

#### 2.0 Waiver Transfer (Tips)

- ➤ You will remain in the same consumer record until you log off or switch to another consumer using the <u>Search</u> link in the upper left corner of the screen.
- > To skip a screen, click on the screen you want to go to on the blue menu bar at the top of the screen.
- > Only the first letter or letters of a provider's name need to be entered on the SSD screens.
- ➤ If [Save and Continue] does not take you to the next screen, read the error message at the top of the screen.
- Remember to use the HCSIS menu links (not the [Back] button in your web browser) for navigation in HCSIS. Some pages will automatically "expire" once the user navigates away from the page. If you use the [Back] button in the Internet Explorer, you may encounter a *Page has Expired* message in HCSIS. If the web page shows an error that it cannot display a secured page, click the [Refresh] button in the toolbar or use menu path View > Refresh to resume navigation in HCSIS. Then click on [Retry] in the next window that displays. HCSIS will refresh the screen to the latest state it was in before the page expired. If the [Refresh] button does not work, contact your supervisor or HCSIS Administrator.
- The tip sheet is organized with each major step listed in a separate box.
- The Headings of each tip box list some or all of the following information:

Tip number Tip Sheet Name (Step Name)
HCSIS Menu Path needed to complete step
(Scope needed to complete step)

- > Most tip boxes have a **Gray** heading. These tips represent steps to be completed by the Service Coordinator.
- A few tip boxes have a White heading. These tips represent steps to be completed by the SC Supervisor.
- Some tip boxes have a Black heading. These tips represent steps to be completed by the OLTL State Program Staff.
- ➤ Logging in and out of HCSIS: When you log back into HCSIS, follow the appropriate menu path on the tip sheet. You will be prompted to perform a search so HCSIS knows which consumer's information you want to update. Search by Last Name and click [Search]. If more than one consumer has that last name, select the consumer you want by clicking the link Last Name, First Name for the consumer. Then the screen will appear with the consumer's name in the blue header at the top of the screen.
- ➤ Throughout this tip sheet, "Service Coordinator 1" is used to identify the service coordinator who was responsible for the consumer's record for the waiver **out** of which the consumer is transferring, and "Service Coordinator 2" is used to identify the service coordinator responsible for the consumer's record for the waiver **into** which the consumer is transferring.
- ➤ Note: If a consumer is identified as being served by multiple program offices, the consumer's record can be shared across program offices (Office of Developmental Programs, Office of Long Term Living, and Office of Mental Health and Substance Abuse Services). Certain information, such as demographic, eligibility, and Individual Service Plan (ISP) information, can be viewed and/or updated by each program office serving the consumer.
- ➤ If you experience difficulties or have questions about HCSIS, the HCSIS Help Desk is available to answer and troubleshoot your questions. Please contact the HCSIS Help Desk at 1-866-444-1264.

#### 2.0 Waiver Transfer (Tips) Continued



- Transfers will be identified by:
  - The consumer, during initial contact, or
  - During the clearance process. See **step 1.1** of the **New Consumer Tip Sheet** for more information on the clearance process.
- ➤ If the consumer will be staying with the same Service Coordinator as the consumer transfers waivers or programs, proceed to **step 2.1.1** of this tip sheet. For example, if a consumer is transferring from ACT 150 to the OBRA waiver, continue on to **step 2.1.1** at this time.
- ➤ If the consumer will be transferring service coordinators as well as waivers or programs, the two service coordinators must communicate outside of HCSIS. Service Coordinator 2 (or his/her supervisor) should contact Service Coordinator 1 and request that the consumer's record be transferred from Service Coordinator 1's SC Entity into Service Coordinator 2's SC Entity.
- Please see the tip sheet 17.0 SC Entity to SC Entity Transfer for more information on transferring ownership of a consumer's HCSIS record.
- Once the transfer of the consumer's HCSIS record from Service Coordinator 1 to Service Coordinator 2 has been completed, proceed to step 2.1.1.

