

Chapter 14 - Person Centered Plan Amendments

In this chapter, users will learn how to add an Amendment to Person-Centered Plan which consists of the following steps: duplicating the Person-Center Plan form, updating existing planned services, updating Assessed Risks, Objectives, Intervention, Mitigations and/or adding additional Planned Services. This process is started by setting the status of the Plan to Draft – Amendment to kick off the workflow wizard to walk users through the process.

Users will refer to Chapter 12 Section titled, “Case Manager Submits PCP for Approval” to submit the Plan to the State for Review. The State Review process is also covered in the earlier chapter.

Create an Amendment to PCP

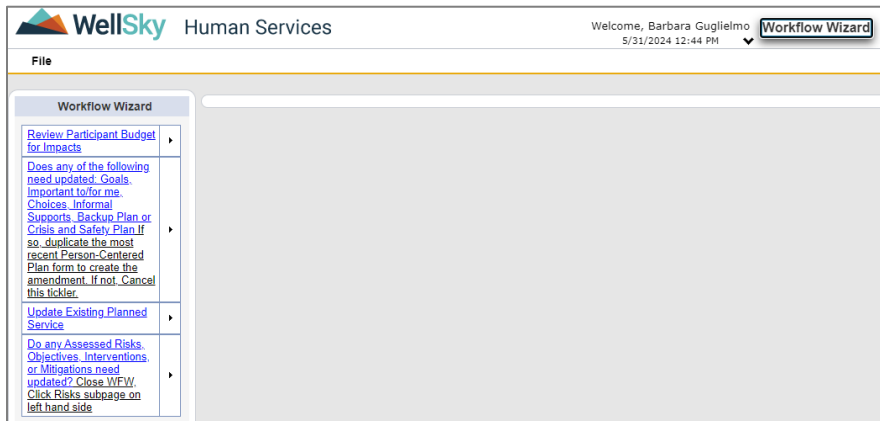
Role = **Case Manager**

1. Click the **Participants** chapter
2. Search using Quick Search (if you suspect the participant is already in the system)
3. In Quick Search type the participant’s last name and click **Search**.
4. If more than one search result is returned, click the participant’s list view record to open
5. Click **Plans** tab
6. Select the current, active Plan to be amended (**do not** create a new plan)
 - a. Set Person-Centered Plan Status equal to ‘Draft - Amendment’
 - b. Set Update Plan Version equal to ‘Yes’
Note: When the plan is saved, this setting causes the plan number to increment for the new version and the Set Update Plan Version will change back to No.
 - c. **Under Comments, enter “AMENDMENT EFFECTIVE” with start date for amendment and end date of plan, along with a detailed description of the changes being made.**

WellSky Human Services		Star Light	Plan Information
		Last Updated by jjohns	
		at 5/17/2023 3:21:49 PM	
File			
Plan Information	Plan Details		
Plan Forms	OpenClose *	LTSS	
Risks	Program	EOHHS / EAD / HCBS Details	
Planned Services	Service Delivery Option (Pathway)	Agency/Provider	
Plan Notes & Follow-Up	Worker	Derrow, Teresa	Clear Details
Linked Budgets	Plan Effective Date *	05/16/2023	
	Plan Renewal Date	05/15/2024	
	Comments	AMENDMENT: Updated rate for shared living in planned services	
	Status	Draft - Amendment	
	Service(s) Start Date *	05/16/2023	
	Service(s) End Date *	05/15/2024	
	Update Plan Version	Yes	
	Plan Version	1	
	Plan Version Date	05/11/2023	
	Plan Version Time	01:24 PM	

Caption: Screen shot showing Status set to Draft - Amendment, update plan version set to Yes, Amendment change in comments.

