Draft

3. When finished, click **File > Save Plan**.

4. The CDC+ Consultant will link the CDC+ Plan to the Budget. Navigate to the **Consumer Budget** tab. Open the current budget. Update the following fields:
- a. Program: APD Waiver is already selected. Make no changes to that. In addition, add CDC+.



- 5. From the **File** menu, select **Save**.
- 6. Select the **Linked Plans** subpage.
- 7. The APD waiver plan will be displayed. Make no changes to that.
- 8. From the File menu, select Link to Plan.



9. The Link to Plan window displays and the CDC+ plan is listed. Select the CDC+ plan for the same fiscal year by clicking on the carat at the end of the row and click **Link**.

Fund Code	Program	Plan Start Date	Plan End Date	Worker	Status
APD	CDC+	07/01/2020	06/30/2021	McEachern, Jennifer	Approved

10. The page refreshes and both plans are now linked to this budget. You can close the Linked Plans page.
11. Return to the CDC+ plan. If there are any planned services not being continued on the CDC+ plan, use the WSC Cost Plan Adjustment role to delete them. (i.e. – remove Res. Hab.) See the [Remove Planned Services section](#).
12. Using the WSC/CDC+ role, update all other planned services. For each planned service, update the following fields:
- Start Date: the same as the cost plan begin date
 - End Date: the same as the cost plan end date
 - Index/SubObject Code = CDC+ ISO
 - Unit of Measure = Year
 - Units Per = Total units needed for a full year
 - Provider ID = Generic CDC+ Provider for all services except CDC Consultant.
13. When finished, click **File > Save and Close Planned Service**.
14. If necessary, add any new planned services not included in the copied APD waiver plan. From the File menu, select Add Planned Services.
15. The Planned Service details page display. Update the following fields:
- Start Date: the same as the cost plan begin date

- b. End Date: the same as the cost plan end date
- c. Index/SubObject Code = CDC+ ISO
- d. Unit of Measure = Year
- e. Units Per = Total units needed for a full year
- f. Provider ID = Generic CDC+ Provider for all services except CDC Consultant.

16. When finished, click **File > Save and Close Planned Service**.

17. In the CDC+ Plan, perform Plan Validation. Click the Plan Information subpage and proceed to the [Plan Validation](#) section of this manual.

18. Once the plan has passed validation, authorizations for the CDC+ services will be created. When authorizations are created, the amount unauthorized on the budget details screen is updated.

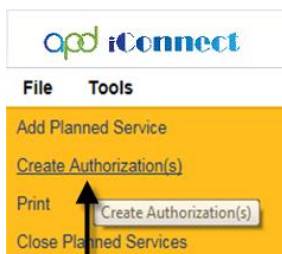
19. Only the authorization for CDC Consultant services will be sent to AHCA via the FMMIS Authorization interface.

20. Once the Planned services have passed Plan validation or have been reviewed by the Region or State Office reviewer and approved, the Create Authorization option will be visible to the user. The WSC will create the authorizations.

21. Click the **Planned Services** subpage.

22. Add a check next to each **Planned Service** that has been validated and is ready to be pushed to an Authorization.

23. Click **File > Create Authorizations**.

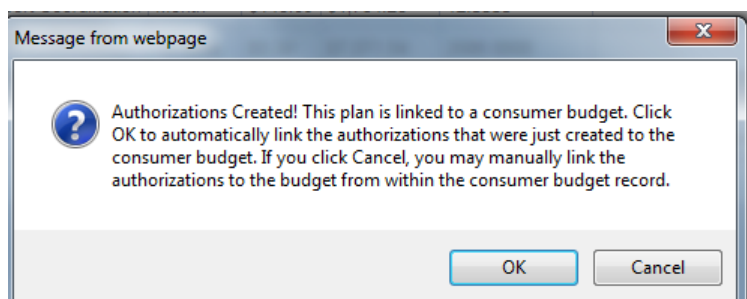


24. The message Authorization Created will display if it was successful and an Auth ID will be assigned. The details of the Authorization are visible on the Planned Service and the Authorization tab.

2 Planned Services record(s) returned - now viewing 1 through 2

Provider	Service Code	Service Description	Unit Type	Rate	Max Amount	Total No of Units	Amount Requested	Begin Date	End Date	Provider Rate Type	Service Ratio	Consumer County	
<input checked="" type="checkbox"/> Achieving Independence	G9012-UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28	12.0000		07/01/2020	06/30/2021	Agency		LEON	<input type="checkbox"/>
Auth ID	Auth Svc ID	Auth Start Date	Auth End Date	Auth Status	Auth Svc Start Date	Auth Svc End Date	Auth Svc Status	Auth Svc EDI Status					
140908	298	07/01/2020	06/30/2021	Approved	07/01/2020	06/30/2021	Approved	Ready to Send					
<input checked="" type="checkbox"/> ResCare For You	S5151-UC	(4221) Respite - Quarter Hour	15 mins	\$3.39	\$7,071.54	2086.0000		07/01/2020	06/30/2021	Agency	1:1	LEON	<input type="checkbox"/>
Auth ID	Auth Svc ID	Auth Start Date	Auth End Date	Auth Status	Auth Svc Start Date	Auth Svc End Date	Auth Svc Status	Auth Svc EDI Status					
140909	299	07/01/2020	06/30/2021	Approved	07/01/2020	06/30/2021	Approved	Ready to Send					
				\$8,855.82	2088.0000								

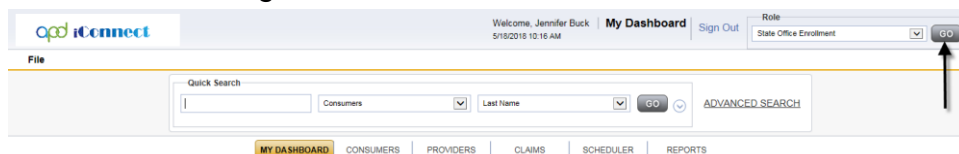
25. The message also describes the plan is linked to a budget and the application will automatically link these authorizations to the budget.



26. iConnect IT staff will pull the amount unauthorized from the budget details screen to get the Reserve Amount. This is used to prorate the anticipated budget in CDC+ system.
27. The rest of the workflow to manage CDC+ services is handled outside of iConnect in the CDC system.

Remove Consumer from CDC+ Program

1. Should a Consumer no longer need to participate in the CDC+ Program, the CDC+ Staff will log into iConnect and set Role = State Office Enrollment. Click **Go**.



2. Navigate to the consumer's record and click on **Programs** tab > open the CDC+ Program Enrollment record.
- In the record, update the following fields:
 - Disposition = Disenrolled
 - The Deactivation Data section displays. Update the following fields:
 - Deactivated To
 - Deactivated Date

iii. Deactivated: enter notes

iv. Deactivation Reason

File Tools Word Merge

Program	Division *	APD
Program Workers	Worker	Tierney, Jacqueline ... Clear Details
Notes	Referral Date	04/09/2018
Events	Create Date *	04/09/2018
Track Disposition	Program *	CDC+ Details
	Disposition *	Disenrolled
	Disposition Date *	04/09/2018
	Enrollment Type	
	Program Begin Date	04/09/2018
	Expected Deactivated Date	04/09/2018 X

↓

Deactivation Data	
Deactivated To	
Deactivated Date *	08/25/2018
Deactivated	
Deactivation Reason	

c. When finished, click **File > Save and Close Programs.**

3. Navigate to the consumer's record and click on **Notes > File > Add Note.** The Note details page displays. Update the following fields:

- Division = APD
- Note Type = CDC+
- Note Subtype = CDC+ Disenrollment
- Status = Pending
- Route the Note record to the WSC (CDC+ Consultant)


4. When finished, click **File > Save and Close Note.**

File Tools

Notes Details

Division * APD ▾

Note By * Tierney, Jacqueline ▾

Note Date * 04/09/2018 

Program/Provider CDC+ ▾ [Details](#)

Note Type * CDC+ ▾*

Note Sub-Type CDC+ Disenrollment ▾

Description

Note

-Please approve the decision to disenroll this Consumer from the CDC+ Program

Status * Pending ▾

Date Completed

5. The CDC+ Consultant will navigate to the consumer's record, click on the **Plans** tab > open the existing CDC+ Plan:

MY DASHBOARD **CONSUMERS** PROVIDERS CLAIMS SCHEDULER REPORTS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Programs Provider Selections Notes Forms Appointments **Plans** Pre-Enrollment Payers Legal Issues

Filters

Division ▾ +

Search Reset

3 Plans record(s) returned - now viewing 1 through 3

	Division	Program	Worker	Cost Plan Creation Date ▾	Status	Cost Plan Begin Date	Cost Plan End Date
☐	APD	CDC+	Tierney, Jacqueline	04/09/2018	Draft	04/09/2018	
☐	APD		Tierney, Jacqueline	03/30/2018	Pending		
☐	APD	APD Waiver	WLSuper, Robert	03/27/2018	Approved	03/27/2018	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

6. In the CDC+ Plan, click on the **Planned Services** tab. For each planned service, select to open the details page. Update the following fields:
- End Date = the CDC+ end date.
 - Planned Service Status = do not change.
7. When finished, click **File > Save and Close Planned Service**.

John Sheppard | Plan Information
Last Updated by jbuck
at 3/21/2019 1:31:58 PM

File Reports

Plan Information

Planned Services

QSI Needs

Plan Notes

Plan Details

Division * APD

Program APD Waiver Details

Worker Reed, Monica

Cost Plan Creation Date * 04/01/2018

Comments

Status * Draft

Cost Plan Begin Date * 07/01/2018

Cost Plan End Date * 06/30/2019

8. Select the **Plan Information** subpage. Update the following fields:
 - a. Cost Plan End Date = the CDC+ end date.
9. Click **File > Save and Validate Plan**.
10. Complete [Plan Validation](#).
11. Once the plan has passed validation, the changes must also be made to the authorization using the **Update Authorization** functionality in iConnect. This will end date authorizations and update the amount unauthorized on the budget details screen.
12. On the planned services details page, a message will display to the user until this update is completed.

John Sheppard | Planned Service
Last Updated by jbuck
at 3/21/2019 1:38:53 PM

File

Planned Service

This planned service is out of sync with one or more of the authorizations to which it is linked.

Planned Services

13. Navigate to the Planned Services subpage.
14. Click the checkbox next to the services that were updated.
15. Click **File > Update Authorization**. A success notification window displays, and the authorization is updated. Only after passing Plan Validation, will the Update Authorization menu option appear on the Planned Services tab.

16. If the Consumer no longer needs APD services, proceed to the [Chapter on Case Closure](#).
17. If the consumer will continue to receive APD services, the CDC+ Consultant will create a new plan record to house the APD waiver services. To do so, in the existing CDC+ plan, click **File > Duplicate** to duplicate the Plan. This copies the CDC+ plan and planned services.

apd iConnect

Marianne Smith
Last Updated by jtierney
at 4/9/2018 11:43:24 AM

Plan Information

File Reports

Duplicate (highlighted)

Spell Check

Save and Add Need

Save and Add Planned Service

Save Plan

Save & Close Plan

History

Print

Close Plan Information

APD

CDC+ Details

Tierney, Jacqueline

Date * 04/09/2018

Draft

04/09/2018

Cost Plan End Date

18. The new copied plan record will automatically open. Update the following fields:
- Program = APD Waiver
 - Cost Plan Begin Date = day after the CDC+ program end date
 - Cost Plan End Date = End of Fiscal Year
 - Status = Draft
19. When finished, click **File > Save Plan**.
20. The CDC+ Consultant will link the APD waiver plan to the Budget. Navigate to the **Consumer Budget** tab. Open the current budget. Notice in the Program field, APD Waiver and CDC+ are already selected. Make no changes.

apd iConnect

File

Budget (selected)

Linked Plans

Linked Authorizations

Budget ID 35279

Approval Date 04/22/2020

Fiscal Year * 2021

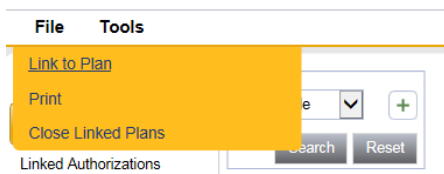
Program(s)

CDC+
APD Waiver

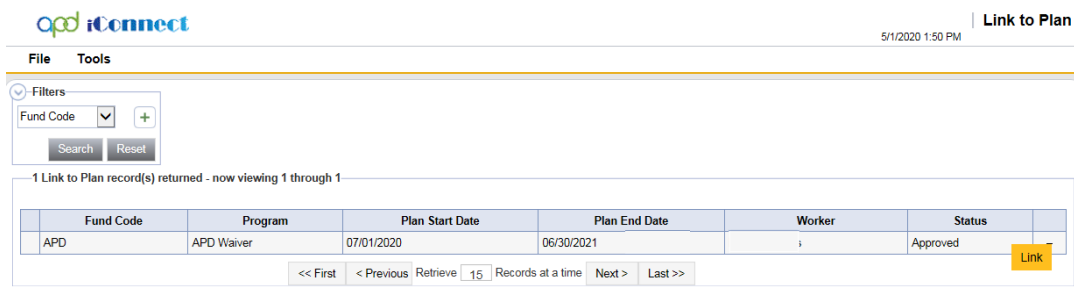
21. Select the **Linked Plans** subpage.

22. The original APD waiver plan and the CDC+ plan will be displayed. Make no changes.

23. From the **File** menu, select **Link to Plan**.



24. The Link to Plan window displays and the new APD waiver plan is listed. Select the APD waiver plan for the same fiscal year by clicking on the carat at the end of the row and click **Link**.



25. The page refreshes and all three plans are now linked to this budget. You can close the Linked Plans page.

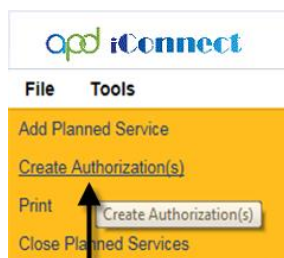
26. Return to the new APD waiver plan. If there are any planned services not being continued on the APD waiver plan, use the WSC Cost Plan Adjustment role to delete them. See the [Remove Planned Services section](#).

27. Using the WSC/CDC+ role, update all other planned services. For each planned service, update the following fields:

- Start Date: the same as the cost plan begin date
- End Date: the same as the cost plan end date
- Index/SubObject Code = Waiver ISO
- Unit of Measure = select based on the service selected
- Units Per = Total units needed for each unit of measure
- Provider ID = search for and select the waiver provider.

28. When finished, click **File > Save and Close Planned Service**.

29. If necessary, add any new planned services not included in the copied CDC+ plan. From the File menu, select Add Planned Services.
30. The Planned Service details page display. Update the following fields:
- a. Start Date: the same as the cost plan begin date
 - b. End Date: the same as the cost plan end date
 - c. Index/SubObject Code = Waiver ISO
 - d. Unit of Measure = select based on the service selected
 - e. Units Per = Total units needed for each unit of measure
 - f. Provider ID = search for and select the waiver provider.
31. When finished, click **File > Save and Close Planned Service**.
32. In the new APD waiver plan, perform Plan Validation. Click the Plan Information subpage and proceed to the [Plan Validation](#) section of this manual.
33. Once the plan has passed validation, authorizations for the APD waiver services will be created. When authorizations are created, the amount unauthorized on the budget details screen is updated.
34. Once the Planned services have passed plan validation or have been reviewed by the Region or State Office reviewer and approved, the Create Authorization option will be visible to the user. The WSC will create the authorizations.
35. Click the **Planned Services** subpage.
36. Add a check next to each **Planned Service** that has been validated and is ready to be pushed to an Authorization.
37. Click **File > Create Authorizations**.



38. The message Authorization Created will display if it was successful and an Auth ID will be assigned. The details of the Authorization are visible on the Planned Service and the Authorization tab.

Chapter 13 | Other Non-Waiver Eligible Settings – Admission

1. The Waiver Support Coordinator or Pre-Enrollment Support Coordinator will document the consumer's admission to a jail, nursing home, rehab center, hospital. To begin, log into iConnect and set Role = WSC/CDC or Region Pre-Enrollment Workstream Worker. Click **Go**.

Quick Search: Consumers Last Name [ADVANCED SEARCH](#)

2. Navigate to the consumer's record and click on the Notes tab. Click **File > Add Note**.
3. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Facility Placement
 - c. Note Subtype = Consumer Admitted
 - d. Status = Alert
 - e. Enter details about the facility placement
 - f. Then click **File > Save and Close Notes**
4. Saving a Note with Note Type = Facility Placement and Sub Type = Consumer Admitted, triggers a Workflow Wizard with two ticklers for the secondary worker on the Division record:
 - a. Change the living setting on the demographics page (due immediately)
 - b. Verify Consumer to Remain on Wavier (due in 60 days and visible via My Dashboard).
5. Click the Change the living setting on the demographics page tickler to open the demographics list view page.
6. From the **Edit** menu in the top toolbar > select **Edit Demographics**.

Demographics	
iConnect ID	10106
Salutation	
Last Name	Sheppard
First Name	John
Consumer Photo	
Middle Name	
Medicaid ID	12314588
Age	47.6
Race	
Ethnicity	
Marital Status	
Living Setting	

7. Update the following fields:
 - a. Living Setting = select applicable value

The screenshot shows the iConnect Demographics form. The 'Living Setting' field is selected, and a dropdown menu is open, displaying the following options:

- AHCA Licensed Adult Family Care Home
- AHCA Licensed Assisted Living
- AHCA Licensed ICF/DD
- AHCA Licensed Nursing Home
- APD Developmental Disabilities Center
- APD Developmental Disabilities Defendant Program
- APD Licensed Facility - Comprehensive Transitional Education Program (CTEP)
- APD Licensed Facility - Foster Home (Capacity 1-3)
- APD Licensed Facility - Large Group Home (Capacity 7-15)
- APD Licensed Facility - Residential Habilitation Center
- APD Licensed Facility - Small Group Home (Capacity 4-6)
- DCF Licensed Foster or Group Home
- Department of Juvenile Justice Facility
- Family Home
- Hospital - Non-Psychiatric
- Hospital - Psychiatric** (highlighted)
- Independent Living
- Jail/Prison
- Supported Living

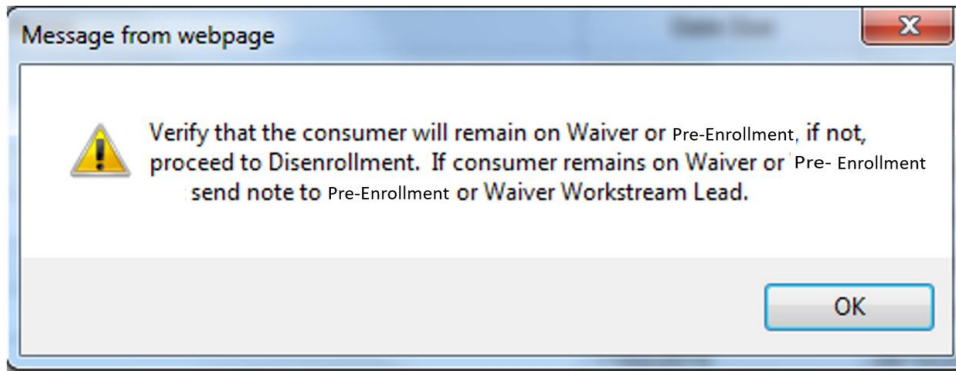
8. When complete, click **File > Save and Close Demographics**.
9. Return to the open Workflow Wizard window. From the tickler flyout menu > Select **Complete**.
10. The Verify Consumer to Remain on the Waiver tickler will be visible via My Dashboard because it is not due for 60 days.
11. From My Dashboard > select Consumers > ticklers to open the Tickler queue.
12. Select the Verify Consumer to Remain on the Waiver tickler.

The screenshot shows the iConnect Ticklers queue. The table displays the following data:

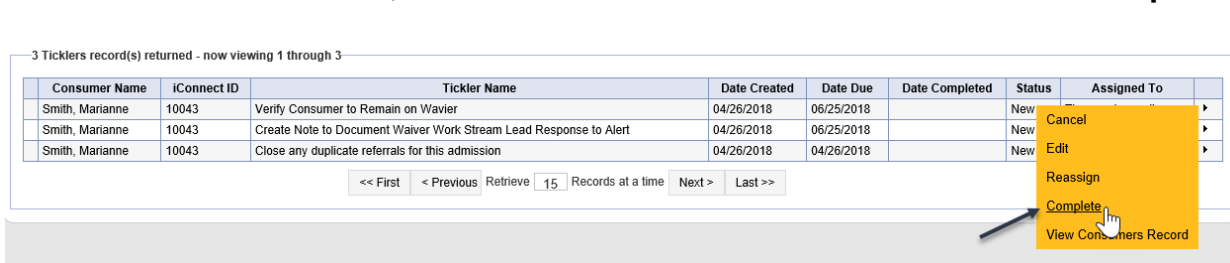
Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Sheppard, John	10106	Verify Consumer to Remain on Waiver	08/25/2018	10/24/2018		New	Buck, Jennifer

An arrow points to the 'Verify Consumer to Remain on Waiver' tickler in the table.

13. A message tickler displays: Verify that the consumer will remain on Waiver or Pre-Enrollment, if not, proceed to Disenrollment. If consumer remains on Waiver or Pre-Enrollment send note to Pre-Enrollment or Waiver Workstream Lead.



14. Navigate to the consumer's record to verify that the Consumer is Medicaid eligible and all other criteria have been met to enroll in the waiver.
15. If the consumer will not remain on the Pre-Enrollment or Waiver, proceed to the [Waiver Disenrollment](#) section.
16. If the consumer will remain on the Pre-Enrollment or Waiver, send a note to the Pre-Enrollment or Waiver Workstream Worker.
17. Navigate to the consumer's record and click **Notes > File > Add Note**.
18. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Facility Placement
 - c. Description = Remain on the Waiver
 - d. Note = enter details
 - e. Note Status = Complete
 - f. Note Recipient – search for and select the Pre-Enrollment or Waiver Workstream worker.
19. When finished, click **File > Save and Close Notes**
20. In the Tickler Queue, hover over the arrow next to the Tickler to click **Complete**.



21. The Waiver Workstream Worker will view this note via My Dashboard > Consumers > Notes.

Chapter 14 | WSC Reassignment

Introduction

In some instances, a change in the assigned Waiver Support Coordinator is warranted. These instances can be initiated by the Consumer, the WSC, or circumstances that generated a need for the change. This Chapter outlines the required steps to reassign WSCs for an individual Consumer or a group of Consumers.

Reassignment Notification

Consumer notifies the local regional office of his/her desire to change Waiver Support Coordinators. Upon receiving a notification of a Consumers desire to change Waiver Support Coordinators, Region Staff initiate the process by adding a Note in iConnect.

1. To begin, log into iConnect and set Role = Region Waiver Workstream Worker. Click **Go**.

opd iConnect

Welcome, Jennifer Buck 9/13/2018 12:42 PM

My Dashboard Sign Out

Role
Region Waiver Workstream Worker GO

File

Quick Search
Consumers Last Name GO ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER REPORTS

2. Navigate to the Consumers record and click the **Notes** tab > click **File > Add Notes**.

opd iConnect

Marianne Smith
Last Updated by jtierney
at 6/4/2018 1:45:27 PM

Notes Sign Out

Role
Regional Staff

File Tools Reports Ticklers View Consumer Incident

Quick Search
Consumers Last Name GO ADVANCED SEARCH

☐ Participating

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS REPORTS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User
Demographics Divisions Consumer Budgets Programs Provider Selections SANS Notes Forms Appointments Plans

Filters
Note Date +
Search Reset

99 Notes record(s) returned - now viewing 1 through 15

Note Date	Note By	Note Type	Note Sub-Type	Description	Status	D
05/04/2018	Tierney, Jacqueline	Forensic	Annual Review	24 Month Review	Complete	05/

3. The Note Details page is displayed. Update the following fields:
 - a. Division = APD
 - b. Note Type = WSC Change Request
NOTE: WSC and Service Providers cannot see this Note Type
 - c. Note Subtype = Consumer Requested Selection Form Sent
 - d. Note recipient = click the **ellipsis** to search for and select Waiver Workstream Lead worker record.
 - e. Status = Complete
 - f. Attach all supporting documentation

Notes Details

Division * APD

Note By * Buck, Jennifer

Note Date * 05/04/2018

Program/Provider

Note Type * WSC Change Request

Note Sub-Type Consumer Requested Selection Form Sent

Description

Note

sent the form to the consumer

Status * Complete

Date Completed 05/04/2018

4. Click **File > Save and Close Notes**
5. The WSC Selection Form and other supporting documents will be printed and mailed to the Consumer.

WSC Selection – New Agency/Provider

The Consumer notifies the local regional office of his/her newly selected Waiver Support Coordinator agency or solo provider. Upon receiving the notification, the Region Staff will add a Note in iConnect to begin the reassignment process.

New WSC Selected - Add a Note

1. To begin, log into iConnect and set Role = Region Waiver Workstream Worker or Lead. Click **Go**.
2. Navigate to the Consumers record and click the **Notes** tab > click **File > Add Notes**.

The screenshot shows the iConnect system interface. At the top, the user is logged in as Marianne Smith, with the role of Regional Staff. The 'Notes' tab is selected. Below the navigation bar, there is a 'Quick Search' section with a search bar, a dropdown menu set to 'Consumers', and a 'GO' button. A 'Participating' checkbox is also visible. The main content area shows a list of tabs for the consumer record, with 'Notes' highlighted. Below the tabs, there is a 'Filters' section with a 'Note Date' dropdown and a 'Search' button. A table at the bottom displays the search results, showing 99 notes returned, with the first note visible.

Note Date	Note By	Note Type	Note Sub-Type	Description	Status	Date
05/04/2018	Tierney, Jacqueline	Forensic	Annual Review	24 Month Review	Complete	05/04/2018

3. The Note Details page is displayed. Update the following fields:
 - a. Division = APD
 - b. Note Type = WSC Selection
 - c. Note Subtype = WSC Transfer – Agency
 - d. Status = Complete
 - e. Attach all supporting documentation

APD iConnect Alice Sheppard | **Notes**
5/4/2018 12:39 PM

File Tools

Notes Details

Division * APD ▾

Note By * Buck, Jennifer ▾

Note Date * 05/04/2018

Program/Provider ▾

Note Type * WSC Selection ▾*

Note Sub-Type WSC Transfer - Agency ▾

Description

Note

Consumer requested to change WSC agencies

Status * Complete ▾

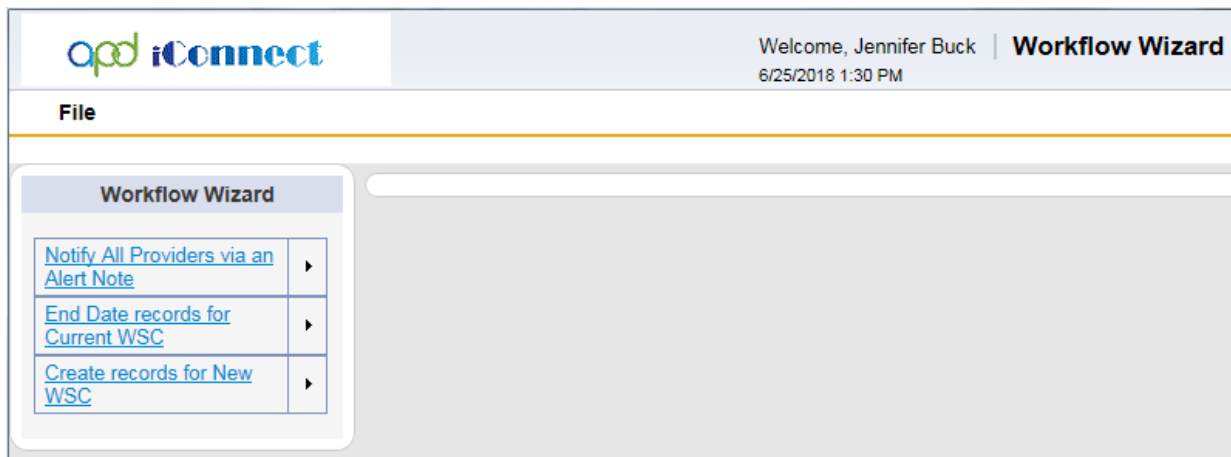
Date Completed 05/04/2018

4. Click **File > Save and Close Notes**.
5. Upon saving the Note, a Workflow Wizard will trigger with the following Ticklers for the User.
 - a. Notify all Providers via an Alert Note
 - b. End date records for current WSC
 - c. Create records for New WSC
6. The actions to take for each are listed in the following sections.

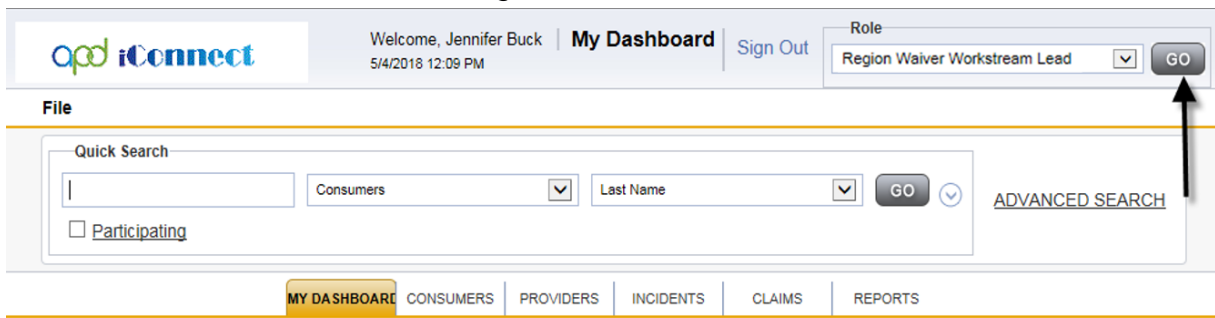
Notify All Providers via an Alert Note

The Consumer has notified the local regional office of his/her newly selected Waiver Support Coordinator and the Region Waiver Workstream Lead has created a Note in the section above to begin the reassignment process. This note triggers a Workflow Wizard with a tickler to Notify All Providers via an Alert Note.

1. To begin, the user would have just saved the WSC Selection Note and triggered the Workflow Wizard. The ticklers are displayed in a new window. Click the tickler to Open it.



2. The ticklers are also visible via My Dashboard at any time. To begin log into iConnect and set Role = Region Waiver Workstream Lead. Click **Go**.



3. Navigate to the My Dashboard and find the Consumers section. Scroll down to the Ticklers panel and click into the linked number of outstanding Ticklers to access the Tickler Queue.

Welcome, Jennifer Buck
5/4/2018 2:11 PM

My Dashboard

Sign Out

Role
Region Waiver Workstream Lead

GO

File

Quick Search

Consumers

Last Name

GO

ADVANCED SEARCH

MY DASHBOARD

CONSUMERS

PROVIDERS

INCIDENTS

CLAIMS

SCHEDULER

REPORTS

CONSUMERS

INCIDENTS

PROVIDERS

TASKS

Division

Disposition

Notes

My Enrollments

Screening Priority

Referrals

Provider Selections

Status

Notes

My Incident Queue

Alert Notes

My Incident Ticklers

Ticklers

Alert Notes

Ticklers

88

4. From here, use the multi variable search to find the Tickler. Click **Search**

Welcome, Jennifer Buck
5/4/2018 2:17 PM

Ticklers

File

Filters

Status

Equal To

New

AND

Last Name

Contains

sheppard

AND

iConnect ID

+

Apply Alert Days Before Due

Search

Reset

100 Ticklers record(s) returned - now viewing 1 through 15

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Sheppard, Alice	10053	Create records for New WSC	05/04/2018	05/04/2018		New	Buck, Jennifer
Sheppard, Alice	10053	End Date records for Current WSC	05/04/2018	05/04/2018		New	Buck, Jennifer
Sheppard, Alice	10053	Notify All Providers via an Alert Note	05/04/2018	05/04/2018		New	Buck, Jennifer



Tip
When searching for a future Tickler, remember to clear the check box next to **Apply Alert Days Before Due** prior to clicking **Search**.

5. Click the **Notify All Providers via an Alert Note** tickler to Open it. The Notes Detail page displays.

6. Update the following fields:
 - a. Division = APD
 - b. Note Type = WSC Selection
 - c. Note Subtype = Notification of WSC Change
 - d. Note = Add the message you want the providers to see each time they login into the account.
 - e. Status = Alert

The screenshot shows the 'Notes Details' form in the iConnect system. The form is titled 'Notes Details' and contains the following fields:

- Division ***: A dropdown menu set to 'APD'.
- Note By ***: A dropdown menu set to 'Buck, Jennifer'.
- Note Date ***: A date field set to '05/04/2018'.
- Program/Provider**: A dropdown menu.
- Note Type ***: A dropdown menu set to 'WSC Selection'. An arrow points to this field from the left.
- Note Sub-Type**: A dropdown menu set to 'Notification of WSC Change'.
- Description**: A text area.
- Note**: A large text area containing the text: 'Add the message you want the providers to see each time they login into the account.'
- Status ***: A dropdown menu set to 'Alert'. An arrow points to this field from the left.
- Date Completed**: A date field.

On the left side of the form, there is a 'Workflow Wizard' section with a button that says 'Notify All Providers via an Alert Note'.

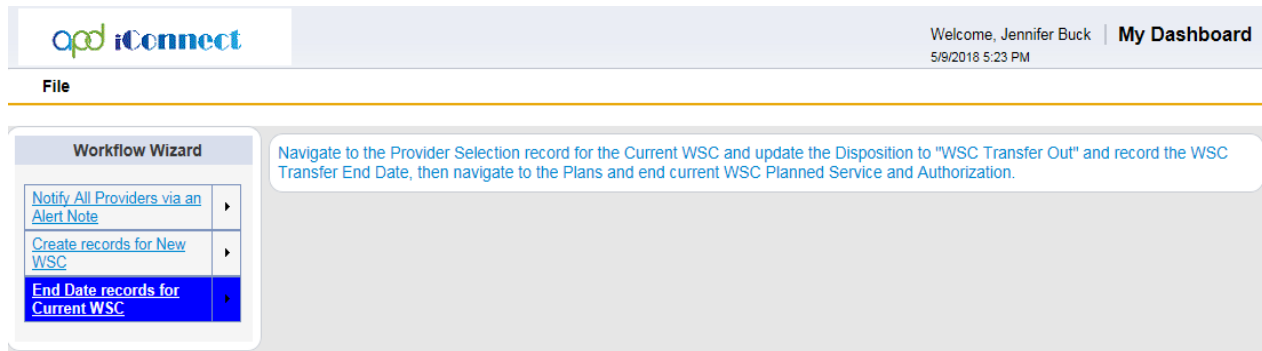
7. Click **File > Save Notes**. The Tickler is marked as complete.

The screenshot shows the 'Workflow Wizard' screen in the iConnect system. The screen is titled 'Workflow Wizard' and contains a button that says 'Notify All Providers via an Alert Note'.

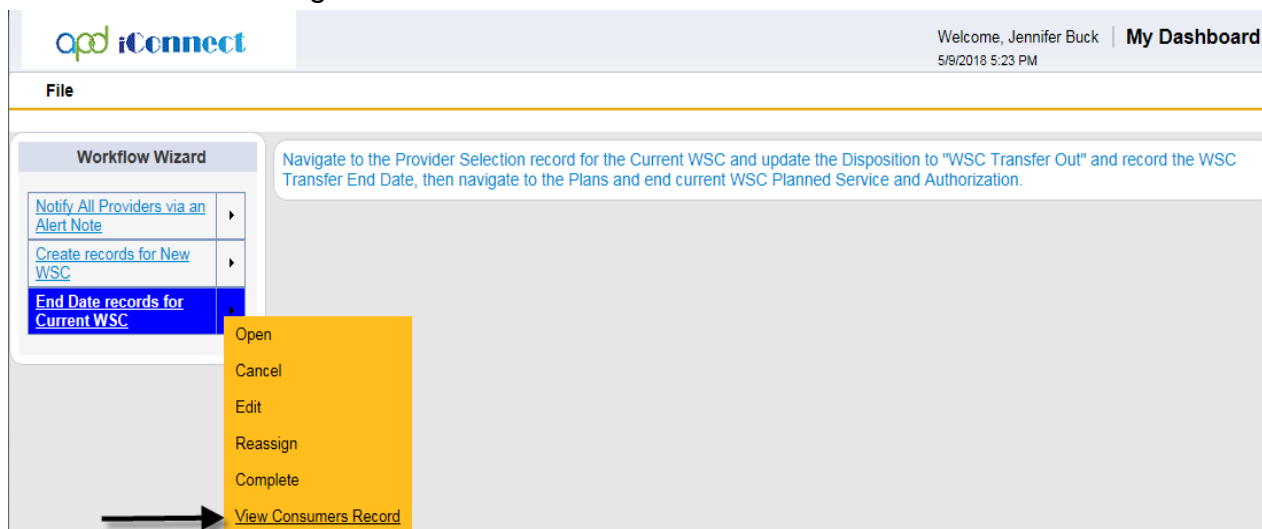
End Date Records for Current WSC

1. Return to the Workflow Wizard and find the Tickler called **End Date Records for Current WSC** tickler.

2. If the person receiving the tickler is not the Waiver Liaison assigned to the current WSC, hover over the arrow next to the Tickler to click **Reassign** to reassign it to the correct person.
3. Otherwise, click to open the Tickler. The following message displays:



4. Users can click the **View Consumer Record** option from the tickler flyout menu to navigate quickly to the Consumer record from the tickler or can complete a quick Search to navigate to the consumer's record.



5. Click the **Provider Selection** tab. From the list view grid, select the applicable WSC Provider Agency record. The provider detail page displays.
6. Update the following fields:
 - a. Disposition = WSC Transfer Out
 - b. Disposition Date = enter date the Disposition was changed
 - c. WSC Transfer End Date = enter the end date (last day of the month)

oqod iConnect Alice Sheppard | **Provider**
Last Updated by jrbuck
at 5/9/2018 5:35:57 PM

File Word Merge

Provider

Provider Workers

Beds

Events

Track Disposition

Division * APD

Selected By Buck, Jennifer ... Clear Details

Selection Date 04/30/2018

Provider * WSC Agency1 Details

Referral Type * Waiver Support Coordinator *

Disposition * WSC Transfer Out ▼

Disposition Date 04/30/2018

WSC Transfer Effective Date

WSC Transfer End Date 05/31/2018

Comments

7. Click **File > Save and Close Provider**

8. Continue with the second part of the message tickler, to end date the Current WSC Planned Service and Authorization.

9. Click the **Plan** tab. Select the APD waiver Plan to open the Plan Details page. Click the **Planned Services** subpage.

oqod iConnect Alice Sheppard | **Planned Services**
5/9/2018 5:43 PM

File Tools

Plan Information

Planned Services

QSI Needs

Plan Notes

Filters
Max Amount ▼ +
Search Reset

5 Planned Services record(s) returned - now viewing 1 through 5

Provider	Service Code	Service Description	Total No of Units	Unit Type	Rate	Max Amount	Begin Date	End Date	Auth ID	
	4250	Specialized Mental Health Counseling Assessment	1.0000	Units	\$128.21	\$128.21	04/01/2018	06/30/2018		<input type="checkbox"/>
APD Test Provider	4083	Life Skills Development - Level 2 (Supported Employment - Individual)	260.0000	15 mins	\$9.56	\$2,485.60	04/01/2018	06/30/2018		<input type="checkbox"/>
Generic CDC+ Provider	4446	Consumable Medical Supplies (non-CDC)	36.0000	Item	\$2.00	\$72.00	04/01/2018	04/09/2018		<input type="checkbox"/>
Generic CDC+ Provider	4400	Consultant - CDC	3.0000	Month	\$148.69	\$446.07	04/02/2018	06/30/2018		<input type="checkbox"/>
WSC Agency1	4270	Support Coordination	6.0000	Month	\$148.69	\$892.14	01/01/2018	06/30/2018		<input type="checkbox"/>
			306.0000			\$4,024.02				

10. Select the Support Coordination planned service to open the details page.

11. Change the End Date. The page refreshes and the totals update.

opd iConnect Alice Sheppard | **Planned Service**
9/21/2018 8:54 AM

File

Planned Services

Division: APD

Begin Date: 01/01/2019

End Date: 05/30/2019

Index/SubObject Code *

IndexCode	Index Description	SubObject	SubObject Description
Statewide	Statewide	Waiver	iBudget Waiver

Service Ratio:

Consumer County *: ALACHUA

Provider Rate Type *: Agency

Service Code *: G9012:UC

Service Description: (4270) Support Coordination

Unit Type: Month

Units Per *: 1

Units of Measure *: Month - Round Up

Rate *: \$148.69

Total No of Units: 5

Max Amount: \$743.45

Amount Requested:

Provider ID: 10035 [Details](#)

Provider: WSC Agency1

Comments *: planned service comments go here

Contract Number:

Planned Service Status: Approved

12. Click **File > Save and Close Planned Service**.

13. A notification displays for the user that the planned service is out of sync with the authorization. The changes to the planned service must also be made to the authorization.

opd iConnect

John Sheppard | **Planned Service**
Last Updated by jlbuck
at 9/21/2018 12:26:12 PM

File

Planned Service

This planned service is out of sync with one or more of the authorizations to which it is linked.