#### 2.1.1 Waiver Transfer (Waiver Enrollment)

#### Individual > Eligibility > Elig. Determination - Waiver/Program Enrollment

(Service Coordination, SC Supervision)

➤ When you follow the menu path above, the Level of Care screen is displayed.

**Note:** If applicable, search for the consumer using the consumer's first and last name. The screen will appear with the consumer's name in the blue header at the top of the screen.

- > Select Waiver/Program Enrollment from the "Go To" drop-down list on the right side of the screen and click [Go].
- ➤ Click [Add].
- ➤ Enter the following information for the consumer's new waiver:
  - Waiver/Program Type (Select the new Waiver/Program from the drop-down list)
  - Waiver/Program Status (Select Pending from the drop-down list)
  - Point of Origin/Entry Process (Select a Point of Origin/Entry from the drop-down list)
  - Effective Begin Date (Enter proposed date that the consumer will enter the new waiver) (See Note at the bottom of the next page.)

#### ➤ Click [Save].

**Note:** Only Act 150 consumers and OBRA NFI consumers can be newly enrolled. All other new enrollments must be served by an MCO under Community HealthChoices (CHC). If SCs have questions regarding transferring a consumer to CHC, please contact the OLTL Enrollment Unit at <a href="mailto:RA-PWENROLLMENTUNIT@pa.gov">RA-PWENROLLMENTUNIT@pa.gov</a>

**Note**: If a consumer is also served by ODP, both OLTL and ODP can capture eligibility information unique to their program office in HCSIS. OLTL will have read-only access to a consumer's ODP eligibility determination information, via a new hyperlink, on the *Level of Care, Service Preference, and Waiver/Program Enrollment* screens in HCSIS.



2.1.2 Waiver Transfer (Eligibility Determination)

#### Individual > Eligibility > Elig. Determination - Level Of Care

(Service Coordination, SC Supervision)

- Select **Level of Care** from the "Go To" drop-down list on the right side of the screen and click [Go]. The **Level of Care** screen appears.
- > Review the consumer's current level of care and compare it to the level of care needed in the new waiver.
- > If the consumer's current level of care matches the level of care for the new waiver, move on to step 2.1.3.
- > If the consumer's current level of care does not match, click on the [Add] button and enter the following information:
  - Level of Care Eligible
    - OBRA = ICF/ORC

**Note:** An OBRA consumer 21 year or older in a CHC county and with a NFCE level of care should be transitioned to CHC and not enrolled in any waiver or program.

- Effective Begin Date
- ➤ Click [Save and Continue].

2.1.3 Waiver Transfer (Eligibility Service Preference)

#### Individual > Eligibility > Elig. Determination - Service Preference

(Service Coordination, SC Supervision)

- ➤ This page should **not** need modification:
  - Service Preference Choice (Should be set to Home and Community Based Services)
  - Effective Begin Date (Should be set to original Waiver enrollment date)
- Click [Save and Continue].

**Note**: OLTL permits participants to begin receiving fee-for-service (FFS) waiver services starting the same day that they are discharged from a nursing facility where they have received services under a Managed Care Organization (MCO) participating in Community HealthChoices (CHC). Special system allowances for eligibility start dates are possible only when participants leave these NF services under these specific conditions. To accommodate this policy, HCSIS allows the start date of the new FFS waiver service to overlap the end date of the CHC-waiver nursing-facility service by one day only. PDE users alone can enter dates that permit unlimited overlap, when needed.



2.1.4 Waiver Transfer (Eligibility Documentation)

#### Individual > Eligibility > Elig. Determination - Eligibility Documentation

(Service Coordination, SC Supervision)

- > Review the consumer's current eligibility documents and compare them to the eligibility documents needed in the new waiver.
- > Add any new documents that are needed but do not end date or delete old documents.
- ➤ If needed, click [Add].
- > Select a required form in the Form Type field.