- d. From the **File** menu, select **Save Plan**
7. The Person-Centered Plan Amendment workflow wizard (WFW) appears (if the WFW doesn't appear, CFCMs should review all sections of the plan and make updates as needed).
As shown below:



Caption: Screen shot showing the Person-Centered Plan Amendment Workflow Wizard

Review Participant Budget for Impacts

1. Click the tickler titled **Review Participant Budget for Impacts**
2. Click on the most recent budget to review how the amendment will affect the participant's budget

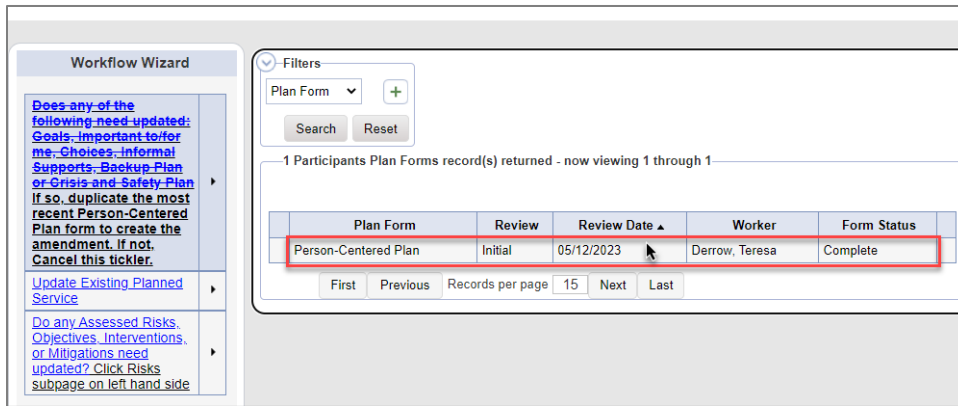
Note: Budgets are not currently (as if 1/22/26) entered in WellSky. CFCMs will still need to review the participant budgets for how the amendment will affect their overall budget.

Update Content of the Plan (if needed)

If the content of the Person-Centered Plan (plan form) needs to be updated, follow steps below.

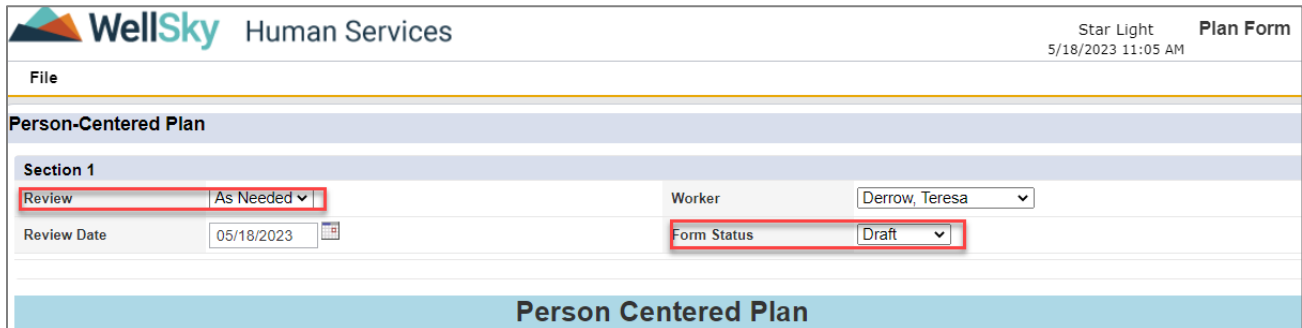
*Note: If the plan form does not need to be updated, cancel this tickler by hovering over the black arrow and selecting **Cancel**.*

1. Click the tickler titled, **Duplicate most recent "Person-Centered Plan" form** to create a plan Amendment.
2. Click the most recent **Person-Centered Plan** form to open



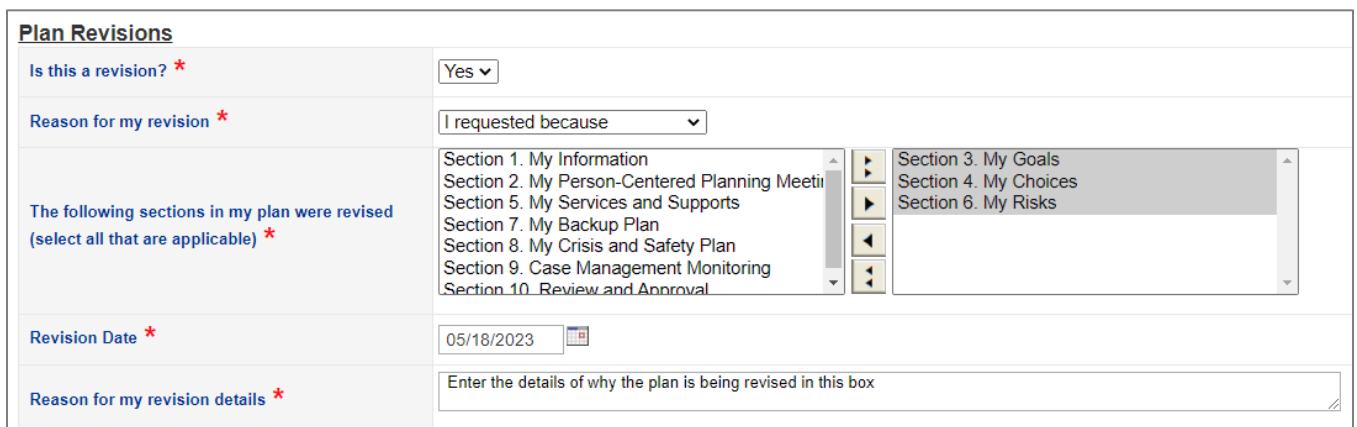
Caption: Click the first tickler and open the most recent completed Person-Centered Plan form