Planned Services

Division: APD

Begin Date: 07/01/2018

End Date: 09/22/2018

Index/SubObject Code *

IndexCode	Index Description	SubObject	SubObject Description
SunCoast	SunCoast Region	Waiver	iBudget Waiver

Service Ratio:

Consumer County *: BAKER

Provider Rate Type *: Agency

Service Code *: G9012:UC

Service Description: (4270) Support Coordination

Unit Type: Month

Units Per *: 1.00

Units of Measure *: Month - Round Up

Rate *: \$148.69

Total No of Units: 3.0000

Max Amount: \$446.07

Amount Requested:

Corresponding Auth No.: 219

Provider ID: 10035 [Details](#)

Provider: WSC Agency1

Comments *: planned service comments

Contract Number:

Planned Service Status: Approved

14. To do so, select the Planned Services subpage.

15. Click the checkbox next to the planned service that was updated.

16. Click **File > Update Authorization**. A success notification window displays, and the authorization is updated.

opd iConnect

John Sheppard | **Planned Services**
9/21/2018 12:25 PM

File Tools

Add Planned Service
Create Authorization(s)
Print
Update Authorization(s)
Close Planned Services

Planned Services record(s) returned - now viewing 1 through 4

Provider	Service Code	Service Description	Unit Type	Rate	Max Amount	Amount Requested	Total No of Units	Begin Date	End Date	Provider Rate Type	Service Ratio	Consumer County	
Pending Provider	H0043:UC:SC	(4175) Residential Habilitation - Live In	Day	\$129.06	\$94,357.48		731.0000	07/01/2018	06/30/2020	Solo	1:1	BAKER	<input type="checkbox"/>
WSC Agency1	G9012:UC	(4270) Support Coordination	Month	\$148.69	\$446.07		3.0000	07/01/2018	09/30/2018	Agency		BAKER	<input checked="" type="checkbox"/>
WSC Agency1	G9012:UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28		12.0000	07/01/2018	06/30/2019				<input type="checkbox"/>
WSC Agency2	G9012:UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28		12.0000	07/01/2018	06/30/2019				<input type="checkbox"/>
					\$98,372.11		758.0000						

<< First < Previous Retrieve 15 Records at a time Next > Last >>

17. The authorization details can be viewed by selecting the + next to the edited planned service or from the Authorization tab.

opd iConnect John Sheppard
9/21/2018 12:38 PM | Planned Services

File Tools

Plan Information
Planned Services
 QSI Needs
 Plan Notes

Filters
 Max Amount +
 Search Reset

4 Planned Services record(s) returned - now viewing 1 through 4

Provider	Service Code	Service Description	Unit Type	Rate	Max Amount	Amount Requested	Total No of Units	Begin Date	End Date	Provider Rate Type	Service Ratio	Consumer County	
Pending Provider	H0043 UC-SC	(4175) Residential Habilitation - Live In	Day	\$129.08	\$94,357.48		731.0000	07/01/2018	06/30/2020	Solo	1:1	BAKER	<input type="checkbox"/>
WSC Agency1	G9012 UC	(4270) Support Coordination	Month	\$148.69	\$446.07	3.0000		07/01/2018	09/22/2018	Agency		BAKER	<input type="checkbox"/>
140841	219	07/01/2018	09/22/2018	Approved	07/01/2018	09/22/2018	Approved		Ready to Send				
WSC Agency1	G9012 UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28		12.0000	07/01/2018	06/30/2019				<input type="checkbox"/>
WSC Agency2	G9012 UC	(4270) Support Coordination	Month	\$148.69	\$1,784.28		12.0000	07/01/2018	06/30/2019				<input type="checkbox"/>
					\$36,372.11		755.0000						

<< First < Previous Retrieve 15 Records at a time Next > Last >>

opd iConnect Alice Sheppard
Last Updated by jbwk
at 5/9/2018 5:22:54 PM | Auths

File Reports Ticklers View Consumer Incidents

Sheppard, Alice (10053)

Diagnosis Eligibility Medications **Auths** Provider Documentation Contacts Consumer Module User

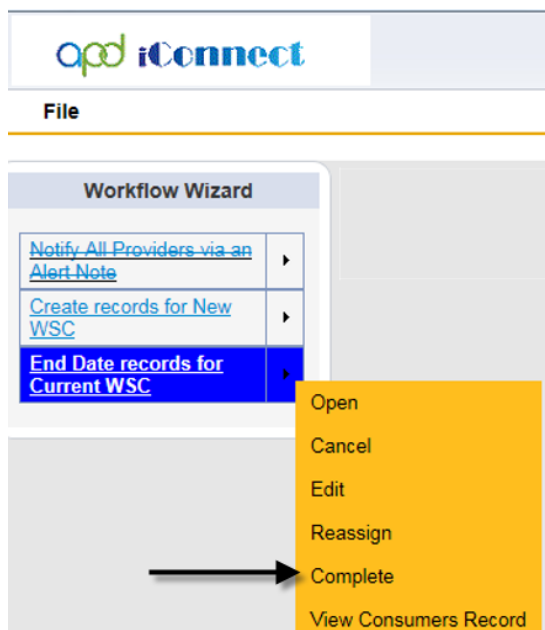
Demographics Divisions Programs Provider Selections Notes Forms Appointments Plans Pre-Enrollment Payers Legal Issues

Filters
 Auth Service EDI Status Equal To Ready to Send AND
 Division +
 Search Reset

3 Auths record(s) returned - now viewing 1 through 3

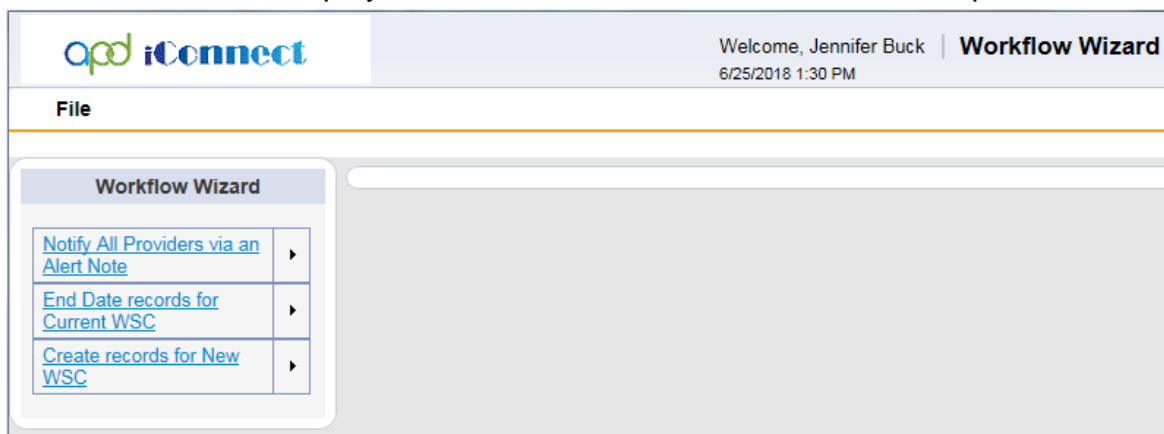
Division	Provider	PA Number	Auth ID	Start Date	End Date	Status	Cancelled
APD	WSC Agency1		140676	04/01/2018	06/30/2018	Approved	No
APD	APD Test Provider		140675	04/01/2018	06/30/2018	Approved	No
APD	A Test Provider		140669	04/01/2018	06/30/2018	Approved	No

18. Upon completing the tasks outlined in the message tickler, navigate back to the workflow wizard screen. Click **Complete** from the tickler flyout menu. The tickler is marked as complete.

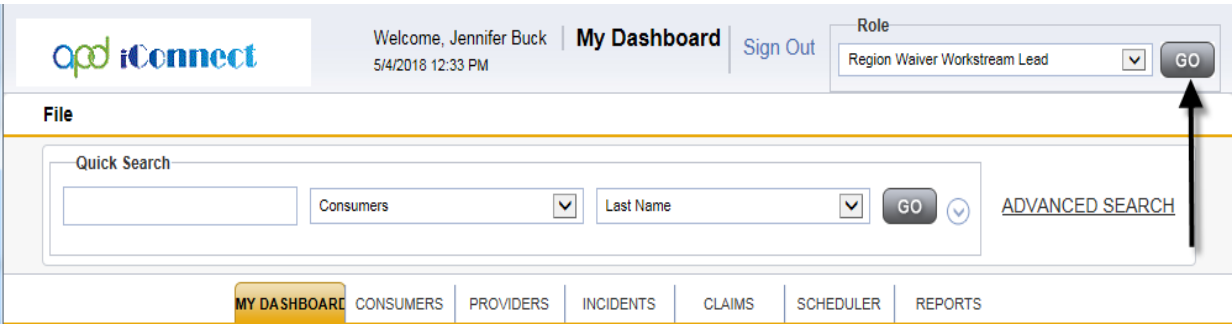


Create Records for New WSC

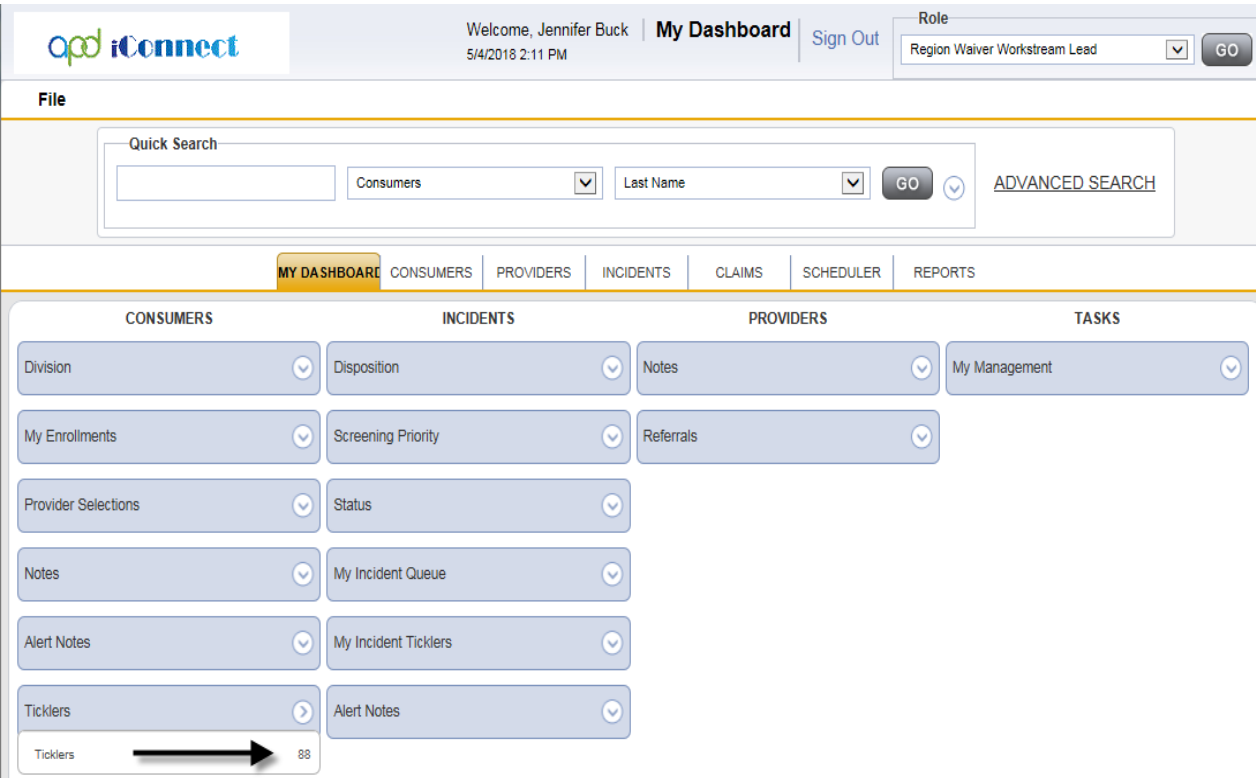
1. To begin, the user would have just saved the WSC Selection Note and triggered the Workflow Wizard. The user will be prompted to create new Provider Selection records for the new WSC and later change the Primary Worker to the new WSC (real time.) The user will also be prompted to end date the Provider Selection Record and Authorization for the current WSC and later close the current WSC Provider Record (real time.)
2. The ticklers are displayed in a new window. Click the tickler to Open it.



3. The ticklers are also visible via My Dashboard at any time. To begin log into iConnect and set Role = Region Waiver Workstream Lead. Click **Go**.



4. Navigate to the My Dashboard and find the Consumers section. Scroll down to the Ticklers panel and click into the linked number of outstanding Ticklers to access the Tickler Queue.



5. From here, use the multi variable search to find the Tickler. Click **Search**

iConnect Welcome, Jennifer Buck | Ticklers
5/4/2018 2:17 PM

File

Filters

Status Equal To New AND

Last Name Contains sheppard AND

iConnect ID +

☐ Apply Alert Days Before Due

100 Ticklers record(s) returned - now viewing 1 through 15

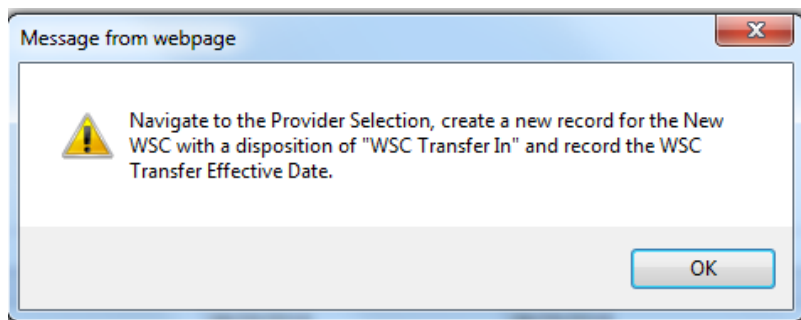
Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Sheppard, Alice	10053	Create records for New WSC	05/04/2018	05/04/2018		New	Buck, Jennifer
Sheppard, Alice	10053	End Date records for Current WSC	05/04/2018	05/04/2018		New	Buck, Jennifer
Sheppard, Alice	10053	Notify All Providers via an Alert Note	05/04/2018	05/04/2018		New	Buck, Jennifer



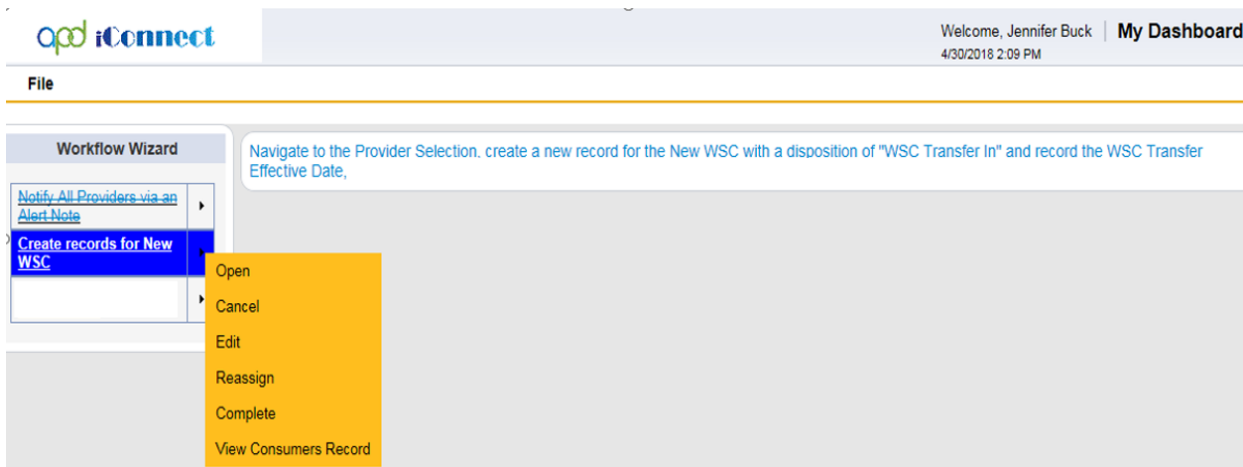
Tip

*When searching for a future Tickler, remember to clear the check box next to **Apply Alert Days Before Due** prior to clicking **Search**.*

6. Find the Tickler called. **Create records for New WSC** tickler to open it.
 - a. If the person receiving the tickler is not the Waiver Liaison assigned to the current WSC, hover over the arrow next to the Tickler to click **Reassign** to reassign it to the correct person.
 - b. Otherwise, click to open the Tickler. The following message displays:



7. To complete the Tickler, click the **View Consumer Record** option from the tickler flyout menu to navigate quickly to the Consumer record from the tickler or can complete a quick Search to navigate to the consumer's record.



8. Click the **Provider Selections** tab.

9. Click **File > Add Provider**. The Provider Selection Detail page opens.

The screenshot shows the 'Provider Selection Detail' page in the iConnect system. The header includes the iConnect logo, the user 'Alice Sheppard', the date '5/9/2018 1:27 PM', and the title 'Provider'. Below the header is a 'File' menu bar. The main form contains the following fields:

- Division ***: APD (dropdown)
- Selected By**: Buck, Jennifer (text field with '...' button, 'Clear' button, and 'Details' link)
- Selection Date**: 05/09/2018 (text field with calendar icon)
- Provider ***: WSC Agency1 (text field with '...' button, 'Clear' button, and 'Details' link). An arrow points to this field.
- Referral Type ***: Waiver Support Coordinator (dropdown with asterisk)
- Disposition ***: WSC Transfer In (dropdown)
- Disposition Date**: 05/09/2018 (text field with calendar icon)
- Provider Worker ***: Reed, Monica (text field with '...' button, 'Clear' button, and 'Details' link). An arrow points to this field.
- WSC Transfer Effective Date**: 05/01/2018 (text field with calendar icon). An arrow points to this field.
- WSC Transfer End Date**: (empty text field with calendar icon)
- Comments**: (empty text area with up/down arrows)

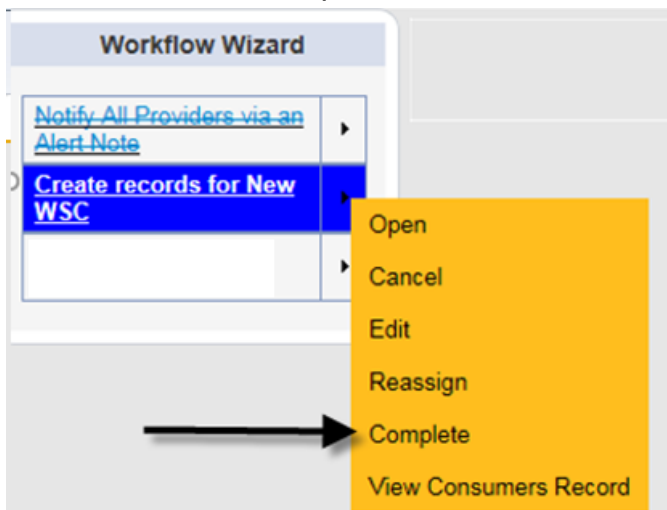
10. Update the following fields:

- Division = default to APD
- Selected by = defaults to Self
- Selection date = defaults to today
- Provider = select the ellipsis to search for and select the new WSC Agency
- Referral Type = Waiver Support Coordinator
- Disposition = WSC Transfer In

- g. Disposition Date = defaults to today
- h. Provider Worker = search for and select the new WSC Worker.
- i. WSC Transfer Effective Date = enter the effective date of the transfer

11. Click **File > Save and Close Provider**.

12. Upon completing the tasks outlined in the message tickler, navigate back to the workflow wizard screen. Click **Complete** from the tickler flyout menu. The tickler is marked as complete.



Add a new Planned Service for the new WSC, validate and create the authorization

1. Upon saving the Provider Selection Record with a Disposition = WSC Transfer In, a Workflow Wizard will trigger for the user with three Ticklers.
 - a. Add a new Planned Service for the new WSC, validate and create the Authorization.
 - b. On the effective date, update Primary Worker on the Division record to the new WSC
 - c. On the effective date, close Previous WSC's Provider Selection Record by changing the disposition to Closed. The end date and WSC-Transfer Out disposition were updated on the previous WSC's Provider Selection record in an earlier step for tracking purposes. This tickler is for the WSC to close the Previous WSC Provider Selection record which removes access to the consumer's record for the previous WSC.
2. From the open Workflow Wizard window click the **Add a new Planned Service for the new WSC, validate and create the authorization** tickler. The Plans list view displays.

opd iConnect John Sheppard | Plans
9/13/2018 3:14 PM

File

Workflow Wizard
Navigate to the Plans tab and add a Planned Service, validate, then create the Authorization.

Add a new Planned Service for the new WSC, validate and create the Authorization

On the effective date, close Previous WSC's Provider Selection record by changing the Disposition to Closed.

On the Effective Date update the Primary Worker on the new WSC record to the new WSC

Filters
Division

3 Plans record(s) returned - now viewing 1 through 3

	Division	Program	Cost Plan Creation Date	Closed Date	Worker	Status	Cost Plan Begin Date	Cost Plan End Date
<input type="checkbox"/>	APD	APD Waiver	09/10/2018		Buck, Jennifer	Draft	07/01/2018	06/30/2020
<input type="checkbox"/>	APD		06/01/2018		Buck, Jennifer	Draft		
<input type="checkbox"/>	APD	APD Waiver	04/01/2018		Buck, Jennifer	Draft	07/01/2018	06/30/2020

<< First < Previous Retrieve 15 Records at a time Next > Last >>

3. Click the APD waiver Plan. The Plan Information page displays.

4. Click the **Planned Services** subpage.

opd iConnect Alice Sheppard | Planned Services
5/9/2018 5:43 PM

File Tools

Plan Information

Planned Services

QSI Needs

Plan Notes

Filters
Max Amount

5 Planned Services record(s) returned - now viewing 1 through 5

Provider	Service Code	Service Description	Total No of Units	Unit Type	Rate	Max Amount	Begin Date	End Date	Auth ID	
	4250	Specialized Mental Health Counseling Assessment	1.0000	Units	\$128.21	\$128.21	04/01/2018	06/30/2018		<input type="checkbox"/>
APD Test Provider	4083	Life Skills Development - Level 2 (Supported Employment - Individual)	260.0000	15 mins	\$9.56	\$2,485.60	04/01/2018	06/30/2018		<input type="checkbox"/>
Generic CDC+ Provider	4446	Consumable Medical Supplies (non-CDC)	36.0000	Item	\$2.00	\$72.00	04/01/2018	04/09/2018		<input type="checkbox"/>

5. Click **File > Add Planned Service**.

6. A new Planned Service record opens. Update the following fields:

- Fiscal Year Choose the applicable fiscal year.
NOTE: Fiscal Years in iConnect are in yyyy format. This is different than the yy – yy FY format APD is used to. For example: 20 – 21 FY = 2021 in iConnect.
- Begin Date Enter the begin and End dates as the dates of service.
- End Date Enter the begin and End dates as the dates of service.
NOTE: The Start and End Dates of a Planned Service must be within the Cost Plan Begin and End Dates located on the Plan Information page.
- Index/SubObject Code: The ISO is an iConnect term that defines which 'bucket of money' the service is being paid from Statewide and by region.
 - WSCs will select their regional ISO, not 'Statewide.'
- Service Ratio: Select the correct ratio only if the service contains a ratio

- f. County: pulls from the consumer demographic page
- g. Geographic Differential: Select Geographic, Non-geographic or Monroe
- h. Provider Rate Type: Select Solo or Agency
- i. Service Code: Search for and select the service code.
- j. Unit Type auto populates when service code selected
- k. Unit Per Enter the identified number of units per period.
 - i. This value will vary depending on the service selected and can vary with time of year.
- l. Unit of Measure
- m. Total No of Units will auto-populate
- n. Provider ID: Search for and select the service provider if known at the time the planned service is added. If not known, can select Pending Provider. A valid provider must be selected before creating an authorization.
- o. Rate will auto populate and depending on the service code may or may not be editable.
- p. Max Amount will auto populate once the service code, rate and provider have been selected.
- q. Amount Requested = used by the Lead when the amount requested does not equal the amount approved
- r. Authorization Notes/Comments = enter notes. This is a required field. Text in this field will be visible on the Auth Service and printed authorization.
- s. Contract Number = enter if applicable.
- t. Non-Taxable = check if applicable.
- u. Planned Service Status = Proposed.

APD iConnect | **Planned Service** 5/1/2020 4:45 PM

File

Planned Services

Division: APD

Fiscal Year: 2021

Begin Date: 07/01/2020

End Date: 06/30/2021

Index/SubObject Code:

IndexCode	Index Description	SubObject	SubObject Description
Central	Central Region	Waiver	iBudget Waiver

Service Ratio: [v]

Consumer County: Miami-Dade

Geographic Differential: Geographic

Provider Rate Type: Solo

Service Code: G9012:UC

Service Description: (4270) Support Coordination

Unit Type: Month

Units Per: 1

Units of Measure: Month - Round Up

Total No of Units: 12

Provider ID: 14988

Provider: A Test Provider

Rate: \$148.69

Max Amount: \$1,784.28

Amount Requested:

Authorization Notes/Comments:

WSC comments visible on the authorization

7. Click **File > Save and Close Planned Service**.

8. Upon completing the tasks outlined in the message tickler, navigate back to the workflow wizard screen. Click **Complete** from the tickler flyout menu. The tickler is marked as complete.

APD iConnect | John Sheppard | **Plans** 9/13/2018 3:14 PM

File

Workflow Wizard

Navigate to the Plans tab and add a Planned Service, validate, then create the Authorization.

Add a new Planned Service for the new WSC, validate and create the Authorization

On the effective date, close Previous WSC's Provider Selection record by changing the Disposition to Closed.

On the Effective Date update the Primary Worker on the Division record to the new WSC.

Filters

Division: [v] [v] [v]

Search Reset

3 Plans record(s) returned - now viewing 1 through 3

Program	Cost Plan Creation Date	Closed Date	Worker	Status	Cost Plan Begin Date	Cost Plan End Date
Waiver	09/10/2018		Buck, Jennifer	Draft	07/01/2018	06/30/2020
Waiver	06/01/2018		Buck, Jennifer	Draft		
Waiver	04/01/2018		Buck, Jennifer	Draft	07/01/2018	06/30/2020

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Open

Cancel

Edit

Reassign

Complete

View Consumers Record

Close Previous WSC's Provider Selection Record

- Upon saving the Provider Selection Record with a Disposition = WSC Transfer In, a Workflow Wizard will trigger for the user with the following Ticklers to complete on the effective date of the new WSC. Similar ticklers were completed earlier when an end date was added to the Previous WSC's Provider Selection record for tracking

purposes, but these ticklers are closing the records, removing access for the previous WSC.

- a. On the effective date, update Primary Worker on the Division record to the new WSC. This tickler will trigger immediately but the user should not complete it until the effective date because the changes are effective immediately.
 - b. On the effective date, close Previous WSC's Provider Selection Record by changing the disposition to Closed. The end date was added to the previous WSC's Provider Selection record in an earlier step. This tickler is for the WSC to close the Previous WSC Provider Selection record. This tickler will trigger immediately but the user should not complete it until the effective date because the changes are effective immediately.
 - c. Add a new Planned Service for the new WSC, validate and create the Authorization.
2. Click the **On the effective date Close Previous WSC's Provider Selection Record by changing the Disposition to Closed** tickler. The Provider Selection list view displays.

The screenshot shows the iConnect interface for Provider Selections. The top bar includes the iConnect logo, user information (John Sheppard, 9/13/2018 3:06 PM), and the title "Provider Selections". Below the top bar is a "File" menu. The main content area is divided into a "Workflow Wizard" on the left and a "Filters" section on the right. The Workflow Wizard lists three steps: "Add a new Planned Service for the new WSC, validate and create the Authorization", "On the effective date, close Previous WSC's Provider Selection record by changing the Disposition to Closed." (highlighted in blue), and "On the Effective Date update the Primary Worker on the Division record to the new WSC". The Filters section shows a search criteria of "Disposition Not Equal To Closed" with a "Search" button. Below the filters, it states "12 Provider Selections record(s) returned - now viewing 1 through 12". A table displays the records with columns: Division, Selection Date, Provider, APD Vendor #, Provider Worker, Disposition, Deactivated Date, and LOS. The first record shown is for Division APD, Selection Date 07/18/2018, Provider WSC Agency1, Provider Worker Buck, Jennifer, and Disposition WSC Transfer Out.

Division	Selection Date	Provider	APD Vendor #	Provider Worker	Disposition	Deactivated Date	LOS
APD	07/18/2018	WSC Agency1		Buck, Jennifer	WSC Transfer Out		

3. Click the previous WSC Provider Selection Record. The Details page displays. Update the following fields:
 - a. Disposition = Closed
 - b. Disposition Date = defaults to current date but can be edited

Provider

Alice Sheppard
Last Updated by jibuck
at 5/9/2018 5:13:40 PM

File Word Merge

Provider

Provider Workers

Beds

Events

Track Disposition

Division * APD

Selected By Buck, Jennifer ... Clear Details

Selection Date 04/30/2018

Provider * WSC Agency1 Details

Referral Type * Waiver Support Coordinator

Disposition * Closed

Disposition Date 04/30/2018

WSC Transfer Effective Date 05/09/2018

WSC Transfer End Date

Comments

Deactivated Date 05/09/2018

4. Click **File > Save and Close Provider**

5. Navigate back to the workflow wizard screen. Click **Complete** from the tickler flyout menu. The tickler is marked as complete.

Workflow Wizard

Add a new Planned Service for the new WSC, validate and create the Authorization

On the effective date, close Previous WSC's Provider Selection record by changing the Disposition to Closed.

On the Effective Date update the Primary Worker on the Division record to the new WSC

Document WSC Transition Meeting

Open

Cancel

Edit

Reassign

Complete

View Consumers Record

Update the Primary Worker

Upon saving the Provider Selection Record with a Disposition = WSC Transfer In, a Workflow Wizard will trigger for the user with the following Ticklers to complete on the effective date of the new WSC. Similar ticklers were completed earlier when an end date was added to the Previous WSC's Provider Selection record, but these ticklers are closing the records, removing access for the previous WSC.

- a. On the effective date, update Primary Worker on the Division record to the new WSC. This tickler will trigger immediately but the user should not complete it until the effective date because the change is effective immediately.
- b. On the effective date, close Previous WSC's Provider Selection Record by changing the disposition to Closed. The end date was added to the previous WSC's Provider Selection record in an earlier step. This tickler is for the WSC to close the Previous WSC Provider Selection record. This tickler will trigger immediately but the user should not complete it until the effective date because the change is effective immediately.
- c. Add a new Planned Service for the new WSC, validate and create the Authorization.

The screenshot shows the iConnect Workflow Wizard interface. At the top, the iConnect logo is on the left, and the text "Welcome, Jennifer Buck | Workflow Wizard" and "9/13/2018 2:13 PM" is on the right. Below the header is a "File" menu bar. The main content area is titled "Workflow Wizard" and contains a list of three tasks, each with a right-pointing arrow icon:

Workflow Wizard	
Add a new Planned Service for the new WSC, validate and create the Authorization	▶
On the effective date, close Previous WSC's Provider Selection record by changing the Disposition to Closed.	▶
On the Effective Date update the Primary Worker on the Division record to the new WSC	▶

1. Click the **On the Effective date, update Primary Worker** tickler. The Division list view displays.

opd iConnect John Sheppard | Divisions
9/13/2018 3:02 PM

File

Workflow Wizard

- [Add a new Planned Service for the new WSC, validate and create the Authorization](#)
- [On the effective date, close Previous WSC's Provider Selection record by changing the Disposition to Closed.](#)
- [On the Effective Date update the Primary Worker on the Division record to the new WSC](#)**

Filters

Disposition Not Equal To Closed AND

Open Date Greater Than AND

Division +


2 Divisions record(s) returned - now viewing 1 through 2

Division	Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
FOR	Forensic Open	Buck, Jennifer		08/03/2018		41
APD	APD Eligible - Non Waiting List	Buck, Jennifer	Buck, Jennifer	05/23/2018		113

<< First < Previous Retrieve 15 Records at a time Next > Last >>

2. Click the **APD Eligible – Waiver** Division record. The Division details page opens. Update the following fields:
 - a. Primary Worker = select the ellipsis to search for and select the new WSC Worker.
 - b. A notification will display informing the user changing the Primary Worker on the Division record will reassign all pending assessments, authorizations, plans, and ticklers from the old WSC to the new WSC. Click **OK** to accept.

Changing the primary worker will update the worker designated on all pending assessments, authorizations, plans, plan reviews, ticklers, placements, payments, and any child-linked open/close records. Do you want to continue?



Alice Sheppard
 Last Updated by j buck
 at 5/9/2018 3:04:07 PM

Division






File **Word Merge**

Division


Events

Track Disposition

Events

Division *	APD		
Disposition *	APD Eligible - Waiver ▼		
Disposition Date	05/09/2018		
Open Date	04/03/2018		
Data Entry Date	04/03/2018		
Primary Worker *	Reed, Monica	...	Clear Details
Secondary Worker	Buck, Jennifer	...	Clear Details
Application Received Date *	04/01/2018		
Interested in ICF/IID	▼		
Age Category at Time of Application *	6 and Above ▼		
Application Pended Due Date			
Eligibility Documentation Complete Date			

Referral Source

Referral Date	04/03/2018	
Referral Source	▼	
Referral Reason	▼	

3. Click **File** > **Save and Close Division**.



Tip

When the Primary Worker is updated on the Division page, the Primary Worker on the Programs page is also updated.

4. Upon completing the tasks outlined in the message tickler, navigate back to the workflow wizard screen. Click **Complete** from the tickler flyout menu. The tickler is marked as complete.

The screenshot shows the 'Workflow Wizard' interface. On the left, there are three steps: 'Add a new Planned Service for the new WSC, validate and create the Authorization', 'On the effective date, close Previous WSC's Provider Selection record by changing the Disposition to Closed.', and 'On the Effective Date update the Primary Worker on the Division record to the new WSC'. The third step is highlighted in blue. A context menu is open over the table, showing options: Open, Cancel, Edit, Reassign, Complete (highlighted with a black arrow), and View Consumers Record.

Filters

Disposition: Not Equal To Closed AND
 Open Date: Greater Than AND
 Division: +

Search Reset

2 Divisions record(s) returned - now viewing 1 through 2

Division	Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
	Basic Open	Buck, Jennifer		08/03/2018		41
	Eligible - Non Waiting List	Buck, Jennifer	Buck, Jennifer	05/23/2018		113

First < Previous Retrieve 15 Records at a time Next > Last >>

WSC Selection – Same Agency/Provider

Depending on the reason for the change the Region staff or the old WSC will work with the consumer to select a new WSC and effective date. A note is added in iConnect to begin the reassignment process. **NOTE:** this is an area of organizational change. Regions will be involved to ensure caseload capacity is not exceeded.

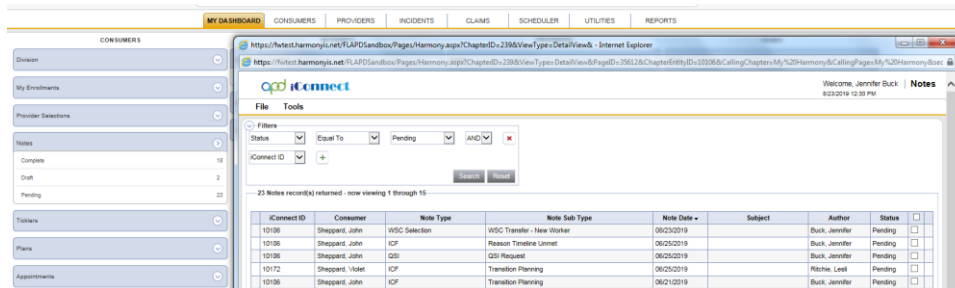
New WSC Request - Add a Note

1. To begin, log into iConnect and set Role = Region Waiver Workstream Worker or WSC. Click **Go**.
2. Navigate to the consumer's record and click the **Notes** tab > click **File > Add Notes**.
3. The Note details page displays. Update the following fields.
 - a. Division = APD
 - b. Note Type = WSC Selection
 - c. Note Subtype = WSC Transfer – New Worker
 - d. Status = Pending
 - e. Note = details of the requested change
 - f. Attach all supporting documentation

The screenshot shows the 'Notes Details' form in the iConnect system. The form is titled 'Notes Details' and contains several fields: Division (APD), Note By (Buck, Jennifer), Note Date (05/04/2018), Program/Provider, Note Type (WSC Selection), Note Sub-Type (WSC Transfer - New Worker), and Description (Consumer requested to change WSC. Same agency). Two black arrows point to the Note Type and Note Sub-Type fields.

4. Click **File > Save and Close Notes**
5. The Consumer has selected new WSC. Update the Note with a **document** demonstrating the consumer was given choice within the agency. Then send the Note for Region Review before accepting the case.
6. The Region staff or WSC will navigate to the consumer's Record and select the **Notes** tab. Select the **WSC Selection Note** to open. The Note Details page displays. Update the following fields:
 - a. Note Type = remains WSC Selection
 - b. Sub Type = remains WSC Transfer – Worker
 - c. Note = details of the selected WSC and request for region review before accepting the case.
 - d. Status = remains Pending
 - e. Recipients = Region Waiver Lead
 - f. Attachment = search for and select the saved **document** and attach it to the note.

7. The Region Waiver Lead will monitor My Dashboard for incoming Notes. The Region Waiver Lead will locate the WSC Selection Note in the Notes queue and select it to open.



8. The Region Waiver Lead will also check the Caseload report monthly to ensure there are no limit violations. This report will be accessed from an APD SharePoint site.
9. The Region Waiver Lead will approve or not approve based on the requested WSC's case load and will update the Note with his/her decision. Update the following fields:
- Note Type = remains WSC Selection
 - Sub Type = change to WSC Transfer Approved or WSC Transfer Not Approved
 - Note = decision details to approve or not approve the case load
 - Status = Complete
 - Recipients = Old WSC, Agency Owner/Manager, Waiver Workstream Worker

The screenshot displays the iConnect Case Management Module interface. At the top, the logo 'iConnect' is visible on the left, and user information 'John Sheppard' and 'Notes' are on the right. Below the header, there are tabs for 'File', 'Tools', and 'Reports'. The main form area contains the following fields:

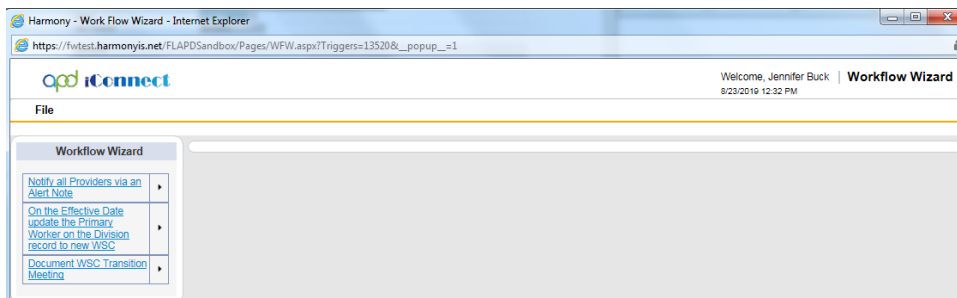
- Division ***: APD (dropdown)
- Note By ***: Buck, Jennifer
- Note Date ***: 08/23/2019 (calendar icon)
- Program/Provider**: (dropdown)
- Note Type ***: WSC Selection (dropdown)
- Note Sub-Type**: WSC Transfer - New Worker (dropdown)
- Description**: (text area)
- Note**: A text area containing the message: "On 8/23/2019 at 12:32 PM, Jennifer Buck wrote: Approving the case load". Below this is a "New Text" input field and an "Append Text to Note" button.
- Status ***: Complete (dropdown)
- Date Completed**: 08/23/2019 (calendar icon)

Below the form fields, there is an "Attachments" section with a link "Add Attachment". Below that is a table with columns: Document, Description, Category, and Action. The table is currently empty, with the text "There are no attachments to display" below it.

At the bottom, there is a "Note Recipients" section with a link "Add Note Recipient:" and a "Clear" button. Below this is a table with columns: Name, Date Sent, Date Read, Status, Date Signed, and an action link "Remove". The table contains one row:

Name	Date Sent	Date Read	Status	Date Signed	Action
Buck, Jennifer	08/23/2019		Unread		Remove

10. The old WSC will monitor My Dashboard for incoming notes for notification that the Waiver Lead has approved or not approved the case load for the new WSC.
 - a. When approved, the old WSC will complete the transition meeting with the new WSC. Proceed to the [WSC Transition Meeting](#) section.
 - b. When not approved, the old WSC will work with the consumer to select a new WSC and effective date.
11. Saving the WSC Selection Note with SubType = WSC Transfer Approved and Status = Complete, triggers a Workflow Wizard for the user/Region Waiver Lead, with the following ticklers:
 - a. Notify all Providers via an Alert Note. The Waiver Lead will complete this tickler immediately.
 - b. On the Effective Date update the Primary Worker on the Division record to new WSC. The Waiver Lead will reassign this tickler to the new WSC.
 - c. Document WSC Transition Meeting. The Waiver Lead will reassign this tickler to the new WSC.

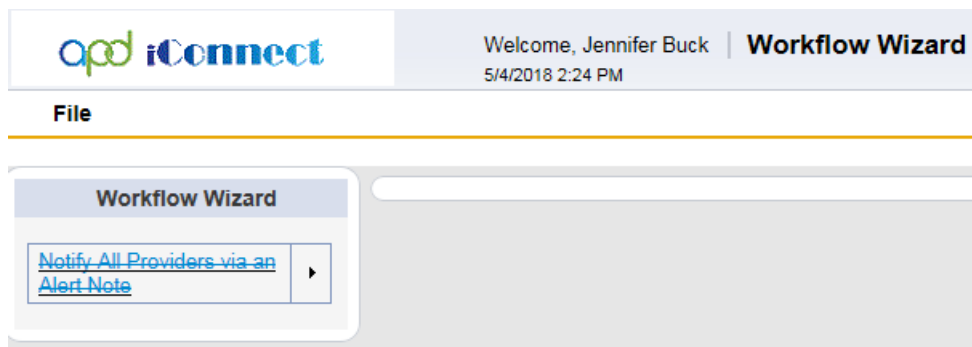


Notify All Providers via an Alert Note

1. Saving the WSC Selection Note with SubType = WSC Transfer – New Worker and Status = Complete, triggers the **Notify all Providers via an Alert Note** tickler. Select it to open. The Notes Detail page displays.
2. Update the following fields:
 - a. Division = APD
 - b. Note Type = WSC Selection
 - c. Note Subtype = Notification of WSC Change
 - d. Note = Add the message you want the providers to see each time they login into the account.
 - e. Status = Alert

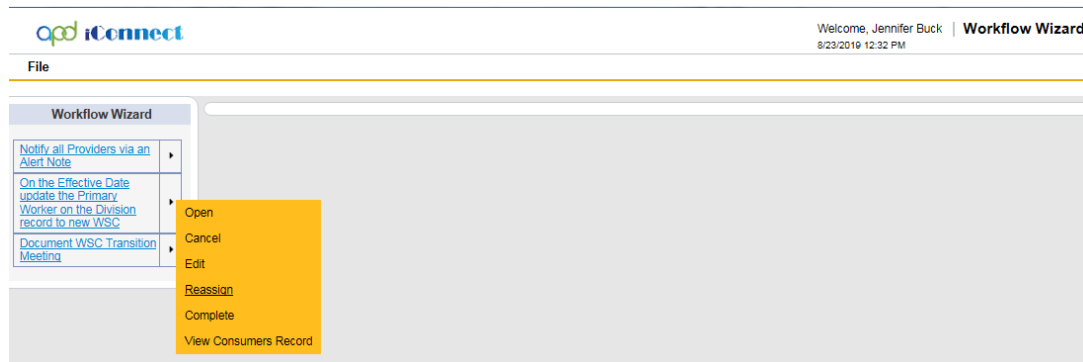
Notes Details	
Division *	APD
Note By *	Buck, Jennifer
Note Date *	05/04/2018
Program/Provider	
Note Type *	WSC Selection
Note Sub-Type	Notification of WSC Change
Description	
Note	Add the message you want the providers to see each time they login into the account.
Status *	Alert
Date Completed	

3. Click **File > Save Notes**. The Tickler is marked as complete.

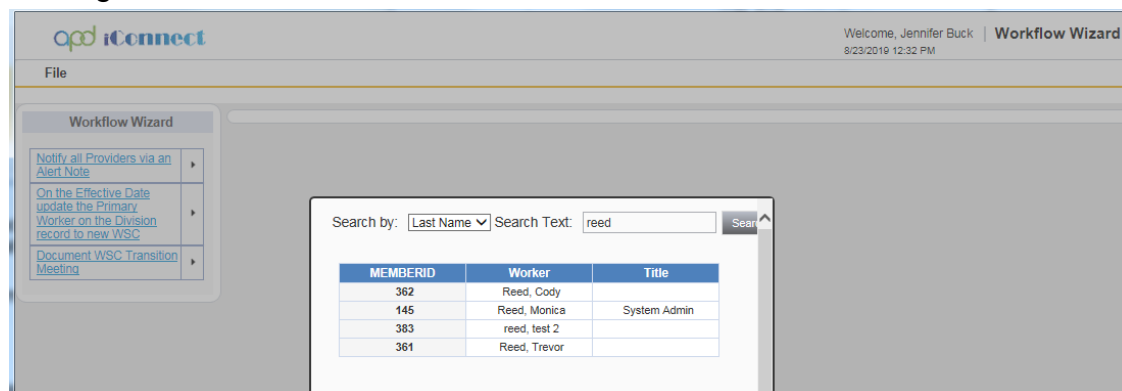


Update Primary Worker

1. Saving the WSC Selection Note with SubType = WSC Transfer – New Worker and Status = Complete, triggers the **On the Effective Date update the Primary Worker on the Division record to new WSC** tickler. The Waiver Lead will reassign it to the new WSC.
2. From the tickler flyout menu, select **Reassign**.



3. Search for and select the new WSC name. When select, the tickler is automatically reassigned.



4. The new WSC will monitor **My Dashboard** for incoming ticklers.

5. Click the **On the effective date, update the Primary Worker on the Division record to the new WSC** tickler. The consumer's Divisions list view grid will display.

File

Workflow Wizard

On the Effective Date update the Primary Worker on the Division record to new WSC

Update Primary Worker

Document WSC Transition Meeting

Filters

Disposition Not Equal To Closed AND

Open Date Greater Than AND

Division +

Search Reset

2 Divisions record(s) returned - now viewing 1 through 2

Division	Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
FOR	Tracking	Tierney, Jacqueline		05/02/2018		40
APD	APD Eligible - PESG Assigned	Reed, Monica	Tierney, Jacqueline	04/04/2018		68

<< First < Previous Retrieve 15 Records at a time Next > Last >>


6. On the effective date of the new WSC, the new WSC will update the primary worker on the Division which will automatically update the worker on the associated Program records and Provider Selection records.
7. Select the **APD Eligible – Waiver** record.
8. The Division details page displays. Update the following fields:
- a. Primary Worker = select the ellipsis to search for and select the new WSC Worker.
 - b. A notification will display informing the user changing the Primary Worker on the Division record will reassign all pending assessments, authorizations, plans, and ticklers from the old WSC to the new WSC. Click **OK** to accept.

Changing the primary worker will update the worker designated on all pending assessments, authorizations, plans, plan reviews, ticklers, placements, payments, and any child-linked open/close records. Do you want to continue?