#### **OBRA**

Assessment Summary(All Waiver/Program)
MA-51 Evaluation(All Waiver/Program)
PA-162 (OBRA)
Preference(All Waiver/Program)

#### ACT 150

Assessment Summary(All Waiver/Program)
Attendant Care Signature Page (Act 150, Att Care)
MA-51 Evaluation(All Waiver/Program)
Options Assessment(Act 150, Att Care, Independence)
Options Determination Report(Act 150, Att Care, Independence)

- ➤ Select the status of the eligibility document/form from the Status dropdown box
  - **Completed** The document/form has been completed. Ultimately, all required forms must have the *completed* status to continue with the eligibility process.
  - Received Only used when documents/forms need to be submitted to a third party for review and received back to the program office.
  - Submitted Only used when documents/forms need to be submitted to a third party for review and received back by the program office.
- > Enter the following information:
  - Effective Begin Date
- ➤ Click [Save].
- > Repeat these steps for all forms indicated.
- ➤ When all the appropriate forms are completed, click [Save and Continue].



#### 2.2.1 Waiver Transfer (Create Draft Waiver Transfer)

#### ISP > Plan Admin > Create Draft

(Service Coordination, SC Supervision)

➤ When you follow the menu path above, the *Create Draft* screen is displayed.

**Note:** If applicable, search for the consumer using the consumer's first and last name. The screen will appear with the consumer's name in the blue header at the top of the screen.

- If multiple plans are displayed select the consumer's most recent plan.
- If needed, select the **old** Waiver/Program Type from the drop-down list.
- > Enter the day before the consumer will be enrolled in the new waiver as the Proposed End Date.
- Select Waiver/Program Transfer in the Category of Plan Changes field.
- ➤ Click [Create Draft].
- ➤ Verify the draft plan was created by checking to see if an **Operation Successful** message appears at the top of the screen. If you do not receive an **Operation Successful** message, an error has occurred and the draft plan was not created. Read the error message at the top of the screen, address the error, and click [Create Draft] again.

**Note**: If a consumer is also served by ODP, both ODP and OLTL can capture a consumer's ISP information unique to their program office in HCSIS. In addition, OLTL can view a consumer's plan created by ODP via the *Print Plan* screen in HCSIS.

#### 2.2.2 Waiver Transfer (Service Details End Dating)

#### ISP > Serv & Supp > Serv Dtls

(Service Coordination, SC Supervision)

- ➤ When you follow the menu path above, the Service Details screen is displayed.
- Click the **Select** circle (or radio button) for a service on the left side of the table at the top of the screen.
- Click [Edit], and the service appears in the fields on the screen below the table.
- Update the following information:
  - Expected Stop Date (Set this to the day before the consumer will be enrolled in the new waiver.)
  - <u>Do Not Update</u> Total Annual Units at this time.
- ➤ Click [Save].
- > Repeat these steps for each service.



2.2.3 Waiver Transfer (Submit Plan)

#### ISP > Plan Admin > Draft Plans

(Service Coordination, SC Supervision)

> Follow the HCSIS menu path above.

**Note:** If applicable, search for the consumer using the consumer's first and last name. The screen will appear with the consumer's name in the blue header at the top of the screen.

- > Answer Are any of the Consumers attendants family members (Select Yes/No from drop-down list).
- ➤ Enter any comments/details by clicking <u>View/Add Comments</u>. A separate window opens and allows multiple comment entries. *Please see the* **Comment Box Requirements Tip Sheet** for more information about what details should be provided here.

**Note:** Comments are viewable to all users who have access to view the plan in HCSIS. Comments entered on this screen cannot be deleted or modified. If necessary, a new comment should be added to clarify or correct errors.

- Add a comment stating that this is for a waiver transfer.
- ➤ Click [Submit Comments] to save comments.
- ➤ Click [Close] to return to the *Draft Plans* screen.
- > Click [Submit] to submit the plan for review.

2.2.4 Waiver Transfer (Review Plan)

#### ISP > Plan Admin > Pending Review/Approval

(SC Supervision)

- > Follow the HCSIS menu path above.
- Search for the consumer's plan by Last Name and First Name or SSN.
- ➤ Enter any comments/details by clicking <u>View/Add Comments</u>. A separate window opens and allows multiple comment entries. *Please see the* **Comment Box Requirements Tip Sheet** for more information about what details should be provided here.