3. From the **File** menu, select **Duplicate Plan Review**
 - a. Set Review equal to **Intermittent / Change**
 - b. Review Date defaults to today
 - c. Worker defaults to current worker
 - d. Leave status in **Draft** while the form is being worked on



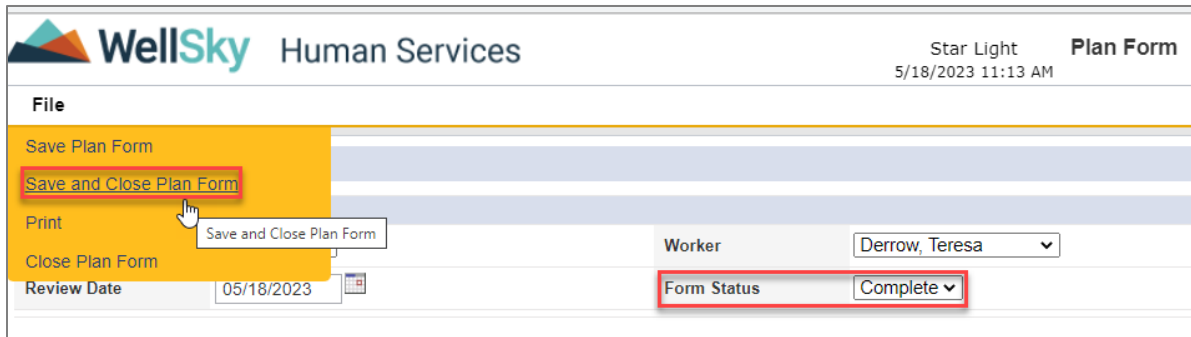
Caption: Screen shot showing the header fields of the Person-Centered Plan form

4. In the Plan Revisions section, set **Is this a Revision?** equal to **Yes**
5. Fill out the remainder of the required fields in the Plan Revisions section



Caption: Screen shot showing the Plan Revisions section of the Person-Centered Plan form

6. Make any updates to the form and when finished, set Status to **Complete**
7. Click **OK** on message stating that all required fields must be filled out
8. From the **File** menu, select **Save and Close Plan Form**



Caption: screen shot showing the status being set to Complete and the Save and Close menu option

Update Risks, Objectives, Intervention, and/or Mitigations

1. Click the tickler titled **Do any Risks, Objectives, Interventions or Mitigations need updated**
2. Click on the words in blue - this will open the message tickler with directions on how to navigate to the Risks area of the plan

