

### Plan Validation Errors

### Introduction

The Agency for Persons with Disabilities (APD) and the Waiver Support Coordinators (WSCs) work to develop and maintain the clients of APD cost plans as it is outlined in the <u>Developmental Disabilities iBudget Handbook and Rate Table.</u> When the WSC or the Waiver unit attempts to validate a plan, errors may be encountered. This job aid will assist in correcting some of the common errors associated with plan validation rules. Please work with your <u>Regional Waiver Liaison</u> for questions on Plan Validation issues.

The following headings are from the system message that generates when the plan validation fails. Navigate to the appropriate heading to assist in resolving that issue.

## Plan Validation Error Messages:

This service has exceeded the maximum units per.

Combination of Life Skills Development Services cannot exceed more than 56 hours per week.

Total units exceed the max units allowed for this assessment service.

Exceeds the nursing assessment max limit.

You cannot add/edit units on a terminated authorization

The consumer does not have sufficient budget left on this FY cost plan to process the changes at this time. Please try again after confirming all the authorization requests sent to FMMIS are fully approved or canceled.

Line Item Not Found

Sum of Claims Dollar Greater

## Plan Validation Error Messages Explained and Tips to Resolve

### This service has exceeded the maximum units per.

When services exceed the iBudget Handbook and Rate Table limitations, validation rules have been added so that plans will fail validation appropriately.

- Review the units that you have added and adjust as needed.
- Check for duplicate entries of services. Delete the entry as needed.



## Combination of Life Skills Development Services cannot exceed more than 56 hours per week

The maximum allowable hours for combined Life Skills Development (LSD) services have been adjusted to 56 hours per week.

Plan validation rules have been added so that plans will fail validation if any combination of LSD services exceeds 56 hours per week.

- Review the hours for each LSD service and adjust accordingly.
- Check the authorizations to determine if they have been updated prior to the new cost plan changes.

# Total units exceed the max units allowed for this assessment service. OR Exceeds the nursing assessment max limit.

Plan validation rules have been enhanced so assessments will pass validation when they meet these iBudget Handbook requirements.

- Physical therapy assessment services may not exceed two assessments per year.
- Behavioral assessments and speech therapy assessments are limited to one per year.
- Nursing assessments should be updated annually.
- Review the cost plan for prior assessments and adjust the planned service accordingly.

### You cannot add/edit units on a terminated authorization.

The Florida Medicaid Management Information System (FMMIS) interface will reject an authorization with added units that were previously terminated.

A **new rule** has been created to prevent users from adding units to an authorization that was previously terminated to reduce rejected authorizations.

- Check the Auths tab for authorizations with terminated status, do **not** use the authorization to add or edit units as the authorization is USED with 0 max units.
- Refer to Processing Rejected Authorizations video



The consumer does not have sufficient budget left on this FY cost plan to process the changes at this time. Please try again after confirming all the authorization requests sent to FMMIS are fully approved or canceled.

Consumers' cost plans should not exceed their allocated budget.

A **new rule** has been created to prevent users from creating authorizations if it will cause the consumer to incur a negative balance on their current fiscal year (FY) budget.

- Check for rejected authorizations and resolve.
- Check Auths tab for confirmation that the authorizations have been updated as needed. If authorizations have not been updated, you need to update the authorizations.

#### Line Item Not Found

A prior authorization doesn't exist which usually means all units were used/billed.

Double check what has been billed prior to trying to update the authorization.

### Sum of Claims Dollar Greater

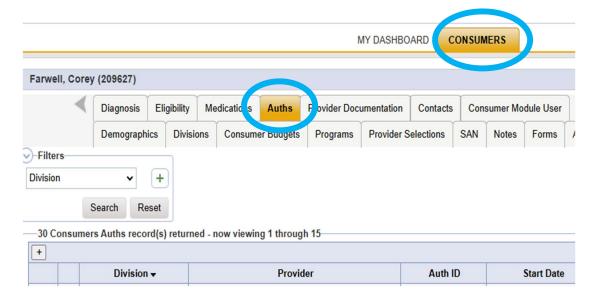
The provider has billed and the units on the adjusted planned service is less than the claimed amount.

- Double check what has been billed prior to updating the authorization.
- 1. Helpful Tips for Successful ValidationContact the Region <u>not</u> the help desk for validation issues
- 2. Inability to create/update auths is because the plan hasn't validated
- Inability to print auths is due to the authorization is terminated or rejected
- 4. Update authorizations first, then create authorizations to eliminate rejected authorizations
- 5. After you have sent authorizations to FLMMIS, check the Auths tab to confirm the returned authorization is in either Approved or Terminated status



## Reviewing the Auths tab in iConnect

1. Navigate to the consumer's record and click on the **Auths** tab.



2. Select the name of the provider for the authorization you want to review.

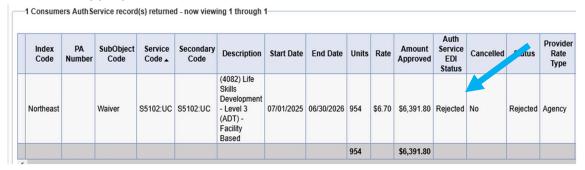


3. Click on the AuthService tab.

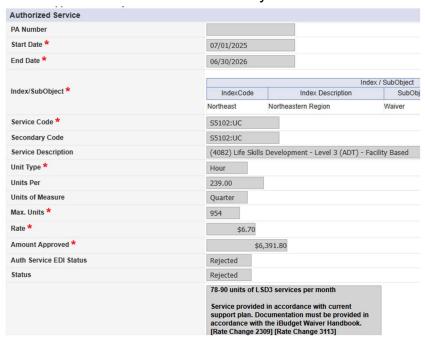




4. Select the appropriate authorization.



5. Review the AuthService for accuracy.



6. Click the Error Message tab to view the error message from FLMMIS.

