

# Ancillary Services Tool

Directions for use: Ancillary Waiver Services are reviewed using the desk review process. Notification is sent to the provider requesting document submission on a specified date. Send the notification letter, the sample key and the required documents list. The date the documents are received is the review date. The reviewer evaluates the information received by answering the questions on the tool and completes a report or final letter for the provider.

Questions & Guidance		Answer Key		
<b>1</b>	<b>Demographics</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
1.1	Is the provider an independent provider?			
1.2	Is the provider an agency provider?			
1.3	Did the provider provide Environmental Accessibility Adaptations - IO?			
1.4	Did the provider provide Environmental Accessibility Adaptations - Level 1?			
1.5	Did the provider provide Home Delivered Meals - IO?			
1.6	Did the provider provide Informal Respite - Level 1?			
1.7	Did the provider provide Interpreter - IO?			
1.8	Did the provider provide Nutrition - IO?			
1.9	Did the provider provide Personal Emergency Response Systems - Level 1?			
1.10	Did the provider provide Social Work - IO?			
1.11	Did the provider provide Special Medical Equipment and Supplies - IO?			
1.12	Did the provider provide Special Medical Equipment and Supplies - Level 1?			
<b>2</b>	<b>ALL SERVICES: Services Delivery &amp; Documentation</b>	<b>Compliant</b>	<b>Non-Compliant</b>	<b>N/A</b>
2.1	Is the service plan being implemented as written?			
2.2	Does the waiver service delivery documentation include the date of service?			
2.3	Does the waiver service delivery documentation include the place/location of service?			
2.4	Does the waiver service delivery documentation include the name of the recipient?			
2.5	Does the waiver service delivery documentation include the Medicaid number of the recipient?			
2.6	Does the waiver service delivery documentation include the name of the provider?			
2.7	Does the waiver service delivery documentation include the contract number of the provider?			
2.8	Does the waiver service delivery documentation include the written or electronic signature or initials of the person delivering the services?			
2.9	Does the waiver service delivery documentation include the type of services?			
2.10	Does the waiver service delivery documentation include the description and details of the services delivered, including: Scope			
2.11	Does the waiver service delivery documentation include the description and details of the services delivered, including: Frequency			
2.12	Does the waiver service delivery documentation include the description and details of the services delivered, including: Duration			
2.13	Is the provider following all applicable local, state and federal rules and regulations?			
<b>3</b>	<b>Environmental Accessibility Adaptations - IO &amp; Level 1</b>	<b>Compliant</b>	<b>Non-Compliant</b>	<b>N/A</b>
3.1	Did the county board verify that the project was completed satisfactorily and in compliance with state and local requirements, including building codes?			

4	Home Delivered Meals - IO	Compliant	Non-Compliant	N/A
4.1	Does the waiver service delivery documentation include the time that meals were delivered?			
4.2	Does the waiver service delivery documentation include the name of the person accepting delivery of meals?			
4.3	Does the waiver service delivery documentation include the number of meals delivered?			
4.4	Did the provider ensure that a licensed dietitian approved all menus and developed all special menus in accordance with the ISP?			
4.5	Did the provider maintain a roster of delivery drivers who are trained and have available backup staff for scheduled meal deliveries?			
5	Informal Respite - Level 1	Compliant	Non-Compliant	N/A
5.1	Did the provider receive annual MUI training?			
	<i>Guidance: The training should be provided by the individual or designee.</i>			
5.2	Did the provider receive annual Rights training?			
	<i>Guidance: The training should be provided by the individual or designee.</i>			
5.3	Did the provider receive individual specific training as identified in the ISP?			
	<i>Guidance: The training should be provided by the individual or designee.</i>			
5.4	Does the waiver service delivery documentation include the begin and end times of the delivered service?			
6	Interpreter - IO	Compliant	Non-Compliant	N/A
6.1	Is the provider certified by the registry of interpreters for the deaf?			
6.2	Does the provider meet one of the following criteria; A. Provider graduated from an interpreter training program (of a minimum of 2 years) and have at least one year of documented experience providing interpreter services, OR, B. Provider completed a written test administered by the registry of interpreters for the deaf and have at least one year of documented experience providing interpreter services , OR, C. Provider has at least two years of documented experience providing interpreter services?			
6.3	Does the waiver service delivery documentation include the number of units or continuous amount of uninterrupted time that the service was provided?			
6.4	Does the waiver service delivery documentation include the group size in which the service was provided?			
6.5	Does the waiver service delivery documentation include the begin and end times of the delivered service?			
7	Nutrition - IO	Compliant	Non-Compliant	N/A
7.1	Is the dietician licensed by the state?			
7.2	Did the provider train the appropriate parties on the individual's dietary program?			
	<i>Guidance: Rule requires training for the individual, family, professionals, paraprofessionals, direct care, habilitations specialists and vocational/school staff.</i>			
7.3	Does the waiver service delivery documentation include the number of units or continuous amount of uninterrupted time that the service was provided?			
7.4	Does the waiver service delivery documentation include the begin and end times of the delivered service?			

7.5	Does the waiver service delivery documentation include the group size in which the service was provided?			
	<i>Guidance: This service includes nutritional assessments, development of a nutrition care plan or dietary program and training for individuals, their families and other paid and non-paid supports. Aspects of the service such as training may be provided for a group of individuals and identification of group size will determine the rate for billing the service.</i>			
<b>8</b>	<b>Personal Emergency Response Systems - Level 1</b>	<b>Compliant</b>	<b>Non-Compliant</b>	<b>N/A</b>
8.1	Does the waiver service delivery documentation include record of the provider's notification to emergency personnel such as police, fire, emergency medical services, and psychiatric crisis response entities?			
8.2	Does the waiver service delivery documentation include a record of preventive maintenance checks and quarterly testing of the provider's equipment as required?			
8.3	Does the waiver service delivery documentation include a record of training provided to the individual who receives personal emergency response systems services?			
	<i>Guidance: Provide an individual who receives personal emergency response systems with initial and ongoing training on how to use the PERS as specified in the ISP.</i>			
8.4	Does the provider have response center coverage 24 hours/7 days a week?			
8.5	Is the equipment operational?			
	<i>Guidance: This can be verified through contact with the individual, guardian, SSA, or family.</i>			
<b>9</b>	<b>Social Work - IO</b>	<b>Compliant</b>	<b>Non-Compliant</b>	<b>N/A</b>
9.1	Is the provider licensed by the state?			
9.2	Does the waiver service delivery documentation include the number of units or continuous amount of uninterrupted time that the service was provided?			
9.3	Does the waiver service delivery documentation include the group size in which the service was provided?			
9.4	Does the waiver service delivery documentation include the begin and end times of the delivered service?			
<b>10</b>	<b>Special Medical Equipment and Supplies - IO &amp; Level 1</b>	<b>Compliant</b>	<b>Non-Compliant</b>	<b>N/A</b>
10.1	For veterinary services, is the veterinarian licensed by the state?			
	<i>Guidance: For other equipment and supplies, provider qualifications are verified at the time of certification.</i>			
10.2	Did the provider provide the individual/guardian/family/staff with training on the proper use of the equipment?			
10.3	Is the equipment operational?			
	<i>Guidance: This can be verified through contact with the individual, guardian, SSA, or family.</i>			