**Note:** Comments are viewable to all users who have access to view the plan in HCSIS. Comments entered on this screen cannot be deleted or modified. If necessary, a new comment should be added to clarify or correct errors.

- > Click [Submit Comments] to save comments.
- ➤ Click [Close] to return to the Pending Review/Approval screen.
- ➤ Click [Save] to save the plan without submitting the plan, click [Reviewed] to send the plan on for approval, or click [Pending Revision] to send the plan back to the Service Coordinator for revision.

**Note:** If you send the plan back to the Service Coordinator for revision, be sure to explain why the plan needs to be revised in the comments.

**Note**: If a consumer is also served by ODP, both ODP and OLTL can capture a consumer's ISP information unique to their program office in HCSIS. In addition, OLTL can view a consumer's plan created by ODP via the *Print Plan* screen in HCSIS.



# 2.2.5 Waiver Transfer (Approve Plan)

# ISP > Plan Admin > Pending Approval/Review (OLTL STATE)

- > When you follow the menu path above, the *Pending Approval* screen is displayed.
- Enter search criteria such as First Name, Last Name, SSN, Waiver/Program Type, or SC Entity and SC.

**Note:** Only one of the search fields listed above is required.

> Set the search criteria field Category of Plan Changes to Waiver/Program Transfer.

**Note:** If the Category of Plan Changes search field produces no results, try searching under all categories. The SC may not have end-dated the plan as required when performing a waiver transfer. Make a note, in the comments, for the SC to end-date the ISP by clicking on <u>View/Add Comments</u>.

- ➤ Click [Search].
- Find the ISP for the consumer and click on the appropriate hyperlink.

**Note:** If only one consumer's ISP is produced from your search criteria, HCSIS automatically directs you to their ISP without having to click on a hyperlink.

- > Review the consumer's ISP information as needed by bringing up a read-only version of the plan by clicking on the printable version of the plan link.
- ➤ Click [Approved].

**Note**: If a consumer is also served by ODP, both ODP and OLTL can capture a consumer's ISP information unique to their program office in HCSIS. In addition, OLTL can view a consumer's plan created by ODP via the *Print Plan* screen in HCSIS.

- Continue on to step 2.3.1, ISP Create Draft Annual Review, if you are underway working with a plan.
- > If the plan has not been created at this point, skip to step 2.4, Waiver Enrollment.

#### 2.3.1 Waiver Transfer (ISP Create Draft Annual Review)

#### ISP > Plan Admin > Create Draft

(Service Coordination, SC Supervision)

# Note: This step cannot be completed until OLTL has approved the consumer's waiver transfer plan in step 2.2.5.

- When you follow the menu path above, the Create Draft screen is displayed.
- Search for consumer by Last Name and First Name or SSN.
- ➤ Select the **New Waiver/Program Type** from the drop-down list.
- ➤ Enter the **New Waiver enrollment date** as the Proposed Start Date.
- Enter the last day of the fiscal year (6/30/20XX) as the Proposed End Date.
- Select Annual Review in the Category of Plan Changes field.
- ➤ Click [Create Draft].
- ➤ Verify the draft plan was created by checking to see if an **Operation Successful** message appears at the top of the screen. If you do not receive an **Operation Successful** message, an error has occurred and the draft plan was not created. Read the error message at the top of the screen, address the error, and click [Create Draft] again.



2.3.2 New Consumer (ISP Employment Information)

#### ISP > Functional Information > Functional Level - Employment Information

(Service Coordination, SC Supervision)

**Note:** A consumer must have employment information in HCSIS in order to submit a draft plan. If the consumer does not have employment information recorded in HCSIS, you will receive an error message when submitting the plan.

> When you follow the menu path above, the *Employment Information* screen is displayed.

**Note:** If applicable, search for the consumer using the consumer's first and last name. The screen will appear with the consumer's name in the blue header at the top of the screen.

> Select Yes or No from the Employed Status drop-down list.

Note: If you enter No, skip to step 1.4.3.