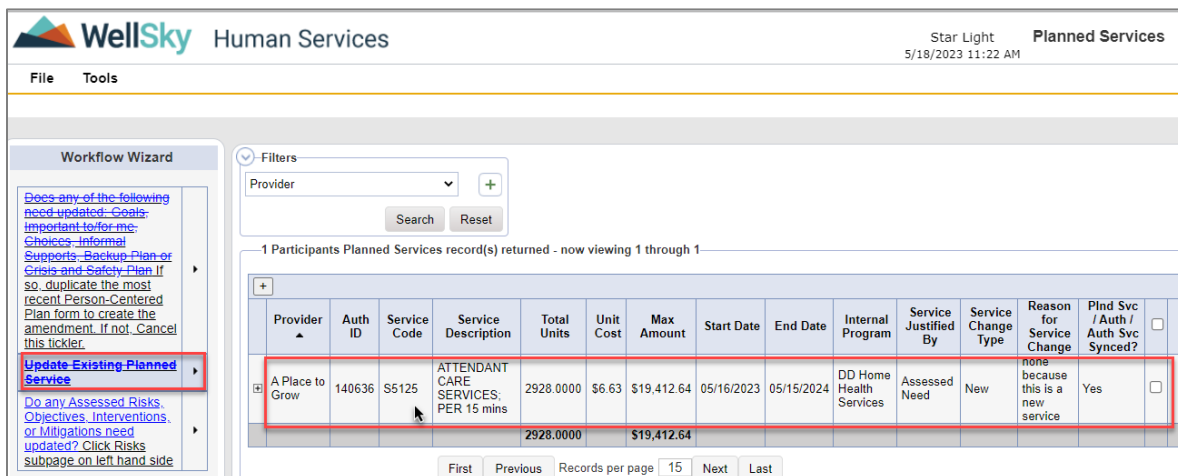
Update Existing Planned Services

*Note: If planned services needs updated, click on the tickler titled **Update Existing Planned Services**. If planned services do not need updated, cancel the tickler by hovering over the black arrow and selecting **Cancel***

If existing planned service(s) need to be updated for the reasons of **Increase of Services**, or **Decrease of Services (units or cost)**, updates will be made by updating the existing planned service entry.

Example: Participant wants to increase community-based services from 2000 units to 3000 units per year or decrease from 3000 units to 2000 units per year.

1. Click on the planned service that needs to be updated



Caption: Screen shot showing the tickler and the planned service being selected

Planned Services													
Open/Close	LTSS												
Start Date	05/16/2023												
End Date	05/15/2024												
... Clear													
Index/SubObject Code	<table border="1"> <thead> <tr> <th colspan="4">Index / SubObject</th> </tr> <tr> <th>Index Code</th> <th>Index Description</th> <th>SubObject</th> <th>SubObject Description</th> </tr> </thead> <tbody> <tr> <td>EOHHS</td> <td>EOHHS</td> <td>EAD/HCBS</td> <td>EAD/HCBS</td> </tr> </tbody> </table>	Index / SubObject				Index Code	Index Description	SubObject	SubObject Description	EOHHS	EOHHS	EAD/HCBS	EAD/HCBS
Index / SubObject													
Index Code	Index Description	SubObject	SubObject Description										
EOHHS	EOHHS	EAD/HCBS	EAD/HCBS										
Internal Program	DD Home Health Services												
Service Code *	S5125												
Service Description	ATTENDANT CARE SERVICES; PER 15 mins												
Unit Type	15 mins												
Units Per	10												
Units of Measure	Calendar Day												
Total No of Units	3660												
Provider ID	13908 Details												
Provider	A Place to Grow												
Unit Cost	\$6.63												
Max Amount	\$24,265.80												
Auth Svc ID	6												
Service Justified By	Assessed Need												
Service Change Type *	Increase												
Reason for Service Change	health has declined												
Additional Comments	optional												

2. Make changes to the Planned Service as needed by increasing or decreasing the units or cost.
3. Update **Service Change Type** field from New to the **appropriate type (ex., increase or decrease)**
4. Update the **Reason for Service Change** field with detailed comments (including when/what was updated)
5. Update **Reason Change Code** to the appropriate text (ex., change in units/dollars)
6. From the **File** menu, select **Save and Close Planned Service**

Add Additional Planned Services

If a new service needs to be added or if there is an existing planned service but the participant is changing providers or service delivery pathway, then a new planned service entry will need to be created.

Example: Participant now wants to add job discovery, a service that was not previously part of the plan. OR

Example: Participant has been receiving community-based services (CBS) through an agency but now wants to self-direct their community-based services.

Agency CBS will need to be **ended**, and self-direct CBS will need to be **added**. OR

Example: Participant is receiving CBS with ABC Agency but wants to change to XYZ Provider. Services with ABC will need to **end** and new planned services for CBS with XYZ Provider will need to be **added**.

