

1

Create Draft Annual Review

All users should review the following steps before performing an annual review in HCSIS

- Navigate to the *Create Draft* screen by following the menu path: **Plan > Plan Admin > Create Draft**
- Search for the participant by Last Name or SSN. The screen will appear with the participant's name in the blue header at the top of the screen.
- Enter the following information:
 - **Waiver/Program Type** (Select the waiver/program from the drop-down list)
 - **Proposed Start Date** (Enter 07/01/20XX)
 - **Proposed End Date** (Enter 06/30/20XX)
 - **Category of Plan Changes** (Select Annual Review)
- 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.

Name: <input type="text"/>		MCI#: <input type="text"/>	Residential County: <input type="text"/>
Plan Status:	Changed:	Agency / SC Entity: SC ENTITY ONE	Waiver/Program:
MCI #:		<input type="text"/>	
BSU #:			
MA #:			
Name:		<input type="text"/>	
Address:		<input type="text"/>	
Phone:			
SSN:			
Date of Birth:		<input type="text"/>	
Effective End Date:			
Gender:		<input type="text"/>	
Waiver/Program Type:		<input type="text"/>	
Proposed Start Date (MM/DD/YYYY):		<input type="text"/>	
Proposed End Date (MM/DD/YYYY):		<input type="text"/>	
Category of Plan Changes:		<input type="text"/>	
<input type="button" value="Reset"/> <input type="button" value="Create Draft"/>			

Select Annual Review from the drop-down

2

ISP Employment/Volunteer Information

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

- Navigate to the *Employment/Volunteer Information* screen by following the menu path: **Plan > Functional Information > Functional Level – Employment/Volunteer Information**
- Select Employed, Volunteer or None from the Work Status drop-down list.
- Enter the following information
 - **Frequency** (Select Fulltime or Part-time from drop-down list)
 - **Position**
 - **Employer/Organization**
 - **Address**
 - **City**
 - **State**
 - **Zip Code**
 - **Phone**
- Answer **Does this consumer have employment/volunteer goals?** (Select Yes/No from the drop-down list).
- If Yes is selected, enter goal information in the List Employment/volunteer goals text box.
- Click [Save].
- Continue to Existing Services, Details.

The Home and Community Services Information System

Home | M4Q | Individual | Plan | SC | Provider | Financial | Admin. | Tools
 Plan Admin | Indiv Pref | Medical | Health & Safety | Func Info | Financial | Serv & Supp | History
 Functional Level | Understanding Communication | Other Non-Medical Evaluation | Household Composition

Plan - Functional Info - Functional Level - Employment/Volunteer Information

Name: [redacted] MCI#: [redacted] Residential County: [redacted] Info

Plan Status: Draft Changed: 10/06/2010 16:09:24 Agency /SC Entity: SC ENTITY ONE Waiver/Program: Attendant Care Fiscal Year: 2010-2011

Go to: Employment/Volunteer Information Go

Work Status	Frequency	Employer/Organization	Goals?
Volunteer	Part-time	CHOP	No

Add Edit Delete

Employment/Volunteer Information

Work Status: * Volunteer

Frequency: Part-time

Position: GREETER

Employer/Organization: CHOP

Address Line 1: 300 SOUTH STREET

Address Line 2:

City: PHILADELPHIA

State: Pennsylvania

Zip: 19131

Phone: 215-555-5708

Does this consumer have employment/volunteer goals?: * No

List Employment/volunteer goals:

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Existing Service Details

- Navigate to the *Service Details* screen by following the menu path: **Plan> Serv & Supp> Serv Dtls**
- Note: HCSIS copies all of the exact information, including services, from the existing approved ISP into the draft Annual Review.
- Click the Select circle (or radio button) for a service to edit from the table at the top of the screen.
- Click [Edit] and the selected service's information will appear in the fields below the table.
- Highlight the appropriate outcome in the Related Outcome Phrase field.
- Enter the following information:
 - **Total Annual Units** (Update the service dates and units as appropriate to reflect the entire fiscal year)
 - Units of Service Coordination = 144
 - Units of Service = 52* Total permanent hours* 4
 - **Expected Start Date** (Set this to 7/1/20XX)
 - **Expected Stop Date** (Set this to 6/30/20XX)
- Click [Save].
- Repeat these steps for each service on the plan.