- > Enter the following information
  - Frequency (Select Fulltime or Part-time from drop-down list)
  - Position
  - Employer
  - Address
  - City
  - State
  - Zip Code
  - Phone
- Answer Does Consumer have employment goals (Select Yes/No from the drop-down list).
- ➤ Click [Save].
- > Continue on to step 2.3.3, ISP Outcome.



2.3.3 Waiver Transfer (ISP Outcome)

#### ISP > Serv & Supp > Outcome Summary

(Service Coordination, SC Supervision)

**Note:** At least one outcome is required for all plans.

> When you follow the menu path above, the *Outcome Summary* screen is displayed.

**Note:** If applicable, search for the consumer using the consumer's first and last name. The screen will appear with the consumer's name in the blue header at the top of the screen.

- ➤ Enter an outcome in the Outcome Phrase field. Outcome phrases are based on a consumer's desires and represent the service goals of the consumer, his/her family, and the support team. Examples include Service Coordination and Daily Living Services.
- ➤ Click [Save].
- > Continue on to step 2.3.4, ISP Outcome Action.

2.3.4 Waiver Transfer (ISP Outcome Action)

#### ISP > Serv & Supp > Outcome Action

(Service Coordination, SC Supervision)

### This step does not apply to ACT150.

➤ When you follow the menu path above, the *Outcome Action* screen is displayed.

**Note:** If applicable, search for the consumer using the consumer's first and last name. The screen will appear with the consumer's name in the blue header at the top of the screen.

- > Select the Related Outcome Phrase.
- ➤ Click [Save].



2.3.5 Waiver Transfer (ISP SSD)

#### ISP > Serv & Supp > SSD

(Service Coordination, SC Supervision)

➤ When you follow the menu path above, the SSD (Service and Supports Directory) screen is displayed.

**Note:** If applicable, search for the consumer using the consumer's first and last name. The screen will appear with the consumer's name in the blue header at the top of the screen.

- ➤ Enter the following information into the *Provider Service Search* fields:
  - **Provider** (if known this is not a required field)
  - County (SSD section)
- ➤ Click [Search].
- > Select the services to add to the plan by clicking the checkbox to the left of the service name(s). Be sure to reference the **Contract Start Date** on the SSD to ensure you are selecting a service that fits within the plan dates.

Note: When searching for services in the SSD screen, use the Go To box to view "All" results <u>or</u> narrow search criteria to show fewer services on the screen

- ➤ Click [Add to Selected].
- > Repeat these steps for each provider.
- > To add Vendor Services to the plan, continue on to step 2.3.6, ISP Vendor Services.
- ➤ If Vendor Services do not need to be added to the consumer's plan, click on **Service Details** in the blue menu bar at the top of the screen to go to the *Service Details* screen and skip to **step 2.3.7**, **ISP Service Details**.

2.3.6 Waiver Transfer (ISP Vendor Services)

#### ISP > Serv & Supp > SSD-Vendor Services

(Service Coordination, SC Supervision)

- > If you just finished adding provider services to the plan, use the "Go To" drop-down list located in the upper right corner of the HCSIS window to select **Vendor Services**.
- ➤ Click [Go].
- ➤ If you navigated away from the SSD screen or you are logging back in to HCSIS, follow the menu path above and the SSD screen is displayed.
- ➤ Enter the following information:
  - Provider
  - County of Service
- ➤ Click [Search].

Note: Narrowing your search criteria by entering the full provider name will show fewer services on the screen.

Click on the vendor service that you would like to add.

Note: See tip sheet 6.0 Vendor Services for additional information on Vendor Services.



2.3.7 Waiver Transfer (ISP Service Details)

#### ISP > Serv & Supp > Serv Dtls

(Service Coordination, SC Supervision)

➤ When you follow the menu path above, the Service Details screen is displayed.

**Note:** If applicable, search for the consumer using the consumer's first and last name. The screen will appear with the consumer's name in the blue header at the top of the screen.

