

MSC E-VISORY

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State of New York Office of Mental Retardation and Developmental Disabilities
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Distributed by: Division of Policy and Enterprise Solutions
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The MSC E-Visory is an electronic advisory intended to provide timely information to Medicaid Service Coordination Supervisors and their staff.

Questions and comments should be directed to Carol Kriss, MSC Statewide Coordinator via e-mail: Carol.Kriss@omr.state.ny.us

Each E-Visory has pertinent information on programs and services available to individuals receiving Medicaid Service Coordination (MSC). Announcements about MSC training, conferences and meetings appear regularly in issues of the MSC E-Visory. Please forward this issue to all Medicaid Service Coordinators and MSC Supervisors.

In This Issue:

Annual ISP Review

Every year the New York State Department of Health performs an audit of Individualized Service Plans for HCBS waiver participants. A statistically valid sample of approximately 200 names is drawn. This sample is representative of the entire state and all services offered in our waiver including self-directed services and individuals living in both certified and non-certified settings. Once the names in the sample are identified, the respective DDSO Waiver Coordinators will begin to gather the required documentation for the review period.

The audit for fiscal year 2007 – 2008 is now under way. Medicaid Service Coordinators and their MSC Supervisors may be contacted by their DDSO Waiver Coordinators requesting assistance in gathering this documentation for individuals on their caseload included in the sample. In the event an individual changed to another MSC agency during the review period, the former MSC agency will still be asked to provide information for the period of time they served that individual.

The required documentation we will be looking for is as follows:

1. **Individualized Service Plans (ISP)** including all updates and addendums for the entire review period,*
2. All **Habilitation Plans** for the entire review period,
3. Annual **Level of Care Determination** Forms for the entire review period,
4. **Medicaid Service Coordination (MSC) Basic Agreement** for entire review period,
5. **Documentation of Choice** Form,
6. **Individual Plans of Protective Oversight** for entire review period for those individuals residing in IRA's, and
7. **The MSC activity Plan** for the entire review period, for Willowbrook Class members only.

* The **Review Period** for this audit is **10/1/07 to 9/30/08**

The cooperation of Medicaid Service Coordinators and MSC Supervisors during this audit will be greatly appreciated. If contacted by your DDSO, please provide a timely response as they are working within strict timelines established by the New York State Department of Health.