OK

Cancel

- b. Secondary Worker = Region Waiver Lead



Alice Sheppard
 Last Updated by jibuck
 at 5/9/2018 5:22:54 PM

Division

File
Word Merge

Division

Events

Track Disposition

Events

Division *	APD		
Disposition *	APD Eligible - Waiver ▼		
Disposition Date	05/09/2018		
Open Date	04/03/2018		
Data Entry Date	04/03/2018		
Primary Worker *	Worker, Applicable	...	Clear Details
Secondary Worker	Buck, Jennifer	...	Clear Details
Application Received Date *	04/01/2018		
Interested in ICF/IID	▼		
Age Category at Time of Application *	6 and Above ▼		
Application Pended Due Date			
Eligibility Documentation Complete Date			

Referral Source

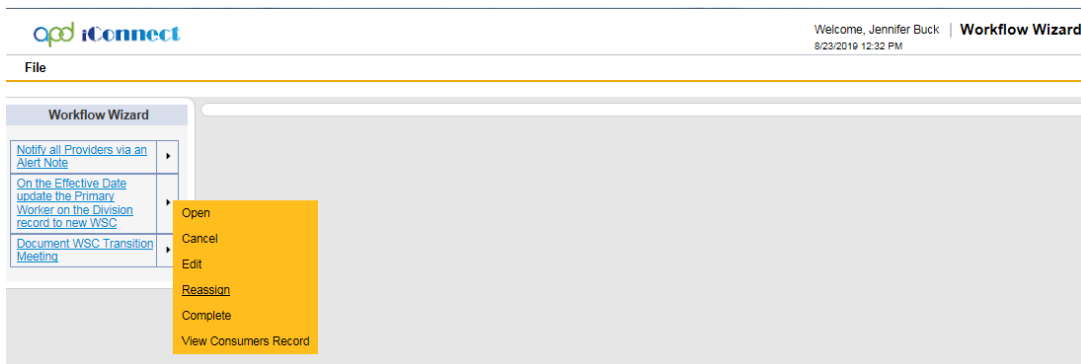
Referral Date	04/03/2018		
Referral Source	▼		
Referral Reason	▼		

9. Click **File > Save and Close Division**.

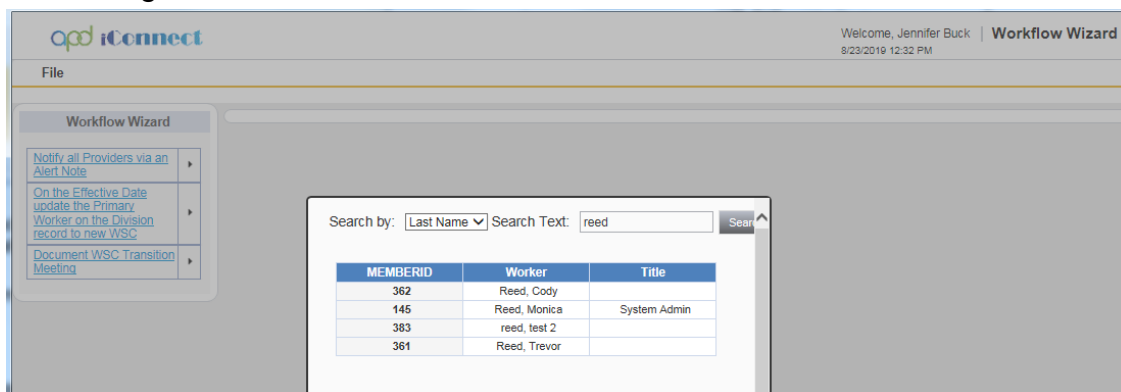
10. Upon completing the tasks outlined in the tickler, navigate back to the workflow wizard screen. Click **Complete** from the tickler flyout menu. The tickler is marked as complete.
11. When the primary worker on the division record is changed on the effective date, the worker on the provider selection record will update automatically to the new WSC and the previous worker/old WSC on the provider selection record will close automatically.

WSC Transition Meeting

1. Saving the WSC Selection Note with SubType = WSC Transfer – New Worker and Status = Complete, triggers the **Document WSC Transition Meeting** tickler. The Waiver Lead will reassign it to the new WSC.
2. From the tickler flyout menu, select **Reassign**.



3. Search for and select the new WSC name. When select, the tickler is automatically reassigned.



4. The new WSC will monitor **My Dashboard** for incoming ticklers. Locate the **Document WSC Transition Meeting** tickler. Select to open the Notes detail page. Once the transition process is complete, the new WSC will complete this tickler by adding a Note confirming the transition is complete. For now, it can be closed.
5. As part of the WSC Transition process, the previous WSC will meet and discuss the Consumer case with the new WSC.
6. The previous WSC will mark the Person-Centered Support Plan form as complete, making it ready only. The new WSC will create a new Person-Centered Support Plan duplicated from the one completed by the previous WSC.
7. The previous WSC will navigate to the consumer's record and click on the Forms tab. Click the **Person-Centered Support Plan** form with Status = Open.

MY DASHBOARD CONSUMERS

Kastner, Martin (209726)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User
Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Claim

Filters
Form
Search Reset

2 Consumers Forms record(s) returned - now viewing 1 through 2

Form	Review	Review Date	Worker	Division	Status
Person-Centered Support Plan eff. 11/4/2021	Initial	12/14/2021	Worker_16248, Training	APD	Complete
Person-Centered Support Plan eff. 11/4/2021	Initial	11/03/2022	Brown-Fenier, Mollie	APD	Open

First Previous Records per page: 15 Next Last

8. Update the following fields:
 - a. Review the form and ensure it is complete.
 - b. Change the Status = Complete

9. Click **File > Save and Close Forms**.

iConnect

Alice Sheppard
Last Updated by jBuck
at 8/10/2018 3:19:49 PM

Forms

File Reports

Copy Shared Response
History
Duplicate Assessment
Spell Check
Save Forms
Save and Close Forms
Print
Close Forms

Worker * Buck, Jennifer Clear Details
Status * Complete
Provider/Program * WSC Agency1 Details
Approved Date 09/26/2018

PERSON-CENTERED SUPPORT PLAN

Support Plan Effective Date* 05/01/2018
Is the Consumer 18 or over? Yes
Supported Living Need? No

10. The new WSC will use the **Duplicate Assessment** feature to copy information such as the social history from the Person-Centered Support Plan completed by the previous WSC into a new Person-Centered Support Plan for the new WSC. The new WSC will update all section of the support plan with new information and change the effective date of the plan.
11. To do so, with the Person-Centered Support Plan created from the previous WSC opened, click **File > Duplicate Assessment**. A notification window displays. Click OK. The new Person-Centered Support Plan form that is an exact copy of the existing Person-Centered Support Plan form is displayed.

The screenshot shows the iConnect Case Management System interface. The top header displays the iConnect logo and user information: Alice Sheppard, Last Updated by Buck at 7/5/2016 2:30:41 PM. A left sidebar contains a 'File' menu with options: Copy Shared Response, History, Duplicate Assessment, Spell Check, Save Forms, Save and Close Forms, Print, and Close Forms. An arrow points to 'Save and Close Forms'. The main area displays a 'PERSON CENTERED SUPPORT PLAN' form. Fields include: Initial (dropdown), 07/05/2018 (date), APD (dropdown), Worker (Buck, Jennifer), Status (Draft), Provider/Program (dropdown), and Approved Date. Below the plan title, 'Support Plan Effective Date' is 05/01/2018. A section titled 'My Waiver Support Coordinator' contains fields for WSC Name (Buck, Jennifer), WSC Agency Name, and WSC Phone Number.

12. Update the following fields:

- In the Form header, change the **Review Type** = Annual.
- Update the support plan effective date.
- Make updates to goals, needs, and other important factors.

13. When finished, change the **Status** = Open. Click **File** > **Save and Close Forms**.

14. Following the WSC Transition meeting with the Consumer, the WSC will locate the **Document WSC Transition Meeting** tickler from **My Dashboard**. Select it to open.

15. A new Consumer Note record opens. Update the following fields:

- Division = APD
- Note Type = WSC Selection
- Note Subtype = WSC Transition Note
- Note = Add details recording the meeting with the Consumer
- Status = Complete

The screenshot shows the iConnect system interface. At the top, the logo 'iConnect' is visible on the left, and the user 'Alice Sheppard' is logged in on the right, with the date '5/9/2018 7:38 PM' and the 'Notes' tab selected. Below the header, there is a 'File' and 'Tools' menu. On the left side, a 'Workflow Wizard' panel is visible, with a button labeled 'Document WSC Transition Meeting'. The main area displays the 'Notes Details' form. The form fields are as follows:

Notes Details	
Division *	APD
Note By *	Buck, Jennifer
Note Date *	05/09/2018
Program/Provider	
Note Type *	WSC Selection
Note Sub-Type	WSC Transition Note
Description	
Note	Add details recording the meeting with the Consumer
Status *	Complete
Date Completed	05/09/2018

Arrows in the original image point to the 'Note Type', 'Note Sub-Type', and 'Status' fields, indicating they are the focus of the current step.

16. Click **File > Save Note**.

17. The tickler is marked as complete.

Inter-region Transfer on Pre-Enrollment

The Region Office may receive a request to transfer a Consumer on the Pre-Enrollment to a different Pre-Enrollment Support Coordinator due to a pending move or a new address.

1. To begin, log into iConnect and set Role = Pre-Enrollment Workstream Worker. Click **Go**.
2. Navigate to the consumer's record, click on the **Notes** tab.
3. Click **File > Add Notes**.

The screenshot shows the iConnect system interface. At the top, the user is logged in as Alice Sheppard, with a 'Notes' link and a 'Sign Out' button. The main navigation bar includes 'File', 'Tools', 'Reports', 'Ticklers', and 'View Consumer Incident'. Below this, a sub-navigation bar shows 'MY DASHBOARD', 'CONSUMERS', 'PROVIDERS', 'INCIDENTS', 'CLAIMS', and 'REPORTS'. The 'CONSUMERS' tab is active, displaying a list of consumers. The consumer 'Sheppard, Alice (10053)' is selected. A tabbed interface below the consumer name shows various tabs: 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation', 'Contacts', 'Consumer Module User', 'Demographics', 'Divisions', 'Consumer Budgets', 'Programs', 'Provider Selections', 'SANS', 'Notes', 'Forms', 'Appointments', and 'Plans'. The 'Notes' tab is highlighted, and an arrow points to it. A filter box on the left shows 'Note Date' with a dropdown and a search button. Below the filter box, it says '45 Notes record(s) returned - now viewing 1 through 15'.

4. The Note details page displays. Update the following fields:
- Division = APD
 - Note Type = Central Record Transfer
 - Note Subtype = Pending Central Record Transfer
 - Note recipient = select the ellipsis to search for and select the Pre-Enrollment Workstream Lead at the Receiving Region
 - Status = Pending
 - Attach all supporting documentation

The screenshot shows the 'Notes Details' form. At the top, it says 'An asterisk (*) indicates a required field'. The form has the following fields: 'Division' (APD), 'Note By' (Baer, Sylvia), 'Note Date' (04/09/2024), 'Program/Provider' (empty), 'Note Type' (Central Record Transfer), 'Note Sub-Type' (Pending Central Record Transfer), 'Description' (Pending Central Record Transfer), 'Note' (a rich text editor with the text 'Region Office has received a request to transfer a Consumer on Pre-Enrollment'), and 'Status' (Pending). Arrows point to the 'Note Type', 'Note Sub-Type', and 'Status' fields, indicating they are being updated.

5. Click **File > Save and Close Notes**.

6. The Region Pre-Enrollment Workstream Lead will monitor his/her My Dashboard > Notes queue.

Quick Search: Consumers Last Name [ADVANCED SEARCH](#)

MY DASHBOARD CONSUMERS PROVIDERS

CONSUMERS

Division

Provider Selections

Notes

Complete	12
Pending	1

PROVIDERS

TASKS

Links

- iConnect eLearning Library
- iConnect Help Desk

My Management

- Current Active Cases
- DOD OpenClose Open List

7. Click the **Central Record Transfer** Note to open it.

Filters

Status Equal To Pending AND

iConnect ID

8 Notes record(s) returned - now viewing 1 through 8

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10053	Sheppard, Alice	Central Record Transfer	Pending Central Record Transfer	05/09/2018		Buck, Jennifer	Pending
10053	Sheppard, Alice	Safety Plan	Consult Requested	04/27/2018		Buck, Jennifer	Pending
10053	Sheppard, Alice	Crisis	MCM/ABA Crisis Report Request	04/25/2018		Buck, Jennifer	Pending
10053	Sheppard, Alice	Crisis	ROM Review	04/25/2018		Buck, Jennifer	Pending
10053	Sheppard, Alice	Waiver Enrollment	Waiver Enrollment Request	04/25/2018		Buck, Jennifer	Pending
10043	Smith, Marianne	Supported Employment		04/13/2018	SE Services Exceeded 90 Days	Buck, Jennifer	Pending
10053	Sheppard, Alice	Waiver Disenrollment		04/09/2018		Buck, Jennifer	Pending
10053	Sheppard, Alice	Waiver Enrollment	Waiver Enrollment Request	04/04/2018		Buck, Jennifer	Pending

8. The Note Details page displays. Update the following fields:
- Sub Type = Central Record Transfer Completed
 - Note = add a summary of the transfer assignment and Append Text to Note.
 - Note Recipient = select the ellipsis to search for and select the Pre-Enrollment Support Coordinator in the Receiving Region.
 - Status = Complete

File Tools

Notes

An asterisk (*) indicates a required field

Notes Details

Division * APD ▾

Note By * Baer, Sylvia

Note Date * 04/09/2024 📅

Program/Provider ▾

Note Type * Central Record Transfer ▾

Note Sub-Type → Central Record Transfer Completed ▾

Description Central Record Transfer Completed

Note

On 4/9/2024 at 10:41 AM, Sylvia Baer wrote:
Region Office has received a request to transfer a Consumer on Pre-Enrollment
On 4/9/2024 at 10:42 AM, Sylvia Baer wrote:
assigned to new Pre-Enrollment Support Coordinator

New Text

B *I* U 16px ▾ A ▾

Append Text to Note

Status * → Complete ▾

9. Click **File > Save and Close Notes**.

10. Navigate to the Consumer record and click the **Division** tab.

opd itconnect

Martin Kastner
Last Updated by sylvia.baer@apdcares.org
at 4/8/2024 4:37:01 PM

Divisions Sign Out

Role
Region Pre-Enrollment Workstream Lead ▾ GO

File Tickers Word Merge

Quick Search: Consumers ▾ Last Name ▾ GO ADVANCED SEARCH

MY DASHBOARD **CONSUMERS** PROVIDERS UTILITIES CASES

Kastner, Martin (209730)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics **Divisions** Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Paye

Filters

Disposition ▾ Not Equal To ▾ Closed ▾ AND ▾ X

Open Date ▾ Greater Than ▾ MM/DD/YYYY 📅 AND ▾ X

Division ▾ +

Search Reset

1 Consumers Divisions record(s) returned - now viewing 1 through 1

Division	Disposition	Primary Worker	Secondary Worker	Open Date ▾	Close Date	LOS
APD →	APD Eligible - Walver	Baer, Sylvia	Brown-Ferrier, Mollie	01/01/2020		1560

First Previous Records per page 15 Next Last

11. Select the APD Division record to open it.

12. The Division Details page displays. Update the following fields:

- Primary Worker = new Pre-Enrollment Support Coordinator

- b. A notification will display informing the user changing the Primary Worker on the Division record will reassign all pending assessments, authorizations, plans, and ticklers from the old WSC to the new WSC. Click **OK** to accept.

Changing the primary worker will update the worker designated on all pending assessments, authorizations, plans, plan reviews, ticklers, placements, payments, and any child-linked open/close records. Do you want to continue?

OK

Cancel

- c. Secondary Worker = Clinical Workstream Lead

File Word Merge

Division

Alice Sheppard | Division
Last Updated by jibuck
at 5/9/2018 5:22:54 PM

Events

Division * APD

Disposition * APD Eligible - Waiver

Disposition Date 05/09/2018

Open Date 04/03/2018

Data Entry Date 04/03/2018

Primary Worker * Worker, Applicable

Secondary Worker Buck, Jennifer

Application Received Date * 04/01/2018

Interested in ICF/IID

Age Category at Time of Application * 6 and Above

Application Pended Due Date

Eligibility Documentation Complete Date

Referral Source

Referral Date 04/03/2018

13. Click **File > Save and Close Division**.

Inter-region Transfer on Waiver

Prompted by an Address Change Request from the Consumer, the WSC will update the consumer's demographics record with the new address. If there is a need to transfer the consumer to a different region, the WSC should determine if Residential Placement is necessary. If the Consumer requires Residential Placement, proceed to the Residential Planning section. If not, the Receiving Region Office will be notified of the incoming Consumer via a Note.

Notify the Receiving Region Office via a Note

1. To begin, log into iConnect and set Role = WSC/CDC. Click **Go**.

The screenshot shows the iConnect login page. At the top, it says 'Welcome, Jennifer Buck' and '5/9/2018 8:09 PM'. There is a 'My Dashboard' link and a 'Sign Out' link. On the right, there is a 'Role' dropdown menu set to 'WSC/CDC' and a 'GO' button. An arrow points to the 'GO' button. Below the login area, there is a 'File' tab and a search bar with 'Quick Search' and 'Consumers' dropdown. There is also a 'Participating' checkbox and a 'GO' button. To the right of the search bar is a link to 'ADVANCED SEARCH'. At the bottom, there is a navigation bar with tabs: 'MY DASHBOARD', 'CONSUMERS', 'PROVIDERS', 'INCIDENTS', 'CLAIMS', and 'SCHEDULER'.

2. Navigate to the consumer's record, click on the **Notes** tab.

3. Click **File > Add Notes**.


The screenshot shows the iConnect consumer record page for Alice Sheppard (10053). The user is logged in as Alice Sheppard, Role: Regional Staff. The 'Notes' tab is highlighted with an arrow. Below the tabs, there is a navigation bar with tabs: 'MY DASHBOARD', 'CONSUMERS', 'PROVIDERS', 'INCIDENTS', 'CLAIMS', and 'REPORTS'. Below the navigation bar, there is a list of tabs for the consumer record: 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation', 'Contacts', 'Consumer Module User', 'Demographics', 'Divisions', 'Consumer Budgets', 'Programs', 'Provider Selections', 'SANS', 'Notes', 'Forms', 'Appointments', 'Plans', 'Pre-Enrollment', and 'Payers'. The 'Notes' tab is highlighted. To the left of the tabs, there is a 'Filters' section with a 'Note Date' dropdown and a 'Search' button.

4. The Note details page displays. Update the following fields:
 - a. Division = APD
 - b. Note Type = Central Record Transfer
 - c. Note Subtype = Pending Central Record Transfer
 - d. Note recipient = select the ellipsis to search for and select the Waiver Workstream Lead at the Receiving Region
 - e. Status = Pending

f. Attach all supporting documentation

File Tools

An asterisk (*) indicates a required field

Notes Details	
Division *	APD ▼
Note By *	Baer, Sylvia ▼
Note Date *	04/09/2024 
Program/Provider	▼
Note Type *	Central Record Transfer ▼*
Note Sub-Type	Pending Central Record Transfer ▼
Description	Pending Central Record Transfer
Note	<div><div>B I U 16px A ▼</div><div>Region Office has received a request to transfer a Consumer on Pre-Enrollment</div></div>
Status *	Pending ▼
Date Completed	

5. Click **File > Save and Close Notes**.
6. The Receiving region will send the WSC Selection form to the Consumer and document it was sent in iConnect.
7. From the Notes tab, click **File > Add Note**.
8. The Note details page displays. Update the following fields:
 - a. Division = APD
 - b. Note Type = WSC Selection
 - c. Note Subtype = Selection Form Sent
 - d. Status = Pending

opd iConnect Alice Sheppard | Notes
5/9/2018 8:19 PM

File Tools

Notes Details

Division * APD ▼

Note By * Buck, Jennifer ▼

Note Date * 05/09/2018

Program/Provider ▼

Note Type * WSC Selection ▼*

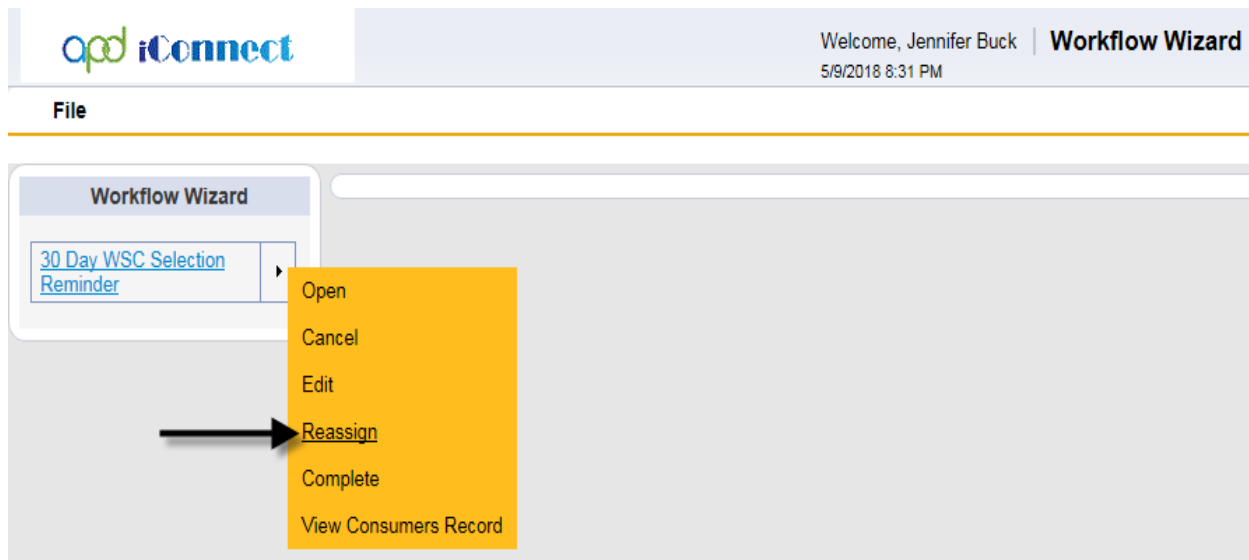
Note Sub-Type Selection Form Sent ▼

Description

Note

Sent form to consumer to select new WSC in the new region

9. Click **File > Save and Close Notes**.
10. Upon saving a Note with Note Sub Type = Selection Form Sent, a Workflow Wizard will trigger with the following tickler:
 - a. 30-day WSC Selection Reminder. The WSC should reassign this tickler to the Waiver Workstream Lead if the Consumer has already relocated to the receiving region.
11. From the tickler flyout menu, click **Reassign**.



12. Search for and select the receiving Waiver Workstream Lead worker record and the tickler is reassigned.
13. This tickler is visible to the Waiver Workstream Lead on the My Dashboard > Ticklers queue.
14. In 30 days when the tickler is due, the Waiver Workstream Lead will check if the Consumer has selected the WSC indicated by the existence of a WSC Selection/WSC Inter-Region Transfer Note. If the selection has been made, the Waiver Workstream Lead will cancel the tickler by selecting Cancel from the tickler flyout menu.
15. If Consumer has not notified regional office of his/her newly selected Waiver Support Coordinator, the Waiver Workstream Lead will make the selection on the behalf of the Consumer.

Consumer selects new WSC

The Consumer notifies the receiving regional office of his/her newly selected Waiver Support Coordinator.

1. To begin, log into iConnect and set Role = Region Waiver Workstream Lead. Click **Go**.

File

Quick Search

Consumers

Last Name

GO

ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER REPORTS

2. Navigate to the Consumer Record and click the **Notes** tab.

File Tools Reports Ticklers View Consumer Incident

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS REPORTS

Sheppard, Alice (10053)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SANs Notes Forms Appointments Plans

Filters

Note Date

Search Reset

3. Click **File > Add Note**.
4. The Note detail page displays. Update the following fields:
 - a. Division = APD
 - b. Note Type = WSC Selection
 - c. Note Subtype = WSC Inter-Region Transfer
 - d. Status = Complete

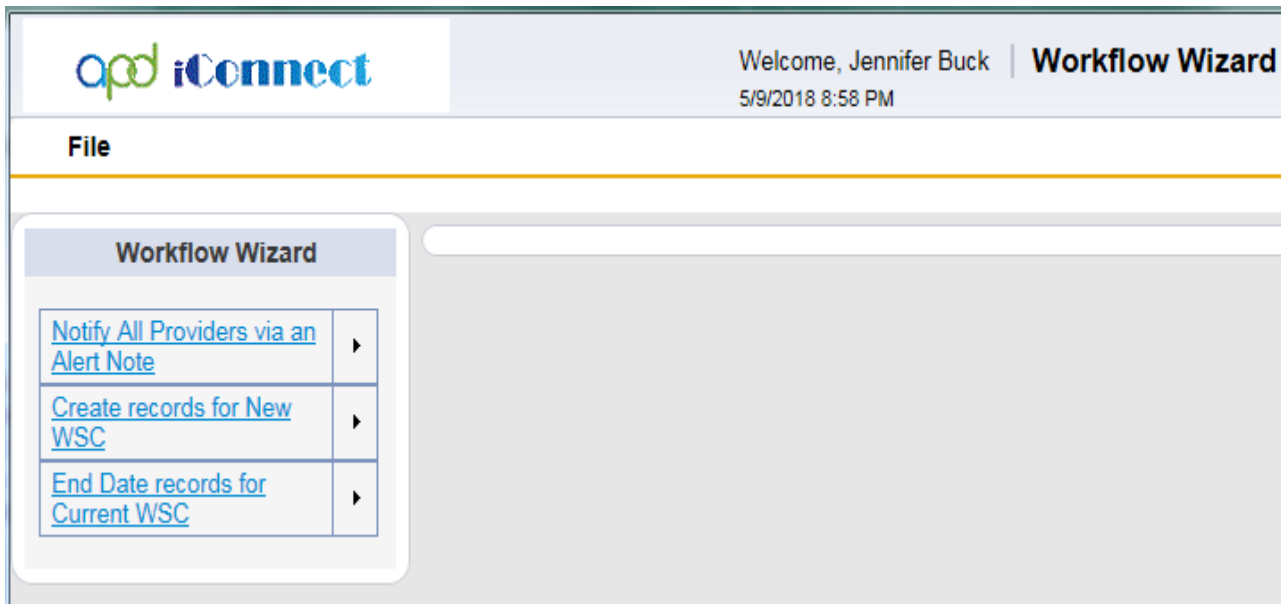
opd iConnect Alice Sheppard | **Notes**
5/9/2018 8:40 PM

File Tools

Notes Details

Division *	APD ▼
Note By *	Buck, Jennifer ▼
Note Date *	05/09/2018
Program/Provider	▼
Note Type *	WSC Selection ▼*
Note Sub-Type	WSC Inter-Region Transfer ▼
Description	<div></div>
Note	<div></div>
Status *	Complete ▼
Date Completed	05/09/2018

5. Click **File > Save and Close Notes**.
6. Upon saving the Note with Note Type = WSC Selection and Sub Type = WSC Inter-Region Transfer a Workflow Wizard triggers with the following ticklers:
 - a. Notify all Providers via an Alert Note
 - b. End Date records for Current WSC
 - c. Create records for New WSC



Notify all Providers via an Alert Note

1. Click the Notify All Providers via an Alert note tickler to display the Notes detail page.
2. Complete [section WSC Selection – New Agency: Notify All Providers via an Alert Note](#) to add the Alert note.

Create Records for New WSC

1. Click the Create records for New WSC tickler to display a message tickler.
2. Complete [section WSC Selection – New Agency: Create records for New WSC](#) to create the new WSC records.

End Date Records for Current WSC

1. Click the End Date Records for Current WSC tickler to display a message tickler.
2. Complete [section WSC Selection – New Agency: End Date records for Current WSC](#) to end date the Current WSC records.

As Needed: WSC Transition Planning Note

There are times in which the current WSC will need to complete a series of tasks in order to facilitate a consumer's transition to another region. Examples may include assisting the individual/family interviewing providers, coordinating services and transportation to another region, or hosting a transition call with the current circle of supports and the newly selected

circle of supports to ensure that there is a smooth transition. The WSC will document such tasks using a Note.

1. The WSC will navigate to the consumer's record and click **Notes > File > Add Note**.
 - a. Update the following fields:
 - i. Division = APD
 - ii. Note Type = WSC Selection
 - iii. Note Subtype = WSC Transition Note
 - iv. Description = WSC will document the types of activities conducted.
 - v. Note = Add details recording the meeting with the Consumer
 - vi. Status = Complete

The screenshot shows a 'Notes Details' form with the following fields and values:

- Division: APD
- Note By: Buck, Jennifer
- Note Date: 05/09/2018
- Program/Provider: [Empty]
- Note Type: WSC Selection
- Note Sub-Type: WSC Transition Note
- Description: Transition Meeting with Circle of Support
- Note: Add details recording the meeting with the Consumer
- Status: Complete
- Date Completed: 05/09/2018

Arrows point to the following fields:

- Note Type
- Note Sub-Type
- Description
- Status

2. Click **File > Save and Close Note**.

Chapter 15 | Due Process

Introduction

In some instances, when a Consumer has been denied access to Waiver Funding, provided limited funding, denied services and/or has been partially approved for services. In these cases, the Consumer has the right to exercise his/her rights to Due Process by requesting a hearing. A hearing can be requested for cases in which an action, intended action or failure to act would adversely affect the individual's eligibility for services provided by APD or where action on a claim for such assistance or services is unreasonably delayed. These hearings are generally referred to as Fair Hearings in federal regulations.

Requests for hearings can be made at the local office or directly to the Office of Appeal Hearings. The office provides a hearing conducted by an independent and neutral hearing officer who writes a decision based on program rules and regulations, the facts or evidence produced during the hearing, and post-hearing submissions, if submitted, in the form of a Final Order.

Request to Exercise Due Process Hearing

1. If a Consumer is denied APD services, he/she is entitled to appeal the decision. The Consumer will reach out to the Region office via email or regular mail to exercise their right to a Fair Hearing
2. Upon receiving the consumer's request for a Fair Hearing, the Region Worker will log into iConnect and set Role = Region Pre-Enrollment or Waiver Workstream Worker. Click **Go**.

Quick Search

Consumers Last Name GO ADVANCED SEARCH

3. Navigate to the consumer's record and click **Notes > File > Add Note**.

MY DASHBOARD CONSUMERS PROVIDERS UTILITIES CASES

Kastner, Martin (209730)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Payer

Filters

Note Date +

Search Reset

4. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Due Process
 - c. Note Subtype = Hearing Request Notification
 - d. Status = Complete
 - e. Attach all supporting documentation

5. When finished, click **File > Save and Close Note**

The screenshot shows the 'iConnect' interface with a 'Notes' section. The 'Notes Details' form is displayed with the following fields:

- Division ***: APD
- Note By ***: Buck, Jennifer
- Note Date ***: 04/13/2018
- Program/Provider**: (empty dropdown)
- Note Type ***: Due Process
- Note Sub-Type**: Hearing Request Notification (indicated by a blue arrow)
- Description**: (empty text area)
- Note**: Supporting Documentation attached to this Note record
- Status ***: Complete
- Date Completed**: 04/13/2018

6. Upon saving the Note, a Workflow Wizard will trigger with the following Ticklers:
 - a. Send Hearing Request Form - *Assigned to the user (Region Waiver Workstream Lead) who will reassign it to the hearing point of contact in the region.* Due Immediately
 - b. Update Budget - *Assigned to secondary worker, Due Immediately.* This tickler is specific to due process for consumers on the waiver. This tickler is not relevant to due process when resulting from denial of eligibility, denial of crisis, etc. This tickler should be cancelled if not applicable to the specific due process request.
 - c. Update Cost Plan Validate and Update Authorization - *Assigned to WSC, Due Immediately (but cannot update until Budget is updated).* This tickler is only relevant to consumers on the waiver. It should be cancelled if the specific due process request is not about planned services.

- 7. The Send Hearing Request Form tickler displays for the Region Worker.
- 8. Reassign the tickler to the Hearing point of contact in the region. Hover over the arrow next to the tickler and click **Reassign**.

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Send Hearing Request Form	04/13/2018	04/13/2018		Not Started	
Smith, Marianne	10043	Update Cost Plan, Validate and Update Authorization	04/13/2018	04/13/2018		Not Started	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Cancel

Edit

Reassign

Complete

View Consumers Record

- 9. In the Reassign Tickler window, search for the hearing contact for the region. click **Search**, and upon finding a match click on the name.
- 10. The tickler is reassigned.
- 11. The assigned Hearing point of contact for the region will monitor their **My Dashboard** for Ticklers related to Due Process. To begin, log into iConnect and set Role = Region Pre-Enrollment or Waiver Workstream Worker. Click **Go**.

Welcome, Caroline Shorter
4/4/2024 3:48 PM

[My Dashboard](#) [Sign Out](#)

Role
Region Pre-Enrollment Workstream Worker [GO](#)

File Reports

Quick Search

Consumers

Last Name

[GO](#)

[ADVANCED SEARCH](#)

- 12. On the **My Dashboard**, find the Consumers Section and scroll down to the Ticklers Panel. Click on **Ticklers Due** to access the Tickler Queue:

Alert Notes

Unread Alert Notes 0

Ticklers

Ticklers 11

Plans

Approved 1

Pending 1

- a. Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.

File

Filters

Status

Equal To

New

AND

Last Name

Equal To

smith

AND

iConnect ID

☐ Apply Alert Days Before Due

Search

Reset

2 Tickers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Send Hearing Request Form	04/13/2018	04/13/2018		New	Reed, Monica
Smith, Marianne	10043	Update Cost Plan, Validate and Update Authorization	04/13/2018	04/13/2018		New	Reed, Monica

<< First

< Previous

Retrieve 15

Records at a time

Next >

Last >>



Tip
When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.

13. Click on the Tickler called Send Hearing Request Form to open it.

14. A Message Tickler will appear - Hearing Request Form is located outside of iConnect and should be emailed to regional attorney. Click **OK**.

oed iConnect

Welcome, Monica Reed | My Dashboard

11/27/2018 2:10 PM

File

Workflow Wizard

Send Hearing Request Form

The Hearing Request Form is located outside of iConnect and should be emailed to the Regional Attorney. Reassign this tickler to the Hearing point of contact in the region.

15. Once the Hearing request form is emailed to the regional attorney, hover over the arrow next to the Tickler to click **Complete**

2 Tickers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Send Hearing Request Form	04/13/2018	04/13/2018		New	Reed, Monica
Smith, Marianne	10043	Update Cost Plan, Validate and Update Authorization	04/13/2018	04/13/2018		New	Reed, Monica

<< First

< Previous

Retrieve 15

Records at a time

Next >

Last >>

Cancel

Edit

Reassign

Complete

View Consumers Record

16. The Region Staff (Secondary Worker), will monitor their **My Dashboard** for Ticklers related to Due Process. To begin, log into iConnect and set Role = Region Waiver Workstream Lead. Click **Go**.

17. On the **My Dashboard**, find the Consumers Section and scroll down to the Ticklers Panel. Click on **Ticklers Due** to access the Tickler Queue:

- a. Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.



Tip

*When searching for a future Tickler, remember to clear the check box next to **Apply Alert Days Before Due** prior to clicking **Search**.*

18. In the Tickler Queue, find the second Tickler called Update Budget.

- a. This Tickler is only relevant for Consumers on the waiver. If this specific Due Process request is not about Planned Services, hover over the arrow next to the Tickler to click **Cancel**.
- b. If the Consumer is on the Waiver, hover over the arrow next to the Tickler to click **Reassign**. Select the appropriate Region Staff that handles Budget Entry. That user will be able to access the Tickler from their **My Dashboard**.

19. A Message Tickler will appear - Update applicable Budget prior to Notice of Hearing Rights being sent to Consumer. Click **OK**.

20. Navigate to the appropriate Budget and update it accordingly. [See Chapter 9 | Consumer Budget](#)

21. When finished, hover over the arrow next to the Tickler to click **Complete**.

22. The Primary Worker (Pre-Enrollment or Waiver Support Coordinator) will monitor their **My Dashboard** for Ticklers related to Due Process. To begin, log into iConnect and set Role = WSC/CDC or Region Pre-Enrollment Workstream Worker. Click **Go**.

23. On the **My Dashboard**, find the Consumers Section and scroll down to the Ticklers Panel. Click on **Ticklers Due** to access the Tickler Queue:

- a. Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.

File

Filters

Status Equal To New AND

Last Name Equal To smith AND

iConnect ID

☐ Apply Alert Days Before Due

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Send Hearing Request Form	04/13/2018	04/13/2018		New	Reed, Monica
Smith, Marianne	10043	Update Cost Plan, Validate and Update Authorization	04/13/2018	04/13/2018		New	Reed, Monica

<< First < Previous Retrieve 15 Records at a time Next > Last >>



Tip

*When searching for a future Tickler, remember to clear the check box next to **Apply Alert Days Before Due** prior to clicking **Search**.*

24. In the Tickler Queue, find the Tickler called Update Cost Plan, Validate and Update Plan Authorization

- This Tickler is only relevant for Consumers on the waiver. If this specific Due Process request is not about Planned Services, hover over the arrow next to the Tickler to click **Cancel**.

25. If the Consumer is on the Waiver, click to open the Tickler and the consumer's Cost Plan List View Grid will open:

File

Workflow Wizard

[Update Cost Plan, Validate and Update Authorization](#)

Filters

Division

3 Plans record(s) returned - now viewing 1 through 3

+	Division	Program	Worker	Cost Plan Creation Date	Status	Cost Plan Begin Date
<input type="checkbox"/>	APD	CDC+	Tierney, Jacqueline	04/09/2018	Draft	04/09/2018
<input type="checkbox"/>	APD		Tierney, Jacqueline	03/30/2018	Pending	
<input type="checkbox"/>	APD	APD Waiver	Reed, Monica	03/27/2018	Approved	03/27/2018

<< First < Previous Retrieve 15 Records at a time Next > Last >>

26. In the Cost Plan List View Grid, click on the applicable Cost Plan to open it and update fields as necessary

27. When finished, click **File > Save and Close Plan**

28. Hover over the arrow next to the Tickler to click **Complete**

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Send Hearing Request Form	04/13/2018	04/13/2018		Ne	
Smith, Marianne	10043	Update Cost Plan, Validate and Update Authorization	04/13/2018	04/13/2018		Ne	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Cancel
Edit
Reassign
Complete
View Consumers Record

29. The Office of Appeal Hearings will assign an Appeal Number and issue Acknowledgement of Hearing and notify APD of the number via email.

30. Upon receiving the e-mail from the Office of Appeal Hearings, the Hearing point of contact for the Region will log into iConnect and set Role = Region Waiver Workstream Worker. Click **Go**.

qpd iConnect

Welcome, Michelle Eligibility | My Dashboard Sign Out

4/4/2018 2:25 PM

Role
Region Waiver Workstream Worker

GO

File

Quick Search

Consumers Last Name GO ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER REPORTS

31. Navigate to the consumer's record and click **Notes > File > Add Note**.

32. In the new Note record, update the following fields:

- Division = APD
- Note Type = Due Process
- Note Subtype = Appeal Documents
- Status = Pending
- Route the Note to the appropriate Secondary Worker by clicking the ellipsis next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
- Attach any collateral documentation

33. When finished, click **File > Save and Close Note**

Notes

Division * APD

Note By * Buck, Jennifer

Note Date * 04/13/2018

Program/Provider

Note Type * Due Process

Note Sub-Type Appeal Documents

Description

Note

Status * Pending

Date Completed

34. The Secondary Worker will monitor their **My Dashboard** for Note records related to Due Process Appeal Documents. To do so, log into iConnect and set Role = Pre-Enrollment or Waiver Workstream Lead. Click **Go**.

35. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Notes with Status = Pending

Notes	
Complete	4
Draft	1
I'm Interested	1
Pending	1
Alert Notes	
Unread Alert Notes	0
Ticklers	
Ticklers	52

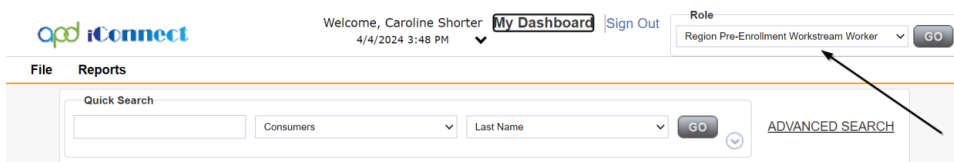
36. In the Pending Notes queue, open the Note record with Note Type = Due Process and Note Subtype = Appeal Documents.

37. Review the contents of the Note to determine if Legal Issues record can be created. Update the Note accordingly.

- a. Route the Note back to the appropriate Region Worker by clicking the ellipsis next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
- b. Set Status = Complete

38. Click **File > Save and Close Notes**.

39. The Region Worker will monitor their **My Dashboard** for Note records related to Appeal Documents. To begin, log into iConnect and set Role = Region Pre-Enrollment Workstream Worker. Click **Go**.



40. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Complete** link to open a queue of Notes with Status = Complete.

Notes	
Complete	7
Draft	1
I'm Not Interested	1
Pending	8
Alert Notes	
Unread Alert Notes	0

- a. Use the multi variable search to narrow down the search results. Open the Note record with Note Type = Due Process and Note Subtype = Appeal Documents

41. Review the contents of the Note. Proceed to create the Legal Issues record per the instructions below.

42. To document the Fair Hearing in the consumer's record, navigate to the **Legal Issues** tab and click **File > Add Legal Issue**.

File Ticklers

Add New Demographics Search

Add Legal Issue

Print

Consumers

Last Name

GO

ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS UTILITIES CASES

Kastner, Martin (209730)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Divisions Consumer Budgets Programs Provider Selections SAN Notes Forms Appointments Plans Pre-Enrollment Payers Legal Issues

Filters

Request Date

Search Reset

43. In the new Legal Issue record, update the following fields:

- Request Date = Enter the date the original request was received
- Type = Fair Hearing
- Issue Source = what prompted Fair Hearing request
- Status = Requested
- Worker = Program Reviewer or Assessor

44. When finished, click **File > Save Legal Issue**

opd iConnect

Marianne Smith | Legal Issue

4/13/2018 12:04 PM

File

Legal Issue Details

Division APD

Request Date * 04/13/2018

Hearing Case/Docket # 301981

Search

Type * Fair Hearing

Issue Source Due Process - IFS

Worker Tierney, Jacqueline

Status * Requested

Decision

45. In the Legal Issue record, the **Hearings** tab will appear. Click on the **Hearings > File > Add Hearing**.

The screenshot shows the top of the iConnect application. The 'File' menu is open, highlighting the 'Add Hearing' option with a mouse cursor. Other menu items include 'Add Hearing', 'Spell Check', 'Print', 'Close Hearings', 'Hearings', and 'Court Decisions'. To the right, there are view options for 'Monthly View' and 'Daily View'. A 'Filters' section contains dropdowns for 'Status' (set to 'Not Equal To'), 'Draft', and 'AND', along with a 'Hearing Start Date' field and a '+' button. 'Search' and 'Reset' buttons are at the bottom right of the filters. The user 'Marianne Smith' is logged in, and the time is '4/13/2018 12:20 PM'. The 'Hearings' section shows '0 record(s) returned'.

46. In the new Hearing record, update the following fields:

- Type = Fair Hearing
- Start Date
- Start Time
- End Date
- End Time
- Status = Scheduled

47. When finished, click **File > Save Hearing**

The screenshot shows the 'Hearing Detail' form. The 'Type' field is set to 'Fair Hearing', and an arrow points to it. The 'Status' field is set to 'Scheduled'. Other fields include 'Division' (APD), 'Program' (APD Waiver), 'Start Date' (04/13/2018), 'Start Time' (12:21 PM), 'End Date' (04/13/2018), 'End Time' (12:51 PM), 'Service Code' (empty), 'Sub Type' (empty), 'Description (non-HIPAA Data)' (empty), 'Reason' (empty), 'Appt. Summary (non-HIPAA Data)' (empty), 'Appt. Details(HIPAA Data)' (empty), 'Category' (empty), 'Location' (Consumers Home), and 'High Priority' (unchecked).