1. Click the **Planned Services** subpage
2. From the **File** menu, select **Add Planned Service**
3. Open/Close defaults to LTSS
4. Start and end date should be updated to the date the amended planned services will start/end

- a. For example, if the plan effective date is 6/1/2025 – 5/31/2026 and the amended service will start 2/1/2026 and go through the end of the plan then the start date for the newly added service will be 2/1/2026 and the end date will remain 5/31/2026
5. Click ellipsis (...) next to Index/ SubObject Code, select a one of the 5 Index/SubObject combinations (Example “BHDDH / IDD/HCBS”)
6. Select the MMIS Program
7. Click ellipsis (...) next to Service Code
8. Click Search and select the desired Service
9. Enter Units Per and Units of Measure
10. The following will automatically calculate based on your selection and the date range
 - a. Total No of Units
 - b. Unit Cost
 - c. Max Amount

*****Please note, if your start and end date are not for a full year and you select Year for Units of Measure, the system will prorate your units. Please take care to check that units/cost/max cost are all correct before saving the service and/or submitting your plan.**

11. Click **ellipsis (...)** next to Provider ID (*if known at this time, otherwise you will have to come back to this step to select the provider*)
12. Select the provider who will be providing this service
13. Select a Service Justified By
 - a. If a Goal is selected, an additional field show to describe the goal and the priority ranking
14. Select a **Change Type** - in this case it is **New**
15. Enter **Reason for Service Change**
Note: Required for amendments and should be detailed (including when/what change has been made)

16. *Select Reason Change Code*
17. Enter Additional Comments
18. From the **File** menu, select **Save Planned Service** or **Save and Add Planned Service**
Note: If another service or additional time periods for the same service is being added to the plan, repeat steps for each additional record.

The screenshot displays the 'Planned Services' form in the WellSky Human Services system. The form is titled 'WellSky Human Services' and 'Planned Service'. It shows the following fields and values:

- Open/Close:** LTSS
- Start Date:** 12/28/2023
- End Date:** 12/27/2024
- Index/SubObject Code:** BHDDH / IDD/HCBS
- MMIS Program:** DD Home Health Services
- Service Code:** S5125
- Service Description:** ATTENDANT CARE SERVICES: PER 15 mins
- Unit Type:** 15 mins
- Units Per:** 4
- Units of Measure:** Business Day
- Total No of Units:** 1048
- Provider ID:** 13784
- Provider:** Knotty Oak Village
- Unit Cost:** \$6.63
- Max Amount:** \$6,948.24
- Service Justified By:** Goal
- Goal including Priority Ranking, Describe:** testing 1
- Service Change Type:** New
- Reason for Service Change:** (Empty text field)
- Additional Comments:** (Empty text field)

End Planned Services

If there is an **existing** planned service with a provider that is **ending** (either changing to different provider, changing service pathways, or no longer interested in service) that service will need to be end dated

Example: Service was added in error and authorizations have already been created but have not be billed against. OR

Example: Participant no longer needs transportation services, the existing service will be end dated. OR

Example: Participant is receiving CBS with ABC Agency but wants to change to XYZ Provider. Services with ABC will need to end and new planned services for CBS with XYZ Provider will need to be added. OR

Example: Participant has been receiving community-based services (CBS) through an agency but now wanted to self-direct their community-based services. Agency CBS will need to be ended, and self-direct CBS will need to be added.

1. Click on the planned service that needs to be ended
2. Select the End Date = date the service will be ending
3. ****If the service was added in error and authorizations have already been created but have not been billed against then change unit cost and max amount to \$0.****
4. Update **Service Change Type** field from existing selection to the **appropriate type (ex., terminate)**
5. Update the **Reason for Service Change** field with detailed comments (including when/what was updated)
6. Update **Reason Change Code** to the next appropriate text (ex., Change service, Living Sit., Provider)
7. From the **File** menu, select **Save and Close Planned Service**

Delete Planned Services

Planned Services can be deleted **as long as there is not an authorization tied to the service.**

Note:

- *Don't delete transportation with RIPTA or CFCM. Instead, end date these planned services.*
- *If there is an authorization, the planned service should be end dated if it will no longer be needed.*

To delete a planned service:

1. Click the **Planned Services** subpage
2. Place a checkmark next to the service(s) you wish to delete (on the right hand side of the identified service)
3. From the **Tools** menu, select **Delete Selected Items**

