



Home and Community Based Daily SCL D-4 Review Workflow and the Individual Service Plan Review Workflow

Home and Community Based Daily SCL D-4 Review Workflow

- The SCL service provider completes the Schedule D-4 (form 470-3449) for the site which includes a schedule D-4 for each individual member at the site

- The SCL service provider sends the individual D-4 to the member's CM for review and sign-off.

- The CM reviews the individual D-4 for the member's individualized needs to support identified costs in the D-4 in order to determine that those expenditures (including \$1570) are reflected in the member's service plan. The CM is only reviewing the following line items on page 1 of the individual D-4

- Line 3290 – Other related transportation; (transportation when member **IS** in the vehicle for service plan activities)

- Line 3520 – Other consultation/instruction; (Expenses related to the implementation of specific service plan goals) Staff expenses can only be used to cover staff admission to activities **when** there are not member or community resources available **and** there is an instructional goal for the member.

- Line 4320 – Other equipment repair or purchase. (The CM is also reviewing and verifying the staffing schedule for the member on page 2 of the individual D-4.

- If all of the member's individualized support need expenditures are appropriate to individual, the CM signs and returns individual D-4 to the SCL provider. If not, the CM must contact the provider and negotiate the line item costs so the provider may submit an accurate signed individual D-4 for the member to the IME.

***Note:** It is not acceptable to delay service authorization and ultimately reimbursement when the CM does not agree with the provider's overall costs. The CM should promptly review the rate and make contact with the provider to discuss and resolve any discrepancies.*

- The SCL service provider collects all of the signed individual D-4s from the members' CMs and sends the Schedule D-4 (form 470-3449) for the site which includes a schedule D-4 for each individual member residing at the site to the IME Provider Cost Audit and Rate Setting (PCA) unit.

- The PCA unit conducts a financial review. The SCL service provider is notified if additional information is needed to process the D-4.

- The PCA unit sends the D-4, and any items noted during financial review, to the Medical Services unit for service plan review, if necessary.

<ul style="list-style-type: none"> • The Medical Services unit completes the service plan review for medical necessity which may include a telephonic review with the Case Manager and/or the provider.
<ul style="list-style-type: none"> • Medical Services sends notification of the approved/denied SCL services to the PCA unit.
<ul style="list-style-type: none"> • The PCA unit incorporates Medical Service's notification into the rate determination and finalizes the review.
<ul style="list-style-type: none"> • The PCA unit sends the rate letter, approval or denial, to the SCL service provider. The letter includes instructions to forward the rate letter to CMs.
<ul style="list-style-type: none"> • The CM is notified by the provider of approval; or if changes are needed, the CM enters the approved rate into ISIS.
<ul style="list-style-type: none"> • The CM issues a Notice of Decision (NOD) to the daily SCL provider.

Individual Service Plan Review Workflow

<ul style="list-style-type: none"> • The daily SCL service provider receives an approved HCBS Daily SCL rate from the PCA unit) or the SCL provider projects a new daily SCL rate and submits the Site and Individual D-4s signed by the Case Managers (CM) to the PCA unit for approval. The provider must communicate whether they are using the individual rate or the site rate.
<ul style="list-style-type: none"> • After provider confirms the rate has been approved and the final rate sheet has been received for the file, the provider communicates the rate with the CM. The CM enters the daily SCL services including the rate projected/approved into the member's service plan and responds to the milestones in ISIS. The CM notes in the comments the name of the site and whether the rate is a site rate or individual rate.
<ul style="list-style-type: none"> • The IME Medical Services unit Review Coordinator receives an ISIS milestone when the CM responds during the workflow that the rate is not approved and/or PCA receives the projected D-4s.
<ul style="list-style-type: none"> • The Review Coordinator reviews the service plan change request and existing service plan documentation, initiates a telephone consultation with the CM if necessary, and reviews the service plan for medical necessity.
<ul style="list-style-type: none"> • The service plan is authorized if services are determined to be medically necessary and supported by the rates requested. If not supported, the Review Coordinator denies or negotiates the request with the CM.