- Click the **Select** circle for a service in the table at the top of the screen.
- Click [Edit] and the service will appear in the fields on the screen below the table.
- > Highlight the appropriate outcome in the Related Outcome Phrase field.
- > Enter the following information:
  - Total Annual Units
    - For ACT 150 the following formulas should be used.
      - Units of Service Coordination = Number of months left in fiscal year including month
        of the start
      - Units of Attendant Care Service = (Number of weeks left in year from consumer's start date \* Total permanent hours \* 4)
  - Expected Start Date (Set this to the date the consumer is expected to begin receiving the service)
  - Expected Stop Date (Set this to the last day of the fiscal year 6/30/20XX)
- ➤ Click [Save].
- > Repeat these steps for each service.

**Note:** Before continuing on to the next step, review the table at the top of the *Service Details* screen. Be sure the table is complete and all details (outcome, units, and service start and end dates) have been captured for each service on the plan. If the table is incomplete, HCSIS will not allow you to submit the plan for review and approval.

2.3.8 Waiver Transfer (Deleting Services for Old Waiver)

ISP > Serv & Supp > Serv Dtls

(Service Coordination, SC Supervision)

**Note:** This step is necessary only if services associated with the consumer's old waiver copied forward onto the consumer's new plan.

- > Click the **Select** circle for a **service associated with the old waiver** in the table at the top of the screen.
- > Click [Delete] and the message "This action will delete this record. Do you wish to continue?" is displayed.
- ➤ Click [Yes].
- > Repeat these steps for each **Old Waiver** service.
- Continue on to step 2.4, Waiver Enrollment.



2.4 Waiver Transfer (Waiver Enrollment)

#### Individual > Eligibility > Elig. Determination – Waiver/Program Enrollment

(SC Supervision)

- > Once all eligibility documentation has been completed, follow the HCSIS menu path above.
- Add a note in the comments box notifying OLTL that this is a waiver transfer and ask OLTL to end date the eligibility for the consumer's old waiver prior to enrolling the consumer in the new waiver.

**Note:** If applicable, search for the consumer using the consumer's first and last name. The screen will appear with the consumer's name in the blue header at the top of the screen.

- > Select Submit to State in the Waiver/Program Status field.
- ➤ Click [Save].

**Note**: If a consumer is also served by ODP, both ODP and OLTL can capture eligibility information unique to their program office in HCSIS. OLTL will have read-only access to a consumer's ODP eligibility determination information, via a new hyperlink, on the *Level of Care, Service Preference, and Waiver/Program Enrollment* screens in HCSIS.



2.5 Waiver Transfer (Approve Plan)

ISP > Plan Admin > Pending Approval/Review

(OLTL STATE)

- Follow the HCSIS menu path above or click on the  $\Delta$  alerts link on the HCSIS home page.
- ➤ Under "Alert Search Criteria" select "Pending Enrollment Decision" as the "Subject".
- ➤ Click [Search].
- > Find the Alert for the consumer.
- Click on the hyperlink labeled "An Individual's Waiver/Program enrollment records is pending for enrollment decision".
- The Eligibility Determination page will now be displayed for this consumer. The menu path for this screen is Individual > Eligibility > Elig. Determination > Waiver/Program Enrollment.
- ➤ Review the consumer's Eligibility and ISP information as needed. (This review will involve navigating to additional screens.)
- > End date the consumer's current enrollment record for the day before the consumer will be enrolling in the new waiver.
- > Select the reason that the consumer's eligibility is ending from the Reason Eligibility is Ending dropdown list.

Note: If "Other" is chosen, enter a description in the If 'Other', please specify text box.

- ➤ Click [Save].
- ➤ Select **Enrolled** in the Waiver/Program Status field.
- ➤ Click [Save].
- Continue on to step 2.5.2, Submit Plan, if the plan has been created.
- If a plan has not been created at this point, return to **step 2.3.1** and begin creating a new plan for the consumer.