Services And Supports	
Plan Start Date:	07/01/2010
Plan End Date:	06/30/2011
Related Outcome Phrase:	* <input type="text"/>
Service Name:	Attendant Care (Agency)-Michael Dallas
Service Procedure Code:	S5125:00:00:00:00
County Where the Service is Provided:	OMAP/OSP STATE
Service Contract Start Date:	07/01/2010
Service Contract End Date:	06/30/2011
Service Unit Cost:	\$12.50/15 min.
Provider MPI #:	300357222
Provider Name:	REL SIX SEVEN OLTL PROV FIVE
Service Location Id:	0001
Provider Site:	1301 N 6TH ST HARRISBURG, PA 17102-1249
Total Annual Units:	* <input type="text" value="10"/>
Utilized Units:	0
Expected Start Date (MM/DD/YYYY):	* <input type="text" value="07/01/2010"/>
Expected Stop Date (MM/DD/YYYY):	* <input type="text" value="06/30/2011"/>
The service is an emergency substitute for the following service:	<input type="text"/>
Service Subtotal:	\$125.00
Plan Budget Total:	\$125.00
Authorization Status:	Authorized
Authorization Date And Time:	06/14/2010 07:33:10 PM
Authorization Comments:	

OLTL Annual Review Tip Sheet

4

Deleting Old Services, Details

Note: Skip this step if you are not deleting services from the participant's plan.

Navigate to the *Service Details* screen by following the menu path: **Plan> Serv & Supp> Serv Dtls**

- Click the **Select** circle for a service to be removed from the plan.
- Click [Delete] and a box will appear asking you to confirm the deletion.
- Click [Yes].
- Repeat these steps for each service that should be removed from the plan.

HCSis The Home and Community Services Information System Help

Home | M4Q | Individual | Plan | SC | Provider | Financial | Admin. | Tools
Plan Admin | Indiv Pref | Medical | Health & Safety | Func Info | Financial | Serv & Supp | History
Outcome Summ | Outcome Act | SSD | Serv Dtls | Indiv Rates | Serv Req | Serv Summ | Non-Waiver Services

Plan - Services and Supports - Service Details

Search

Name: [REDACTED]	MCI#: [REDACTED]	Residential County: Westmoreland	Info	
Plan Status: Draft	Changed: 09/24/2010 14:36:22	Agency /SC Entity: OSP DATA	Waiver/Program: Michael Dallas	Fiscal Year: 2010-2011

Select	Outcome Phrase	Service Name	Service Unit Cost	Provider Name	Total Annual Units	Service Start Date	Service End Date	Authorization Status
<input checked="" type="radio"/>		Attendant Care (Agency)-Michael Dallas	\$12.50/15 min.	REL SIX SEVEN OLTL PROV FIVE	10	01/01/2011	06/30/2011	Authorized

Services And Supports

Plan Start Date: 07/01/2010
Plan End Date: 06/30/2011

Related Outcome Phrase: *

Service Name: Attendant Care (Agency)-Michael Dallas
Service Procedure Code: S5125:00:00:00:00
County Where the Service is Provided: OMAP/OSP STATE
Service Contract Start Date: 07/01/2010
Service Contract End Date: 06/30/2011
Service Unit Cost: \$12.50/15 min.
Provider MPI #: 300357222
Provider Name: REL SIX SEVEN OLTL PROV FIVE
Service Location Id: 0001
Provider Site: 1301 N 6TH ST
HARRISBURG,PA 17102-1249
Total Annual Units: * 10
Utilized Units: 0

Confirm Deletion

This action will delete this record. Do you wish to continue?

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Adding NEW SSD Services

Note: Skip this step if you are not adding new services to the participant's plan.

- Navigate to the *Services and Supports Directory* (SSD) screen by following the menu path: Plan> Serv & Supp> **SSD**
- Enter the following information into the Provider Service Search fields:
 - Provider (if known – this is not a required field)
 - County
- Click [Search].