48. In the new Hearing record, Click on the **New Hearing Participant** subpage:
- Use the filters to find workers in the system who will serve as witnesses. Click on matching records and click **Add** to add them to the Hearing appointment
 - When finished, click **File > Save New Hearing Participant** and **File > Close New Hearing Participant**

49. To upload any additional supporting documents to the consumer's record, click on the **Notes** tab and click **File > Add Note**.

50. In the new Note record, update the following fields:
- Note Type = Due Process
 - Note Subtype = Evidentiary Documents
 - Status = Complete
 - Attach any additional documents

51. When finished, click **File > Save and Close Note**

The screenshot shows the 'Notes' form in the iConnect system. The form is titled 'Notes Details' and contains several fields:


- Division ***: APD
- Note By ***: Buck, Jennifer
- Note Date ***: 04/13/2018
- Program/Provider**: APD Waiver (with a 'Details' link)
- Note Type ***: Due Process
- Note Sub-Type**: Evidentiary Documents
- Description**: (empty text box)
- Note**: (large text area with placeholder text: '-Additional documentation attached to this email')
- Status ***: Complete
- Date Completed**: 04/13/2018

A blue arrow points to the 'Note Type' dropdown menu.

Motion to Dismiss or Withdraw Due Process Request

1. In the event the region receives a Motion to Dismiss or Withdraw, the document(s) will need to be attached to a Note. To do so, the Region Worker will navigate to the consumer's record and click on **Notes > File > Add Note**.
2. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Due Process
 - c. Note Subtype = Collateral Documents
 - d. Status = Complete
3. Attach all relevant documentation.
4. When finished, click **File > Save and Close Note**

File Tools

Notes Details	
Division *	APD ▼
Note By *	Buck, Jennifer ▼
Note Date *	04/13/2018 
Program/Provider	APD Waiver ▼ Details
Note Type *	Due Process ▼*
Note Sub-Type	Collateral Documents ▼
Description	<div></div>
Note	<div>Collateral documents attached to this email</div>
Status *	Complete ▼
Date Completed	04/13/2018

5. On the consumer's record, navigate to the **Legal Issues** tab and click **File > Add Legal Issues**:

The screenshot shows the Case Management Module interface. In the left sidebar, under the 'File' tab, the 'Add Legal Issue' link is highlighted with an orange background and an arrow pointing to it. The top navigation bar shows 'MY DASHBOARD', 'CONSUMERS', 'PROVIDERS', 'UTILITIES', and 'CASES'. The 'CONSUMERS' tab is selected. Below the navigation bar, the 'Legal Issues' tab is selected in the top navigation bar. The main content area shows a search bar with 'Consumers' selected and a 'GO' button. Below the search bar, there are tabs for 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation', 'Contacts', and 'Consumer Module User'. The 'Legal Issues' tab is selected. Below the tabs, there is a 'Filters' section with a 'Request Date' dropdown and a 'Search' button. The main content area shows a table with columns for 'Request Date', 'Type', 'Issue Source', 'Status', and 'Worker'.

6. In the new Legal Issue record, update the following fields:
 - a. Request Date = Update as appropriate
 - b. Type = Fair Hearing
 - c. Issue Source = what prompted Fair Hearing request
 - d. Status = Request for Motion to Withdraw OR Request for Motion to Dismiss
 - e. Worker = Program Reviewer or Assessor

7. When finished, click **File > Save Legal Issue**

The screenshot shows the 'Legal Issue Details' form. The form has the following fields:

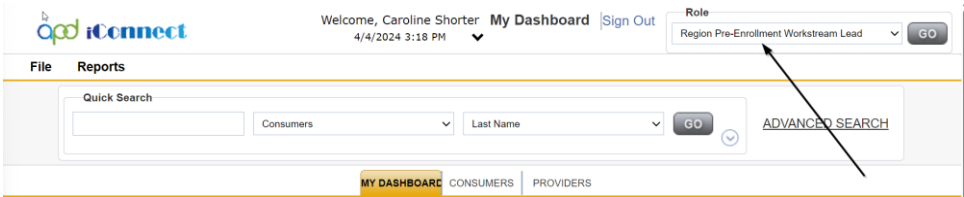
- Division:** APD (dropdown)
- Request Date *:** 04/13/2018 (calendar icon)
- Hearing Case/Docket #:** 43534
- Type *:** Fair Hearing (dropdown)
- Issue Source:** Due Process - Cost Plan Review (dropdown)
- Worker:** Tierney, Jacqueline (dropdown)
- Status *:** Request for Motion to Withdraw (dropdown)
- Decision:** (dropdown)

An arrow points to the 'Issue Source' dropdown menu.

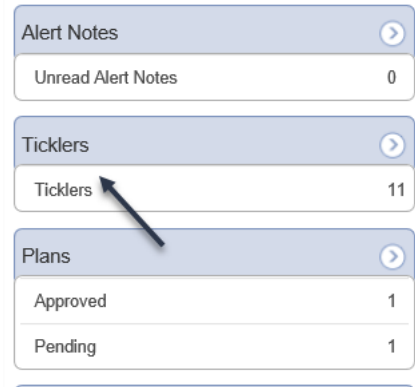
8. Upon saving the Legal Issue record, a Workflow Wizard will trigger with the following Ticklers:
 - a. Update Cost Plan, Validate and Update Authorization - *Assigned to Primary Worker (Waiver Support Coordinator)*
 - b. Update Budget - *Assigned to Secondary Worker (Pre-Enrollment or Waiver Workstream Lead)*, who will complete the task or reassign to the appropriate designee with the Budget Entry role. Pre-Enrollment Workstream leads will cancel this tickler.

- c. Update Legal Issue Status - *Assigned to Secondary Worker (Pre-Enrollment or Waiver Workstream Lead)*, Due Immediately

9. The Region Staff (Secondary Worker), will monitor their **My Dashboard** for Ticklers related to Due Process. To begin, log into iConnect and set Role = Region Waiver Workstream Lead. Click **Go**.



10. On the **My Dashboard**, find the Consumers Section and scroll down to the Ticklers Panel. Click on **Ticklers Due** to access the Tickler Queue:

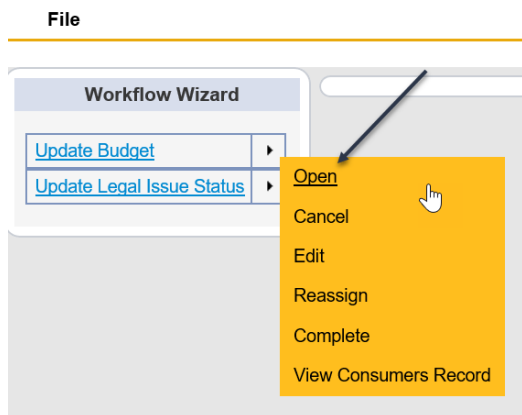


- a. Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.

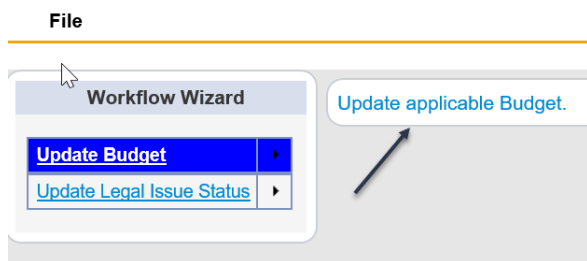


Tip
When searching for a future Tickler, remember to clear the check box next to *Apply Alert Days Before Due* prior to clicking **Search**.

11. Select the tickler, called Update Budget to Open it.



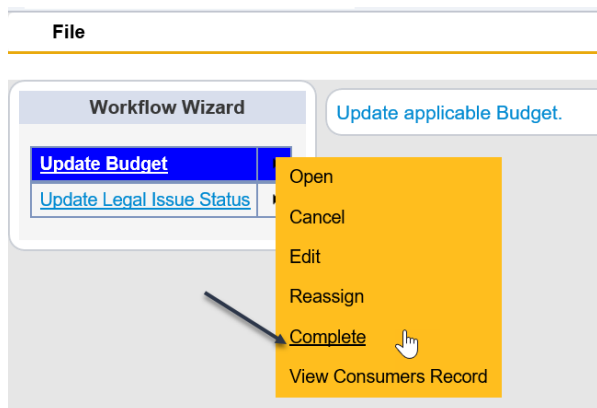
12. Upon doing so a Message Tickler will open that says Update Applicable Budget



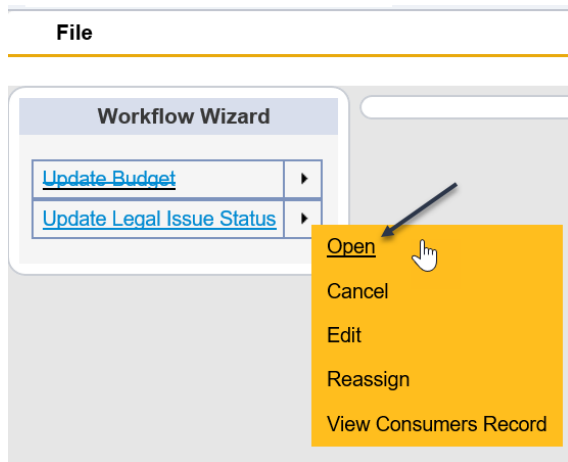
- Note that the Budget only needs to be updated if Due Process was initiated because of an Agency action regarding waiver services. If this is not the case, hover over the arrow next to the Tickler to click **Cancel**.
- If the Due Process request was initiated because of an Agency action regarding waiver services, update the Budget.

13. To do so, navigate to the consumer's record and click on the **Consumer Budget** tab > open the appropriate Budget and update it accordingly. [See Chapter 9 | Consumer Budget](#)

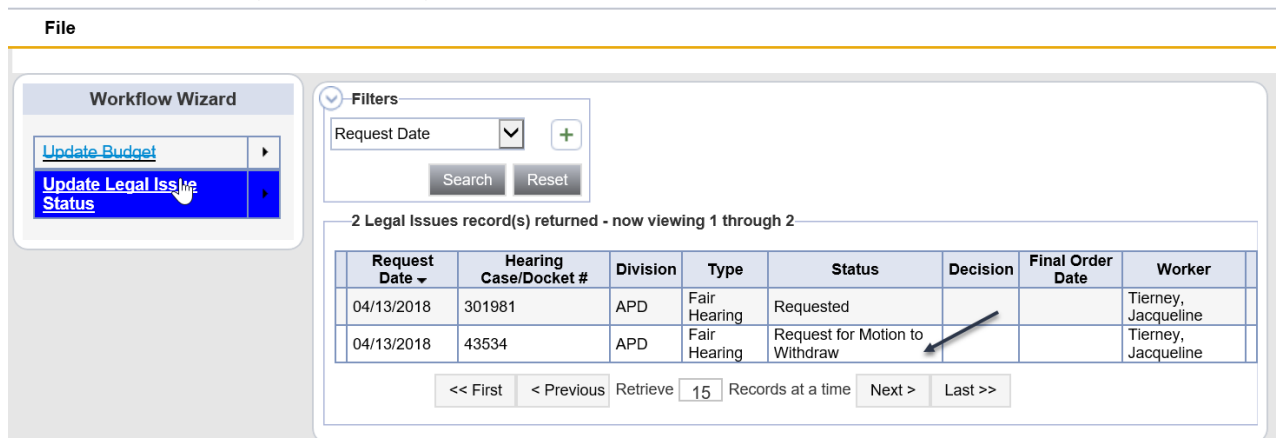
14. Back in the Workflow Wizard window, hover over the arrow next to the Tickler to click **Complete**



15. In the Tickler queue, hover over the arrow next to the Tickler Update Legal Issue Status to click **Open**.



16. Upon doing so, the Legal Issues List View Grid will open



17. In the consumer's Legal Issues List View grid, click to open the relevant Legal Issue and update the Status and other fields as applicable.

18. When finished, click **File > Save and Close Legal Issue**

19. Back in the Workflow Wizard window, hover over the arrow next to the Tickler to click **Complete**

20. Click **File > Close Workflow Wizard**

21. The Waiver Support Coordinator will monitor their **My Dashboard** for Ticklers related to Due Process. To begin, log into iConnect and set Role = WSC/CDC. Click **Go**.

Welcome, Monica Reed
4/13/2018 11:42 AM

My Dashboard

Sign Out

Role
WSC/CDC

GO

File

Quick Search

Consumers

Last Name

GO

ADVANCED SEARCH

MY DASHBOARD

CONSUMERS

PROVIDERS

INCIDENTS

CLAIMS

SCHEDULER

22. On the **My Dashboard**, find the Consumers Section and scroll down to the Ticklers Panel. Click on **Ticklers Due** to access the Tickler Queue:

Alert Notes

Unread Alert Notes0

Ticklers

Ticklers11

Plans

Approved1

Pending1

a. Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.

File

Filters

Status

Equal To

New

AND

Last Name

Equal To

smith

AND

iConnect ID

+

☐ Apply Alert Days Before Due

Search

Reset

1 Ticklers record(s) returned - now viewing 1 through 1

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Update Cost Plan, Validate and Update Authorization	04/13/2018	04/13/2018		New	Reed, Monica

<< First

< Previous

Retrieve 15

Records at a time

Next >

Last >>



Tip
When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.

23. Click on the Tickler called Update Cost Plan, Validate and Update Authorization to open it.

24. Upon doing so, the consumer's Cost Plan List View Grid will open

The screenshot shows the 'Plans' page in the iConnect system. The top header includes the 'opd iConnect' logo, the user name 'Marianne Smith', and the date/time '4/13/2018 1:01 PM'. A 'File' menu is visible. On the left, a 'Workflow Wizard' sidebar contains a button labeled 'Update Cost Plan, Validate and Update Authorization'. The main area features a 'Filters' section with a 'Division' dropdown and 'Search' and 'Reset' buttons. Below the filters, it states '3 Plans record(s) returned - now viewing 1 through 3'. A table displays the following data:

	Division	Program	Worker	Cost Plan Creation Date	Status	Cost Plan Begin Date
<input checked="" type="checkbox"/>	APD	CDC+	Tierney, Jacqueline	04/09/2018	Draft	04/09/2018
<input type="checkbox"/>	APD		Tierney, Jacqueline	03/30/2018	Pending	
<input checked="" type="checkbox"/>	APD	APD Waiver	Reed, Monica	03/27/2018	Approved	03/27/2018

At the bottom of the table, there are navigation controls: '<< First', '< Previous', 'Retrieve 15 Records at a time', 'Next >', and 'Last >>'.

25. In the Cost Plan List View Grid, click on the applicable Cost Plan to open it and update fields as necessary

26. When finished, click **File > Save and Close Plan** and **File > Close Workflow Wizard**

Fair Hearing

1. When the assigned Workstream Worker or Workstream Lead receives a copy of the Final Order issued in response to the Due Process request, the worker will document via note and attach a copy of the Final Order. To begin, the worker will log into iConnect and set Role Region Waiver Workstream Worker or Lead. Click **Go**.
2. To provide all necessary parties with the Final Order, navigate to the consumer's record and click **Notes > File > Add Note**.
3. In the new Note record, update the following fields:
 - a. Note Type = Due Process
 - b. Note Subtype = Final Order
 - c. Status = Complete
 - d. Attach the Final Order to the Note
 - e. Route the Note to the appropriate recipients (ROM DROM, Waiver Work Stream Lead) by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up

window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

4. When finished, click **File > Save and Close Note**

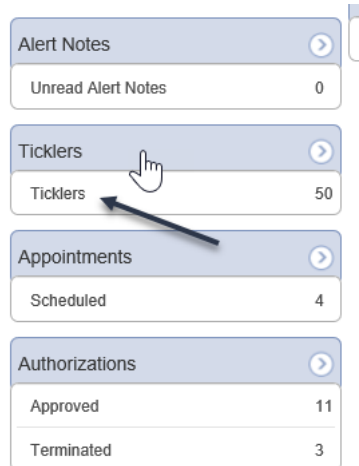
The screenshot shows the 'opd iConnect' interface. At the top right, the user is 'Marianne Smith' and the date is '4/23/2018 1:59 PM'. The 'Notes' section is active. Below the 'File' and 'Tools' menu bar, the 'Notes Details' form is displayed. The form contains the following fields:

- Division ***: APD (dropdown)
- Note By ***: Tierney, Jacqueline (dropdown)
- Note Date ***: 04/23/2018 (calendar icon)
- Program/Provider**: APD Waiver (dropdown) with a 'Details' link.
- Note Type ***: Due Process (dropdown) - A mouse cursor is pointing at this field, and a blue arrow points to it from the left.
- Note Sub-Type**: Final Order (dropdown)
- Description**: (text area)
- Note**: Please review Final Order attached to this Note. (text area)
- Status ***: Complete (dropdown)
- Date Completed**: 04/23/2018

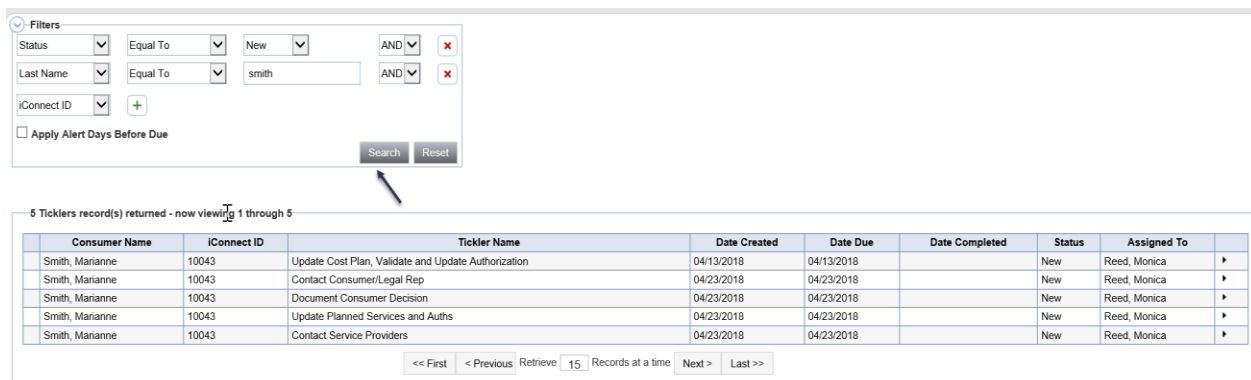
5. Upon saving the Note record, a Workflow Wizard will trigger with the following Ticklers:

- Run the Algorithm, Update Budget, and Hearing Status - *Assigned to the Secondary Worker, (WL or Waiver Workstream Lead)* Due Immediately
- Contact Consumer/Consumer Rep – *Assigned to the Primary Worker*, Due Immediately
- Document Consumer Decision - *Assigned to the Primary Worker*, Due Immediately
- Update Planned Services and Auths - *Assigned to the Primary Worker*, Due Immediately
- Create/Update Service Authorizations - *Assigned to the Primary Worker*, Due Immediately
- Contact Service Providers - *Assigned to the Primary Worker*, Due Immediately

6. To complete the first Tickler, the Secondary Worker (Pre-Enrollment or Waiver Workstream Lead) will log into iConnect and set Role = Pre-Enrollment or Waiver Workstream Lead). Click **Go**.
7. On the **My Dashboard**, finding the consumer's section and scrolling down to the Ticklers Panel. Click on the **Ticklers** link:



- a. In the Tickler Queue, use the multi variable search to narrow the results down to the relevant Ticklers. Click **Search**.



5 Ticklers record(s) returned - now viewing 1 through 5

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Update Cost Plan, Validate and Update Authorization	04/13/2018	04/13/2018		New	Reed, Monica
Smith, Marianne	10043	Contact Consumer/Legal Rep	04/23/2018	04/23/2018		New	Reed, Monica
Smith, Marianne	10043	Document Consumer Decision	04/23/2018	04/23/2018		New	Reed, Monica
Smith, Marianne	10043	Update Planned Services and Auths	04/23/2018	04/23/2018		New	Reed, Monica
Smith, Marianne	10043	Contact Service Providers	04/23/2018	04/23/2018		New	Reed, Monica

<< First < Previous Retrieve 15 Records at a time Next > Last >>



Tip

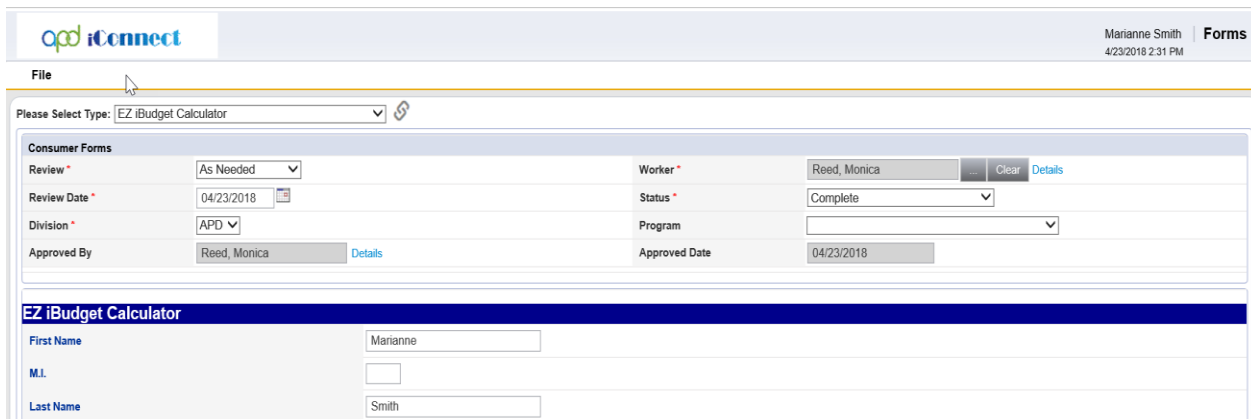
*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

8. In the Tickler Queue, click to open the Tickler called Run Algorithm, Update Budget and Hearing Status.
9. Upon doing so, a Message Tickler will open - Run Algorithm, Update Budget and Hearing Status
 NOTE: Running the algorithm is rare when receiving a final order. If this is not needed, Cancel the tickler.

10. To complete the Tickler, begin by navigating to the consumer's record and click on **Forms > File > Add Form**.

- Set Please Select Type = EZ iBudget Calculator.
- Complete all relevant fields

11. When finished, click **File > Save and Close Form**



File

Please Select Type: **EZ iBudget Calculator**

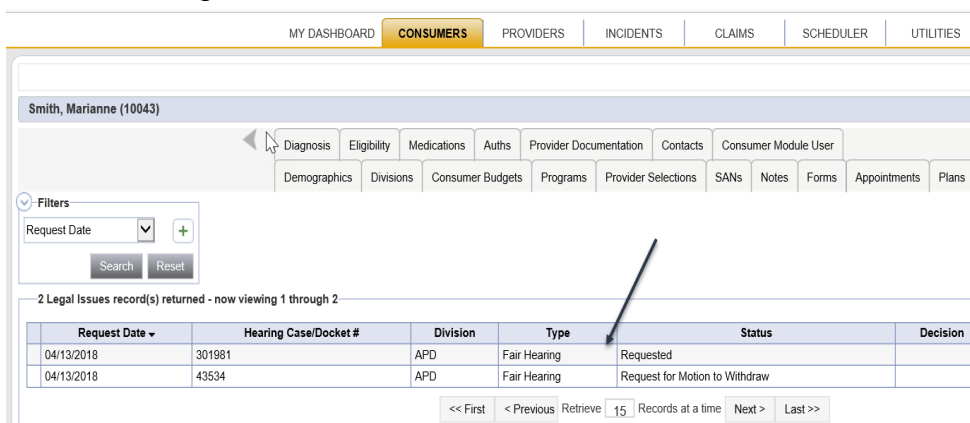
Consumer Forms

Review *	As Needed	Worker *	Reed, Monica
Review Date *	04/23/2018	Status *	Complete
Division *	APD	Program	
Approved By	Reed, Monica	Approved Date	04/23/2018

EZ iBudget Calculator

First Name	Marianne
M.I.	
Last Name	Smith

12. Navigate to the consumer's record, click on the **Legal Issues** tab > click to open the relevant Legal Issue record > click on the **Hearings** tab > click to open the relevant Hearing record



MY DASHBOARD **CONSUMERS** PROVIDERS INCIDENTS CLAIMS SCHEDULER UTILITIES

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SANs Notes Forms Appointments Plans

Filters

Request Date

Search Reset

2 Legal Issues record(s) returned - now viewing 1 through 2

Request Date	Hearing Case/Docket #	Division	Type	Status	Decision
04/13/2018	301981	APD	Fair Hearing	Requested	
04/13/2018	43534	APD	Fair Hearing	Request for Motion to Withdraw	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

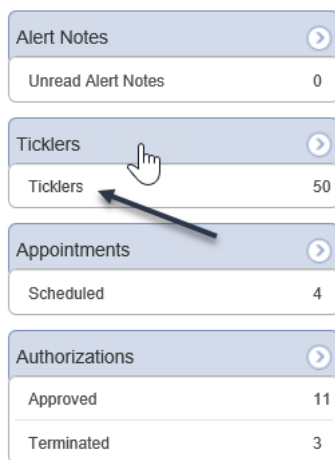
13. Update the Status field

14. When finished, click **File > Save and Close Hearing**

15. Back in the Tickler Queue, hover over the arrow next to the Tickler to click **Complete**

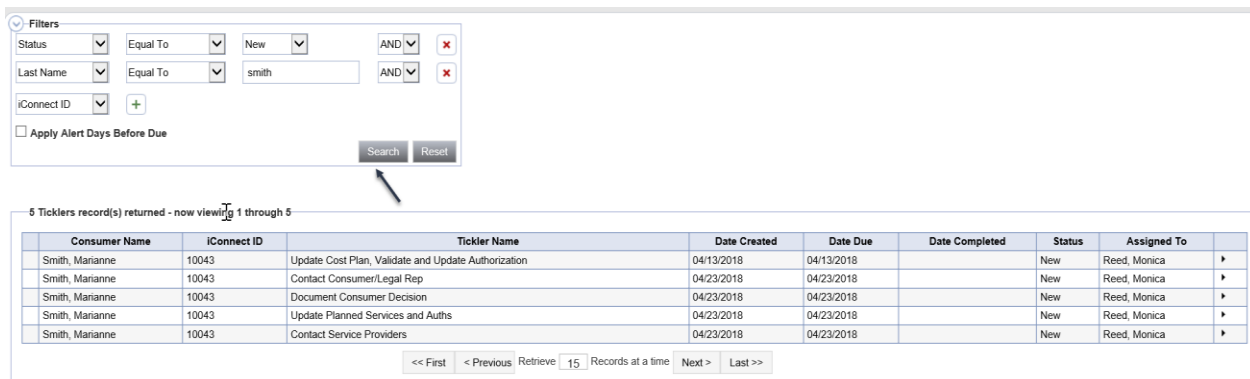
16. To complete the remaining Ticklers, the Primary Worker (Waiver Support Coordinator) will log into iConnect and set Role = WSC/CDC. Click **Go**.

17. On the **My Dashboard**, finding the consumer's section and scrolling down to the Ticklers Panel. Click on the **Ticklers** link:



The screenshot shows a sidebar menu with four main sections: Alert Notes, Ticklers, Appointments, and Authorizations. Each section has a sub-item. Under Alert Notes, 'Unread Alert Notes' has a count of 0. Under Ticklers, 'Ticklers' has a count of 50. Under Appointments, 'Scheduled' has a count of 4. Under Authorizations, 'Approved' has a count of 11 and 'Terminated' has a count of 3. A mouse cursor is pointing at the 'Ticklers' link in the sidebar.

a. In the Tickler Queue, use the multi variable search to narrow the results down to the relevant Ticklers. Click **Search**.



The screenshot shows the Tickler Queue search interface. It includes a 'Filters' section with dropdowns for Status, Last Name, and iConnect ID, each with an 'Equal To' operator and a search field. The 'Status' dropdown is set to 'New'. The 'Last Name' search field contains 'smith'. The 'iConnect ID' search field is empty. There are 'AND' and 'X' buttons to manage filters. A checkbox for 'Apply Alert Days Before Due' is present. A 'Search' button and a 'Reset' button are at the bottom right of the filter section. Below the filter section, a message states '5 Ticklers record(s) returned - now viewing 1 through 5'. A table displays the results with columns: Consumer Name, iConnect ID, Tickler Name, Date Created, Date Due, Date Completed, Status, and Assigned To. The table contains 5 rows of data. At the bottom of the table, there are navigation buttons: '<< First', '< Previous', 'Retrieve 15 Records at a time', 'Next >', and 'Last >>'.

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Update Cost Plan, Validate and Update Authorization	04/13/2018	04/23/2018		New	Reed, Monica
Smith, Marianne	10043	Contact Consumer/Legal Rep	04/23/2018	04/23/2018		New	Reed, Monica
Smith, Marianne	10043	Document Consumer Decision	04/23/2018	04/23/2018		New	Reed, Monica
Smith, Marianne	10043	Update Planned Services and Auths	04/23/2018	04/23/2018		New	Reed, Monica
Smith, Marianne	10043	Contact Service Providers	04/23/2018	04/23/2018		New	Reed, Monica

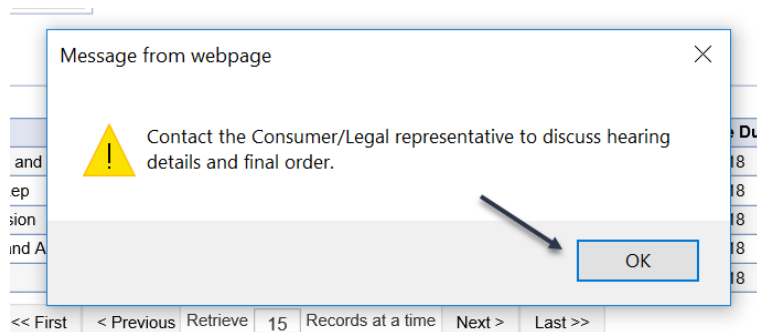


Tip

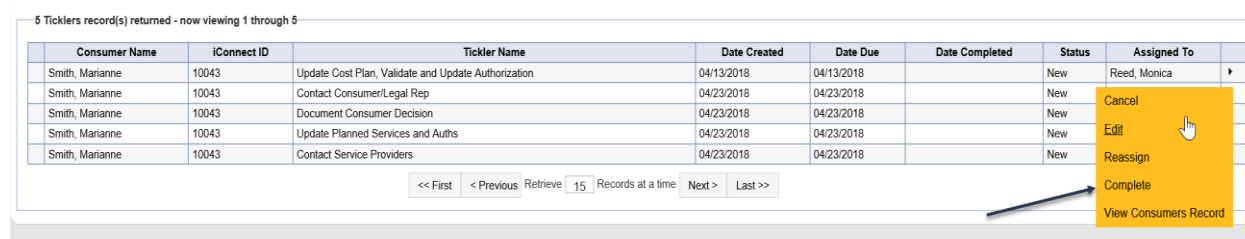
*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

18. In the Tickler Queue, click to open the Tickler called Contact Consumer/Legal Rep.

19. Upon doing so, a Message Tickler will open - Contact Consumer/Legal Representative to discuss hearing details and final order. Click **OK**.



20. When finished, hover over the arrow next to the Tickler to click **Complete**



21. Back in the Tickler Queue, click to open the Tickler called Document Consumer Decision.

22. Upon doing so, a new Consumer Note record will open. In the new Consumer Note record, update the following fields:

- Division = APD
- Note Type = Due Process
- Note Subtype = Consumer Update
- Description = Consumer Decision
- Note = summarize the discussion with the consumer/legal representative explain the impact of the Final Order. If the consumer doesn't agree with the Final order, he/she can take the necessary steps to have a judicial review.
- Status = Complete

23. When finished, click **File > Save Notes** and **File > Close Workflow Wizard**

File Tools

Workflow Wizard

Document Consumer Decision

Notes

Notes Details

Division * APD

Note By * Reed, Monica

Note Date * 11/27/2018

Program/Provider * WSC Agency1 Details

Note Type * Consumer Contact

Note Sub-Type Face to Face

Description Consumer Decision

Note

Final Order discussion with Consumer summarized here

Status * Complete

Date Completed 11/27/2018

24. Back in the Tickler Queue, click to open the Tickler Update Planned Services and Auths.

25. Upon doing so, the consumer's Cost Plan List View Grid will open.

26. In the consumer's Cost Plan List View Grid, click on the relevant Cost Plan to view it. Update the Cost Plan as necessary.

File

Workflow Wizard

Update Planned Services and Auths

Filters

Division

Search Reset

3 Plans record(s) returned - now viewing 1 through 3

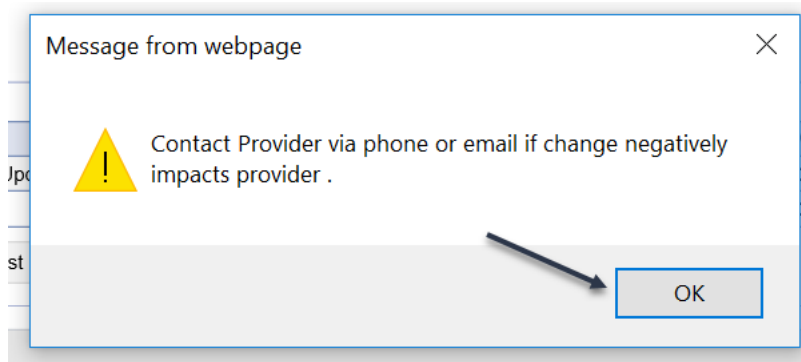
	Division	Program	Worker	Cost Plan Creation Date	Status	Cost Plan Begin Date	Cost Plan End Date
+	APD	CDC+	Tierney, Jacqueline	04/09/2018	Draft	04/09/2018	
	APD		Tierney, Jacqueline	03/30/2018	Pending		
+	APD	APD Waiver	Reed, Monica	03/27/2018	Approved	03/27/2018	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

27. When finished, click **File > Save and Close Plan** and **File > Close Workflow Wizard**

28. Back in the Tickler Queue, click to open the Tickler called Contact Service Providers

29. Upon doing so, a Message Tickler opens - Contact Provider via phone or email if change negatively impacts Provider



30. When finished, hover over the arrow next to the Tickler to click **Complete**
31. If the Consumer doesn't agree with the Final Order, he/she can take necessary steps to request a Judicial Review (non-iConnect process).

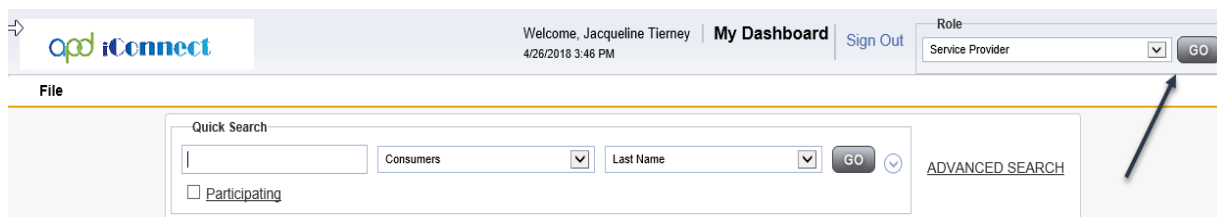
Chapter 16 | Safety Plan

Introduction

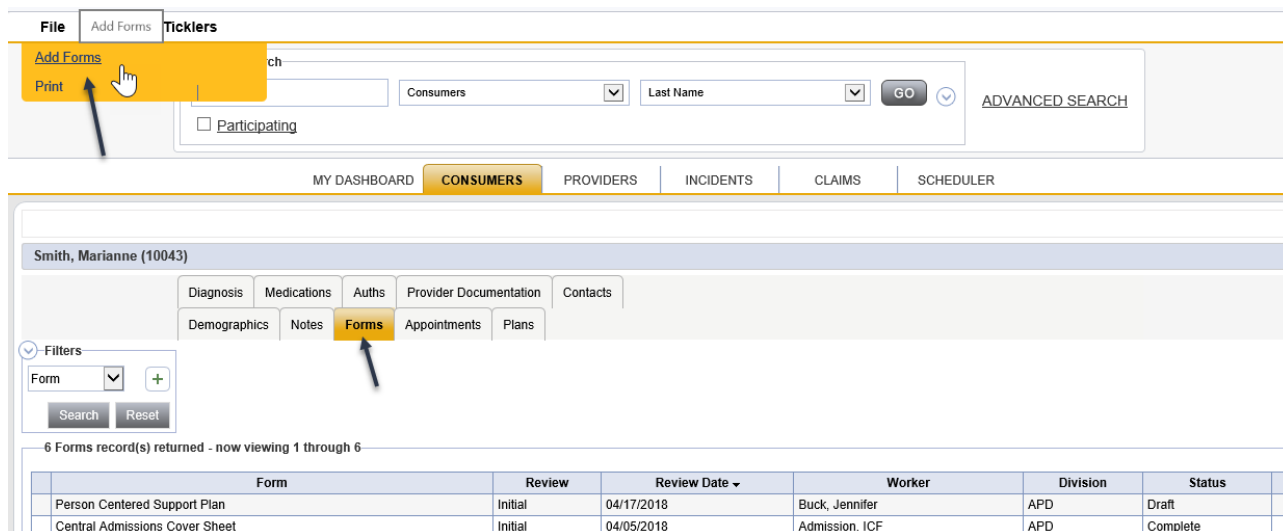
In some cases, Consumers exhibit behavior that indicate the need for a monitored plan of care. These behaviors include but are not limited to a documented history of engaging in sexual aggression, sexual battery or otherwise engaged in nonconsensual sexual behavior with another individual, with or without police involvement, that addresses their unique needs and creates safe environments for everyone and facilitates successful community living. In these instances, a Safety Plan developed by the Waiver Support Coordinator (WSC), with consultation from the authorized behavior analysis (BA) provider or Area Behavior Analyst (ABA), when needed. These plans are integrated into the Support Plan and implemented where the consumer resides. The following Chapter outlines how the Safety Plan should be documented within iConnect.

Sexual Misconduct Process

1. The process begins when a Consumer has been identified to have Sexually Aggressive Behaviors. The individual's Sexually Aggressive behavior could be identified via various methods including but not limited to, transition summary report, incident report, police report, court order, responses on a Behavioral Assessment, etc.
2. The Sending provider / Behavior Analysis provider / Area Behavior Analyst will document behavior via the Sexual Misconduct Characteristics Form. To begin, log into iConnect and set Role = Service Provider. Click **Go**.



3. Navigate to the consumer's record and click **Forms > Add Form**. Set Please Select Type = Sexual Misconduct Characteristics Form.



File Add Forms Ticklers

Add Forms Print

ch

Consumers Last Name GO

Participating

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER

Smith, Marianne (10043)

Diagnosis Medications Auths Provider Documentation Contacts

Demographics Notes Forms Appointments Plans

Filters

Form +

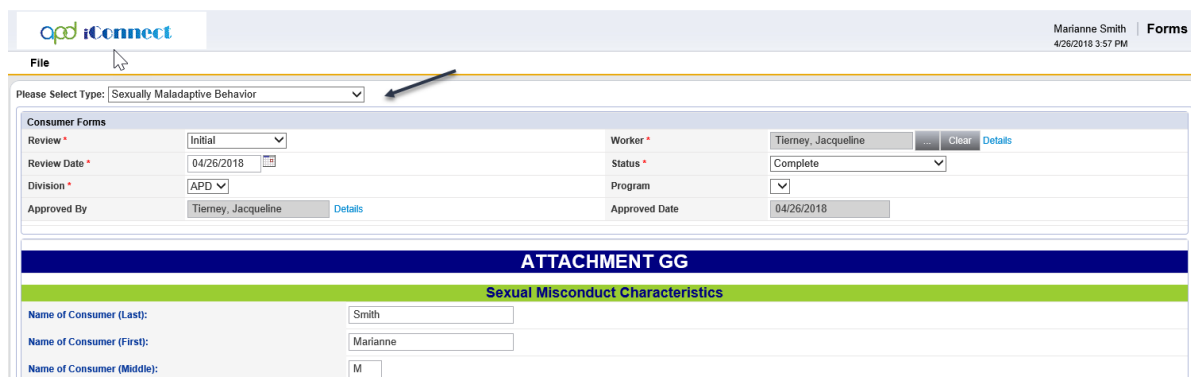
Search Reset

6 Forms record(s) returned - now viewing 1 through 6

Form	Review	Review Date	Worker	Division	Status
Person Centered Support Plan	Initial	04/17/2018	Buck, Jennifer	APD	Draft
Central Admissions Cover Sheet	Initial	04/05/2018	Admission, ICF	APD	Complete

4. In the Form, update all relevant fields. In the Header, update the following fields:
 - a. Review = Initial
 - b. Division = APD
 - c. Status = Complete

5. When finished, click **File > Save and Close Forms**



apd iConnect

Marianne Smith 4/26/2018 3:57 PM Forms

File

Please Select Type: Sexually Maladaptive Behavior

Consumer Forms

Review * Initial

Review Date * 04/26/2018

Division * APD

Approved By Tierney, Jacqueline

Worker * Tierney, Jacqueline

Status * Complete

Program

Approved Date 04/26/2018

ATTACHMENT GG

Sexual Misconduct Characteristics

Name of Consumer (Last): Smith

Name of Consumer (First): Marianne

Name of Consumer (Middle): M

6. Upon saving the Sexual Misconduct Characteristics Form with Status = Complete, a Workflow Wizard will trigger the following Tickler to the WSC:
 - a. Initiate Safety Plan, Assigned to WSC, Due Immediately
7. To complete the Tickler, the assigned Waiver Support Coordinator (WSC) will log into iConnect and set Role = WSC/CDC. Click **Go**.

8. On the **My Dashboard**, the WSC will find the Consumers Section and scroll down to the Ticklers Panel. Click on **Ticklers Due** to access the Tickler Queue:

- a. Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.



Tip

*When searching for a future Tickler, remember to clear the check box next to **Apply Alert Days Before Due** prior to clicking **Search**.*

9. In the search results, the WSC will click to open the Tickler called Initiate Safety Plan.
10. Upon doing so, the consumer's Forms List View Grid will open.
11. Click to open the Person-Centered Support Plan and complete all fields in the section called Safety Plan. Set Status = Draft.

12. When finished, click **File > Save Forms** and **File > Ticklers**.

13. After completing the Safety Plan, if the WSC feels a consult with the assigned BA provider or ABA is warranted, the WSC should notify the BA provider or ABA via a note. Consults are optional and not required.

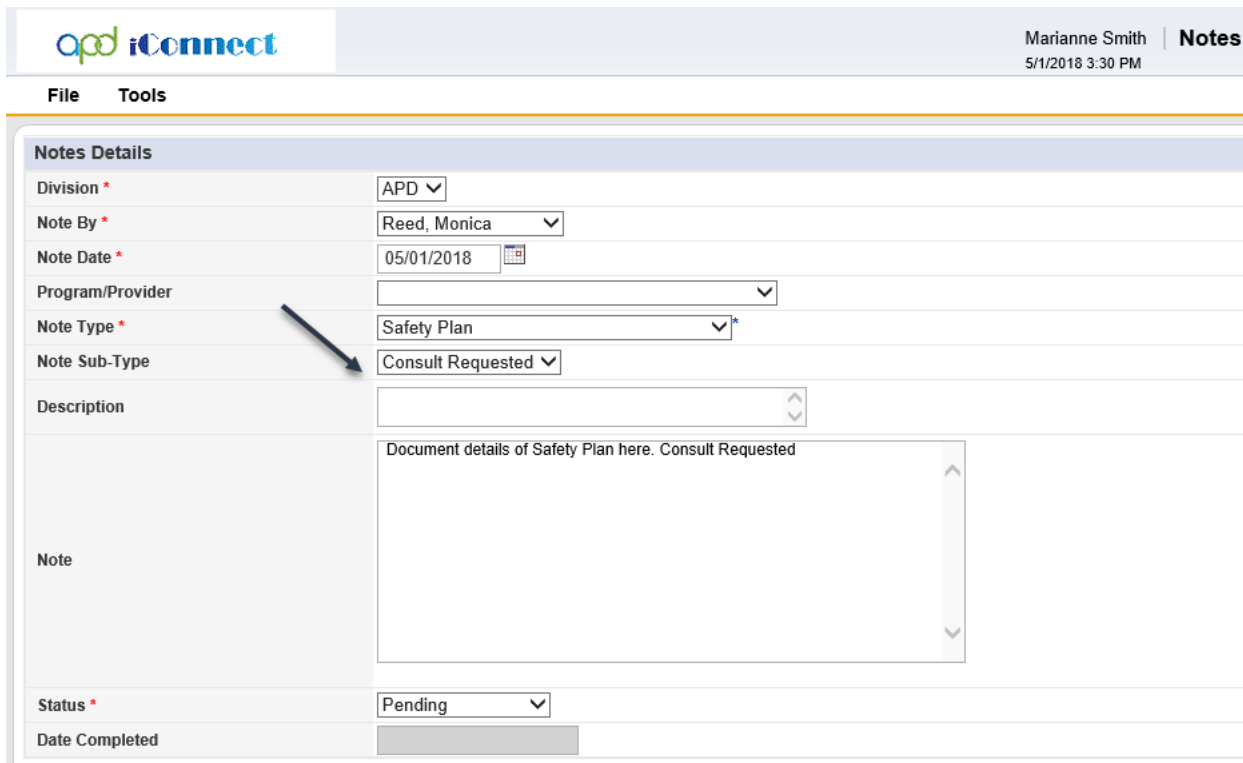
Note: WSCs should only request a consult from the ABA if the consumer does not have behavioral services. If there is a treating BA provider, that is who they should ask to complete the consult.