**Note**: If a consumer is also served by ODP, both ODP and OLTL can capture eligibility information unique to their program office in HCSIS. OLTL will have read-only access to a consumer's ODP eligibility determination information, via a new hyperlink, on the *Level of Care, Service Preference, and Waiver/Program Enrollment* screens in HCSIS



2.5.2 Waiver Transfer (Submit Plan)

#### ISP > Plan Admin > Draft Plans

(Service Coordination, SC Supervision)

- > Follow the HCSIS menu path above.
- > Search for the consumer's plan by **Last Name**.
- > Answer Are any of the Consumers attendants family members (Select Yes/No from drop-down list).
- Enter any comments/details by clicking <u>View/Add Comments</u>. A separate window opens and allows multiple comment entries. *Please see the* **Comment Box Requirements Tip Sheet** for more information about what details should be provided here.

**Note:** Comments are viewable to all users who have access to view the plan in HCSIS. Comments entered on this screen cannot be deleted or modified. If necessary, a new comment should be added to clarify or correct errors.

- ➤ Click [Submit Comments] to save comments.
- ➤ Click [Close] to return to the *Draft Plans* screen.
- > Click [Submit] to submit the plan for review.

2.5.3 Waiver Transfer (Review Plan)

#### ISP > Plan Admin > Pending Review/Approval

(SC Supervision)

- Follow the HCSIS menu path above.
- > Search for the consumer's plan by Last Name and First Name or SSN.
- ➤ Enter any comments/details by clicking <u>View/Add Comments</u>. A separate window opens and allows multiple comment entries. *Please see the* **Comment Box Requirements Tip Sheet** for more information about what details should be provided here.

**Note:** Comments are viewable to all users who have access to view the plan in HCSIS. Comments entered on this screen cannot be deleted or modified. If necessary, a new comment should be added to clarify or correct errors.

- ➤ Click [Submit Comments] to save comments.
- ➤ Click [Close] to return to the Pending Review/Approval screen.
- Click [Save] to save the plan without submitting the plan, click [Reviewed] to send the plan on for approval, or click [Pending Revision] to send the plan back to the Service Coordinator for revision.

**Note:** If you send the plan back to the Service Coordinator for revision, be sure to explain why the plan needs to be revised in the comments.



2.6 Waiver Transfer (Approve Plan)

ISP > Plan Admin > Pending Approval/Review

(OLTL STATE)

- ➤ When you follow the menu path above, the *Pending Approval* screen is displayed.
- > Enter search criteria such as First Name, Last Name, SSN, Waiver/Program Type, or SC Entity and SC.

Note: Only one of the search fields listed above is required.

- ➤ Set the search criteria field Category of Plan Changes to Annual Review.
- ➤ Click [Search].
- Find the ISP for the consumer and click on the appropriate hyperlink.

**Note:** If only one consumer's ISP is produced from your search criteria, HCSIS automatically directs you to their ISP without having to click on a hyperlink.

- > Review the consumer's ISP information as needed by bringing up a read-only version of the plan by clicking on the printable version of the plan link.
- ➤ Click [Approved].



2.7.1 Waiver Transfer (Create Draft Critical Revision)

#### ISP > Plan Admin > Create Draft

(Service Coordination, SC Supervision)

- ➤ When you follow the menu path above, the *Create Draft* screen is displayed.
- > Select the Old Waiver/Program Type from the drop-down list.
- Select Critical Revision in the Category of Plan Changes field.
- ➤ Click [Create Draft].
- ➤ Verify the draft plan was created by checking to see if an **Operation Successful** message appears at the top of the screen. If you do not receive an **Operation Successful** message, an error has occurred and the draft plan was not created. Read the error message at the top of the screen, address the error, and click [Create Draft] again.

#### 2.7.2 Waiver Transfer (Modifying Service Units)

#### ISP > Serv & Supp > Serv Dtls

(Service Coordination, SC Supervision)

**Note:** Before completing this step Service Coordinator 2 should contact Service Coordinator 1 and to determine the approximate number of units used for each service provided under the consumer's old waiver.

- ➤ When you follow the menu path above, the Service Details screen is displayed.
- Click the **Select** circle for a service on the table at the top of the screen.
- ➤ Click [Edit] and the service will appear in the fields on the screen below the table.
- ➤ Update the Total Annual Units
- ➤ Click [Save].
- Repeat these steps for each service.