Provider	Auth ID	Service Code	Service Description	Total Units	Unit Cost	Max Amount	Start Date	End Date	MMIS Program	Service Justified By	Service Change Type	Reason for Service Change	Pind Svc / Auth / Auth Svc Synced?	
CareNet of Rhode Island		T2022	CASE MANAGEMENT, PER MONTH	2.0381	\$125.00	\$254.76	07/01/2024	06/30/2025	Personal Choice		New		n/a	<input checked="" type="checkbox"/>
Chicoine House		S5102.U1.U2	DAY CARE SERVICES, ADULT, PER DIEM, U1; U2	12.2286	\$78.00	\$953.83	07/01/2024	06/30/2025	Adult Day	Assessed Risk	New	New Service	n/a	<input type="checkbox"/>
Cornerstone Adult Services - Coventry Center		T2019	HABILITATION, SUPPORTED EMPLOYMENT, WAIVER, PER 15 mins	482.5160	\$9.69	\$4,675.58	07/01/2024	06/30/2025	Habilitation Community	Goal	Other	Change provider and update goal	n/a	<input type="checkbox"/>
Everything Provider		T2003	NON-EMERGENCY TRANSPORTATION; ENCOUNTER/TRIP		\$10.62		07/01/2024	06/30/2025	Transportation WAIVER	Goal	New	new goal added	n/a	<input type="checkbox"/>
Rebuilding Together Greater Newport		T2019	HABILITATION, SUPPORTED EMPLOYMENT, WAIVER, PER 15 mins	104.2858	\$9.69	\$1,010.53	07/01/2024	06/30/2025	Habilitation Community		New		n/a	<input type="checkbox"/>
				601.0685		\$6,894.70								

Caption: screen shot showing the Delete Selected Items menu option

Plan Notes and Follow Up

1. Click the **Plan Notes and Follow-Up** subpage
2. From the **File** menu, select **Add Note**
3. **Note By** defaults to current worker
4. **Note Date** defaults to today's date
5. **Division** defaults to **LTSS**
6. From **State Agency/Program** drop down, select **BHDDH/IDD/HCBS**
7. Select **Note Type** from drop down
 - i. Most often used types in Plan Notes and Follow Up = **Person Centered Planning** or **Documentation**
8. Select **Note SubType** from drop down
 - i. Frequently used subtypes selected:
 1. Add-On Employment Request (Select Note Type Person Centered Planning) - use to communicate with employment team regarding Add-On Employment Request.

2. Goods and Service Request (Select Note Type Person Centered Planning) - use to communicate with Goods and Services team about goods and service request.
3. Signature Page – PCP (Select Note Type Person Centered Planning) - used to upload the Person-Centered Plan Signature page.

NOTE: Plan amendments must include an updated signature page

9. The entire plan should be printed, along with the printed planned service page, and signatures should be collected on the last pages. The entire document should then be uploaded.

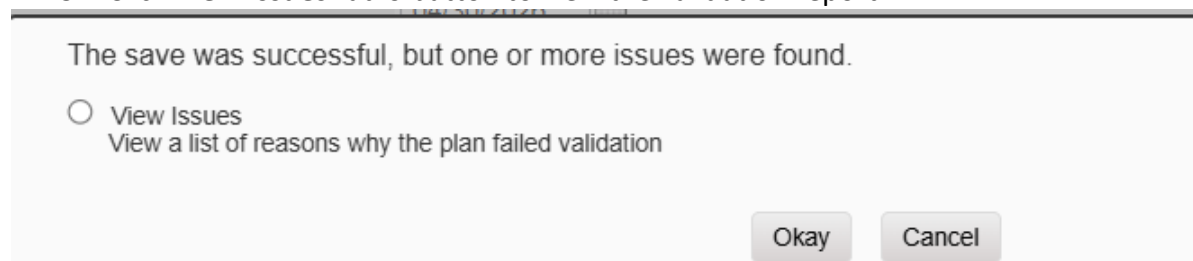
*If participant has guardian, be sure guardianship paperwork is part of record.

10. Under attachments, click on the **Add Attachment** hyperlink to upload any associated documentation, if applicable (for example, the Signature Page- PCP)
11. If your note is complete, change **Status** to **Complete**
12. Click **File, Save and Close Notes**

Run Plan Validation

NOTE: Validating plan will determine if the system discovers any issues with the plan checking it against pre-established validation rules. Please also use BHDDH rubric as a guide when creating a plan to ensure you are meeting requirements for approval.