14. To do so, the WSC navigates to the consumer's record and click **Notes > File > Add Note**.

15. In the new Note record, update the following fields:

- a. Division = APD
- b. Note Type = Safety Plan
- c. Note Subtype = Consult Requested OR Completed
- d. Note = Document rationale for consultation on the Safety Plan
- e. Status = Pending OR Complete
- f. If a Consult is requested, route the Note to the BA provider, or the ABA when appropriate, by clicking the **Ellipsis** button (. . .) next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

16. When finished, click **File > Save and Close Notes**



Notes Details

Division * APD ▼

Note By * Reed, Monica ▼

Note Date * 05/01/2018

Program/Provider ▼

Note Type * Safety Plan ▼

Note Sub-Type Consult Requested ▼

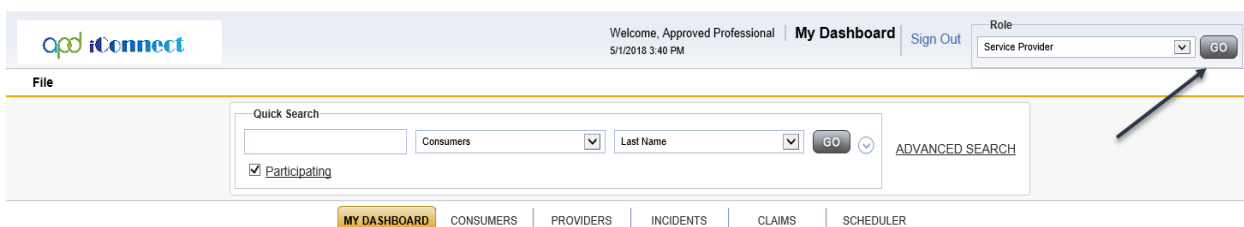
Description

Note

Status * Pending ▼

Date Completed

17. To access Notes requesting a Safety Plan Consult, the BA provider or ABA will log into iConnect and set Role = Service Provider OR Clinical Workstream Worker, respectively.



My Dashboard

Welcome, Approved Professional 5/1/2018 3:40 PM

Sign Out

Role Service Provider ▼ GO

File

Quick Search

Consumers ▼ Last Name ▼ GO

☒ Participating

ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER

18. On the **My Dashboard**, the BA provider or ABA will identify the Consumer panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Pending Notes

Notes	
Complete	4
Draft	1
I'm Interested	1
Pending	1
Alert Notes	
Unread Alert Notes	0
Ticklers	
Ticklers	52

19. In the Pending Notes queue, open the Note record with Note Type = Safety Plan and Note Subtype = Consult Requested.

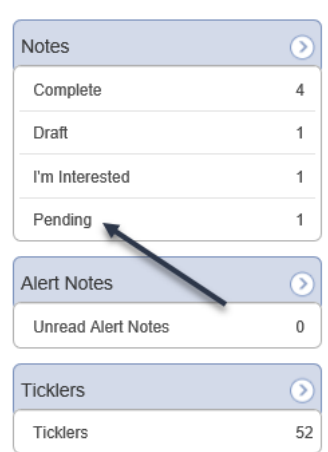
20. Review the contents of the Note record and update it with feedback. Update the following fields:

- Note Subtype = Consult Requested
- Route the Note to the assigned WSC by clicking the **Ellipsis** button (. . .) next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
- Attach any supporting documentation

21. When finished, click **File > Save and Close Notes**.

22. The WSC will monitor the **My Dashboard** for the Behavioral Provider or the ABA's response to the Consult Requested Note record. To do so, log into iConnect and set Role = WSC/CDC. Click **Go**.

23. On the **My Dashboard**, the WSC will identify the Consumer panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Pending Notes



Notes	
Complete	4
Draft	1
I'm Interested	1
Pending	1
Alert Notes	
Unread Alert Notes	0
Ticklers	
Ticklers	52

- 24. In the Pending Notes queue, open the Note record with Note Type = Safety Plan and Note Subtype = Consult Requested.
- 25. Review the contents of the Note record and take any necessary action as specified by the BA provider or the ABA.
- 26. When finished, click **File > Save and Close Notes**.

Chapter 17 | Medical Case Manager Report

Introduction

In some cases, in order to determine the level of care required for a Consumer, a Medical Case Manager may be necessary. A request for a Medical Case Manager report can be made at any time when a consumer's needs are being evaluated by the Region Medical Case Manager. In this Chapter, the process in which to complete and document a Medical Case Manager Report is outlined.

Add Medical Case Manager Report

1. The Clinical Work Stream Lead will receive a request for Medical Case Management via fax, email or regular mail
2. To begin, log into iConnect and set Role = Region Clinical Workstream Lead. Click **Go**.

3. To add a request for a Medical Case Manager Report, navigate to the consumer's record and click **Notes > File > Add Note**.

Note Date	Note By	Note Type	Note Sub-Type
04/06/2018	Eligibility, Michelle	Waiver Enrollment	Phelan McDermid Syndrome Verification

4. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = MCM Request
 - c. Note Subtype = Pending

- d. Status = Pending
- e. Route the Note record to the Medical Case Manager by scrolling to the bottom of the Note and clicking on the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient

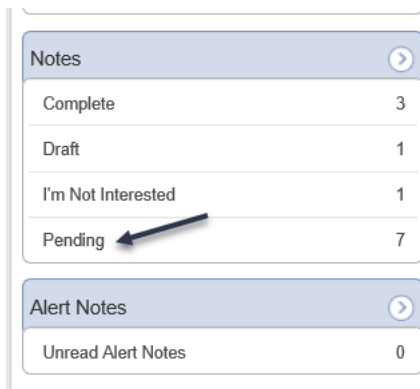
5. When finished, click **File > Save and Close Note**

The screenshot shows the 'Notes Details' form in the iConnect system. The form is divided into two main sections: 'Notes Details' and 'Note'. The 'Notes Details' section contains the following fields:

- Division: APD
- Note By: ClinicalWSL, Tony
- Note Date: 04/06/2018
- Program/Provider: [Empty]
- Note Type: MCM Request
- Note Sub-Type: Pending
- Description: [Empty]
- Note: [Empty]
- Status: Pending
- Date Completed: [Empty]

A blue arrow points to the 'Note Type' dropdown menu.

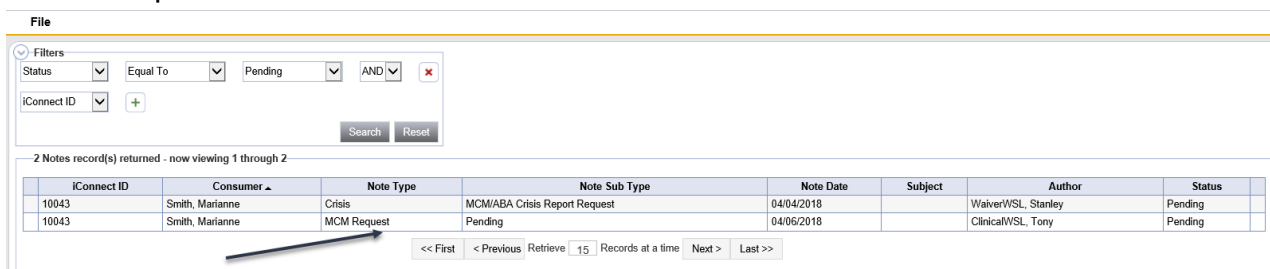
6. The Medical Case Manager will monitor the Notes Panel on their **My Dashboard** for Pending Notes. To begin, log into iConnect and set Role = Region Workstream Worker. Click **Go**.
7. On the **My Dashboard**, find the Consumers section and scroll down to the Notes Panel. Click on the **Pending** link to view the Notes Queue:



Notes	
Complete	3
Draft	1
I'm Not Interested	1
Pending	7

Alert Notes	
Unread Alert Notes	0

8. Use the multi variable search to find the Note record with Note Type = MCM Request



File

Filters

Status: Pending Equal To: AND

iConnect ID: +

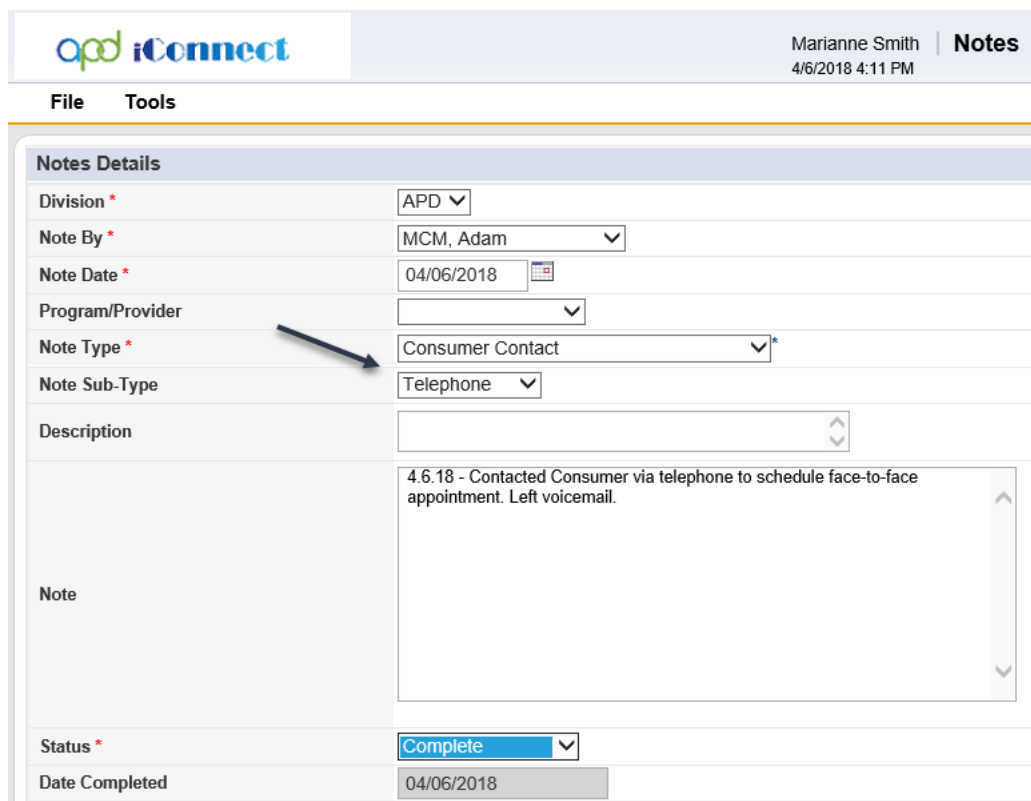
Search Reset

2 Notes record(s) returned - now viewing 1 through 2

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10043	Smith, Marianne	Crisis	MCM/ABA Crisis Report Request	04/04/2018		Walver/WSL, Stanley	Pending
10043	Smith, Marianne	MCM Request	Pending	04/06/2018		ClinicalWSL, Tony	Pending

<< First < Previous Retrieve 15 Records at a time Next > Last >>

9. Open and review the Note record
10. Navigate to the consumer's record to review all relevant Forms and Notes. The ROM or Clinical Workstream Lead will decide if a face-to-face meeting is necessary.
- If a face-to-face meeting is necessary, proceed below
 - If a face-to-face meeting is NOT necessary, do not schedule the appointment with the Consumer and proceed with completing the record review and the Medical Case Manager Report
11. If a face-to-face meeting is necessary, proceed with contacting the Consumer to schedule the appointment. Document each contact attempt in a Consumer record. To do so, navigate to the consumer's record and click **Notes > File > Add Note**.
12. In the Note record, update the following fields:
- Division = APD
 - Note Type = Consumer Contact
 - Subtype = Telephone
 - Status = Complete
13. When finished, click **File > Save and Close Notes**



Notes Details

Division * APD

Note By * MCM, Adam

Note Date * 04/06/2018

Program/Provider

Note Type * Consumer Contact

Note Sub-Type Telephone

Description

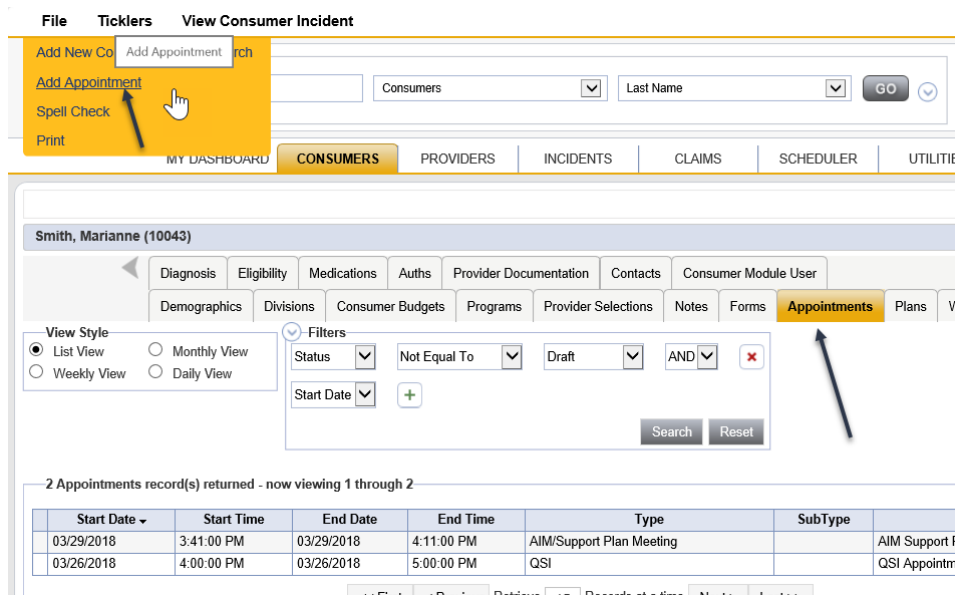
Note

4.6.18 - Contacted Consumer via telephone to schedule face-to-face appointment. Left voicemail.

Status * Complete

Date Completed 04/06/2018

14. Upon reaching the Consumer via telephone, schedule the appointment. In iConnect, navigate to the consumer's record and click on **Appointments > File > Add Appointment**.



Add New **Add Appointment** **Search**

Add Appointment

Spell Check

Print

MY DASHBOARD **CONSUMERS** **PROVIDERS** **INCIDENTS** **CLAIMS** **SCHEDULER** **UTILITIES**

Smith, Marianne (10043)

Diagnosis **Eligibility** **Medications** **Auths** **Provider Documentation** **Contacts** **Consumer Module User**

Demographics **Divisions** **Consumer Budgets** **Programs** **Provider Selections** **Notes** **Forms** **Appointments** **Plans** **V**

View Style

☒ List View ☐ Monthly View

☐ Weekly View ☐ Daily View

Filters

Status **Not Equal To** **Draft** **AND** **X**

Start Date **+**

Search **Reset**

2 Appointments record(s) returned - now viewing 1 through 2

Start Date	Start Time	End Date	End Time	Type	SubType
03/29/2018	3:41:00 PM	03/29/2018	4:11:00 PM	AIM/Support Plan Meeting	AIM Support f
03/26/2018	4:00:00 PM	03/26/2018	5:00:00 PM	QSI	QSI Appointm

First **Previous** **Retrieve** **45** **Records at a time** **Next** **Last**

15. In the new Appointment record, update the following fields:

- Division = APD
- Start Date

- c. Start Time
- d. End Date
- e. End Time (estimated)
- f. Appointment Type = Medical
- g. Status = Scheduled

16. When finished, click **File > Save Appointment**

opd iConnect Marianne Smith | Appointment
4/6/2018 4:20 PM

File

Appointment Detail

Division	APD
Program	APD Waiver Details
Start Date *	04/06/2018
Start Time	04:20 PM
End Date	04/06/2018
End Time	04:50 PM
Travel Time	
Preparation Time	
Type	Medical
Sub Type	
Subject	Face-to-Face Medical Case Manager Report Meeting
Appointment Summary	<div>500 characters remaining</div>
Additional Information (Private)	<div>500 characters remaining</div>
Reason	
Location	
Status *	Scheduled

17. Upon saving the new Appointment, the Appointment record will refresh and display the **Add Attendee** tab.

18. Click **Add Attendee** and scroll to find the relevant worker records that should be added to the Appointment. Note that you can use the CTRL key to select multiple workers before clicking **Add**. Then click **Add > Save and Close Add Attendee**.

19. To complete the Medical Case Manager Report, navigate to the consumer's record and click on **Forms > File > Add Form**.

The screenshot shows the Case Management Module interface. In the top navigation bar, the 'Add Forms' button is highlighted with a blue arrow. Below the navigation bar, the 'CONSUMERS' tab is selected. The consumer record for 'Smith, Marianne (10043)' is displayed. In the record header, the 'Forms' tab is highlighted with a blue arrow. A table below shows 8 forms returned, with the first two rows visible:

Form	Review	Review Date	Worker
Central Admissions Cover Sheet	Initial	04/05/2018	Admission, ICF
Crisis Identification Tool	Initial	04/04/2018	Reed, Monica

20. In the Please Select Type field select the Medical Case Manager Report

21. Complete all relevant fields in the Form.

22. In the header, complete the following fields:

- Review = As Needed
- Division = APD
- Status = Complete
- Program = Update as appropriate

23. When finished, click **File > Save and Close Form**

The screenshot shows the 'Medical Case Manager Report' form. The 'Please Select Type' dropdown is set to 'Medical Case Manager Report'. The form fields are filled out as follows:

Consumer Forms	
Review *	As Needed
Review Date *	04/09/2018
Division *	APD
Approved By	MCM, Adam
Worker *	MCM, Adam
Status *	Complete
Program	APD Waiver
Approved Date	04/09/2018

The form is titled 'MEDICAL CASE MANAGER REPORT'. The client information is as follows:

MEDICAL CASE MANAGER REPORT	
Client First Name:	Marianne
Client Last Name:	Smith
Client Date of Birth:	03/04/2004
Client Age:	14

24. To notify the MCM Review Requestor and the Clinical Work Stream Lead that the Medical Case Manager Report is Complete, navigate to the consumer's record and click **Notes > File > Add Note**.

25. In the new Note record, update the following fields:

- Division = APD

- b. Note Type = MCM Report Status
- c. Note Status = Complete
- d. Route the Note to the MCM Review Requestor and the Clinical Workstream Lead by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

26. When finished, click **File > Save and Close Notes**

The screenshot displays the 'iConnect' application interface. At the top, the user is identified as 'Marianne Smith' with a timestamp of '4/9/2018 10:30 AM'. The page title is 'Notes'. Below the header, there are tabs for 'File' and 'Tools'. The main content area is titled 'Notes Details' and contains the following fields:

- Division ***: APD (dropdown)
- Note By ***: MCM, Adam (dropdown)
- Note Date ***: 04/09/2018 (calendar icon)
- Program/Provider**: APD Waiver (dropdown) with a 'Details' link.
- Note Type ***: MCM Request (dropdown). A blue arrow points to the dropdown arrow.
- Note Sub-Type**: Complete (dropdown)
- Description**: A text area with a vertical scrollbar.
- Note**: A larger text area containing the text: 'The Consumer's "Medical Case Manager Report" is complete.'
- Status ***: Complete (dropdown)
- Date Completed**: 04/09/2018 (text field)

Chapter 18a | WSC Service Recording

Introduction

Upon a Consumer receiving services, Providers are required to track and maintain those services and the details surrounding them. These details can include a variation of record-keeping methods based on the type of service(s) rendered. The documentation types include Progress Notes, Attendance Logs, Service Logs, Trip Logs, or a combination of documents. Often these services must be documented as frequently as daily, but some can be documented monthly.

1. Life Skills Development – Level 1 (Companion)
2. Life Skills Development – Level 2 (Supported Employment)
3. Life Skills Development – Level 3 (Adult Day Training - ADT)
4. Residential Habilitation (Standard)
5. Residential Habilitation (Behavior Focused)
6. Residential Habilitation (Intensive Behavior)
7. Supported Living Coaching
8. Support Coordination
9. Behavior Analysis Services
10. Behavior Assistant Service

WSC Monthly Service Recording

Waiver Support Coordinators (WSCs) should maintain all progress notes in one place in iConnect. To streamline the entry of progress notes, iConnect has been updated so that the session notes are included within one screen design under the Provider Documentation Tab.

[WSC Advisory #2023-006](#) released on August 4, 2023 provides a method to streamline Progress Notes within iConnect. Waiver Support Coordinators (WSCs) and Consumer-Directed Care Plus (CDC+) Consultants are required to maintain Progress Notes (also referred to as Case Notes) in iConnect in accordance with the iBudget Handbook.

WSCs and CDC+ Consultants may maintain all billable contacts in a single Progress Note for each month using the authorized service code for Support Coordination. To do so, the WSC or CDC+ Consultant will enter all billable contacts for the same calendar month in the Progress Notes field.

They will also need to note the dates that the contacts occurred within that same month.

1. Monthly, the Waiver Support Coordinator can choose to record their Support Coordination on a monthly (billable) note, and an additional contact note, both as Activities on the Provider Documentation tab in iConnect.

Or the Waiver Support Coordinator can record their Support Coordination on a monthly (billable) note that contains all dates when contacts were made.

2. The contacts can be with the recipient or with persons important in the recipient's life, including family members, legal representatives, service providers, or community members.
3. The contacts can be via telephone, letter writing, or e-mail transmission. Any contact or activity on behalf of the recipient must be documented in the support coordination progress notes and on the Provider Documentation tab in iConnect.
4. The contacts must be individualized and related to services and benefits specific to the recipient who is receiving services.
5. It is best practice to complete the [Additional Contact Note](#) as the last note of the month.
6. Administrative activities such as typing letters, filing, mailing, or leaving messages do not qualify as billable contacts or activities. These activities should be documented as [Administrative/Non-Billable Activities](#).
7. In addition, activities including telephone calls to schedule meetings, setting up face-to-face visits or scheduling meetings with the recipient's employer, family, or providers do not qualify as contacts.

Support Coordination Billable Note

1. To begin, log into iConnect and set Role = WSC/CDC. Click **Go**
2. Navigate to the Consumers record and click the **Provider Documentation** tab > click **File > Add Provider Documentation**

The screenshot displays the iConnect web application interface. At the top, the logo 'iConnect' is visible on the left, and 'Demonstration Raven' with 'Last Updated by' and 'at 4/15/2022 8:23:05 AM' is in the center. On the right, there is a 'Sign Out' link and a 'Role' dropdown menu set to 'WSC/CDC' with a 'GO' button. Below this is a navigation bar with 'File', 'Tools', and 'Ticklers'. A 'Quick Search' section includes a text input, a 'Consumers' dropdown, a 'Last Name' dropdown, a 'GO' button, and a link to 'ADVANCED SEARCH'. Below the search bar is a horizontal menu with 'MY DASHBOARD', 'CONSUMERS' (highlighted), 'PROVIDERS', 'CLAIMS', 'SCHEDULER', 'UTILITIES', and 'REPORTS'. At the bottom, a sub-menu for 'Raven, Demonstration E' shows various tabs: 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation' (highlighted), 'Contacts', 'Consumer Module User', 'Demographics', 'Divisions', 'Consumer Budgets', 'Programs', 'Provider Selections', 'SAN', 'Notes', 'Forms', 'Appointments', 'Plans', 'Waiting List', and 'Payers'.

3. The Provider Documentation Details page is displayed. Update the following fields:
 - a. Start Date: Defaults to today and is editable
 - b. Start Time: Leave Blank

- c. End Date: Defaults to today and is editable
- d. End Time: Leave Blank
- e. Click Add

An asterisk (*) indicates a required field

Activity Times					
Start Date *	Start Time	End Date *	End Time	Total Minutes	
04/01/2022	5:00 PM	04/01/2022	6:00 PM		Add

- f. Select the appropriate Authorization by clicking the ellipsis and searching for the current Auth ID
 - i. Click the Support Coordination Authorization. The Authorization ID is populated on the Provider Documentation details page.

Authorization	
Auth ID	PA Number

Filters

Auth Service EDI Status * Contains Approved AND X

Auth ID +

Search Reset

1 Auth Search record(s) returned - now viewing 1 through 1

	Auth ID	Auth Date	Provider	Start Date	End Date
+	214146	07/01/2021	Training QO	07/01/2021	06/30/2022

First Previous Records per page 15 Next Last

- g. Once the Auth ID is Selected, the Division the Provider, and Worker fields will populate.

Activity Details			
Division	APD	Worker*	Training, WSC
Provider	Training QO	Status	Pending

- h. Click the Service ellipsis to display a list of services.
- i. Select the Authorized Service

DialogVendorServiceSelectPopUp

Search By: Service Type Search Text: Search Cancel

ServiceID	ServiceCode	SecondaryCode	Service	UnitCost	UnitType	EffectiveDate	EndDate	SvcStartDate	SvcEndDate	VServiceID	AuthServiceID	MaxAuth	Used	Remaining
5882	G9012:UC	G9012:UC	(4270) Support Coordination	148.69	Month	01/01/2018		07/01/2022	06/30/2023	72227	203989	12	0.00	12.00

- j. The Activity Services details are populated on the Provider Documentation details page.

k. Update the number of Units = 1.

Activity Services			
Service *	G9012:UC	(4270) Support Coordination	Clear
Units *	1		
Rate	\$148.69		
Secondary Code	G9012:UC		
Unit Type	Month		
		Total Cost	\$148.69

l. Add text to the Person Contacted/Attendees box

m. Add text to the Progress Note text box

n. Provider Documentation Type = select applicable items

o. Add follow-up information to the Follow-Up text box

Documentation			
Person Contacted/Attendees *	Julia Presentation ,Mother, Caroline Presentation, Individual, Didi Presentation, Behavior Analyst		
Provider Documentation Type *	Face to Face Other Billable Activity Admin/Non-Billable Activity Facility Visit School Visit Support Plan Pre-Planning Supported Living Quarterly	Home Visit Support Plan Meeting	Progress Note * Here is where we type the details of the meeting/contact. Ensure that your documentation meet the iBudget Handbook requirements. This example does not so do not replicate these notes. 49815 characters remaining
		Follow-Up	Document any follow-up activities that you will perform as a result of this meeting/contact.

4. Click **File > Save and Close Provider Documentation.**

There is no longer a need to Save and Add Session Note as the WSC's activities are now documented in the additional fields included at the bottom of this page.

iConnect Raven Demonstration 7/1/2022 10:06 AM **Provider Documentation**

File

Activity Times					
Start Date *	Start Time	End Date *	End Time	Total Minutes	
04/01/2022	5:00 PM	04/01/2022	6:00 PM	0	Delete
04/09/2022		04/09/2022			Add

Authorization	
Auth ID	214146
PA Number	

Activity Details	
Division	APD
Worker*	WSC
Provider	Training QO
Status	Pending

Activity Services	
Service *	G9012:UC (4270) Support Coordination
Units *	1
Rate	\$148.69
Secondary Code	G9012:UC
Unit Type	Month
Total Cost \$148.69	

Documentation	
Person Contacted/Attendees *	Julia Presentation ,Mother, Caroline Presentation, Individual, Didi Presentation, Behavior Analyst
Provider Documentation Type *	Face to Face Other Billable Activity Admin/Non-Billable Activity Facility Visit School Visit Support Plan Pre-Planning
Progress Note *	Here is where we type the details of the meeting/contact. Ensure that your documentation meet the iBudget Handbook requirements. This example does not so do not replicate these notes. 49815 characters remaining
Follow-Up	Document any follow-up activities that you will perform as a result of this meeting/contact.

WSC Progress Notes – Additional Contact Note

1. Anytime during the month, when the Waiver Support Coordinator has contact with a consumer or does work on their behalf, they will record his / her Support Coordination progress notes on the Provider Documentation tab in iConnect. This is where the second contact of the month required by the iBudget Handbook will be recorded as well.
2. To begin, log into iConnect and set Role = WSC/CDC. Click **Go**.
3. Navigate to the Consumers record and click the **Provider Documentation** tab > click **File > Add Provider Documentation**.

4. The Provider Documentation Details page is displayed. Update the following fields:
 - a. Start Date: Defaults to today and is editable
 - b. Start Time: Leave blank
 - c. End Date: Defaults to today and is editable
 - d. End Time: Leave blank
 - e. Leave the Auth ID field blank.

- f. Provider = for roles with Program level access, like the WSC/CDC the worker must have an open Provider Selection record for the provider name to display in the dropdown
- g. Worker = defaults to self
- h. Click the Service ellipsis to display a list of services. Select the Service Code 0000 = Non-Billable Progress Note Documentation.

The screenshot shows the 'Activity Details' form. The 'Provider' is set to 'Training QO' and the 'Worker' is 'Training, WSC'. The 'Status' is 'Pending'. A 'DialogVendorServiceSelectPopUp' window is open, displaying a search interface. The 'Search By' dropdown is set to 'Service Type'. Below the search bar is a table with the following data:

ServiceID	ServiceCode	SecondaryCode	Service	UnitCost	UnitType	EffectiveDate	EndDate	ServiceID	MaxAuth	Used	Remaining
5950	0000	0000	Additional Contact Documentation	0.00	Units	07/01/2019		453941	0	0	0

- i. The Activity Services details are populated on the Provider Documentation details page.

The screenshot shows the 'Provider Documentation' form. The 'Activity Times' section has 'Start Date' as 08/01/2022 and 'End Date' as 08/31/2022. The 'Authorization' section has 'Auth ID' and 'PA Number' fields. The 'Activity Details' section has 'Division' as APD and 'Worker' as Training, WSC. The 'Activity Services' section is populated with the following data:

Service *	Units *	Rate	Secondary Code	Unit Type	Total Cost
0000 Additional Contact Documentation	1	\$0.00	0000	Units	\$0.00

- j. Update the number of Units = 1.
- k. Add text to the Person Contacted/Attendees box
- l. Add text to the Progress Note text box
- m. Provider Documentation Type = select applicable items
- n. Add follow-up information to the Follow-Up text box

The screenshot shows the 'Documentation' form. The 'Person Contacted/Attendees' section has a text box for 'Enter the Name of those contacted here'. The 'Progress Note' section has a text box for 'Enter all of the details of the contact here' and a character count of 49696 characters remaining. The 'Provider Documentation Type' section has a dropdown menu with the following options: Home Visit, Facility Visit, School Visit, Support Plan Meeting, Support Plan Pre-Planning, Supported Living Quarter, and Other. The 'Follow-Up' section has a text box for 'Enter information pertaining to follow-up here'.

5. Click **File > Save and Close Provider Documentation**.

There is no longer a need to Save and Add Session Note as the WSC's activities are now documented in the additional fields included at the bottom of this page

WSC Progress Notes – Administrative/Non-Billable Activities

Waiver Support Coordinators (WSCs) should maintain all progress notes in one place in iConnect, including case notes related to administrative/non-billable activities. For this purpose, WSCs should use the service code, “0000-NB WSC Administrative Activity.”

Examples include, but are not limited to:

- Documenting the sending of a copy of the support plan to the client and their legal representative.
- Documenting a back-and-forth communication with a client/legal representative that is not tied to a billable contact.
- Documenting activities related to scheduling meetings with the client, legal rep, client’s employer, family, or service providers.

1. To begin, log into iConnect and set Role = WSC/CDC. Click **Go**
2. Navigate to the Consumers record and click the **Provider Documentation** tab > click **File > Add Provider Documentation**

3. The Provider Documentation Details page is displayed. Update the following fields:
 - a. Start Date: Defaults to today and is editable
 - b. Start Time: Select from the dropdowns
 - c. End Date: Defaults to today and is editable
 - d. End Time: Select from the dropdowns
 - e. Click Add

An asterisk (*) indicates a required field

Activity Times				
Start Date *	Start Time	End Date *	End Time	Total Minutes
04/01/2022	5:00 PM	04/01/2022	6:00 PM	
				Add

- f. **DO NOT CHOOSE AN AUTHORIZATION!!!!**

Authorization

Auth ID **Skip this!** PA Number

Activity Details

- g. Division = APD
- h. Provider = Choose your provider record
- i. Worker = defaults to self

qool iConnect Demonstration Raven
4/15/2022 8:29 AM **Provider Documentation**

File

Activity Times

Start Date *	Start Time	End Date *	End Time	Total Minutes	
04/15/2022	5:00 PM	04/15/2022	5:01 PM	1	Delete
04/15/2022		04/15/2022			Add

Authorization

Auth ID PA Number

Activity Details

Division: APD Worker: Training.WSC Clear Details

Provider: Training.QO Status: Pending

- j. Click the Service ellipsis to display a list of services.
- k. Select "0000-NB" Select the Service Code 0000-NB = WSC Administrative Activity.

DialogVendorServiceSelectPopUp

Search By: Service Type Search Text: Search Cancel

ServiceID	ServiceCode	SecondaryCode	Service	UnitCost	UnitType	EffectiveDate	EndDate	VServiceID	MaxAuth	Used	Remaining
5950	0000	0000	Additional Contact Documentation	0.00	Units	04/15/2022		453933	0	0	0
5975	0000-NB	0000-NB	WSC Administrative Activity	0.00	Units	04/15/2022		453934	0	0	0
5882	G9012:UC	G9012:UC	(4270) Support Coordination	148.69	Month	01/01/2018		135603	0	0	0
5889	G9012:UC:U5	G9012:UC:U5	(4400) Consultant - CDC	148.69	Month	01/01/2018		117554	0	0	0
5883	T2022:UC	T2022:UC	(4271) Support Coordination (Limited)	74.35	Month	01/01/2018		129128	0	0	0
5890	T2022:UC:U5	T2022:UC:U5	(4410) Consultant (Limited) - CDC	74.35	Month	01/01/2018		112899	0	0	0

- l. The Activity Services details are populated on the Provider Documentation details page.
- m. Update the number of Units = 1.

Activity Services

Service * 0000-NB WSC Administrative Activity ... Clear Total Cost \$0.00

Units * 1

Rate \$0.00

Secondary Code 0000-NB

Unit Type Units

- n. Add Text to the Person Contacted/Attendees box
- o. Add Text to the Progress Note

- p. Provider Documentation Type = Admin/Non-Billable Activity.
- q. Add Service Log documentation to the Note Text box.

Documentation

Person Contacted/Attendees *

Document the persons contacted here

Progress Note *

Document your notes here

49970 characters remaining

Provider Documentation Type *

Face to Face
Other Billable Activity
Home Visit
Facility Visit
School Visit
Support Plan Meeting
Support Plan Pre-Planning

Admin/Non-Billable Activity

4. Click **File > Save and Close Provider Documentation**.

There is no need to Save and Add Session Note as the WSC's activities are documented in the Progress note text field.

qcd iConnect Demonstration Raven
Last Updated by i
at 4/15/2022 8:41:17 AM **Provider Documentation**

File

Provider Documentation

Claims

Start Date *	Start Time	End Date *	End Time	Total Minutes	
04/15/2022	5:00 PM	04/15/2022	5:01 PM	1	Delete
04/15/2022		04/15/2022			Add

Authorization

Auth ID PA Number

Activity Details

Division APD Worker* Training, WSC [Details](#)

Provider Training QO [Details](#) Status Complete

Activity Services

Service *	Units *	Rate	Secondary Code	Unit Type	Total Cost
0000-NB WSC Administrative Activity	1.00	\$0.00	0000-NB	Units	\$0.00

Documentation

Person Contacted/Attendees *

Document the person(s) contacted here

Progress Note *

Document your notes here

Provider Documentation Type *

Face to Face
Other Billable Activity
Home Visit
Facility Visit
School Visit

Admin/Non-Billable Activity

Follow-Up

Chapter 18b | Service Recording

Introduction

Upon a Consumer receiving services, Providers are required to track and maintain those services and the details surrounding them. These details can include a variation of record keeping methods based on the type of service(s) rendered. The documentation types include Progress Notes, Attendance Logs, Service Logs, Trip Logs, or a combination of documents.

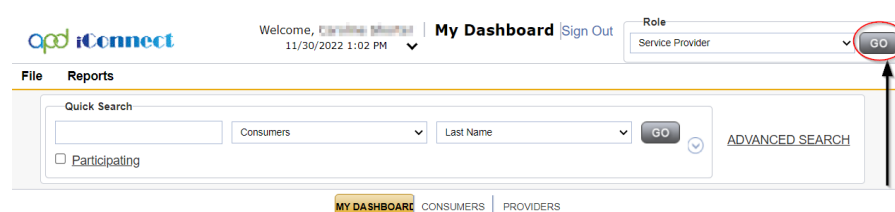
This job aid will encompass using iConnect to record services using the Provider Documentation Tab of the Consumer's record. If services are required to use the EVV system, this aid will not address those tasks, please refer to the [EVV Information and Training Material](#) website.

How to use this job aid: to understand how to fill out the Provider Documentation Screen, use the "Intro to completing Provider Documentation Screens with detailed images" section. This provides detailed instructions on how to complete the required fields of the Provider Documentation screen. Once familiarized with how the Provider Documentation record can be completed, use the Documentation specific sections as a quick reference to complete the required documentation (Service Log, Monthly Summary, Annual Report, etc).

Please refer to the [Developmental Disabilities Individual Budgeting Waiver Services Coverage and Limitations Handbook](#) for specific documentation requirements. Services provided after the implementation of iConnect must be added to iConnect prior to billing. Once a service is live in iConnect, the contracted vendor monitoring handbook compliance will look for documentation in iConnect.

Intro to completing Provider Documentation Screens with detailed images

1. To begin, log into iConnect and set Role = **Service Provider** or **Service Provider Worker**. Click **Go**.

The screenshot shows the iConnect user interface. At the top, there is a header with the iConnect logo, a welcome message, the date and time, and navigation links for 'My Dashboard' and 'Sign Out'. A 'Role' dropdown menu is set to 'Service Provider', and the 'GO' button next to it is circled in red with an arrow pointing to it. Below the header, there is a 'File Reports' section with a 'Quick Search' area containing text input fields, dropdown menus for 'Consumers' and 'Last Name', and a 'GO' button. A checkbox for 'Participating' is also visible. At the bottom, there are tabs for 'MY DASHBOARD', 'CONSUMERS', and 'PROVIDERS'.

2. Navigate to the Consumer's record.
 - a. Type the consumer's last name in the Quick Search text field (first field on the left)
 - b. Ensure that the second field contains Consumers, third field contains last name and click "Go"

Welcome, Carolina Barker | My Dashboard | Sign Out
12/6/2022 8:56 AM

Role: Service Provider

File Reports

Quick Search
 → → → ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS CLAIMS SCHEDULER UTILITIES REPORTS

3. Click the **Provider Documentation** tab > click **File** > **Add Provider Documentation**.

Lyre Demonstrations
Last Updated by [redacted] at 11/30/2022 11:45:34 AM

Provider Documentation | Sign Out

Role: Service Provider

File Tools Ticklers

Add Provider Documentation
Print

Quick Search
 Consumers Last Name ADVANCED SEARCH
☐ Participating

MY DASHBOARD CONSUMERS PROVIDERS

Demonstrations, Lyre (215662)

Diagnosis Medications **Provider Documentation** Contacts
 Demographics Notes Forms Appointments

4. The Provider Documentation Details page is displayed. Update the following fields:
- Start Date: Use the Calendar icon to select the date. The date will not change until the date is selected in the calendar menu.

Start Date * Start

11/30/2022

Nov 2022

Su Mo Tu We Th Fr Sa

1 2 3 4 5

6 7 8 9 10 11 12

13 14 15 16 17 18 19

20 21 22 23 24 25 26

27 28 29 30

Start Date * Start

11/30/2022

Nov 2022

Su M We Th Fr Sa

Jan

Feb

Mar

Apr

May

Jun

Jul

Aug

Sep

Oct

Nov

Dec

Units *

0

Start Date * Start

11/30/2022

Jul 2022

Su Mo Tu We Th Fr Sa

1 2

3 4 5 6 7 8 9

10 11 12 13 14 15 16

17 18 19 20 21 22 23

24 25 26 27 28 29 30

31

- Start Time: Use the Dropdown Menus to make the selections. Select the Hour, the Minute, and AM/PM.

Start Time

01 02 03 04 05 06 07

Start Time

03 00 01 02 03 04 05 06

Start Time

03 00 AM PM

- c. End Date: End date may automatically populate to the same date, but if not make selection using the Calendar icon.
- d. End Time: Make selections from dropdown menus.
- e. Click **Add**.

i. Notice a new line that appears for dates and times, do not add a second date unless instructed otherwise.

Activity Times					
Start Date *	Start Time	End Date *	End Time	Total Minutes	
07/14/2022	03:00 PM	07/14/2022	06:00 PM		Add

5. Click the box next to the Auth ID field that contains an ellipsis (three dots) to display a list of authorizations. There are specific circumstances in which you may skip this step, but that will be listed in the documentation specific instructions.

Authorization	
Auth ID	<input type="text"/>

- a. Using the Filter Options can assist with locating the necessary Auth ID.
- b. Use the Green + to add filters.

Filters

Auth ID

+

Search

Reset

- c. Make the appropriate selections from the dropdown menus.

Filters

Start Date

Greater Than

07/01/2022

AND

+

Auth ID

Auth Date

Start Date

End Date

Auth Service ID

Service

Max Units

Auth Service EDI Status

Search

Reset

- d. Use the Red X to remove filters.

Filters

Start Date

Equal To

07/01/2022

AND

Service

Equal To

Auth ID

+

×

×

Search

Reset

- e. Click the Search button.

6. Click the Authorization. The Authorization ID is populated on the Provider Documentation details page.

Filters

Start Date Equal To 07/01/2022 AND

Auth ID

Search Reset

1 Auth Search record(s) returned - now viewing 1 through 1

Auth ID	Auth Date	Provider	Start Date	End Date
257185	11/30/2022	Simulation Provider	07/01/2022	06/30/2023

First Previous Records per page 15 Next Last

7. Verify that the Division and Provider information have been populated. If they are not, use the dropdown menus to make the appropriate selections.

Activity Details

Division APD

Provider Simulation Provide Details

8. Click the box next to the Service field that contains an ellipsis (three dots) to display a list of services for this authorization.

Activity Services

Service *	Units *	Total

- a. Select the Service.

DialogVendorServiceSelectPopUp

Search By: Service Type Search Text:

Search Cancel

ServiceID	ServiceCode	SecondaryCode	Service	UnitCost	UnitType	EffectiveDate	EndDate	SvcStartDate	SvcEndDate	VServiceID	AuthServiceID	MaxAuth	Used	Remaining
5825	SS135:UC	SS135:UC	(4080) Life Skills Development - Level 1 (Community Inclusion)	3.13	15 mins	11/29/2021		07/01/2022	06/30/2023	251237	156906	400	0.00	400.00

- b. The Activity Services details are populated on the Provider Documentation details page.

9. Verify/update the number of Units as needed. Some services are programmed to populate this field, whereas other services are not programmed to populate this field.

- a. In the first example, the units cannot be changed. In the second example, Units were updated. Notice the difference in the shade of the boxes, editable fields have a white background.

Activity Services		Total Cost
Service *	SS135 UC	\$37.56
Units *	12	
Rate	\$3.13	
Secondary Code	SS135 UC	
Activity Services		Total Cost
Service *	SS135 UC	\$0.00
Units *	1	
Rate	\$0.00	
Secondary Code	SS135 UC	
Unit Type	Units	

10. Provider Documentation Type = Select as needed.

a. Use the scrollbar to see all the selections.