Home | M4Q | Individual | Plan | SC | Provider | Financial | Admin. | Tools
 Plan Admin | Indiv Pref | Medical | Health & Safety | Func Info | Financial | Serv & Supp | History
 Outcome Summ | Outcome Act | SSD | Serv Dtls | Indiv Rates | Serv Req | Serv Summ | Non-Waiver Services

Plan - Services and Supports - SSD

Name: [Redacted] MCI#: [Redacted] Residential County: Monroe Info
 Plan Status: Draft Changed: 06/02/2022 09:52:43 Agency /SC Entity: SYDANDI, LLC Waiver/Program: ACT 150 Fiscal Year: 2022-2023
 Go to: [Dropdown]

Provider Service Search

Provider Name: [Text Box]
 Service Name: [Dropdown]
 Service Rate (Less Than OR Equals To): [Text Box]
 County of Service **: [Dropdown]

[Reset] [Search]

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

- 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.
- Click [Add to Selected].
- Repeat these steps for each provider.
- If vendor services will not be added to the participant's plan, click on [Serv Dtls] in the blue menu bar at the top of the screen to go to the *Service Details* screen

Home | M4Q | Individual | Plan | SC | Provider | Financial | Admin. | Tools
 Plan Admin | Indiv Pref | Medical | Health & Safety | Func Info | Financial | Serv & Supp | History
 Outcome Summ | Outcome Act | SSD | Serv Dtls | Indiv Rates | Serv Req | Serv Summ | Non-Waiver Services

Plan - Services and Supports - SSD

Name: [Redacted] MCI#: [Redacted] Residential County: Monroe Info
 Plan Status: Draft Changed: 06/02/2022 09:52:43 Agency /SC Entity: SYDANDI, LLC Waiver/Program: ACT 150 Fiscal Year: 2022-2023
 Go to: [Provider Services] [Go]

Provider Service Search

Provider Name: [Text Box]
 Service Name: [Dropdown]
 Service Rate (Less Than OR Equals To): [Text Box]
 County of Service **: [Dropdown]

[Reset] [Search]

select	Service Name (Procedure Code : Modifiers, Provider Type, Specialty Code)	Provider Name	Site (Service Location)	County/Joinder	Contract Start Date	Service Rate
<input type="checkbox"/>	Svc Coordination-Act 150-219 (W1011:00:00:00:00, PT:59, SP: 219)	UNITED DISABILITIES SERVICES	UNITED DISABILITIES SERVICES(0016) 2270 ERIN CT LANCASTER, PA - 176011965	MONROE	7/1/2022	\$20.21

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Adding NEW Vendor Services

Note: Skip this step if you are not adding new vendor services to the participant's plan.

- Navigate to the SSD screen by following the menu path: **Plan > Serv & Supp > SSD**
- 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 into HCSIS, follow the menu path above and the SSD screen will display.
- Enter the following information:
 - Provider Name (This is a required field.)
 - County of Service (This is a required field.)
- Click [Search].
- 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.

Home | M4Q | Individual | Plan | SC | Provider | Financial | Admin. | Tools
 Plan Admin | Individ Pref | Medical | Health & Safety | Func Info | Financial | Serv & Supp | History
 Outcome Status | Outcome Act | SSD | Serv Dtls | Indiv Rates | Serv Ren | Serv Summ | Non-Waiver Services
 Plan - Services and Supports - SSD - Vendor Information
 Search

Name: [Redacted] MCI#: [Redacted] Residential County: Monroe Info
 Plan Status: Draft Changed: 06/02/2022 09:52:43 Agency / SC Entity: SYDANDI, LLC Waiver/Program: ACT 150 Fiscal Year: 2022-2023
 Go to: [Redacted]

Vendor Service Search
 Provider Name *: [Text Box]
 County of Service *: [Dropdown]
 [Reset] [Search]

Select	Service Name	Vendor Name	Address	Phone	Bid Amount
<input type="checkbox"/>	Pers. Emerg. Response Sys. (Maint.)-ACT 150	MEDSCOPE AMERICA CORPORATION	222 W LANCASTER AVE PAOLI PA, 19301-1742	(800) 645-2060	\$35.00

[View/Edit]

Vendor Information

Service Name: Pers. Emerg. Response Sys. (Maint.)-ACT 150
 Vendor Name: MEDSCOPE AMERICA CORPORATION
 Address 1: 222 W LANCASTER AVE
 Address 2:
 Address 3:
 City: PAOLI
 State: Pennsylvania
 Zip: 19301-1742
 Phone (123)456-7890: (800) 645-2060
 Bid Amount: \$35.00

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Adding Service Details for NEW Services

Note: Skip this step if you did not add new services to the participant's plan.