2.7.3 Waiver Transfer (Submit Plan)

#### ISP > Plan Admin > Draft Plans

(Service Coordination, SC Supervision)

- > Follow the HCSIS menu path above.
- Search for the consumer's plan by **Last Name**.
- Answer Are any of the Consumers attendants family members (Select Yes/No from drop-down list).
- ➤ Enter any comments/details by clicking <u>View/Add Comments</u>. A separate window opens and allows multiple comment entries. *Please see the* **Comment Box Requirements Tip Sheet** for more information about what details should be provided here.

**Note:** Comments are viewable to all users who have access to view the plan in HCSIS. Comments entered on this screen cannot be deleted or modified. If necessary, a new comment should be added to clarify or correct errors.

- ➤ Click [Submit Comments] to save comments.
- ➤ Click [Close] to return to the *Draft Plans* screen.
- Click [Submit] to submit the plan for review.

2.7.4 Waiver Transfer (Review Plan)

#### ISP > Plan Admin > Pending Review/Approval

(SC Supervision)

- Follow the HCSIS menu path above.
- Search for the consumer's plan by Last Name and First Name or SSN.
- ➤ Enter any comments/details by clicking <u>View/Add Comments</u>. A separate window opens and allows multiple comment entries. *Please see the* **Comment Box Requirements Tip Sheet** for more information about what details should be provided here.

**Note:** Comments are viewable to all users who have access to view the plan in HCSIS. Comments entered on this screen cannot be deleted or modified. If necessary, a new comment should be added to clarify or correct errors.

- ➤ Click [Submit Comments] to save comments.
- ➤ Click [Close] to return to the *Pending Review/Approval* screen.
- > Click [Save] to save the plan without submitting the plan, click [Reviewed] to send the plan on for approval, or click [Pending Revision] to send the plan back to the Service Coordinator for revision.

**Note:** If you send the plan back to the Service Coordinator for revision, be sure to explain why the plan needs to be revised in the comments.



# 2.7.5 Waiver Transfer (Approve Plan) ISP > Plan Admin > Pending Approval/Review (OLTL STATE)

- > When you follow the menu path above, the *Pending Approval* screen is displayed.
- > Enter search criteria such as First Name, Last Name, SSN, Waiver/Program Type, or SC Entity and SC.

**Note:** Only one of the search fields listed above is required.

- ➤ Set the search criteria field Category of Plan Changes to Critical Revision.
- ➤ Click [Search].
- Find the ISP for the consumer and click on the appropriate hyperlink.

**Note:** If only one consumer's ISP is produced from your search criteria, HCSIS automatically directs you to their ISP without having to click on a hyperlink.

- ➤ Review the consumer's ISP information as needed by bringing up a read-only version of the plan by clicking on the printable version of the plan link.
- ➤ Click [Approved].

#### 2.8 Waiver Transfer (End Dating Level of Care)

#### Individual > Eligibility > Elig. Determination - Level Of Care

(Service Coordination, SC Supervision)

➤ When you follow the menu path above, the *Level of Care* screen appears.

**Note:** If applicable, search for the consumer using the consumer's first and last name. The screen will appear with the consumer's name in the blue header at the top of the screen.

- ➤ If the consumer's Level of Care changed in the new waiver:
  - Add an effective end date of the last day that the consumer was in the old waiver to the Level of Care, which is no longer applicable.
- ➤ Click [Save and Continue].



2.9 Waiver Transfer (Eligibility Documentation)

#### Individual > Eligibility > Elig. Determination – Eligibility Documentation

(Service Coordination, SC Supervision)

- > Follow the HCSIS menu path above.
- ➤ Select Eligibility Documentation from the "Go To" drop-down list, and click [Go]. The Eligibility Documentation screen appears.
- ➤ If certain eligibility documents are no longer needed in the new waiver:
  - Add an effective end date of the last day that the consumer was in the old waiver to all documents which are no longer applicable.
- ➤ When all the appropriate forms are end dated, click [Save and Continue].

The waiver transfer process is now complete!