Documentation	
Provider Documentation Type *	<div> Annual Report Daily Attendance Log Monthly R&B Monthly Summary Progress Note Quarterly Summary Trip Log </div>

b. The carat pointing to the right will move selections to the box on the right.

- Single carat moves the selected options.
- Double carats move all the items.

Documentation	
Provider Documentation Type *	<div> Annual Report Daily Attendance Log Monthly R&B Monthly Summary Progress Note Quarterly Summary Trip Log </div>

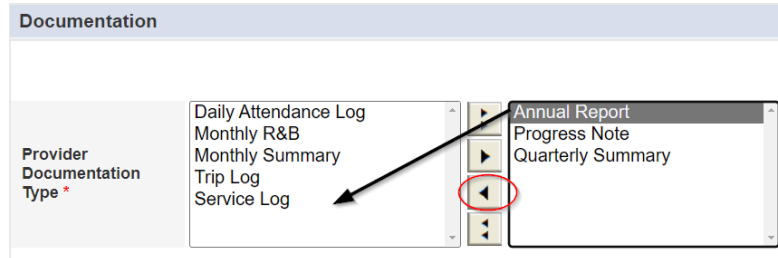
c. Ctrl + Mouse Clicks can be used to make multiple selections at one time (example below).

Documentation	
Provider Documentation Type *	<div> Annual Report Daily Attendance Log Monthly R&B Monthly Summary Progress Note Quarterly Summary Trip Log </div>

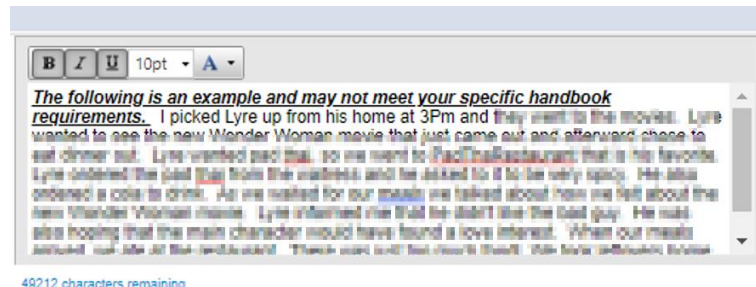
d. Selections should be moved to the box on the right.

Documentation	
Provider Documentation Type *	<div> Daily Attendance Log Monthly R&B Monthly Summary Trip Log Service Log </div>

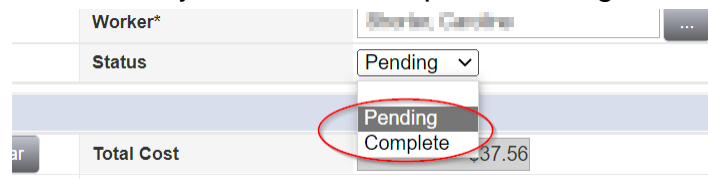
- e. If incorrect selections were made, use the carat pointing to the left to move those selections back into the original menu on the left.
 - i. Single carat moves the selected options.
 - ii. Double carats move all the items.



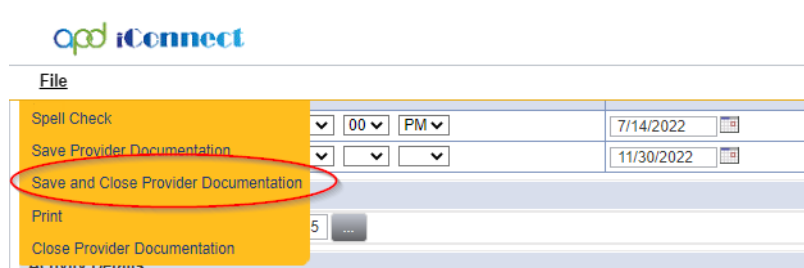
11. Note - Enter details of the services provided to the consumer by typing in the text box.



12. Status - Can be updated by using the dropdown menu. This should be changed to Complete once the activity is finalized and prior to billing.



13. File > **Save and Close Provider Documentation.**



Daily Attendance Log

Service Providers will document activities for the following services on the Provider Documentation tab in iConnect:

- Life Skills Development 3 (Adult Day Training)
- Life Skills Development 4 (Prevocational Services)
- Residential Habilitation Services

An attendance log is for Life Skills Development 3/4 or Residential Habilitation. It records the time period (not for Residential Habilitation) and dates during the month when services were provided.

If the service is Residential Habilitation, the provider will need to do monthly logs. The provider creates one log, with a separate date entry for each day in the month services were provided.

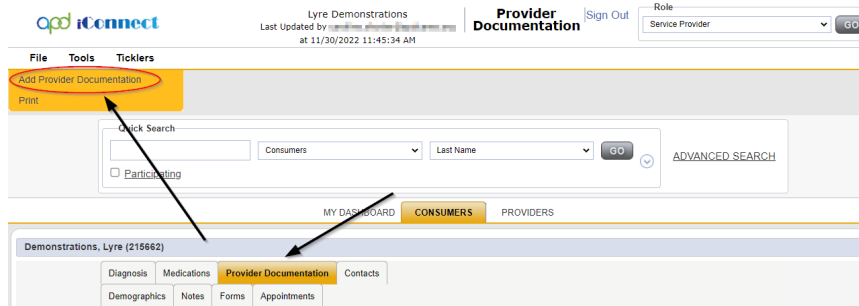
If the service is LSD3, the provider will need to do weekly logs. The provider creates one log, with a separate date entry for each day in the week services were provided.

Please refer to [the Intro to completing Provider Documentation Screens with detailed images for instructions](#) on how to complete each field.

Notice that Attendance Logs are unique in that one provider documentation activity will contain multiple dates, depending on the type of service provided.

- Daily Attendance Logs for ResHab Services will contain all dates of service for the month.
 - *ResHab Services must be **24+ days to be authorized as the monthly rate.***
 - *If the Service provided is less than 24 days, the service must be authorized as the daily rate.*
- Daily Attendance Logs for LSD3 and LSD4 Services will contain all dates of service for the week.

1. To begin, log into iConnect and set Role = **Service Provider** or **Service Provider Worker**. Click **Go**.
2. Navigate to the Consumers record and click the **Provider Documentation** tab > click **File > Add Provider Documentation**.



3. The Provider Documentation Details page is displayed. Update the following fields:
 - a. Start Date: Select the Date of Service.
 - b. Start Time: Select the start time of the service or skip (see conditions below)
 - c. End Date: Select the Date of Service
 - d. End Time: Select the end time of the service or skip (see conditions below)
 - e. Click **Add** or skip (see conditions below)

IMPORTANT: Repeat this step to add all the days in which this individual received services for

- **the week** when documenting daily attendance for LSD3 and LSD4
- **the month** when documenting daily attendance for Residential Habilitation Services
 - Additionally, when Residential Habilitation services are approved (with either the **monthly** or the **daily rate**) the start date can be the beginning of the month and the end date can be the last day of the month if there are no absences during the time period.
 - For example:

01/01/2024 12:00AM - 01/31/2024, 11:59PM

 - For services approved as monthly services: annotate any absences in the Note text field to document accurate attendance.
 - **Skipping Times and Add button:** Residential Habilitation services that are **approved at monthly** rates, the start date can be the beginning of the month and the end date can be the last day of the month, times can be skipped and the Add button can be skipped to omit the time entry.
 - For example:

01/01/2024 Skip Time - 01/31/2024, Skip Time
 - Skip ADD button.

- **Do Not Skip** the times and Add button if dates and times have already been added.
 - Annotate any absences in the Note text field to document accurate attendance.
 - If an individual is not at the home during specific dates (has absences) within the month, then there can be multiple intervals. This must be done for services **authorized as daily rates** to ensure that the quantity of units tabulated are accurate.
 - For example, when an individual resides in the licensed facility on weekdays, then intervals can include
01/01/2024 12:00AM - 01/05/2024, 11:59PM
01/08/2024 12:00AM - 01/12/2024 11:59PM
01/15/2024 12:00AM - 01/19/2024 11:59PM
01/22/2024 12:00AM - 01/26/2024 11:59PM
01/22/2024 12:00AM - 01/26/2024 11:59PM
01/29/2024 12:00AM - 01/31/2024 11:59PM
4. Click the box next to the Auth ID field that contains an ellipsis (three dots) to display a list of authorizations.

IMPORTANT: Ensure the appropriate Authorization ID is chosen for the appropriate timeframe of service provided. If there is a need to obtain a new auth id with the day rate, Providers must contact the WSCs and withhold documenting the service until the WSC makes the change in the consumer's cost plan and issues a corrected Authorization.
 5. Click the Authorization.
 - a. The Authorization ID will populate on the Provider Documentation details page.
 6. Click the box next to the Service field that contains an ellipsis (three dots) to display a list of services for this authorization. Select the Service.
 - a. The Activity Services details are populated on the Provider Documentation details page.
 7. Verify the number of Units is populated. If needed, populate this with the quantity of units being documented (ex. Monthly ResHab services require manual entry). Note the Total Cost value changes as the number of Units change.
 8. Provider Documentation Type = Select Daily Attendance Log.
 - a. If additional selections are needed, make those additional selections too.

9. Note = Enter details of the services provided to the consumer and ensure to document when the individual is not in the home and receiving other services.
- For example: At ADT from approximately 8:00am- 3:00pm every weekday during January except for Monday 1/15/2024 where the ADT was closed for the holiday.*
 - Document Monthly Service Absences: Lyre went to the beach with parents from 01/15/2024 to 01/20/2024*
10. Status = Complete.
- 11.

The screenshot shows the iConnect Provider Documentation form. The 'File' section at the top includes a table for service dates and times. The 'Authorization' section contains fields for Auth ID (257185) and PA Number. The 'Activity Details' section shows Division (APD), Provider (Simulation), and Status (Complete). The 'Activity Services' section displays Service (S5135:UC), Units (12), Rate (\$3.13), and Total Cost (\$37.56). The 'Documentation' section at the bottom includes a 'Note' field with a text area and a 'Service Log' button. Arrows indicate the location of various fields and buttons.

12. Click **File > Save and Close Provider Documentation.**

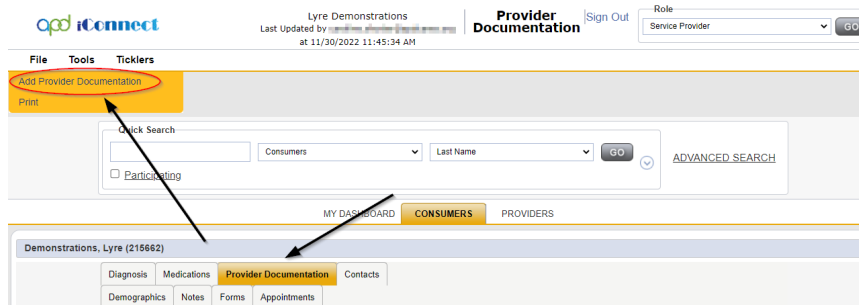
Service Log

Service Providers will document activities for the following services on the Provider Documentation tab in iConnect:

- Special Medical Home Care
- Behavior Analysis
- Behavior Assistant
- Life Skills Development 1 (Companion)
- Life Skills Development 2 (Supported Employment)
- Personal Supports (EVV Exempt)
- Respite (provided in a licensed facility)
- Personal Emergency Response Systems (these providers can submit a detailed invoice in lieu of service logs)

Please refer to [the Intro to completing Provider Documentation Screens with detailed images for instructions](#) on how to complete each field.

1. To begin, log into iConnect and set Role = **Service Provider** or **Service Provider Worker**. Click **Go**.
2. Navigate to the Consumers record and click the **Provider Documentation** tab > click **File > Add Provider Documentation**.



3. The Provider Documentation Details page is displayed. Update the following fields:
 - a. Start Date: Select the Date of Service.
 - b. Start Time: Select the start time of the service
 - c. End Date: Select the Date of Service.
 - d. End Time: Select the end time of the service
 - e. Click **Add**.

IMPORTANT: Each Progress Note Activity should contain one date of service. DO NOT ADD MULTIPLE DATES

4. Click the box next to the Auth ID field that contains an ellipsis (three dots) to display a list of authorizations.
5. Click the Authorization.
 - b. The Authorization ID will populate on the Provider Documentation details page.
6. Click the box next to the Service field that contains an ellipsis (three dots) to display a list of services for this authorization. Select the Service.
 - b. The Activity Services details are populated on the Provider Documentation details page.
7. Verify the number of Units is populated. Note the Total Cost value changes as the number of Units change.

8. Provider Documentation Type = Select Service Log.
 - a. If additional selections are needed, make those additional selections too.
9. Note = Enter details of the services provided to the consumer.
10. Status = Complete.

The screenshot shows the 'Provider Documentation' form in the iConnect system. The form is titled 'Lyre Demonstrations' and '11/30/2022 1:47 PM'. It includes a 'File' menu and a 'Provider Documentation' tab. The form is divided into several sections: 'Authorization', 'Activity Details', 'Activity Services', and 'Documentation'. In the 'Authorization' section, there are fields for 'Start Date *', 'Start Time', 'End Date *', 'End Time', and 'Total Minutes'. In the 'Activity Details' section, there are fields for 'Division', 'Provider', 'Worker*', and 'Status'. In the 'Activity Services' section, there are fields for 'Service *', 'Units *', 'Rate', 'Secondary Code', and 'Unit Type'. In the 'Documentation' section, there is a 'Provider Documentation Type *' dropdown menu and a 'Note *' text area. Arrows point to the following fields: 'Start Date *' (07/14/2022), 'Start Time' (03:00 PM), 'End Date *' (07/14/2022), 'End Time' (06:00 PM), 'Status' (Complete), and 'Provider Documentation Type *' (Service Log).

11. Click **File > Save and Close Provider Documentation.**

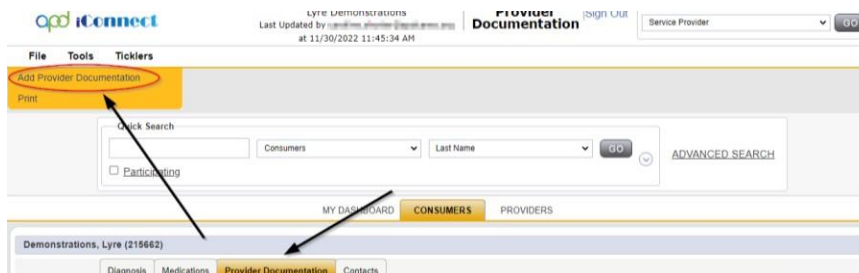
Daily Progress Note

Service Providers will document activities for the following services on the Provider Documentation tab in iConnect:

- Special Medical Home Care
- Supported Living Coaching
- Dietitian Services
- Occupational Therapy
- Physical Therapy
- Residential Nursing
- Respiratory Therapy
- Skilled Nursing
- Speech Therapy
- Specialized Mental Health Counseling

Please refer to [the Intro to completing Provider Documentation Screens with detailed images for instructions on how to complete each field.](#)

1. To begin, log into iConnect and set Role = **Service Provider** or **Service Provider Worker**. Click **Go**.
2. Navigate to the Consumer's record and click the **Provider Documentation** tab > click **File > Add Provider Documentation**.



3. The Provider Documentation Details page is displayed. Update the following fields:
 - a. Start Date: Select the Date of Service.
 - b. Start Time: Select the start time of the service
 - c. End Date: Select the Date of Service.
 - d. End Time: Select the end time of the service
 - e. Click **Add**.

IMPORTANT: Each Progress Note Activity should contain one date of service.

DO NOT ADD MULTIPLE DATES

4. Click the box next to the Auth ID field that contains an ellipsis (three dots) to display a list of authorizations.
5. Click the Authorization.
 - a. The Authorization ID will populate on the Provider Documentation details page.
6. Click the box next to the Service field that contains an ellipsis (three dots) to display a list of services for this authorization. Select the Service.
 - a. The Activity Services details are populated on the Provider Documentation details page.
7. Verify the number of Units is populated. Note the Total Cost value changes as the number of Units change.
8. Provider Documentation Type = Progress Note
 - a. If additional selections are needed, make those additional selections too, such as the Quarterly Summary or Annual Report (see next sections for more information)
9. Note - Enter details of the services provided to the consumer.
10. Status = Complete.

oqod iConnect Lyre Demonstrations
12/1/2022 8:17 AM **Provider Documentation**

File

Activity Times

Start Date *	Start Time	End Date *	End Time	Total Minutes	
07/21/2022	01:00 PM	07/21/2022	02:00 PM	60	Delete
12/01/2022		12/01/2022			Add

Authorization

Auth ID: 257185 PA Number:

Activity Details

Division: APD Worker:
 Provider: Simulation Provide Status: Complete

Activity Services

Service *: 92507:UC (4260) Speech Therapy Total Cost: \$64.08
 Units *:
 Rate: \$16.02
 Secondary Code: 92507:UC
 Unit Type: 15 mins

Documentation

Provider Documentation Type:
 Annual Report
 Daily Attendance Log
 Monthly R&B
 Monthly Summary
 Quarterly Summary
 Service Log
 Trin Log
 Progress Note

Note *

The following is an example and may not meet the Developmental Disabilities Individual Budgeting Waiver Services Coverage and Limitations Handbook requirements. Make sure that your documentation meets all the necessary requirements and do not copy this example.

Provided 1 hour of Speech Therapy and Lyre has made moderate improvement to the following goals:

Swallowing: Lyre is now able to swallow thick liquids. He has made a 10% improvement

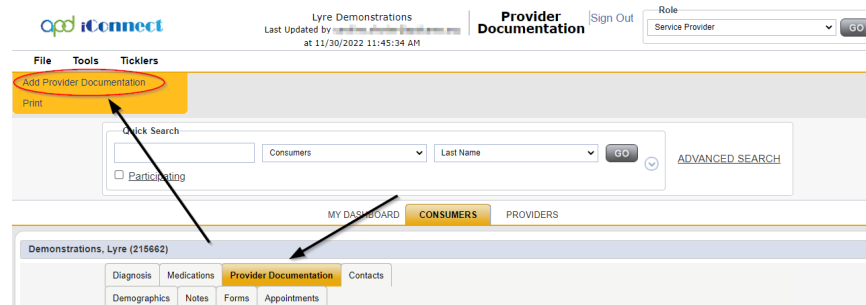
11. Click **File > Save and Close Provider Documentation**.

Trip Logs

The Service Provider will record his/her Transportation Activities on the Provider Documentation tab in iConnect.

Please refer to [the Intro to completing Provider Documentation Screens with detailed images for instructions on how to complete each field.](#)

1. To begin, log into iConnect and set Role = **Service Provider** or **Service Provider Worker**. Click **Go**.
2. Navigate to the Consumers record and click the **Provider Documentation** tab > click **File > Add Provider Documentation**.




3. The Provider Documentation Details page is displayed. Update the following fields:
 - a. Start Date: Select the Date of Service.
 - b. Start Time: Select the start time of the service (these times can be approximations)
 - c. End Date: Select the Date of Service.
 - d. End Time: Select the end time of the service (these times can be approximations)
 - e. Click **Add**.

IMPORTANT: Each Trip Log should contain one date of service if approved by trip and miles. DO NOT ADD MULTIPLE DATES (unless approved by the monthly rate).

Reminder: Any approximated transportation times should not overlap with other documented service delivery, such as ADT or Prevocational service delivery

4. Click the box next to the Auth ID field that contains an ellipsis (three dots) to display a list of authorizations.
5. Click the Authorization.
 - c. The Authorization ID will populate on the Provider Documentation details page.
6. Click the box next to the Service field that contains an ellipsis (three dots) to display a list of services for this authorization. Select the Service.
 - c. The Activity Services details are populated on the Provider Documentation details page.
7. Verify the number of Units is populated. Note the Total Cost value changes as the number of Units change.
8. Provider Documentation Type = Trip Log
9. Note = enter the trip log details:
 - Starting location (consumer's home for example)
 - Destination
 - The following is only required for the services approved for transportation by the **mile**.
 - Starting Odometer Reading (required for transportation authorized by miles)
 - Ending Odometer Reading (required for transportation authorized by miles)
 - Total Mileage (required for transportation authorized by miles)
10. Status = Complete

 Lyre Demonstrations 12/1/2022 11:12 AM **Provider Documentation**

File

Activity Times

Start Date *	Start Time	End Date *	End Time	Total Minutes	
7/11/2022	07:00 AM	7/11/2022	07:30 AM	30	Delete
12/01/2022		12/01/2022			Add

Authorization

Auth ID: 257185 PA Number:

Activity Details

Division: APD Worker*:
Provider: Simulation Provide Details Status: Complete

Activity Services

Service *: T2002 UC (4310) Transportation - Month Total Cost: \$100.00
Units *: 1

Rate: \$100.00
Secondary Code: T2002 UC
Unit Type: Month

Documentation

Provider Documentation Type *

Annual Report
Daily Attendance Log
Monthly R&B
Monthly Summary
Progress Note
Quarterly Summary
Service Log

Trip Log

Note *

- Starting location Lyle's home (1234 E. Tampa St. Tampa FL 33602)
- Starting Odometer Reading (1,200)
- Destination (Big Top LDS 1234 E. Miami St. Tampa FL 33602)
- Ending Odometer Reading (1,208)
- Total Mileage (8 miles)

11. Click **File > Save and Close Provider Documentation.**

Monthly Summary

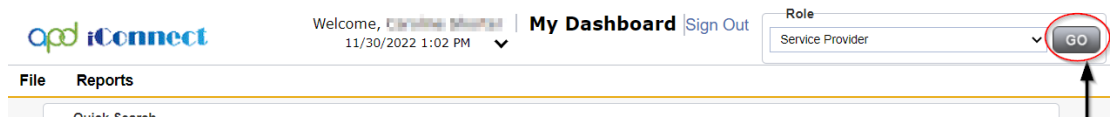
A monthly summary is a written summary of the activities that took place during each month, including the consumer's progress toward achieving goals. **Add the Monthly Summary as a separate activity using the 0000-WVR Code.**

Please refer to [the Intro to completing Provider Documentation Screens with detailed images for instructions](#) on how to complete each field.

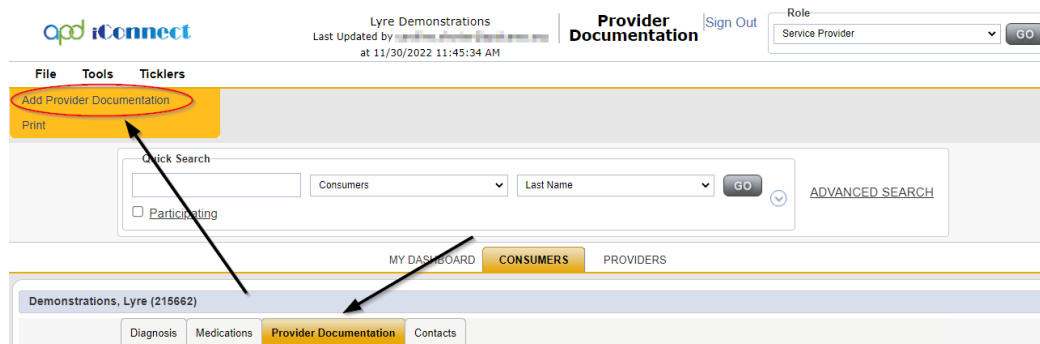
For ResHab Providers: Monthly summaries may be submitted if the provider chooses to do a monthly summary each month rather than a quarterly summary.

Add the Monthly Summary as a separate activity using the 0000-WVR Code:

1. To begin, log into iConnect and set Role = **Service Provider** or **Service Provider Worker**. Click **Go**.



2. Navigate to the Consumer's record and click the **Provider Documentation** tab > click **File** > **Add Provider Documentation**.



3. The Provider Documentation Details page is displayed. Update the following fields:
 - a. Start Date: Select the Date of Service.
 - b. Start Time: Select the start time of the service
 - c. End Date: Select the Date of Service.
 - d. End Time: Select the end time of the service

e. Click **Add**.

4. **SKIP the AUTH ID Section**

5. Since the Auth usually populates the following fields, make sure to complete the following additional sections (select from dropdown menu).

a. Division = APD

b. Provider = The organization represented

6. Click the box next to the Service field that contains an ellipsis (three dots) to display a list of services for this authorization. Select the 0000-WVR Service.

ServiceID	ServiceCode	SecondaryCode	Service	UnitCost	UnitType	EffectiveDate	EndDate	VServiceID	MaxAuth	Used	Remaining
5975	0000-WVR	0000-WVR	Provider Additional Documentation	0.00	Units	07/01/2021		251236	0	0	0

If the 0000-WVR Service is not available – contact the WSC to have a Provider Selection Record for your organization added to the consumer's record.

7. Update the number of units to 1.

8. Provider Documentation Type = Monthly Summary

9. Note - Enter the summary of the activities that took place during the quarter, including the consumer's progress toward achieving goals, in accordance with the iBudget handbook.

10. Status = Complete

The screenshot shows the 'Provider Documentation' form in the iConnect system. The form is divided into several sections:

- Activity Times:** Contains fields for Start Date, Start Time, End Date, End Time, and Total Minutes. Arrows point to the Start Date and End Date fields.
- Authorization:** Includes fields for Auth ID and PA Number.
- Activity Details:** Includes fields for Division (set to APD), Provider (set to Simulation), Worker, Status (set to Complete), and a Details button.
- Activity Services:** Includes fields for Service (set to 0000-WVR), Units (set to 1), Rate (set to \$0.00), Secondary Code (set to 0000-WVR), and Unit Type (set to Units). Arrows point to the Service, Units, and Rate fields.
- Documentation:** Includes a dropdown menu for Provider Documentation Type with options like Annual Report, Daily Attendance Log, Monthly R&B, Progress Note, Quarterly Summary, Service Log, and Trip Log. An arrow points to the Quarterly Summary option.

11. Click **File > Save and Close Provider Documentation**

Quarterly Summary

A quarterly summary is a written summary of the activities that took place during each quarter, including the consumer's progress toward achieving goals. The third quarterly summary is also the annual report. **The third quarterly summary also serves as the annual report and must include a summary of the previous three quarters.**

Add the Quarterly Summary as a separate activity using the 0000-WVR Code.

Please refer to [the Intro to completing Provider Documentation Screens with detailed images for instructions](#) on how to complete each field.

Add the Quarterly Summary as a separate activity using the 0000-WVR Code:

1. To begin, log into iConnect and set Role = **Service Provider** or **Service Provider Worker**. Click **Go**.

The screenshot shows the iConnect login page. The page includes the iConnect logo, a welcome message, the date and time, and a role selection dropdown menu. The role 'Service Provider' is selected, and the 'GO' button is highlighted with a red circle and an arrow.

2. Navigate to the Consumer's record and click the **Provider Documentation** tab > click **File** > **Add Provider Documentation**.

The screenshot shows the iConnect system interface. At the top, there's a navigation bar with 'File', 'Tools', and 'Ticklers' tabs. Below this, there's a search bar with 'Quick Search' and 'Advanced Search' options. The main area shows a dashboard for 'Lyre Demonstrations' with tabs for 'Diagnosis', 'Medications', 'Provider Documentation', and 'Contacts'. The 'Add Provider Documentation' button is highlighted in a yellow box, and an arrow points from it to the 'Provider Documentation' tab in the consumer's record.

3. The Provider Documentation Details page is displayed. Update the following fields:
 - a. Start Date: Select the Date of Service.
 - b. Start Time: Select the start time of the service
 - c. End Date: Select the Date of Service.
 - d. End Time: Select the end time of the service
 - e. Click **Add**.

4. **SKIP the AUTH ID Section**

5. Since the Auth usually populates the following fields, make sure to complete the following additional sections (select from dropdown menu).
 - a. Division = APD
 - b. Provider = The organization represented

The screenshot shows the 'Authorization' and 'Activity Details' sections of the Provider Documentation Details page. The 'Auth ID' field is highlighted with a yellow box and a 'SKIP' button. The 'Division' dropdown menu is set to 'APD' and is circled in red. The 'Provider' dropdown menu is also circled in red. The 'Activity Services' section shows 'Simulation' and 'Provider' options, with 'Simulation' circled in red.

6. Click the box next to the Service field that contains an ellipsis (three dots) to display a list of services for this authorization. Select the 0000-WVR Service.

DialogVendorServiceSelectPopUp

Search By: Secondary Code Search Text: Search Cancel

ServiceID	ServiceCode	SecondaryCode	Service	UnitCost	UnitType	EffectiveDate	EndDate	VServiceID	MaxAuth	Used	Remaining
5975	0000-WVR	0000-WVR	Provider Additional Documentation	0.00	Units	07/01/2021		251236	0	0	0

If the 0000-WVR Service is not available – contact the WSC to have a Provider Selection Record for your organization added to the consumer's record.

7. Update the number of units to 1.

Activity Services

Service *	0000-WVR	Provider Additional Documentation	...	Clear	Total Cost	
Units *	1					
Rate	\$0.00					
Secondary Code	0000-WVR					
Unit Type	Units					

8. Provider Documentation Type = Quarterly Summary

9. Note - Enter the summary of the activities that took place during the quarter, including the consumer's progress toward achieving goals, in accordance with the iBudget handbook.

10. Status = Complete

opd iConnect Lyre Demonstrations 12/1/2022 9:50 AM **Provider Documentation**

File

Activity Times

Start Date *	Start Time	End Date *	End Time	Total Minutes	
09/30/2022	01:00 PM	09/30/2022	01:15 PM	15	Delete
12/31/2022		01/01/2023			Add

Authorization

Auth ID: PA Number:

Activity Details

Division: APD Worker*: Details

Provider: Simulation Provide Details Status: Complete

Activity Services

Service *	0000-WVR	Provider Additional Documentation	...	Clear	Total Cost	\$0.00
Units *	1					
Rate	\$0.00					
Secondary Code	0000-WVR					
Unit Type	Units					

Documentation

Provider Documentation Type: Quarterly Summary

Note *

The following is an example and may not meet the Developmental Disabilities Individual Budgeting Waiver Services Coverage and Limitations Handbook Requirements. Make sure that your documentation meets all the necessary requirements and do not copy this example.

Service: Physical Therapy, 1st Quarterly Summary (July 1, 2021 - September 30, 2021)

In the last Quarter, Lyre had made excellent progress towards his PT Goals. He worked

11. Click **File > Save and Close Provider Documentation**.

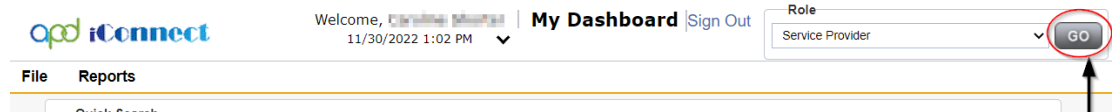
Annual Report

An annual report is a report of the supports and services received by a consumer throughout the year, a description of progress toward meeting their goals, and any pertinent information about significant events that occurred in the consumer's life during the previous year. **Add the Annual Report as a separate activity using the 0000-WVR Code.**

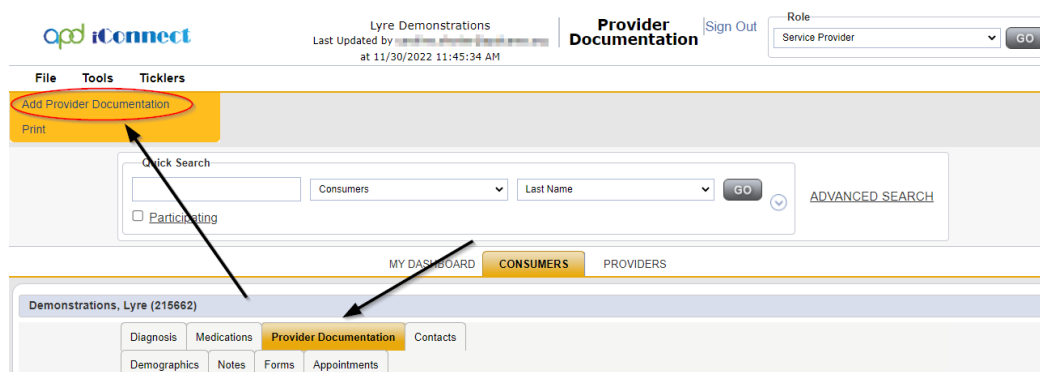
Please refer to [the Intro to completing Provider Documentation Screens with detailed images for instructions](#) on how to complete each field.

Add the Annual Report as a separate activity using the 0000-WVR Code:

1. To begin, log into iConnect and set Role = **Service Provider** or **Service Provider Worker**. Click **Go**.



2. Navigate to the Consumer's record and click the **Provider Documentation** tab > click **File > Add Provider Documentation**.



3. The Provider Documentation Details page is displayed. Update the following fields:
 - a. Start Date: Select the Date of Service.

- b. Start Time: Select the start time of the service
- c. End Date: Select the Date of Service.
- d. End Time: Select the end time of the service
- e. Click **Add**.

4. **SKIP the AUTH ID Section**

5. Since the Auth usually populates the following fields, make sure to complete the following additional sections (select from dropdown menu).
 - a. Division = APD
 - b. Provider = The organization represented

6. Click the box next to the Service field that contains an ellipsis (three dots) to display a list of services for this authorization. Select the 0000-WVR Service.

ServiceID	ServiceCode	SecondaryCode	Service	UnitCost	UnitType	EffectiveDate	EndDate	VServiceID	MaxAuth	Used	Remaining
5975	0000-WVR	0000-WVR	Provider Additional Documentation	0.00	Units	07/01/2021		251236	0	0	0

If the 0000-WVR Service is not available – contact the WSC to have a Provider Selection Record for your organization added to the consumer's record.

7. Update the number of units to 1.

8. Provider Documentation Type = Annual Report

9. Note = Enter the supports and services received by a consumer throughout the year, a description of progress toward meeting their goals, and any pertinent information about significant events that occurred in the consumer's life during the previous year.

10. Status = Complete

apd iConnect Lyre Demonstrations
12/1/2022 9:50 AM **Provider Documentation**

File

Activity Times

Start Date *	Start Time	End Date *	End Time	Total Minutes	
06/30/2022	01:00 PM	06/30/2022	01:15 PM	15	Delete
12/01/2022		12/01/2022			Add

Authorization

Auth ID: PA Number:

Activity Details

Division: APD Worker*: Clear Details

Provider: Simulation Provide Details Status: Complete

Activity Services

Service *: 0000-WVR Provider Additional Documentation: Clear Total Cost: \$0.00

Units *: 1

Rate: \$0.00

Secondary Code: 0000-WVR

Unit Type: Units

Documentation

Provider Documentation Type *

- Daily Attendance Log
- Monthly R&B
- Monthly Summary
- Progress Note
- Quarterly Summary
- Service Log
- Trip Log

Annual Report

Note *

The following is an example and may not meet the Developmental Disabilities Individual Budgeting Waiver Services Coverage and Limitations Handbook Requirements. Make sure that your documentation meets all the necessary requirements and do not copy this example.

Service: Respiratory Therapy, Annual Report (July 1, 2021 - June 30, 2022)

In the last year, Lyre had made excellent progress towards his RT Goals. He worked on

Click **File > Save and Close Provider Documentation.**

Chapter 19 | Death Reporting

Introduction

This chapter covers the end-to-end process for recording a Consumer death in iConnect. Monthly, Department of Health (DOH) Consumer data will be imported into iConnect to populate data fields on matching Consumer records. If a Consumer death has occurred and is recorded in the DOH data, the Date of Death, the DOD File Number, and the Cause of Death fields will be updated on the consumer's Demographics records in iConnect.

Date of Death – Manual Entry

1. Upon receiving notification of a Consumer death, the Medical Case Manager (MCM) will update the consumer's Demographic record. To begin, log into iConnect and set Role = Region Clinical Workstream Worker. Click **Go**.

File

Welcome, Adam MCM
4/27/2018 10:23 AM

My Dashboard Sign Out

Role
Region Clinical Workstream Worker

GO

Quick Search

Consumers Last Name

GO

ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER REPORTS

2. Search for and select the consumer's record and click on the **Demographics** tab > select **Edit > Edit Demographics**.

File Edit Edit Demographics rts Ticklers View Consumer Incidents Word Merge

Edit Demographics

Consumers Last Name

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module Us

Demographics Divisions Programs Provider Selections Notes Forms Appointments Plans

Demographics

iConnect ID 10043 Medicaid ID

Salutation Mrs. Age

3. Update the following fields.

- a. Date of Death = update to correct date of death based on research found
- b. Vital Statistics Cause of Death = enter if known.
- c. DOD File Number = (If known. Otherwise, the field will be auto populated during the monthly scheduled interface job with DOH).

The screenshot shows the iConnect Demographics form. The top navigation bar includes 'File', 'Tools', and 'Reports'. The left sidebar lists 'Demographics', 'Addresses', 'Contact Names', 'Contact Phones', 'Contact Emails', and 'Contact Identifiers'. The main form area is titled 'Basic Demographics' and contains the following fields:

- Salutation: Dropdown menu
- Last Name *: Text field with value 'Sheppard'
- First Name *: Text field with value 'John'
- Consumer Photo: Image upload area
- Middle Name: Text field with a '500 characters remaining' warning
- Suffix: Dropdown menu
- Alias: Text field
- Title: Text field
- Date of Birth *: Text field with value '12/31/1970' and a calendar icon
- Age: Text field with value '47.5'
- Date of Death: Text field with a calendar icon (indicated by an arrow)
- DOD Action: Dropdown menu
- DOD File Number: Text field (indicated by an arrow)
- Vital Statistics Cause of Death: Large text area with a '1000 characters remaining' warning (indicated by an arrow)
- Gender *: Dropdown menu with value 'Male'
- Race: Dropdown menu
- Ethnicity: Dropdown menu
- Suspected Developmental Disability: List box with options: Autism, Cerebral Palsy, Intellectual Disability, Unknown, Prader-Willi Syndrome, Spina Bifida, Down Syndrome
- Competency *: Dropdown menu
- Marital Status: Dropdown menu
- Living Setting: Dropdown menu
- Referral Source: Dropdown menu

4. Select **File > Save and Close Demographics**

5. Upon saving the consumer's Demographic record with a Date of Death, a Workflow Wizard will trigger the following Ticklers:
 - a. Complete ROD – *Assigned to Self (MCM)*, Due Immediately. If anyone other than the MCM should update the DOD, he/she should reassign the tickler to

the Clinical Lead for reassignment to the correct MCM.

- b. Create Alert Note notifying all that the ROD is in Process – *Assigned to Self (MCM)*, Due Immediately. If anyone other than the MCM should update the DOD, he/she should reassign the tickler to the Clinical Lead for reassignment to the correct MCM.

Report of Death Form & Alert Note

1. The Date of Death was just added to the Demographic record and a Workflow Wizard triggers for the MCM (Self.) Click the tickler called Complete ROD.
2. Upon doing so, a new ROD Report of Death form will open. Complete all relevant fields including:
 - a. Review = Other
 - b. Status = Pending
 - c. Fill out ROD form in its entirety
3. When finished, click **File > Save Forms**
4. After the MCM creates the ROD with Status = Pending, a supervisor must review the report as described in the [Supervisor review of ROD](#) section.

File

Please Select Type: ROD Report of Death Form

Consumer Forms

Review *	Initial	Worker *	Tierney, Jacqueline	Clear	Details
Review Date *	04/27/2018	Status *	Pending		
Division *	APD	Program	APD Waiver		Details
Approved By		Approved Date			

REPORTING OF DEATH

CONSUMER INFORMATION

Name of Consumer:	Marianne Smith
Date of Death:	04/27/2018
Suspected Cause of Death	Natural Causes

5. The MCM will return to the Workflow Wizard and select the Create Alert Note notifying all that the ROD is in Process tickler.

6. Upon doing so, a new Consumer Note record opens. Update the following fields:
 - a. Division = APD
 - b. Note Type = Report of Death
 - c. Note Subtype = N/A
 - d. **Description = OPEN ROD – DO NOT CLOSE DIVISION**
 - e. Note = Indicate that the ROD is in process
 - f. Status = Alert

**Remember:**

DO NOT UPDATE THE STATUS OF THIS ALERT NOTE.

Only State Office staff should change the status of this note to Complete.

7. When finished, click **File > Save Notes** and **File > Close Workflow Wizard**

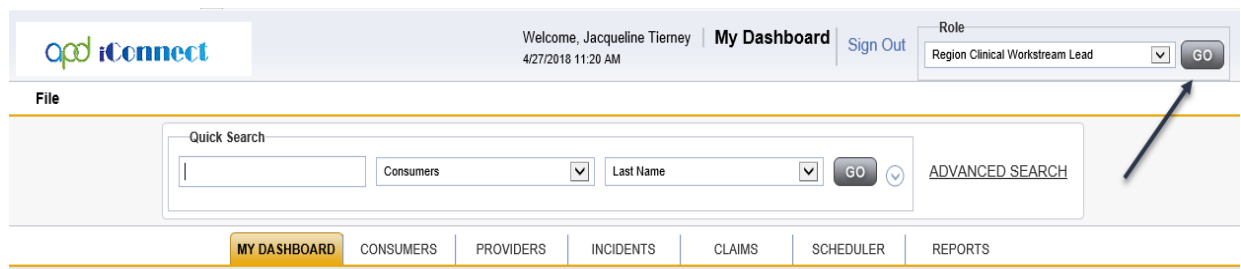
Notes Details

Division *	APD ▼
Note By *	MCM, Adam ▼
Note Date *	04/27/2018
Program/Provider	▼
Note Type *	Report of Death ▼*
Note Sub-Type	▼
Description	<div>This Consumer's ROD is in progress</div>
Note	<div></div>
Status *	Alert ▼
Date Completed	

8. The Supervisor review of the ROD is completed next.

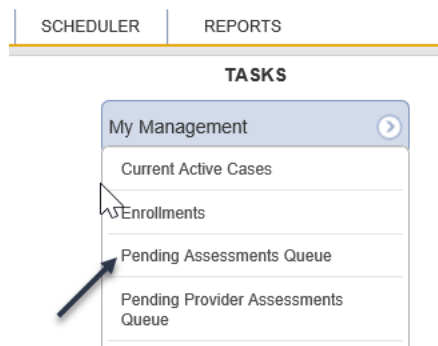
Supervisor Review of ROD

1. After the MCM creates the ROD with Status = Pending, a supervisor must review the report. Supervisors are defined on the Worker's record in iConnect and are added as part of APD's user provisioning process.
2. iConnect will route the Pending ROD to the Supervisor of the MCM that completed the ROD form. The Supervisor will access the Pending Assessments Queue to view the ROD
3. The MCM Supervisor will review all ROD's completed by the MCM.
4. To begin, the Medical Case Manager Supervisor will log into iConnect and set Role = Region Clinical Workstream Lead. Click **Go**.



The screenshot shows the iConnect web application interface. At the top, there is a header bar with the iConnect logo on the left, a welcome message "Welcome, Jacqueline Tierney" and the date "4/27/2018 11:20 AM" in the center, and navigation links "My Dashboard" and "Sign Out" on the right. On the far right of the header, there is a "Role" dropdown menu currently set to "Region Clinical Workstream Lead" and a "GO" button. Below the header, there is a "File" section with a "Quick Search" bar containing a text input field, a "Consumers" dropdown, a "Last Name" dropdown, and a "GO" button. To the right of the search bar is an "ADVANCED SEARCH" link. Below the search bar is a horizontal navigation menu with tabs: "MY DASHBOARD" (highlighted), "CONSUMERS", "PROVIDERS", "INCIDENTS", "CLAIMS", "SCHEDULER", and "REPORTS". A blue arrow points from the "GO" button in the Role dropdown to the "GO" button in the Quick Search bar.

5. On the **My Dashboard**, find the Tasks Section and scroll down to the My Management Panel. Click on the **Pending Assessments Queue** link:



The screenshot shows the "My Management" panel within the "TASKS" section of the iConnect interface. The panel has a title bar "My Management" with a right-pointing arrow. Below the title bar, there is a list of links: "Current Active Cases", "Enrollments", "Pending Assessments Queue" (highlighted with a blue arrow), "Pending Provider Assessments Queue", and "Queue". The "SCHEDULER" and "REPORTS" tabs are visible at the top of the panel.