- Navigate to the *Service Details* screen by following the menu path: **Plan> Serv & Supp> Serv Dtls**
- Click the Select circle (or radio button) for a new service on the left side of the table at the top of the screen.
- Click [Edit] and the selected service's information will appear in the fields below the table.
- Highlight the appropriate outcome in the Related Outcome Phrase field.
- Enter the following information:
 - Total Annual Units
 - Units of Service Coordination = 144
 - Units of Service = (52 * Total permanent hours* 4)
 - Expected Start Date (Set this to 7/1/20XX)
 - Expected Stop Date (Set this to 6/30/20XX)
- Click [Save].
- Repeat these steps for each new service.

HCSis The Home and Community Services Information System Help

Home | M4Q | Individual | Plan | SC | Provider | Financial | Admin. | Tools
 Plan Admin | Indiv Pref | Medical | Health & Safety | Func Info | Financial | Serv & Supp | History
 Outcome Summ | Outcome Act | SSD | Serv Dtls | Indiv Rates | Serv Req | Serv Summ | Non-Waiver Services

Plan - Services and Supports - Service Details

Search

Name: HEALTH CARE	MCI#: 1100-00100	Residential County: Westmoreland	Info
Plan Status: Draft	Changed: 09/24/2010 14:36:22	Agency /SC Entity: OSP DATA	Waiver/Program: Michael Dallas Fiscal Year: 2010-2011

Select	Outcome Phrase	Service Name	Service Unit Cost	Provider Name	Total Annual Units	Service Start Date	Service End Date	Authorization Status
Ⓒ		Attendant Care (Agency)-Michael Dallas	\$12.50/15 min.	REL SIX SEVEN OLTL PROV FIVE	10	01/01/2011	06/30/2011	Authorized
<div style="display: flex; justify-content: center; gap: 10px;"> Edit Delete </div>								

Services And Supports

Plan Start Date: 07/01/2010
 Plan End Date: 06/30/2011

Related Outcome Phrase: *

Service Name: Attendant Care (Agency)-Michael Dallas
 Service Procedure Code: S5125:00:00:00:00
 County Where the Service is Provided: OMAP/OSP STATE
 Service Contract Start Date: 07/01/2010
 Service Contract End Date: 06/30/2011
 Service Unit Cost: \$12.50/15 min.
 Provider MPI #: 300357222

8

Submit Plan

- Navigate to the *Draft Plan* screen by following the menu path: **Plan>Plan Admin> Draft Plans**
- Search for the participant's plan by Last Name or SSN.
- Answer "Are any of the consumer's attendants family members?" (Select Yes/No from drop down list).
- Enter any comments/details by clicking View/Add Comments. 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.
- Click [Submit Comments] to save comments.
- Click [Close] to return to the Draft Plans screen.
- Click [Submit] to submit the plan for review.

The Home and Community Services Information System Help

Home | M4Q | Individual | Plan | SC | Provider | Financial | Admin. | Tools
 Plan Admin | Indiv Pref | Medical | Health & Safety | Func Info | Financial | Serv & Supp | History
 Create Draft | Draft Plans | Pending Approval/Review | Pending Revision | Print | Monitoring | Delete Plan

Plan - Plan Admin - Draft Plans

Search

Name: DEBITE, JENNIFER	MCI#: 0000000000	Residential County: Allegheny	Info
Plan Status: Draft	Changed: 10/29/2010 14:42:41	Agency / SC Entity: OSP DATA	Waiver/Program: OBRA Fiscal Year: 2010-2011
MCI #:			
BSU #:			
MA #:			
Name:	DEBITE, JENNIFER		
Address:	121 NOVEMBER DR CAMP HILL, PA-17011-5068		
Phone:			
SSN:			
Date of Birth:	09/01/1978		
Effective End Date:			
Comments:			
Proposed Start Date (MM/DD/YYYY):	* <input type="text" value="7/1/2010"/>		
Proposed End Date (MM/DD/YYYY):	* <input type="text" value="06/30/2011"/>		
Waiver/Program Type:	OBRA - 07/01/2009 - Enrolled		
Are any of the consumer's attendants family members?:	* <input type="text" value="No"/>		

View/Add Comments (circled in red)

Reset Save Submit Delete

Comments

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.

Plan Category - Status

Comments

Date - Time

User

9

Review Plan

Note: This step is performed by the SC Supervisor.