6. In the Pending Assessments Queue, click to open the form called Report of Death Form to review the form.

File

Filters

Consumer Name Begins With AND

Case No Begins With AND

Consumer Name +

1 Pending Assessments Queue record(s) returned - now viewing 1 through 1

Consumer Name	Case No	Assessment	Review Date	Rater	<input type="checkbox"/>
Smith, Marianne	10043	ROD Report of Death Form	04/27/2018	Tierney, Jacqueline	<input type="checkbox"/>

<< First < Previous Retrieve 15 Records at a time Next > Last >>

7. If all required information is noted, set Status = Submitted and click **File > Save and Close Forms**.

oConnect

Marianne Smith
Last Updated by Tierney
at 4/27/2018 11:28:58 AM

File Reports

ROD Report of Death Form

Consumer Forms

Review * Worker * [Details](#)

Review Date * Status *

Division * Program

Approved By [Details](#) Approved Date

Note

REPORTING OF DEATH

CONSUMER INFORMATION

8. Should the MCM Supervisor find that the form is incomplete, or requires additional attention by the sending MCM, he or she can make changes to the form and/or will notify the MCM via a new Consumer Note record.
9. To add the Note, navigate to the consumer's record and click **Notes > File > Add Note**.
10. In the new Note, update the following fields:
- Division = APD
 - Note Type = Report of Death
 - Note = Indicate which portions of the Form are incomplete
 - Status = Pending
 - Route the Note to the MCM by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click

Search. In the Search results, click on the matching Worker Name to route the note to that recipient.

11. When finished, click **File > Save and Close Note.**
12. Repeat the review cycle (adding relevant changes to the existing Report of Death form) until the ROD form updates have been complete.
13. When all required information is noted on the Report of Death Form, MCM / MCM Supervisor will update Status = Submitted and click **File > Save and Close Forms.**

opd iConnect Marianne Smith | Notes
5/1/2018 9:42 AM

File Tools

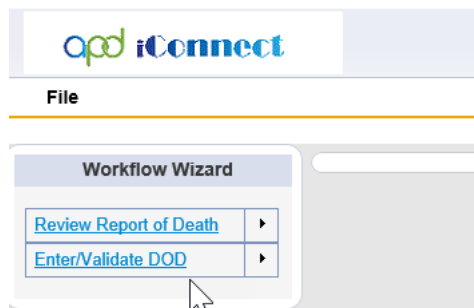
Notes Details

Division *	APD ▼
Note By *	Tierney, Jacqueline ▼
Note Date *	05/01/2018
Program/Provider	▼
Note Type *	Report of Death ▼*
Note Sub-Type	▼
Description	▼
Note	-X and Y are missing from the Report of Death Form. Please update the Form accordingly and resubmit for approval
Status *	Pending ▼
Date Completed	

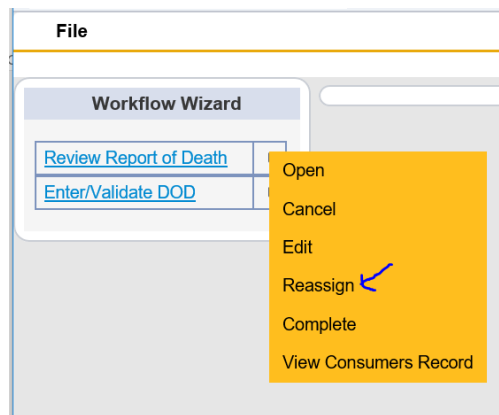
Reassign Ticklers

1. Upon saving the Report of Death Form with Status = Submitted, a Workflow Wizard will trigger the following Ticklers:
 - a. Review Report of Death – *Assigned to Self but Reassign to State Office Nurse, Due Immediately*

- b. Enter/Validate DOD – *Assigned to Self but Reassign to State Office Nurse, Due Immediately*



2. In the Workflow Wizard window, hover over the arrow next to each Tickler and click **Reassign**.

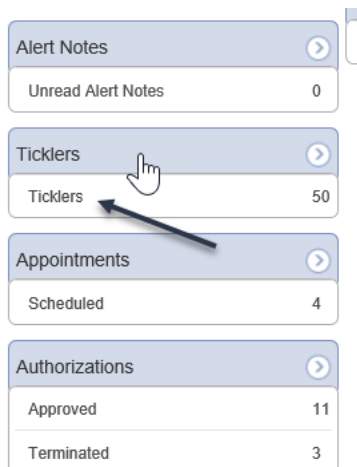


3. In the Reassign Search window, type in the name of the State Office Nurse and click **Search**. Click on the matching record to send the Tickler to that user. The user will be able to access the reassigned Tickler via their **My Dashboard**.
4. A tickler can on be assigned to one user at a time. If additional users need to review the Report of Death, the State Office Nurse can reassign to that user after his/her review is complete.

Review Report of Death

1. The State Office Nurse will monitor the **My Dashboard** for Ticklers related to Reports of Death. To begin, log into iConnect and set Role = State Office Worker. Click **Go**.

2. On the **My Dashboard**, finding the consumer's section and scrolling down to the Ticklers Panel. Click on the **Ticklers** link:



3. In the Tickler Queue, use the multi-variable search to narrow the results down to the relevant Ticklers. Click **Search**.

**Tip**

*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

4. In the Tickler Queue, click to open the Tickler called **Review Report of Death**. Upon doing so, the consumer's Forms List View grid will open.
5. Click to open the Report of Death Form and review it for completion.
 - a. Update the Vital Statistics Cause of Death field if necessary. This field should update automatically on the Demographics page from the DOH interface.
 - b. Change the status from Submitted to Complete. Do not mark the status as complete unless the Vital Statistics Cause of Death exists.
6. When finished, click **File > Save and Close Forms**.
7. When the ROD status has been changed to Complete, open ROD Note and update the following fields:

- a. Description = ROD COMPLETE- DIVISION MAY BE CLOSED
 - b. Note = ROD COMPLETE (this can only be done by entering in New Text field and clicking "Append Text to Note)
 - c. Recipients = Primary and Secondary workers listed in the Division Tab
 - d. Status = Complete
8. When finished, click **File > Save and Close Notes.**
9. Return to the Workflow Wizard, select the flyout menu to the right of the Review Report of Death tickler and select **Complete.**
10. If the Vital Statistics Cause of Death does not yet exist, do not mark the tickler as complete so it will remain in the tickler list as a reminder to the user to complete at a later date.
11. Back in the Tickler queue, click to open the Tickler called **Enter/Validate DOD.** Upon doing so, the consumer's Demographics record will open.
 - a. Ensure that the Date of Death field has populated with the correct date. If changes need to be made, click **Edit > Edit Demographics**, update the relevant fields, and click **File > Save and Close Demographics.**
12. When finished, hover over the arrow next to the Tickler to click **Complete.** Then click **File > Close Workflow Wizard.**

Workflow Wizard

Reassign to State Nurse

Enter/Validate DOD

Demographics

iConnect ID	10043	Medicaid ID	
Salutation	Mrs.	Age	14.1
Last Name	Smith	Race	African American
First Name	Marianne	Ethnicity	Cambodia
Consumer Photo		Marital Status	Married
Middle Name		Living Setting	Family Safety & Preservation Commitm Facility
Alias		Written Language	Central Yupik
Medicaid Enrolled	No	Spoken Language	Croatian
Date of Birth	3/4/2004	Legal County	
Date of Death	4/27/2018	ABC PIN	
Status	Active	Last accessed by	126
SSN	XXX-XX-4005	Demographics Verified On	
Gender	Female		

Update Division Record

- When the Report of Death Screen Design is saved by the MCM with Status = Submitted, a Workflow Wizard Triggers the following tickler.
 - ROD – Division Disposition Review - For Waiver Consumers, update disposition to Pending Disenrollment for all others, cancel the ticker and proceed to the case closure process. – *Assigned to Primary Worker (Pre-Enrollment or Waiver Support Coordinator) Due Immediately*
- The Primary Worker (Pre-Enrollment or Waiver Support Coordinator) will monitor their **My Dashboard** for Ticklers related to the ROD. To begin, log into iConnect and set Role = WSC/CDC. Click **Go**.

My Dashboard

Welcome, Jennifer Buck 5/9/2018 8:09 PM

Sign Out

Role: WSC/CDC **GO**

Quick Search

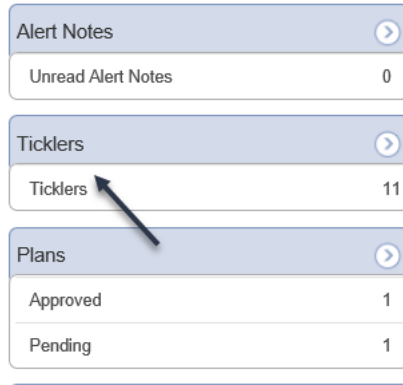
Consumers Last Name **GO**

☐ Participating

ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER

- On the **My Dashboard**, find the Consumers Section and scroll down to the Ticklers Panel. Click on **Ticklers Due** to access the Tickler Queue:



Alert Notes >

Unread Alert Notes 0

Ticklers >

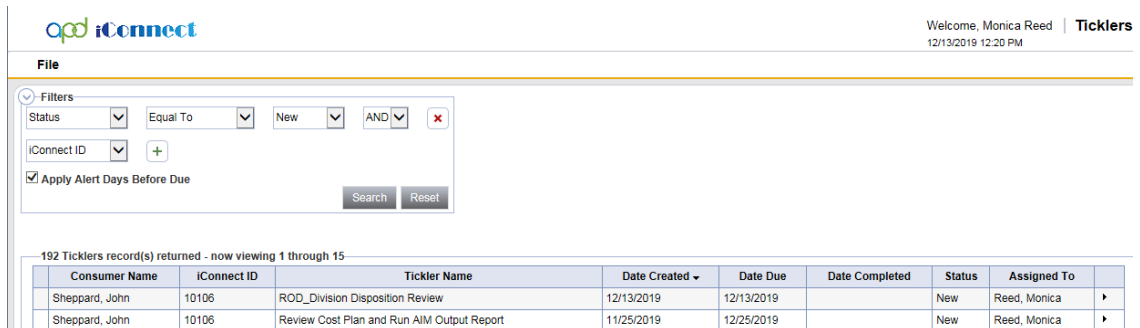
Ticklers 11

Plans >

Approved 1

Pending 1

- Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.



oconnect iConnect

Welcome, Monica Reed | Ticklers
12/13/2019 12:20 PM

File

Filters

Status Equal To New AND

iConnect ID +

☒ Apply Alert Days Before Due

Search Reset

192 Ticklers record(s) returned - now viewing 1 through 15

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Sheppard, John	10106	ROD_Division Disposition Review	12/13/2019	12/13/2019		New	Reed, Monica
Sheppard, John	10106	Review Cost Plan and Run AIM Output Report	11/25/2019	12/25/2019		New	Reed, Monica



Tip

*When searching for a future Tickler, remember to clear the check box next to Apply Alert Days Before Due prior to clicking **Search**.*

- In the Tickler Queue, find the Tickler called ROD-Division Disposition Review. Select the ticker to open. Upon doing so, the consumer's Division List View Grid will open.

apd iConnect John Sheppard | Divisions
12/13/2019 12:23 PM

File

Workflow Wizard

For Waiver Consumers, update disposition to "Pending Disenrollment" for all others, cancel the tickler and proceed to the case closure process.

[ROD_Division Disposition Review](#)

Filters

Disposition ▼ Not Equal To ▼ Closed ▼ AND ✕

Open Date ▼ Greater Than ▼ AND ✕

Division ▼ +

Search **Reset**

2 Divisions record(s) returned - now viewing 1 through 2

Division	Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
FOR	Forensic Open	Buck, Jennifer		08/03/2018		497
APD	APD Eligible - ICF/SNF Transition	Reed, Monica	Buck, Jennifer	05/23/2018		569

<< First < Previous Retrieve 15 Records at a time Next > Last >>

5. Click to open the APD Division record. In the record, update the following fields:
 - a. Disposition = Pending Disenrollment
6. When finished, click **File > Save Division**.

File **Word Merge**

Division

Events

Track Disposition

Events

Division * APD

Disposition * Pending Disenrollment ▼

Disposition Date 04/27/2018

Open Date 04/04/2018

Data Entry Date 03/21/2018

Primary Worker * Reed, Monica ... Clear Details

Secondary Worker Tierney, Jacqueline ... Clear Details

Application Received Date * 04/04/2018

Interested in ICF/IID Yes ▼

Age Category at Time of Application * Under 6 ▼

7. Return to the open tickler window. From the tickler flyout menu, select **Complete**.

Workflow Wizard

For Waiver Consumers, update disposition to "Pending Disenrollment" for all others, cancel the ticker and proceed to the case closure process.

Filters

Disposition: Not Equal To Closed AND
 Open Date: Greater Than AND
 Division: +

Search Reset

1 record(s) returned - now viewing 1 through 2

Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
Basic Open	Buck, Jennifer		08/03/2018		497
Eligible - ICF/SNF Transition	Reed, Monica	Buck, Jennifer	05/23/2018		569

Workflow Wizard actions: Open, Cancel, Edit, Reassign, Complete, View Consumers Record

Disenrollment Request

1. The Pre-Enrollment or Waiver Support Coordinator will begin the case closure tasks and inform the Pre-Enrollment or Waiver Workstream Lead to send the request to Disenroll the Consumer to the State.
2. To begin, log into **iConnect** and set Role = WSC/CDC. Click **Go**.

iConnect

Welcome, Monica Reed | My Dashboard | Sign Out

Role: WSC/CDC GO

File

Quick Search

Consumers Last Name GO ADVANCED SEARCH

Participating

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER

3. Navigate to the consumer's record and click **Notes > File > Add Note**.

The screenshot displays the Case Management Module interface. At the top, there is a navigation bar with 'File', 'ADD NOTES', 'Ticklers', and 'View Consumer Incidents'. Below this, a yellow box highlights the 'Add Notes' and 'Print' buttons. A blue arrow points to the 'Add Notes' button. The main area shows a consumer record for 'Smith, Marianne (10043)'. A tabbed interface below the name includes 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation', 'Contacts', 'Consumer Module Use', 'Demographics', 'Divisions', 'Programs', 'Provider Selections', 'Notes' (highlighted with a blue arrow), 'Forms', 'Appointments', and 'Plans'. A 'Filters' section on the left includes a 'Note Date' dropdown, a '+', and 'Search' and 'Reset' buttons. Below the filters, it states '71 Notes record(s) returned - now viewing 1 through 15'. A table shows the first record:

Note Date	Note By	Note Type	Note Sub-Type	Descri
04/23/2018	Reed, Monica	Due Process	Consumer Update	

4. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Waiver Disenrollment
 - c. Note Subtype = Pending Waiver Disenrollment
 - d. Description = Due to Death
 - e. Status = Pending
 - f. Attach the necessary documents
 - g. Route Note record to the Waiver Work Stream Lead by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
5. When finished, click **File > Save and Close Notes**.

File Tools

Notes Details

Division *	APD ▼
Note By *	WLSuper, Robert ▼
Note Date *	04/23/2018
Program/Provider	▼
Note Type *	Waiver Disenrollment ▼*
Note Sub-Type	Pending Waiver Disenrollment ▼
Description	<div></div>
Note	<div>Consumer would like to disenroll. Please approve request for disenrollment.</div> <div></div>
Status *	Pending ▼
Date Completed	<div></div>

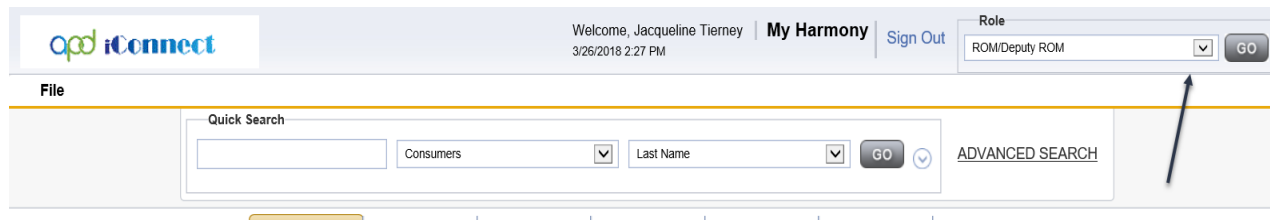
6. The Waiver Work Stream Lead will monitor their **My Dashboard** for Notes related to Waiver Disenrollment. To do so, log into iConnect and set Role = Region Workstream Lead. Click **Go**.
 - a. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Notes with Status = Pending

Notes	
Complete	4
Draft	1
I'm Interested	1
Pending	1

Alert Notes	
Unread Alert Notes	0

Ticklers	
Ticklers	52

7. In the Pending Notes queue, open the Note record with Note Type = Waiver Disenrollment and Note Subtype = Pending Disenrollment:
 - a. Review the contents of the Note to determine next steps. Update the Note accordingly.
 - b. Leave Status = Pending
 - c. Route the Note record ROM/Designee for approval by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
8. When finished, click **File > Save and Close Note**.
9. The ROM/Designee will monitor their **My Dashboard** for Notes related to Waiver Disenrollment. Log into iConnect and set Role = ROM/Deputy ROM. Click **Go**.



oecd iConnect

Welcome, Jacqueline Tierney | My Harmony | Sign Out

3/26/2018 2:27 PM

Role: ROM/Deputy ROM [GO]

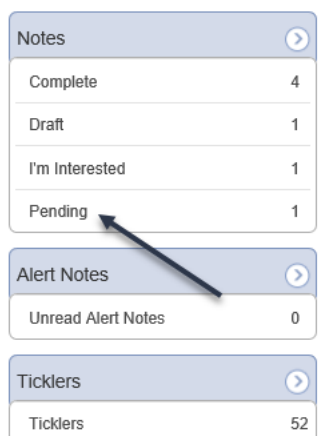
File

Quick Search

[Text Input] Consumers [Dropdown] Last Name [Dropdown] [GO] [Dropdown]

ADVANCED SEARCH

10. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Notes with Status = Pending



Notes	
Complete	4
Draft	1
I'm Interested	1
Pending	1

Alert Notes	
Unread Alert Notes	0

Ticklers	
Ticklers	52

11. In the Pending Notes queue, open the Note record with Note Type = Waiver Disenrollment and Note Subtype = Pending Disenrollment:
 - a. Review the contents of the Note and attachments
 - b. Update Note Subtype = Waiver Disenrollment Approved OR Waiver Disenrollment Denied
 - c. Set Status = Pending
 - d. Route the Note record back to the Waiver Workstream Lead and the Waiver Support Coordinator by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
12. When finished, click **File > Save and Close Notes**.
13. The Waiver Support Coordinator will monitor their **My Dashboard** for Notes related to Waiver Disenrollment. Log into iConnect and set Role = WSC/CDC. Click **Go**.

The screenshot shows the iConnect My Dashboard interface. The top navigation bar includes the iConnect logo, user information (Welcome, Monica Reed, 4/23/2018 2:37 PM), and links for My Dashboard, Sign Out, and a Role dropdown menu set to WSC/CDC with a GO button. Below the navigation bar is a 'File' section with a 'Quick Search' box containing a text input, a 'Consumers' dropdown, a 'Last Name' dropdown, and a GO button. A 'Participating' checkbox is checked. To the right of the search box is an 'ADVANCED SEARCH' link. At the bottom is a horizontal menu with tabs: MY DASHBOARD (highlighted), CONSUMERS, PROVIDERS, INCIDENTS, CLAIMS, and SCHEDULER. An arrow points to the GO button in the top right corner.

- a. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Notes with Status = Pending.
14. In the Pending Notes queue, open the Note record with Note Type = Waiver Disenrollment and Note Subtype = Waiver Disenrollment Approved or Denied
 - a. In the Note record, review the ROM/Designee's decision.
15. When finished, click **File > Close Notes**.

16. To proceed with Waiver Disenrollment, the Waiver Workstream Lead will navigate to the consumer's record and click **Notes > File > Add Note**.

Note Date	Note By	Note Type	Note Sub-Type	D
04/24/2018	Tierney, Jacqueline	Waiver Disenrollment		
04/24/2018	Tierney, Jacqueline	Waiver Disenrollment	Notice of Termination of Waiver Services	


17. In the new Note record, update the following fields:

- Division = APD
- Note Type = Waiver Disenrollment
- Subtype = Request for Waiver Disenrollment Only OR Request to Disenroll and Return to Pre-Enrollment
- Status = Pending
- Route the Note record to the State Office Worker by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

18. When finished, click **File > Save and Close Notes**.

File Tools

Notes Details

Division *	APD ▼
Note By *	Tierney, Jacqueline ▼
Note Date *	04/24/2018 
Program/Provider	APD Waiver ▼ Details
Note Type *	Waiver Disenrollment ▼*
Note Sub-Type	Request for Waiver Disenrollment Only ▼
Description	<div></div>
Note	<div>Please approve request to Disenroll Consumer from Waiver</div>
Status *	Pending ▼
Date Completed	<div></div>

Waiver Program Disenrollment

1. The State Office Worker will monitor their **My Dashboard** for Note records related to Waiver Disenrollment. To do so, log into iConnect and set Role = State Office Enrollment. Click **Go**.
2. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Notes with Status = Pending

Notes	
Complete	4
Draft	1
I'm Interested	1
Pending	1
Alert Notes	
Unread Alert Notes	0
Ticklers	
Ticklers	52

3. In the Pending Notes queue, open the Note record with Note Type = Waiver Disenrollment and Note Subtype = Request for Waiver Disenrollment Only OR Request to Disenroll and Return to Pre-Enrollment

File

Filters

Status Equal To Pending AND

iConnect ID +

Search Reset

2 Notes record(s) returned - now viewing 1 through 2

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10043	Smith, Marianne	Waiver Enrollment	Waiver Enrollment Request	04/04/2018		Tierney, Jacqueline	Pending
10043	Smith, Marianne	Waiver Disenrollment	Request for Waiver Disenrollment Only	04/24/2018		Tierney, Jacqueline	Pending

<< First < Previous Retrieve 15 Records at a time Next > Last >>

4. Review the contents of the Note record and update the following fields:
 - a. Note = Indicate whether the disenrollment request is approved or disapproved
 - b. Status = Complete
 - c. Route the Note record to the Waiver Workstream Lead and/or the Pre-Enrollment Workstream Lead as a Note Recipient by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
5. When finished, click **File > Save and Close Notes**.

File Tools Reports

Notes

Notes Details

Division * APD

Note By * Tierney, Jacqueline

Note Date * 04/24/2018

Program/Provider APD Waiver Details

Note Type * Waiver Disenrollment

Note Sub-Type Request for Waiver Disenrollment Only

Description

On 4/24/2018 at 2:19 PM, Jacqueline Tierney wrote: Please approve request to Disenroll Consumer from Waiver
On 4/24/2018 at 2:25 PM, Worker State wrote: Request Approved

Note

New Text

Append Text to Note

Status * Complete

Date Completed 04/24/2018

6. To disenroll the Consumer, the State Office Enrollment Worker will navigate to the consumer's record and click on the **Programs** tab > open the APD waiver Program record.

MY DASHBOARD CONSUMERS PROVIDERS CLAIMS SCHEDULER REPORTS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions **Programs** Provider Selections Notes Forms Appointments Plans Payers Legal Issues

Filters

Disposition Not Equal To Closed AND

Program

Search Reset

4 Programs record(s) returned - now viewing 1 through 4

Division	Program	Worker	Disposition	Disposition Date	Create Date	Enroll Type	Deactivated Date	LOS
APD	APD Waiver	Reed, Monica	Pending Disenrollment	04/24/2018	04/06/2018	Waiting List to Waiver		18
APD	IFS	Reed, Monica	IFS Request	04/09/2018	04/09/2018	IFS		15
APD	CDC+	WLSuper, Robert	Disenrolled	04/09/2018	04/09/2018		04/09/2018	15
APD	APD Waiver	WaiverWSL, Stanley	Crisis Denied	04/04/2018	04/03/2018	Crisis	04/04/2018	21

<< First < Previous Retrieve 15 Records at a time Next > Last >>

7. Update the following fields:
- Disposition = Disenrolled
 - Deactivated To = set to correct value
 - Deactivated Date = defaults to today's date
8. When finished, click **File > Save and Close Programs**.

Program

Division * APD

Worker State, Worker Clear Details

Referral Date 04/02/2018

Create Date * 04/06/2018

Program * APD Waiver Details

Disposition * Disenrolled

Disposition Date * 04/24/2018

9. The Waiver Workstream Lead and/or Pre-Enrollment Workstream Lead will monitor their **My Dashboard** for Note records related to Waiver Disenrollment status.

10. To begin, log into iConnect and set Role = Region Waiver OR Region Pre-Enrollment Workstream or Region Waiver Workstream Lead. Click **Go**.

Welcome, Caroline Shorter 4/4/2024 3:18 PM My Dashboard Sign Out

Role Region Pre-Enrollment Workstream Lead GO

Quick Search Consumers Last Name GO ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS

11. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Complete** link to open a queue of Notes with Status = Complete.

Notes

Complete 7

Draft 1

I'm Not Interested 1

Pending 8

Alert Notes

Unread Alert Notes 0

12. Use the multi variable search to narrow down the search results. Open the Note record with Note Type = Waiver Disenrollment and Note Subtype = Request for Waiver Disenrollment Only OR Request to Disenroll and Return to Pre-Enrollment

- a. Review the contents of the Note. If the request was approved, create a new request for Case Closure via a new Consumer Note record. Proceed to [Case Closure](#) section.

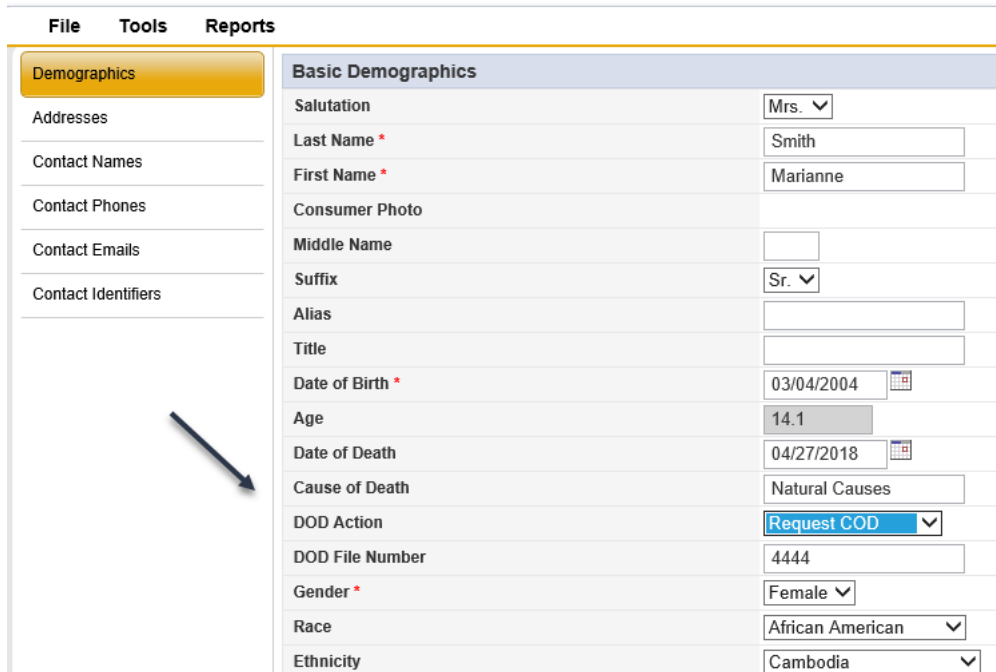
**Important!**

DO NOT CLOSE DECEASED CASES until State Office staff approval

This step impacts ticklers and completion of tasks.

Date of Death Interface

1. Every 16th day of the month, a scheduled job will run to import data from DOH via an agreed upon file format into iConnect:
 - a. Once imported, the consumer's SSN and Date of Birth in the DOH data are compared with Consumer data within iConnect in order to locate a matching Consumer record.
 - b. If an exact match has been identified, the system will update the consumer's Date of Death, the DOD File Number, and set the DOD Action Field = Request COD on the consumer's Demographic record in iConnect.
 - c. These updates will then trigger a request for the Cause of Death field to be updated via the next monthly DOH data import.
 - d. Note that for probable or inexact Consumer record matches, the consumer's data will not import from DOH into iConnect.



Basic Demographics	
Salutation	Mrs. ▼
Last Name *	Smith
First Name *	Marianne
Consumer Photo	
Middle Name	
Suffix	Sr. ▼
Alias	
Title	
Date of Birth *	03/04/2004
Age	14.1
Date of Death	04/27/2018
Cause of Death	Natural Causes
DOD Action	Request COD ▼
DOD File Number	4444
Gender *	Female ▼
Race	African American ▼
Ethnicity	Cambodia ▼

2. The State Office Nurse (or State Office Process Owner) will be able to review the Probable Match Report that identifies probable Consumer record matches between the DOH and iConnect data. Note that this report lives outside of iConnect.
3. After reviewing the Probable Match Report, the State Office Nurse will navigate to the consumer's record in iConnect and add a new Consumer Note record via **Notes > File > Add Note**.
4. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Probable Match Report
 - c. Note Subtype = Completed
 - d. Status = Completed
 - e. Route the Note record to the Waiver Clinical Workstream Lead by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
5. When finished, click **File > Save and Close Notes**.

The screenshot shows the 'iConnect' interface with a 'Notes' section. The 'Notes Details' form is displayed with the following fields:

- Division *: APD
- Note By *: Tierney, Jacqueline
- Note Date *: 05/01/2018
- Program/Provider:
- Note Type *: Probable Match Report
- Note Sub-Type: Completed
- Description:
- Note: Reviewed the Probable Match Report to ensure that the correct match was identified in the DOH data
- Status *: Complete
- Date Completed: 05/01/2018

A blue arrow points to the 'Note Type' field.

6. Based on the review of the Probable Match Report, updates to the consumer's death details may need to be updated (if the fields were not already automatically updated via the monthly DOH data import).
7. The State Office Nurse will navigate to the consumer's record and click **Demographics > Edit > Edit Demographics**. Update the following fields.
 - a. Date of Death = update to correct date of death based on research found
 - b. DOD Action = Request COD
 - c. DOD File Number
 - d. Cause of Death
8. When finished, click **File > Save and Close Demographics**.
9. When finished, proceed to the [Chapter on Case Closure](#).

Chapter 20 | Case Closure

Introduction

Although a Consumer has been added to the Waiver, often it is necessary for the Consumer to be removed from the waiver. While there are various methods to the disenrollment and/or transfers, there are also certain circumstances that automatically make a Consumer ineligible for Waiver Services. This Chapter reflects the process in which to Close a Case.

Waiver Disenrollment

1. Upon receiving notification that a Consumer needs to be removed from the Waiver for any reason other than incarceration or Temporary Service Placement, the assigned Waiver Support Coordinator will initiate the Waiver Disenrollment process.
2. To begin, log into **iConnect** and set Role = WSC/CDC. Click **Go**.

The screenshot displays the iConnect web application interface. The top header includes the iConnect logo, user information (Welcome, Monica Reed, 4/23/2018 2:37 PM), and navigation links (My Dashboard, Sign Out). A role dropdown menu is set to 'WSC/CDC' with a 'GO' button. Below the header is a 'File' section with a 'Quick Search' box containing a text input, a 'Consumers' dropdown, a 'Last Name' dropdown, and a 'GO' button. A 'Participating' checkbox is checked. To the right of the search box is an 'ADVANCED SEARCH' link. At the bottom is a navigation bar with tabs: MY DASHBOARD (highlighted), CONSUMERS, PROVIDERS, INCIDENTS, CLAIMS, and SCHEDULER. An arrow points to the 'GO' button in the role dropdown.

3. Navigate to the consumer's record and click **Notes > File > Add Note**.

The screenshot shows the 'Add Notes' button in the top left corner of the interface, highlighted with a yellow box and an arrow. Below it is a 'Print' button. The main interface displays a consumer record for 'Smith, Marianne (10043)' with various tabs including 'Diagnosis', 'Eligibility', 'Medications', 'Auths', 'Provider Documentation', 'Contacts', 'Consumer Module Us', 'Demographics', 'Divisions', 'Programs', 'Provider Selections', 'Notes', 'Forms', 'Appointments', and 'Plans'. The 'Notes' tab is highlighted with a yellow box and an arrow. A 'Filters' section on the left includes a 'Note Date' dropdown, a search button, and a reset button. Below the filters, a message states '71 Notes record(s) returned - now viewing 1 through 15'. A table shows the first record:

Note Date	Note By	Note Type	Note Sub-Type	Descr
04/23/2018	Reed, Monica	Due Process	Consumer Update	

4. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Waiver Disenrollment
 - c. Note Subtype = Pending Waiver Disenrollment
 - d. Status = Pending
 - e. Attach the necessary documents
 - f. Route Note record to the Waiver Work Stream Lead by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

5. When finished, click **File > Save and Close Notes**.

File Tools

Notes Details

Division * APD ▾

Note By * WLSuper, Robert ▾

Note Date * 04/23/2018

Program/Provider ▾

Note Type * Waiver Disenrollment ▾

Note Sub-Type Pending Waiver Disenrollment ▾

Description

Note

Consumer would like to disenroll. Please approve request for disenrollment.

Status * Pending ▾

Date Completed

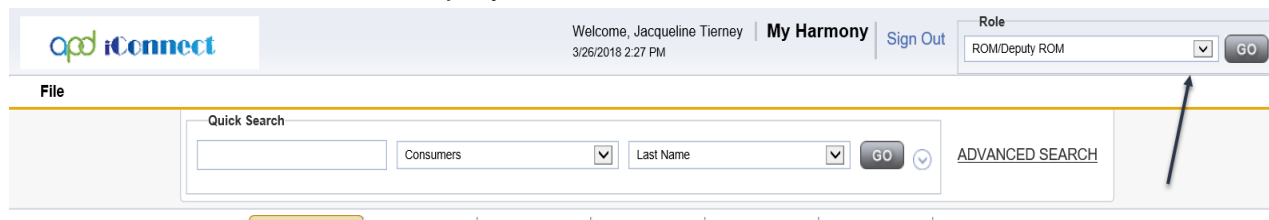
6. The Waiver Work Stream Lead will monitor their **My Dashboard** for Notes related to Waiver Disenrollment. To do so, log into iConnect and set Role = Region Workstream Lead. Click **Go**.
 - a. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Notes with Status = Pending

Notes	
Complete	4
Draft	1
I'm Interested	1
Pending	1

Alert Notes	
Unread Alert Notes	0

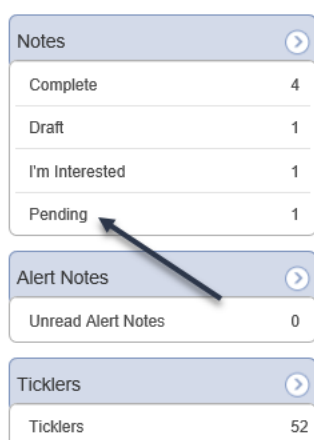
Ticklers	
Ticklers	52

7. In the Pending Notes queue, open the Note record with Note Type = Waiver Disenrollment and Note Subtype = Pending Disenrollment:
8. Review the contents of the Note to determine next steps. Update the Note accordingly. Leave Status = Pending.
9. Route the Note record ROM/Designee for approval by clicking the **Ellipsis** button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
10. When finished, click **File > Save and Close Note**
11. The ROM/Designee will monitor their **My Dashboard** for Notes related to Waiver Disenrollment. Log into iConnect and set Role = ROM/Deputy ROM. Click **Go**.



The screenshot shows the iConnect user interface. At the top, there is a header bar with the iConnect logo, a welcome message 'Welcome, Jacqueline Tierney', the date '3/26/2018 2:27 PM', and a 'My Harmony' link. To the right of the header is a 'Sign Out' link and a 'Role' dropdown menu. The 'Role' dropdown is currently set to 'ROM/Deputy ROM' and has a 'GO' button next to it. Below the header is a 'File' tab. In the center, there is a 'Quick Search' section with a text input field, a 'Consumers' dropdown, a 'Last Name' dropdown, and a 'GO' button. To the right of the 'Quick Search' section is an 'ADVANCED SEARCH' link. An arrow points to the 'GO' button in the 'Role' dropdown.

12. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Notes with Status = Pending



Notes	
Complete	4
Draft	1
I'm Interested	1
Pending	1

Alert Notes	
Unread Alert Notes	0

Ticklers	
Ticklers	52

13. In the Pending Notes queue, open the Note record with Note Type = Waiver Disenrollment and Note Subtype = Pending Disenrollment:
 - a. Review the contents of the Note and attachments
 - b. Update Note Subtype = Waiver Disenrollment Approved OR Waiver Disenrollment Denied
 - c. Set Status = Pending
 - d. Route the Note record back to the Waiver Workstream Lead and the Waiver Support Coordinator by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
14. When finished, click **File > Save and Close Notes**.
15. The Waiver Support Coordinator will monitor their **My Dashboard** for Notes related to Waiver Disenrollment. Log into iConnect and set Role = WSC/CDC. Click **Go**.

The screenshot shows the iConnect My Dashboard interface. The top navigation bar includes the iConnect logo, user information (Welcome, Monica Reed, 4/23/2018 2:37 PM), and links for My Dashboard and Sign Out. A Role dropdown menu is set to WSC/CDC with a GO button. Below the navigation bar is a File menu and a Quick Search section with a text input, a dropdown menu set to Consumers, and another dropdown menu set to Last Name. A GO button and a checkmark icon are next to the search fields. A checkbox for Participating is checked. An ADVANCED SEARCH link is to the right. At the bottom is a horizontal menu with tabs: MY DASHBOARD (highlighted), CONSUMERS, PROVIDERS, INCIDENTS, CLAIMS, and SCHEDULER. An arrow points to the GO button in the Role dropdown.

- a. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Notes with Status = Pending.
16. In the Pending Notes queue, open the Note record with Note Type = Waiver Disenrollment and Note Subtype = Waiver Disenrollment Approved or Denied
17. In the Note record, review the ROM/Designee's decision.
18. When finished, click **File > Close Notes**.

19. Update the consumer's Waiver Program Enrollment record to indicate pending disenrollment. Navigate to the consumer's record > click on the **Programs** tab > open the APD waiver Program record.

20. In the Program record, update the following fields:

- a. Disposition = Pending Disenrollment
- b. Disposition Date = Date Disposition was changed

21. When finished, click **File > Save and Close Programs**.

The screenshot shows the iConnect software interface for editing a Program record. The top header includes the iConnect logo, user information (Marianne Smith, Last Updated by jtierney at 4/6/2018 2:09:17 PM), and a 'Program' tab. Below the header is a 'File' and 'Tools' menu bar. On the left is a sidebar with navigation options: Program (highlighted), Program Workers, Notes, Events, and Track Disposition. The main form area contains the following fields:

Division *	AND
Worker	State, Worker ... Clear Details
Referral Date	04/02/2018
Create Date *	04/06/2018
Program *	APD Waiver Details
Disposition *	Pending Disenrollment
Disposition Date *	04/23/2018

A blue arrow points from the 'Program' sidebar item to the 'Disposition' field.

22. Upon saving the Program record with Disposition = Pending Disenrollment, a Workflow Wizard will trigger the following Ticklers:

- a. Send Notice of Pending Termination of Waiver Services (Only for Non-Compliance), *Assigned to Waiver Workstream Lead*, Due Immediately
- b. Send Notice of Pending Termination of Waiver Services, *Assigned to Waiver Workstream Lead*, Due in 30 Days

23. To complete the Ticklers, the Waiver Workstream Lead will log into iConnect and set Role = Region Waiver Workstream Lead. Click **Go**.

- a. On the **My Dashboard**, find the Consumers Section and scroll down to the Ticklers Panel. Click on **Ticklers Due** to access the Tickler Queue:

- b. Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Send Notice of Pending Termination of Waiver Services (Only for Non Compliance)	04/23/2018	04/23/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Send Notice of Termination of Waiver Services	04/23/2018	05/23/2018		New	Tierney, Jacqueline



Tip

*When searching for a future Tickler, remember to clear the check box next to **Apply Alert Days Before Due** prior to clicking **Search**.*

24. Locate the Tickler called Send Notice of Pending Termination of Waiver Services (sent only for Non-Compliance) in the Tickler Queue.

- a. If the termination of Waiver Services is NOT related to non-compliance, cancel the Tickler. To do so, hover over the arrow next to the Tickler and click **Cancel**.

— 2 Ticklers record(s) returned - now viewing 1 through 2 —

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Send Notice of Pending Termination of Waiver Services (Only for Non Compliance)	04/23/2018	04/23/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Send Notice of Termination of Waiver Services	04/23/2018	05/23/2018			

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Cancel
Edit
Reassign
Complete
View Consumers Record

- b. If the termination of Waiver Services IS related to non-compliance, click to open the Tickler.
 - i. Upon doing so, the Notice of Pending Termination of Waiver Services letter will open in Word Merge Preview mode.
 - ii. Click **Open Document** to edit the contents of the letter in Microsoft Word. Save the document to your computer.

opd iConnect

Welcome, Jacqueline Tierney
4/24/2018 10:31 AM

Notice of Pending Termination of Waiver Services

File

Generate Merge Document
Click the "Open Document" button to open the Merge Document for editing.
Open Document

Save to Note
If no changes have been made to the Merge Document, click "Save to Note". The current word merge template will be uploaded to a note record with the merge fields populated.
Save to Note

Upload and Save to Note

Preview (read-only)
This is a preview of your merge document and is not editable.

opd
agency for persons with disabilities
State of Florida

Notice of Pending Termination of Waiver Services

Ron DeSantis
Governor

Taylor Hatch
Director

Click here to enter a date.

- c. Print and mail the letter to the Consumer.

- d. Back in the Word Merge preview screen, click **Upload and Save to Note**. In the new Consumer Note record, update the following fields:
- i. Division = APD
 - ii. Note Type = Waiver Disenrollment
 - iii. Note Subtype = Pending Waiver Disenrollment
 - iv. Status = Complete

- e. When finished, click **File > Save and Close Notes**

The screenshot shows the 'Notes Details' form in a case management system. The form is titled 'Notes Details' and has a sidebar with 'Notes' selected. The form fields include:

- Division * (APD)
- Note By * (Tierney, Jacqueline)
- Note Date * (04/24/2018)
- Program/Provider (APD Waiver) Details
- Note Type * (Waiver Disenrollment)
- Note Sub-Type (Pending Waiver Disenrollment)
- Description (Word Merge Template)
- Note (Large text area)
- New Text (Text area with 'Append Text to Note' button)
- Status * (Complete)
- Date Completed (04/24/2018)

Arrows point to the 'Note Type' and 'Note Sub-Type' fields.

25. Back in the Tickler Queue, hover over the arrow next to the Tickler to click **Complete**:

2 Ticklers record(s) returned - now viewing 1 through 2

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Send Notice of Pending Termination of Waiver Services (Only for Non Compliance)	04/23/2018	04/23/2018			
Smith, Marianne	10043	Send Notice of Termination of Waiver Services	04/23/2018	05/23/2018			

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Cancel
Edit
Reassign
Complete
View Consumers Record

26. In the Tickler Queue, click to open the tickler called Send Notice of Termination of Waiver Services.

27. Upon doing so, the Notice of Pending Termination of Waiver Services letter will open in Word Merge Preview mode.

28. Click **Open Document** to edit the contents of the letter in Microsoft Word. Save the document to your computer.

opd iConnect

Marianne Smith
4/24/2018 10:53 AM

Notice of Termination of Waiver Services

File

Generate Merge Document
Click the "Open Document" button to open the Merge Document for editing.
Open Document

Save to Note
If no changes have been made to the Merge Document, click "Save to Note". The current word merge template will be uploaded to a note record with the merge fields populated.
Save to Note

Preview (read-only)
This is a preview of your merge document and is not editable.

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agency for persons with disabilities
State of Florida

Notice of Termination of Waiver Services

Ron DeSantis
Governor

Taylor Hatch
Director

Click here to enter a date.