- Navigate to the Pending Review screen by following the menu path: **Plan > Plan Admin > Pending Review/Approval**
- Search for the participant's plan by Last Name and First Name or SSN.
- Enter any comments/details by clicking View/Add Comments. 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.
- Click [Submit Comments] to save comments.
- Click [Close] to return to the Pending Review/Approval screen.
- 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.

HCSIS The Home and Community Services Information System Help Logout

Home | M4Q | Individual | Plan | SC | Provider | Financial | Admin. | Tools
Plan Admin | Indiv Pref | Medical | Health & Safety | Func Info | Financial | Serv & Supp | History
Create Draft | Draft Plans | Pending Approval/Review | Pending Revision | Print | Monitoring | Delete Plan | Plan Dashboard

Plan - Plan Admin - Pending Review - Search

Current Individual	Name: [REDACTED]	SSN: [REDACTED]	MCI#: [REDACTED]	Residential County: Philadelphia	Info
Plan Status: Pending Review	Changed Date: 5/6/2021 12:32:15 PM	Agency /SC Entity: SYDANDI, LLC	Waiver/Program: ACT 150	Fiscal Year: 2020-2021	
MCI #:	001608607				
BSU #:					
Name:	[REDACTED]				
Address:	[REDACTED]				
Phone:					
SSN:	[REDACTED]				
NHT Begin Date:					
NHT End Date:					
Abbreviated plan:					
Reason for abbreviated plan:					
Category of Plan Changes:	Critical Revision				

Individual Service Plan:
[Click here to view a printable version of the plan in a new window](#)

Medical
[Medications/Supplements](#)
[Medical Contacts](#)
[Current Health Status](#)

Proposed Start Date (MM/DD/YYYY):	07/01/2020
Proposed End Date (MM/DD/YYYY):	06/30/2021

[View/Add Comments](#)
[View Plan Comparison](#)

Click [Reviewed] to send the plan on for approval, or click [Pending Revision] to send the plan back to the Service Coordinator for revision.

10

Approve Plan

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

- Navigate to the *Pending Approval* screen by following the menu path: **Plan> Plan Admin> Pending Approval/Review**
- 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 participant and click on the appropriate hyperlink.
- Review the participant'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].

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Review ISP Approval Alert

- Navigate to **Tools> Alerts> Pending Alerts**
- Under "Alert Search Criteria" select "ISP Status Set to Approved" as the "Subject".
- Click [Search].
- Find the Alert for the participant. The participant plan has been approved and no additional action is required.
- If no Alert can be found for the participant.
 - Under "Alert Search Criteria" select "ISP status set to pending revision" as the "Subject".
 - Click [Search].
 - Find the Alert for the participant.
 - Click on "Individual plan requires revisions."

The Home and Community Services Information System

Home | M4Q | Individual | Plan | SC | Provider | Financial | Admin. | Tools
 Reports | Notices | Alerts | Data Extract | Misc | IM Utils | RDE | CIS

Tools - Alerts - Pending Alerts -

Alert Search Criteria

Subject:

View All Alerts
 New Alerts
 New Incidents
 Automated Referback for Entity to Entity Transfer across the Agency
 Consumer approaches 60
 Consumer's Demographics details updated by BAS.
 Consumer's Demographics details updated by EI.
 Consumer's Demographics details updated by OMHSAS.
 Consumer's Demographics details updated by OMR.
 Contact with the Individual not made
 Demographic(s) Update - MCI
 Demographic(s) Update - Pending Verification
 Demographic(s) Update - Rejected
 Demographic(s) Update - Verified
 Eligibility Reviewer Action
 Entity-to-Entity transfer has been cancelled across the Agency
 Entity-to-Entity transfer has been modified across the Agency
 Followup Required Case Comment Created
 ISP expires in 5 days
 ISP not approved within 30 days of eligibility
 ISP review due within 30 days
 ISP status set to Pending review
ISP status set to approved
 ISP status set to pending revision
 Individual Added to Caseload
 Individual Monitoring Pending for Correction
 Individual added to Caseload
 New Transfer Initiated for an Individual between two SC Entities across the Agency
 New referral received

If no Alert can be found under either "ISP Status Set to Approved" or "ISP status set to pending revision" no decision has yet been made regarding this participants plan.

12

ISP Set to Pending Revision

- Navigate to **Plan> Plan Admin> Pending Revision**
- Click View/Add Comments to review the comments regarding why the plan was not approved.
- Click [Revise].
- Make the needed changes to the plan and resubmit

End of Tip Sheet