29. Print and mail the letter to the Consumer.

30. Back in the Word Merge preview screen, click **Upload and Save to Note**. In the new Consumer Note record, update the following fields:

- Division = APD
- Note Type = Waiver Disenrollment
- Note Subtype = Notice of Termination of Waiver Services
- Status = Complete

31. When finished, click **File > Save and Close Notes**

oapd iConnect

Marianne Smith
Last Updated by jtierney
at 4/24/2018 11:03:49 AM

File Tools Reports

Notes

Notes Details

Division * APD ▾

Note By * Tierney, Jacqueline

Note Date * 04/24/2018

Program/Provider APD Waiver ▾ Details

Note Type * Waiver Disenrollment ▾

Note Sub-Type Notice of Termination of Waiver Services ▾

Description Word Merge Template

Note

New Text

Notice of Termination of Waiver Services Letter attached to this Note record

Append Text to Note

Status * Complete ▾

Date Completed 04/24/2018

32. Upon saving the Note record, a Workflow Wizard will trigger with the following Tickler:

- a. 35 Day Due Process Reminder – *Assigned to Self (Waiver Workstream Lead)*, Due 35 Days from the date that the Final Notice of Termination of Waiver Services Letter was sent to the Consumer
- b. Notify all Providers of Disenrollment, *Assigned to WSC*, Due 35 Days from the date that the Final Notice of Termination of Waiver Services Letter was sent to the Consumer
- c. End Date Planned Services and Complete Plans – *Assigned to WSC*, Due Immediately
- d. End Date All Authorizations – *Assigned to WSC*, Due Immediately

iConnect

Welcome, Jennifer Buck

8/26/2018 12:00 AM

Ticklers

File

Filters

Status

Equal To

New

AND

iConnect ID

☐ Apply Alert Days Before Due

Search

Reset

514 Ticklers record(s) returned - now viewing 1 through 15

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Sheppard, John	10106	End Date Planned Services & Complete Plans	08/26/2018	09/30/2018		New	Buck, Jennifer
Sheppard, John	10106	End Date all Authorizations	08/26/2018	09/30/2018		New	Buck, Jennifer
Sheppard, John	10106	35 Day Due Process Reminder	08/26/2018	09/29/2018		New	Buck, Jennifer
Sheppard, John	10106	Notify All Providers of Disenrollment	08/26/2018	09/30/2018		New	Buck, Jennifer

33. Ticklers are visible from My Dashboard.

34. The Waiver Workstream Lead will work through each Tickler listed in the Workflow Wizard window.

35. To begin, hover over the arrow next to the Tickler called 35 Day Due Process Reminder to click **Open**.



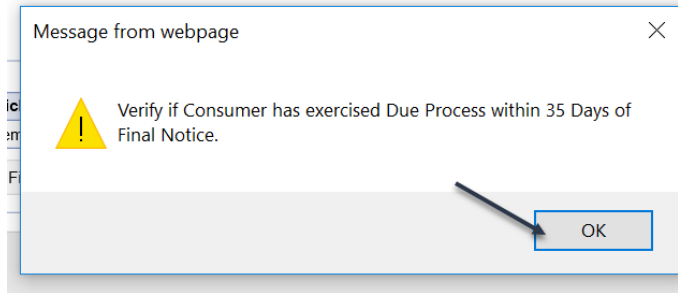
Remember!

There are only 3 instances in which the Waiver Workstream Lead should not wait the 35 days and send the request immediately.

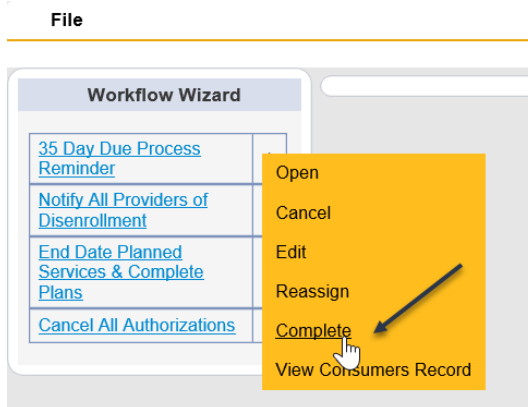
1. Consumer moves to ICF
2. Consumer admitted to DDC
3. Consumer dies (proceed to Chapter on Death Reporting).

*If the closure is for other circumstances, not outlined above, the Waiver Workstream Lead **MUST** wait the 35 days.*

36. Upon doing so, a Message Tickler will appear - Verify if Consumer has exercised Due Process within 35 Days of Final Notice. Click **OK**.



37. After verifying if the Consumer exercised Due Process, hover on the arrow next to the Tickler to click **Complete**.



38. Back in the Workflow Wizard window, hover over the arrow next to the Tickler called Notify All Providers of Disenrollment to click **Open**.

39. Upon doing so, a new Consumer Note record will open. Update the following fields:

- Division = APD
- Program/Provider = Update as necessary
- Note Type = Waiver Disenrollment
- Note Subtype = N/A
- Status = Alert
- Route the Note to the Waiver Workstream Lead by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient

40. When finished, click **File > Save Notes**

41. Complete this process for all relevant Service Providers by clicking **Add Another**

File Tools

Workflow Wizard

- [35 Day Due Process Reminder](#)
- [Notify All Providers of Disenrollment](#)**
- [End Date Planned Services & Complete Plans](#)
- [Cancel All Authorizations](#)

Notes Details

Division *

APL

Note By *

Tierney, Jacqueline

Note Date *

04/24/2018

Program/Provider

APD Waiver

Details

Note Type *

Waiver Disenrollment

Note Sub-Type

Description

Note

The Consumer will be disenrolling from the Waiver.

Status *

Alert

Date Completed

42. Back in the Tickler Queue, hover over the arrow next to the Tickler called End Date Planned Services & Complete Plans to click **Open**.

File

Workflow Wizard

- [35 Day Due Process Reminder](#)
- [Notify All Providers of Disenrollment](#)
- [End Date Planned Services & Complete Plans](#)
- [Cancel All Authorizations](#)

Open

Add Another

Cancel

Edit

Reassign

View Consumers Record

43. Upon doing so, the consumer's Plans List View Grid will open.

File

Workflow Wizard

- [35 Day Due Process Reminder](#)
- [Notify All Providers of Disenrollment](#)
- [End Date Planned Services & Complete Plans](#)**
- [Cancel All Authorizations](#)

Filters

Division

3 Plans record(s) returned - now viewing 1 through 3

	Division	Program	Worker	Cost Plan Creation Date	Comments	Closed Date	Status
<input type="checkbox"/>	APD	CDC+	Tierney, Jacqueline	04/09/2018			Draft
<input type="checkbox"/>	APD		Tierney, Jacqueline	03/30/2018	Created from Assessment		Pending
<input type="checkbox"/>	APD	APD Waiver	Reed, Monica	03/27/2018			Approved

Retrieve Records at a time

44. Click into the relevant Plan record and update all necessary fields.

45. When finished, click **File > Save Plans**

46. Hover over the arrow next to the Tickler to click **Complete**

47. Back in the Tickler Queue, click to open the Tickler called End Date All Authorizations.

48. Upon doing so, the consumer's Authorizations List View Grid will open

49. Click into each relevant Authorization record and update the End Date field.

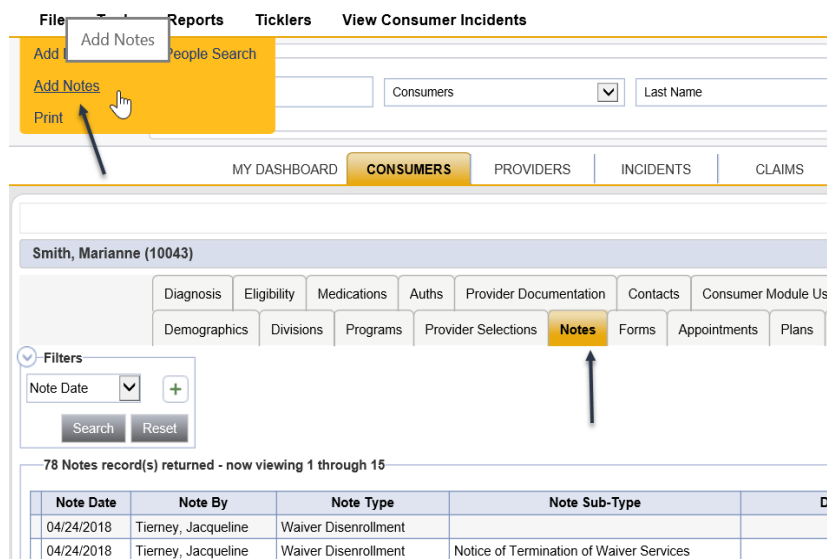
50. When finished, click **File > Save Auth Service** and **File > Close Workflow Wizard**

51. Make a determination about the consumer's Case:

- Did the Consumer Exercise Due Process? If so, proceed to [Chapter on Due Process](#).
- If the Consumer did NOT Exercise Due Process, make a decision if one of the following applies to the consumer's Case:

- i. If any of the following apply, proceed below to Waiver Disenrollment
 - i. Should the consumer's Case be fully Closed? or
 - ii. Should the Consumer be Disenrolled and put back on the Waiver Pre-Enrollment? or

52. To proceed with Waiver Disenrollment, the Waiver Workstream Lead will navigate to the consumer's record and click **Notes > File > Add Note**.



The screenshot shows the Case Management System interface. At the top, there is a navigation bar with tabs: File, Reports, Ticklers, and View Consumer Incidents. Below this, there is a search bar with 'Add Note' and 'People Search' buttons. A yellow box highlights the 'Add Note' button. Below the search bar, there is a dropdown menu for 'Consumers' and a text field for 'Last Name'. Below this, there is a navigation bar with tabs: MY DASHBOARD, CONSUMERS, PROVIDERS, INCIDENTS, and CLAIMS. Below this, there is a consumer record for 'Smith, Marianne (10043)'. Below the consumer record, there is a navigation bar with tabs: Diagnosis, Eligibility, Medications, Auths, Provider Documentation, Contacts, Consumer Module Us, Demographics, Divisions, Programs, Provider Selections, Notes, Forms, Appointments, and Plans. The 'Notes' tab is highlighted. Below the navigation bar, there is a 'Filters' section with a 'Note Date' dropdown and a '+', a 'Search' button, and a 'Reset' button. Below the filters, there is a message: '78 Notes record(s) returned - now viewing 1 through 15'. Below this, there is a table with columns: Note Date, Note By, Note Type, Note Sub-Type, and D.

Note Date	Note By	Note Type	Note Sub-Type	D
04/24/2018	Tierney, Jacqueline	Waiver Disenrollment		
04/24/2018	Tierney, Jacqueline	Waiver Disenrollment	Notice of Termination of Waiver Services	


53. In the new Note record, update the following fields:

- a. Division = APD
- b. Note Type = Waiver Disenrollment
- c. Subtype = Request for Waiver Disenrollment Only OR Request to Disenroll and Return to Pre-Enrollment
- d. Status = Pending
- e. Route the Note record to the State Office Worker by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

54. When finished, click **File > Save and Close Notes**



File Tools


Notes Details


Division *	APD ▼
Note By *	Tierney, Jacqueline ▼
Note Date *	04/24/2018 
Program/Provider	APD Waiver ▼ Details
Note Type *	Waiver Disenrollment ▼*
Note Sub-Type	Request for Waiver Disenrollment Only ▼
Description	<div></div>
Note	<div>Please approve request to Disenroll Consumer from Waiver</div> <div></div>
Status *	Pending ▼
Date Completed	<div></div>

55. The State Office Worker will monitor their **My Dashboard** for Note records related to Waiver Disenrollment. To do so, log into iConnect and set Role = State Office Enrollment. Click **Go**.

56. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Notes with Status = Pending

Notes 	
Complete	4
Draft	1
I'm Interested	1
Pending 	1

Alert Notes 	
Unread Alert Notes	0

Ticklers 	
Ticklers	52

57. In the Pending Notes queue, open the Note record with Note Type = Waiver Disenrollment and Note Subtype = Request for Waiver Disenrollment Only OR Request to Disenroll and Return to Pre-Enrollment

File

Filters

Status Equal To Pending AND

iConnect ID

2 Notes record(s) returned - now viewing 1 through 2

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10043	Smith, Marianne	Waiver Enrollment	Waiver Enrollment Request	04/04/2018		Tierney, Jacqueline	Pending
10043	Smith, Marianne	Waiver Disenrollment	Request for Waiver Disenrollment Only	04/24/2018		Tierney, Jacqueline	Pending

<< First < Previous Retrieve 15 Records at a time Next > Last >>

58. Review the contents of the Note record and update the following fields:
- Note = Indicate whether the disenrollment request is approved or disapproved
 - Status = Complete
 - Route the Note record to the Waiver Workstream Lead and/or the Pre-Enrollment Workstream Lead as a Note Recipient by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.

59. When finished, click **File > Save and Close Notes**

File Tools Reports

Notes

Notes Details

Division * APD

Note By * Tierney, Jacqueline

Note Date * 04/24/2018

Program/Provider APD Waiver Details

Note Type * Waiver Disenrollment

Note Sub-Type Request for Waiver Disenrollment Only

Description

On 4/24/2018 at 2:19 PM, Jacqueline Tierney wrote: Please approve request to Disenroll Consumer from Waiver
On 4/24/2018 at 2:25 PM, Worker State wrote: Request Approved

Note

New Text

Append Text to Note

Status * Complete

Date Completed 04/24/2018

60. To disenroll the Consumer, the State Office Enrollment Worker will navigate to the consumer's record and click on the **Programs** tab > open the APD waiver Program record.

MY DASHBOARD CONSUMERS PROVIDERS CLAIMS SCHEDULER REPORTS

Smith, Marianne (10043)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions **Programs** Provider Selections Notes Forms Appointments Plans Payers Legal Issues

Filters

Disposition Not Equal To Closed AND

Program

Search Reset

4 Programs record(s) returned - now viewing 1 through 4

Division	Program	Worker	Disposition	Disposition Date	Create Date	Enroll Type	Deactivated Date	LOS
APD	APD Waiver	Reed, Monica	Pending Disenrollment	04/24/2018	04/06/2018	Waiting List to Waiver		18
APD	IFS	Reed, Monica	IFS Request	04/09/2018	04/09/2018	IFS		15
APD	CDC+	WLSuper, Robert	Disenrolled	04/09/2018	04/09/2018		04/09/2018	15
APD	APD Waiver	WaiverWSL, Stanley	Crisis Denied	04/04/2018	04/03/2018	Crisis	04/04/2018	21

<< First < Previous Retrieve 15 Records at a time Next > Last >>

61. Update the following fields:

- Disposition = Disenrolled
- Deactivated To = set to correct value
- Deactivated Date = defaults to today's date

62. When finished, click **File > Save and Close Programs**

opd iConnect

Marianne Smith
Last Updated by jtierney
at 4/24/2018 10:53:34 AM

File Tools Word Merge

Program

Program Workers

Notes

Events

Track Disposition

Division * APD

Worker State, Worker Clear Details

Referral Date 04/02/2018

Create Date * 04/06/2018

Program * APD Waiver Details

Disposition * Disenrolled

Disposition Date * 04/24/2018

Enrollment Type Pre-Enrollment to Waiver

Program Begin Date 04/06/2018

Expected Deactivated Date

63. If the Consumer needs to return on the Pre-Enrollment, proceed to the [Chapter on Pre-Enrollment processes](#). Otherwise, proceed below.

64. The Waiver Workstream Lead and/or Pre-Enrollment Workstream Lead will monitor their **My Dashboard** for Note records related to Waiver Disenrollment status.

65. To begin, log into iConnect and set Role = Region Waiver OR Region Pre-Enrollment Workstream or Region Waiver Workstream Lead. Click **Go**.

opd iConnect

Welcome, Caroline Shorter 4/4/2024 3:18 PM My Dashboard Sign Out

Role
Region Pre-Enrollment Workstream Lead GO

File Reports

Quick Search

Consumers Last Name GO ADVANCED SEARCH

MY DASHBOARD CONSUMERS PROVIDERS

66. On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Complete** link to open a queue of Notes with Status = Complete.

Notes

Complete 7

Draft 1

I'm Not Interested 1

Pending 8

Alert Notes

Unread Alert Notes 0

a. Use the multi variable search to narrow down the search results. Open the Note record with Note Type

= Waiver Disenrollment and Note Subtype = Request for Waiver Disenrollment Only OR Request to Disenroll and Return to Pre-Enrollment

67. Review the contents of the Note. If the request was approved, create a new request for Case Closure via a new Consumer Note record.

Request for Case Closure

1. To create the request for Case Closure, navigate to the consumer's record and click **Notes > File > Add Note**.
2. In the new Note record, update the following fields:
 - a. Division = APD
 - b. Note Type = Case Closure
 - c. Note Subtype = Request for Case Closure
 - d. Status = Pending
 - e. Route the Note record to the ROM or designee by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
3. When finished, click **File > Save and Close Notes**

File Tools

Notes Details

Division * APD ▼

Note By * Tierney, Jacqueline ▼

Note Date * 04/25/2018

Program/Provider APD Waiver ▼ [Details](#)

Note Type * Case Closure ▼*

Note Sub-Type Request for Case Closure ▼

Description

Note

4.25.18 - Request for ROM to approve Case Closure Request

Status * Pending ▼

Date Completed

- The Region Operations Manager (ROM) will monitor their **My Dashboard** for Note records related to Waiver Disenrollment status.
- To begin, log into iConnect and set Role = ROM/Deputy ROM. Click **Go**.

opd iConnect

Welcome, Jacqueline Tierney | **My Dashboard** | [Sign Out](#)

Role: ROM/Deputy ROM ▼ **GO**

File

Quick Search

Consumers ▼ Last Name ▼ **GO** [ADVANCED SEARCH](#)

MY DASHBOARD | CONSUMERS | PROVIDERS | INCIDENTS | CLAIMS | SCHEDULER | REPORTS

- On the **My Dashboard**, locate the Consumers panel and scroll down to the Notes section. Click on the **Pending** link to open a queue of Notes with Status = Pending.

Notes	
Complete	7
Draft	1
I'm Not Interested	1
Pending	9

7. Use the multi variable search to narrow down the search results. Open the Note record with Note Type = Case Closure and Note Subtype = Request for Case Closure.

File

Filters

Note Sub Type Contains Case AND

iConnect ID +

Search Reset

1 Notes record(s) returned - now viewing 1 through 1

iConnect ID	Consumer	Note Type	Note Sub Type	Note Date	Subject	Author	Status
10043	Smith, Marianne	Case Closure	Request for Case Closure	04/25/2018		Tierney, Jacqueline	Pending

<< First < Previous Retrieve 15 Records at a time Next > Last >>

8. Review the contents of the Note. If additional info is needed, update the following fields:
 - a. Note Subtype = Additional Information Needed
 - b. Status = Pending
 - c. Route the Note back to the designated Waiver Workstream Lead or Pre-Enrollment Workstream Lead by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results, click on the matching Worker Name to route the note to that recipient.
9. If no additional info needed, update the following fields:
 - a. Note Subtype = Case Closure Approved OR Case Closure Denied
 - b. Status = Complete
 - c. Route the Note back to the designated Waiver Workstream Lead or Pre-Enrollment Workstream Lead by clicking the Ellipsis button next to Add Note Recipient. In the pop-up window, type in the Worker's Last Name and click **Search**. In the Search results,

click on the matching Worker Name to route the note to that recipient.

10. Click **File > Save and Close Notes**.

Notes

Notes Details

Division * APD ▾

Note By * Tierney, Jacqueline

Note Date * 04/25/2018

Program/Provider APD Waiver ▾ Details

Note Type * Case Closure ▾*

Note Sub-Type Case Closure Approved ▾

Description

Note

New Text

Append Text to Note

Status * Complete ▾

Date Completed 04/25/2018

11. Upon saving the Note record with Note Type = Case Closure
Note Subtype = Case Closure Approved with Status =
Complete, a Workflow Wizard will trigger the following
Ticklers:

- Send the Notice of Case Closure – *Assigned to Waiver or Pre-Enrollment Workstream Lead*, Due Immediately
- Close the Case – *Assigned to Waiver or Waiting Workstream Lead*, Due 10 days from Note Date Completed date
- Close the Division Record - *Assigned to Waiver or Pre-Enrollment Workstream Lead*, Due 365 days from Note Date Completed date

12. To complete the Ticklers, the Waiver Workstream Lead or Pre-Enrollment Workstream Lead will log into iConnect and set Role = Region Pre-Enrollment Workstream Lead. Click **Go**.

The screenshot shows the iConnect dashboard. At the top, it says 'Welcome, Caroline Shorter' and 'My Dashboard'. There is a 'Sign Out' link. A dropdown menu for 'Role' is open, showing 'Region Pre-Enrollment Workstream Lead' selected. A 'GO' button is next to the role dropdown. Below this, there is a 'Quick Search' section with a search bar, a dropdown for 'Consumers', and a dropdown for 'Last Name'. There is a 'GO' button and an 'ADVANCED SEARCH' link. At the bottom, there are tabs for 'MY DASHBOARD', 'CONSUMERS', and 'PROVIDERS'.

13. On the **My Dashboard**, find the Consumers Section and scroll down to the Ticklers Panel. Click on **Ticklers Due** to access the Tickler Queue:

The screenshot shows the 'My Dashboard' with three main sections: 'Alert Notes', 'Ticklers', and 'Plans'. The 'Ticklers' section is highlighted with a blue header and shows '11' ticklers. An arrow points to the 'Ticklers' section. The 'Alert Notes' section shows '0' unread alert notes. The 'Plans' section shows '1' approved and '1' pending plan.

- a. Use the multi variable search to narrow down the results in the Tickler Queue. Click **Search**.

The screenshot shows the 'File' section of the iConnect dashboard. It features a 'Filters' section with dropdowns for 'Status', 'Last Name', and 'iConnect ID'. There are also 'Equal To' and 'New' buttons, and 'AND' and 'X' buttons. A 'Search' button is highlighted with an arrow. Below the filters, it says '3 Ticklers record(s) returned - now viewing 1 through 3'. A table displays the results:

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Send Notice of Case Closure	04/25/2018	04/25/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Close the Case	04/25/2018	05/05/2018		New	Tierney, Jacqueline
Smith, Marianne	10043	Close the Division record	04/25/2018	04/25/2019		New	Tierney, Jacqueline

At the bottom, there are navigation buttons: '<< First', '< Previous', 'Retrieve 15 Records at a time', 'Next >', and 'Last >>'.

**Tip**

*When searching for a future Tickler, remember to clear the check box next to **Apply Alert Days Before Due** prior to clicking **Search**.*

14. Click to open the Tickler called Send Notice of Case Closure.

15. Upon doing so, the Notice of Case Closure letter will open in Word Merge preview mode.

16. Click **Open Document** to edit the contents of the letter in Microsoft Word. Save the document to your computer.

The screenshot displays the iConnect web application interface. At the top, there is a navigation bar with the iConnect logo on the left, a user welcome message 'Welcome, Jacqueline Tierney 4/25/2016 8:10 AM' in the center, and a document title 'Notice of Case Closure' on the right. Below the navigation bar, the main content area is titled 'Preview (read-only)' and contains a message 'This is a preview of your merge document and is not editable.' The preview shows a letterhead with the APD logo and the text 'agency for persons with disabilities State of Florida'. Below the logo, the title 'Notice of Case Closure' is displayed. On the left side of the preview, there is a list of names: 'Ron DeSantis Governor', 'Taylor Hatch Director', and a date field with the placeholder text 'Click here to enter a date.' On the far left, there is a sidebar with instructions for generating a merge document and saving it to a note, with buttons for 'Open Document' and 'Save to Note'.

17. Print and mail the letter to the Consumer.

18. Back in the Word Merge preview screen, click **Upload and Save to Note**. In the new Consumer Note record, update the following fields:

- a. Division = APD
- b. Note Type = Case Closure
- c. Status = Complete

19. When finished, click **File > Save and Close Notes**

Notes Details

Division * APD

Note By * Tierney, Jacqueline

Note Date * 04/25/2018

Program/Provider APD Waiver [Details](#)

Note Type * Case Closure

Note Sub-Type

Description Word Merge Template

Note

New Text
Notice of Case Closure Attached to this Note record

Append Text to Note

Status * Complete

Date Completed 04/25/2018

20. In the Tickler Queue, hover over the arrow next to the Tickler to click **Complete**:

3 Ticklers record(s) returned - now viewing 1 through 3

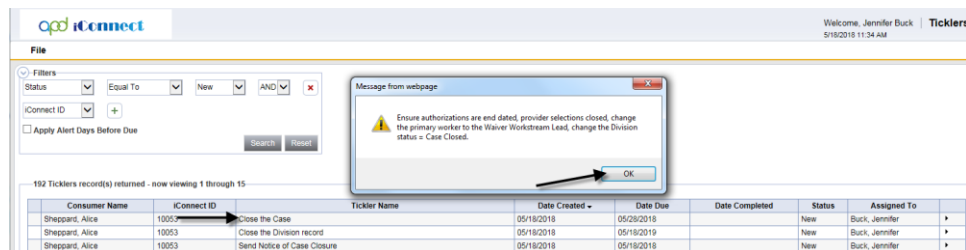
Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Smith, Marianne	10043	Send Notice of Case Closure	04/25/2018	04/25/2018		New	
Smith, Marianne	10043	Close the Case	04/25/2018	05/05/2018		New	
Smith, Marianne	10043	Close the Division record	04/25/2018	04/25/2019		New	

<< First < Previous Retrieve 15 Records at a time Next > Last >>

Cancel
Edit
Reassign
Complete
View Consumers Record

21. Back in the Tickler Queue, click to open the next Tickler called Close the Case.

22. Upon doing so, a Message Tickler will appear – Ensure auths are end dated, provider selections closed, change primary worker to the WS Lead (same as secondary worker). Click **OK**.



23. To close the consumer's Case, navigate to the consumer's record > click on the **Divisions** tab > open the consumer's APD Division record and update the following fields:

- Disposition = Case Closed
- Primary Worker = change to the Waiver Workstream Lead – Same as the Secondary Worker.
- Case Closure Date = Update as appropriate
- Case Closure Reason = Update as appropriate

24. When finished, click **File > Save and Close Divisions**

Division

Marianne Smith
Last Updated by jtierney
at 4/9/2018 1:35:28 PM

File **Word Merge**

Division

Events

Track Disposition

Events

Division * APD

Disposition * Case Closed

Disposition Date 04/25/2018

Open Date 04/04/2018

Data Entry Date 03/21/2018

Primary Worker * Reed, Monica ... Clear Details

Secondary Worker Tierney, Jacqueline ... Clear Details

Application Received Date * 04/04/2018

Interested in ICF/IID Yes

Age Category at Time of Application * Under 6

Application Pended Due Date

Eligibility Documentation Complete Date

Case Closure Date * 04/25/2018

Case Closure Reason * Loss of Contact

25. On the consumer's record, click on **Provider Selections** to verify that all Provider Selection records are closed.

26. On the consumer's record, click on **Authorizations** to verify that each Authorization record is appropriately end dated.
27. Back in the Tickler Queue, hover over the arrow next to the Tickler to click **Complete**.
28. In 365 days after Case Closure Request was approved, the Pre-Enrollment Workstream Lead or Waiver Workstream Lead will return to the Tickler Queue to complete the final Tickler called Close the Division Record.

Consumer Name	iConnect ID	Tickler Name	Date Created	Date Due	Date Completed	Status	Assigned To
Sheppard, Alice	16888	Close the Division record	05/18/2018	05/18/2019		New	Buck, Jennifer

29. Upon clicking on the Tickler, the consumer's Divisions List View Grid will appear.

Division	Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
APD	APD Eligible - ICF/IID	Buck, Jennifer	Buck, Jennifer	03/01/2018		78

30. Click to open the APD Division record. Update the following fields:
 - a. Disposition = Closed
 - b. Closure Date = Update as appropriate
 - c. Closure Reason = Update as appropriate
31. When finished, click **File > Save and Close Divisions**
32. Now that the Consumer is closed to the APD Division, ensure that all Authorizations are terminated automatically when the Division was closed. Navigate to the consumer's

record and click on the **Authorizations** tab (Note those records with Status = Terminated).

Sheppard, Alice (10053)

Diagnosis Eligibility Medications **Auths** Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SANS Notes Forms Appointments Plans Billing Payers

Filters
Division

3 Auths record(s) returned - now viewing 1 through 3

	Division	Provider	PA Number	Auth ID	Start Date	End Date	Status	Cancelled
<input type="checkbox"/>	APD	WSC Agency1		140676	04/01/2018	06/30/2018	Terminated	No
<input type="checkbox"/>	APD	APD Test Provider		140675	04/01/2018	06/30/2018	Terminated	No
<input type="checkbox"/>	APD	A TEST Provider		140669	04/01/2018	06/30/2018	Terminated	No

Chapter 21 | WSC Case Load Transfers

Single Case Load Transfer

1. To begin, log into iConnect and set Role = Waiver or Pre-Enrollment Workstream Lead. Click **Go**.

Quick Search: Consumers Last Name

MY DASHBOARD CONSUMERS PROVIDERS INCIDENTS CLAIMS SCHEDULER REPORTS

NOTE: For Waiver, a single case load transfer would only happen in specific circumstances like if the WSC leaves the agency with no notice and the caseload needs to transfer to a supervisor temporarily until a new WSC can be selected.

2. Navigate to the consumer's record, click on the **Division** tab.
3. The list of open Division records displays. Select the APD Division record.

Filters: Disposition Not Equal To Closed AND

Division

Search Reset

1 Divisions record(s) returned - now viewing 1 through 1

Division	Disposition	Primary Worker	Secondary Worker	Open Date	Close Date	LOS
APD	APD Eligible - ICF/IID	Buck, Jennifer	Buck, Jennifer	04/03/2018		31

4. The Division details page displays. Update the following fields:
 - a. Primary Worker = select the ellipsis to search for and select the new Waiver Support Coordinator worker that will receive the case load.
 - b. When prompted, select Yes to transfer any pending ticklers to the new worker

apd iConnect Alice Sheppard | Division
Last Updated by jibuck
at 4/25/2018 4:06:39 PM

File Word Merge

Division

Events

Track Disposition

Events

Division * APD

Disposition * APD Eligible - ICF/IID

Disposition Date 04/25/2018

Open Date 04/03/2018

Data Entry Date 04/03/2018

Primary Worker * WSC, Best ... Clear Details

Secondary Worker Buck, Jennifer ... Clear Details

Application Received Date * 01/01/2018

Interested in ICF/IID Yes

Age Category at Time of Application * 6 and Above

Application Pended Due Date

Eligibility Documentation Complete Date

Changing the primary worker will update the worker designation on all pending assessments, authorizations, plans, plan review ticklers, placements, payments, and any child-linked open case records. Do you want to continue?

OK Cancel

Referral Source

Referral Date 04/03/2018

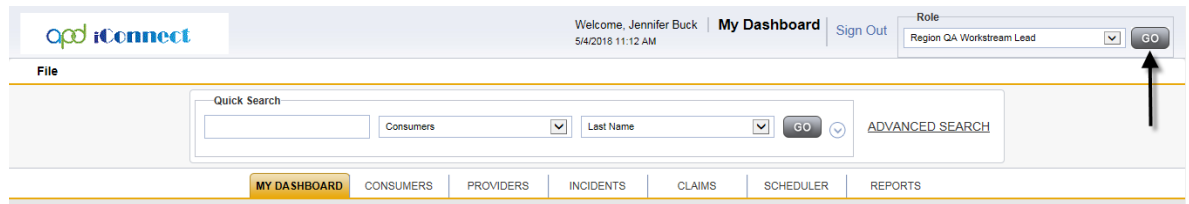
Referral Source

Referral Reason

5. Click **File > Save and Close Division**.
6. Repeat this step for all applicable active Division records

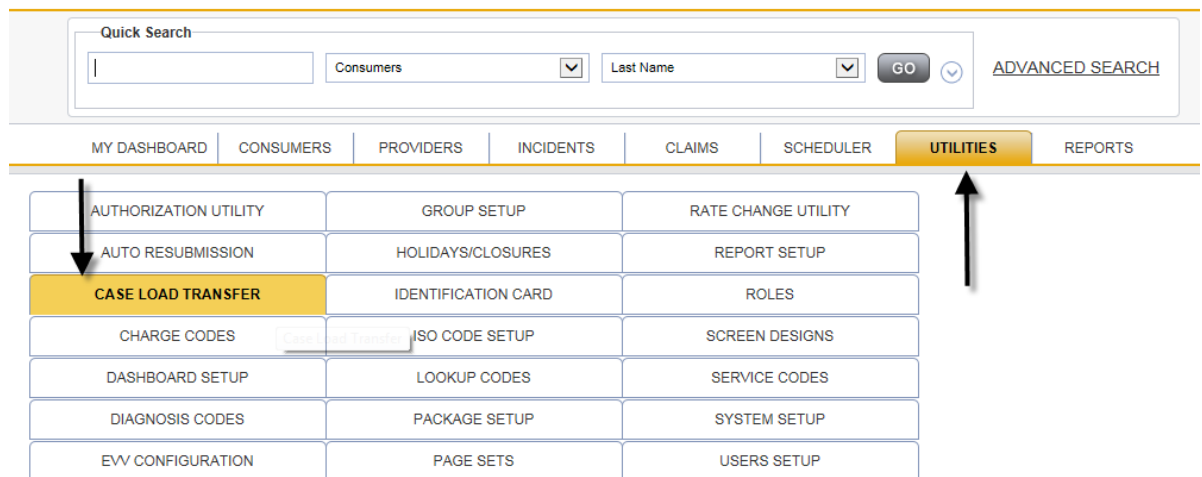
Bulk Case Load Transfer

1. To begin, log into iConnect and set Role = Region QA Workstream Lead. Click **Go**.



The screenshot shows the iConnect login interface. At the top, there is a header with the iConnect logo, a welcome message for Jennifer Buck, and a 'My Dashboard' link. On the right, there is a 'Role' dropdown menu set to 'Region QA Workstream Lead' and a 'GO' button. Below the header, there is a 'Quick Search' section with input fields for 'Consumers' and 'Last Name', and a 'GO' button. An arrow points to the 'GO' button in the role selection area.

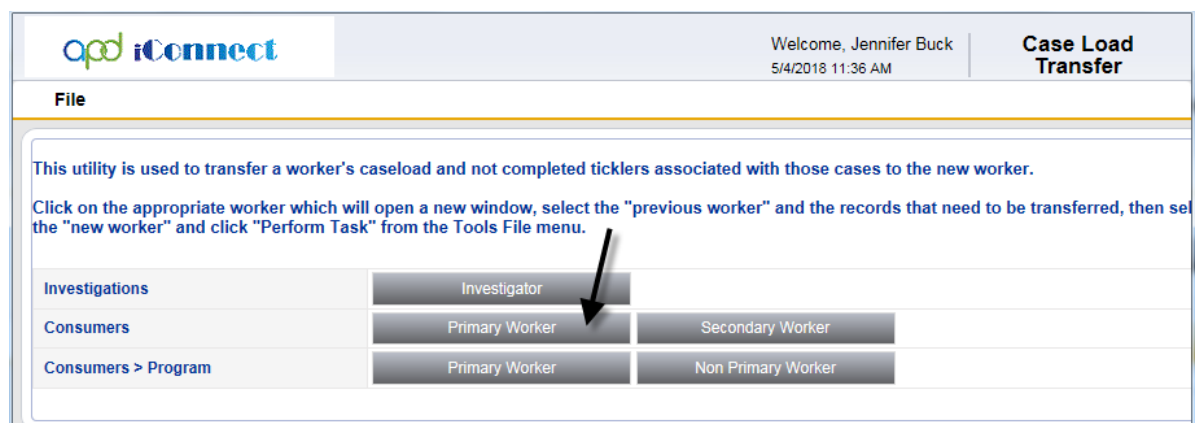
2. Navigate to the **Utilities** Chapter. Select **Case Load Transfer**.



The screenshot shows the iConnect Utilities page. At the top, there is a 'Quick Search' section. Below it, there is a navigation bar with tabs for 'MY DASHBOARD', 'CONSUMERS', 'PROVIDERS', 'INCIDENTS', 'CLAIMS', 'SCHEDULER', 'UTILITIES', and 'REPORTS'. The 'UTILITIES' tab is selected and highlighted. Below the navigation bar, there is a grid of utility options. The 'CASE LOAD TRANSFER' option is highlighted with a yellow background and an arrow points to it.

AUTHORIZATION UTILITY	GROUP SETUP	RATE CHANGE UTILITY
AUTO RESUBMISSION	HOLIDAYS/CLOSURES	REPORT SETUP
CASE LOAD TRANSFER	IDENTIFICATION CARD	ROLES
CHARGE CODES	ISO CODE SETUP	SCREEN DESIGNS
DASHBOARD SETUP	LOOKUP CODES	SERVICE CODES
DIAGNOSIS CODES	PACKAGE SETUP	SYSTEM SETUP
EVV CONFIGURATION	PAGE SETS	USERS SETUP

3. Click **Consumers > Primary Worker** to transfer part of or the full case load of one Waiver Support Coordinator to another.



The screenshot shows the iConnect Case Load Transfer page. At the top, there is a header with the iConnect logo, a welcome message for Jennifer Buck, and a 'Case Load Transfer' link. Below the header, there is a 'File' menu. The main content area contains instructions and a table of options. The 'Consumers > Program' option is highlighted with a yellow background and an arrow points to it.

This utility is used to transfer a worker's caseload and not completed ticklers associated with those cases to the new worker.

Click on the appropriate worker which will open a new window, select the "previous worker" and the records that need to be transferred, then select the "new worker" and click "Perform Task" from the Tools File menu.

Investigations	Investigator	
Consumers	Primary Worker	Secondary Worker
Consumers > Program	Primary Worker	Non Primary Worker

4. The Case Load Transfer page displays. Update the following fields:
 - a. Click the Ellipsis next to **Previous Worker**, search for and select the current Waiver Support Coordinator Worker record.
 - b. Once the worker is selected, click **Display Case Load**
 - c. Click the ellipsis next to **New Worker**, search for and select the new Waiver Support Coordinator Worker record.

Consumer Case Load Transfer

Select the previous worker from the dropdown, click "Display Case Load" and a list of all active consumer records will appear below in a list view where the worker is listed in the Open/Close Page, check the box next to each record you wish to transfer then select a worker from the New Worker dropdown.

From the Tools File Menu select "Perform Task" to execute the transfer of the records and pending ticklers to the new worker.

Previous Worker *	Buck, Jennifer	... Click Details
New Worker *	WSC, Best	... Click Details
Generate Consumer Notification Letter	<input type="checkbox"/>	

Display Case Load

1 Case Load Transfer record(s) returned - now viewing 1 through 1

Case No	Last Name	First Name	Status	Disposition	Fund Code	Disposition Date	Worker	
10053	Sheppard	Alice	Active	APD Eligible - ICF/IID	APD	04/25/2018	Buck, Jennifer	<input type="checkbox"/>

<< First < Previous Retrieve 15 Records at a time Next > Last >>

5. Click the **Generate Consumer Notification Letter** box to save a Note with the WSC change notification attached for every Consumer record/Case that is being transferred.
6. The page refreshes. Update the following fields:
 - a. Note Type = WSC Selection
 - b. Note Subtype = Notification of WSC Change
 - c. Notification Letter = WSC Cover Letter New to Waiver

opd iConnect Welcome, Jennifer Buck 5/4/2018 11:51 AM **Case Load Transfer**

File Tools

Consumer Case Load Transfer

Select the previous worker from the dropdown, click "Display Case Load" and a list of all active consumer records will appear below in a list view where the worker is listed in the Open/Close Page, check the box next to each record you wish to transfer then select a worker from the New Worker dropdown.

From the Tools File Menu select "Perform Task" to execute the transfer of the records and pending ticklers to the new worker.

Previous Worker *	Buck, Jennifer	...Clear	Details	Display Case Load
New Worker *	WSC, Best	...Clear	Details	
Generate Consumer Notification Letter	<input checked="" type="checkbox"/>			

Consumer Notification

When the case load transfer is executed, and there is a notification letter selected in the Notification letter field, the letter will be generated and be attached to a note record for each consumer receiving a new worker. This note will be routed to the Note Attachment Print Queue where the attachment can be printed and mailed.

Note Type: WSC Selection *

Note Subtype: Notification of WSC Change

Notification Letter: WSC Cover Letter New To Waiver

1 Case Load Transfer record(s) returned - now viewing 1 through 1

Case No	Last Name	First Name	Status	Disposition	Fund Code	Disposition Date	Worker	
10053	Sheppard	Alice	Active	APD Eligible - ICF/IID	APD	04/25/2018	Buck, Jennifer	<input type="checkbox"/>

<< First < Previous Retrieve 15 Records at a time Next > Last >>

7. From the Case Load Transfer list view grid, select each case to be transferred by **checking the box** next to each case.

8. Click **Tools > Perform Task**.

opd iConnect Welcome, Jennifer Buck 5/4/2018 11:42 AM **Case Load Transfer**

File Tools

Perform Task

Consumer Case Load Transfer

Select the previous worker from the dropdown, click "Display Case Load" and a list of all active consumer records will appear below in a list view where the worker is listed in the Open/Close Page, check the box next to each record you wish to transfer then select a worker from the New Worker dropdown.

From the Tools File Menu select "Perform Task" to execute the transfer of the records and pending ticklers to the new worker.

Previous Worker *	Buck, Jennifer	...Clear	Details	Display Case Load
New Worker *	WSC, Best	...Clear	Details	
Generate Consumer Notification Letter	<input type="checkbox"/>			

1 Case Load Transfer record(s) returned - now viewing 1 through 1

Case No	Last Name	First Name	Status	Disposition	Fund Code	Disposition Date	Worker	
10053	Sheppard	Alice	Active	APD Eligible - ICF/IID	APD	04/25/2018	Buck, Jennifer	<input checked="" type="checkbox"/>

<< First < Previous Retrieve 15 Records at a time Next > Last >>

9. Accept the acknowledgement. The page refreshes and transferred caseloads no longer appear in the Case Load transfer records list view.

oqo iConnect Welcome, Jennifer Buck 5/4/2018 11:53 AM **Case Load Transfer**

File Tools

Consumer Case Load Transfer

Select the previous worker from the dropdown, click "Display Case Load" and a list of all active consumer records will appear below in a list view where the worker is listed in the Open/Close Page, check the box next to each record you wish to transfer then select a worker from the New Worker dropdown.

From the Tools File Menu select "Perform Task" to execute the transfer of the records and pending ticklers to the new worker.

Previous Worker *	Buck, Jennifer	Clear Details	Display Case Load
New Worker *	WSC, Best	Clear Details	
Generate Consumer Notification Letter	<input checked="" type="checkbox"/>		

Consumer Notification

When the case load transfer is executed, and there is a notification letter select attached to a note record for each consumer receiving a new worker. This note can be printed and mailed.


Note Type: WSC Selection

Note Subtype: Notification of WSC Change

Notification Letter: WSC Cover Letter New To Waiver

0 record(s) returned

Message from webpage

 Case Load Transfer process completed successfully.

OK

10. The Note is visible by navigating to the consumer's record. Click **Notes**. Select the **WSC Selection** Note in the list view to open.

File Tools Reports Ticklers View Consumer Incident

MY DASHBOARD **CONSUMERS** PROVIDERS INCIDENTS CLAIMS SCHEDULER UTILITIES REPORTS

Sheppard, Alice (10053)

Diagnosis Eligibility Medications Auths Provider Documentation Contacts Consumer Module User

Demographics Divisions Consumer Budgets Programs Provider Selections SANs **Notes** Forms Appointments Plans Waiting List Payers

Filters


Note Date +

Search Reset

38 Notes record(s) returned - now viewing 1 through 15

Note Date	Note By	Note Type	Note Sub-Type	Description	Status	Date Completed	Attachment
05/04/2018	Application, Harmony	WSC Selection	Notification of WSC Change	Bulk Case Load Transfer	Complete	05/04/2018	Yes
05/01/2018	Buck, Jennifer	Forensic	Initial Examining Report	Word Merge Template	Complete	05/01/2018	Yes
05/01/2018	Buck, Jennifer	Forensic	Involuntary Commitment	description	Complete	05/01/2018	No

11. Repeat this process to transfer secondary worker caseloads as well as program caseloads as necessary.

		Welcome, Jennifer Buck 5/4/2018 11:36 AM		Case Load Transfer	
File					
<p>This utility is used to transfer a worker's caseload and not completed ticklers associated with those cases to the new worker.</p> <p>Click on the appropriate worker which will open a new window, select the "previous worker" and the records that need to be transferred, then select the "new worker" and click "Perform Task" from the Tools File menu.</p>					
Investigations	<input type="button" value="Investigator"/>				
Consumers	<input type="button" value="Primary Worker"/>		<input type="button" value="Secondary Worker"/>		
Consumers > Program	<input type="button" value="Primary Worker"/>		<input type="button" value="Non Primary Worker"/>		