1. Click on the **Plan Information** subpage (left side menu within the plan)
2. Click **File, Save and Validate Plan**
3. Click **View Issues** radio button to view the validation report



4. Review the validation report and any issues noted. Fix reported issues before submitting the plan to the state for review.
5. If the plan passes validation and no issues are reported, close the successful plan validation popup by clicking **OK**

Note: If a plan was returned to you by the State Service Authorization team, you will need to Save and Validate the plan again before re-submitting the plan for review.

Submit Plan for Review

1. Once Case Manager has done the steps below, they may be ready to submit the plan to the State for Review:
 - a. Reviewed rubric to ensure plan meets requirements for approval
 - b. Set plan form to Complete
 - c. Added any relevant Risks and Objectives
 - d. Added Planned Services including Case Management
 - e. Added Plan Note = Documentation and Subtype = Signature Page – PCP with all required signatures on the plan and all attestations initialed
 - f. Added any other required notes
 - g. Save and Validated the plan
2. Click on **Plan Information** subpage
3. Set **Status = Submitted for Review**
4. Click **File, Save and Close Plan**
 - a. If you are from an external CFCM agency, please email the CFCM email (bhddh.cfc@bhddh.ri.gov) to let us know you have submitted a plan for review. Subject = Plan Submitted

Directions for Service Authorization Team

1. The state will review the plan by following the steps in the **Service Authorization Approval Guide**
2. **For plans that have changes (add, end, update) to planned services**

Note: The Service Change Type, Reason for Service Change (comment box), and Reason Change Code should provide information about when/what changes were made.

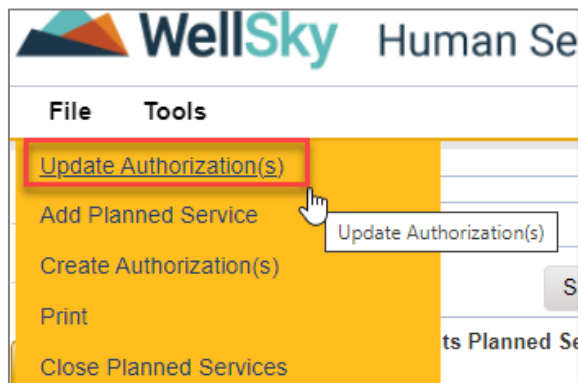
- a. State reviewers will first select **“Update Authorization”** from the **File** menu if an existing service was updated (units/cost) or a service was end dated.

Provider	Auth ID	Service Code	Service Description	Total Units	Unit Cost	Max Amount	Start Date	End Date	Internal Program	Service Justified By	Service Change Type	Reason for Service Change	Plnd Svc / Auth / Auth Svc Synced?
A Place to Grow	140636	S5125	ATTENDANT CARE SERVICES; PER 15 mins	3660.0000	\$6.63	\$24,265.80	05/16/2023	05/15/2024	DD Home Health Services	Assessed Need	Increase	health has declined	No
				3660.0000		\$24,265.80							

Caption: screen shot showing the Planned Service/ Auth Service not being in sync

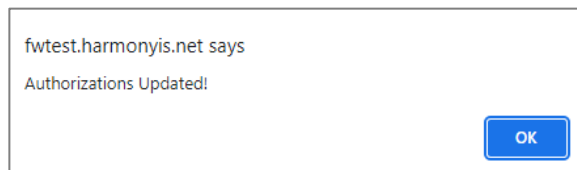
- b. From the **File** menu, click **Update Authorization**

Note: If **Update Authorization** is not an option from the File menu, this may mean the CFCM didn't validate the plan. The State Reviewer may validate by clicking **File, Save and Validate**. If there are any validation errors, then the State Reviewer can send the plan back for revisions.



Caption: screen shot showing Update Authorization(s) menu option

3. Click **OK** on Authorizations Updated! message



Caption: Authorizations Updated pop-up message

- d. State reviewer will select **“Create Authorizations”** from the File menu if a new service was added (new provider, new code)

NOTE: Updates to Authorizations of existing planned services must be made before new authorizations can be created

e. From the File menu, click Create Authorizations

NOTE: Updates to Authorizations of existing planned services must be made before new authorizations can be created

Note: If **Update Authorization** is not an option from the File menu, this may mean the CFCM didn't validate the plan. The State Reviewer may validate by clicking **File, Save and Validate**. If there are any validation errors, then the State Reviewer can send the plan back for revisions.

If an error message appears, State Reviewer should return for plan for revisions.

Note: Authorizations cannot be created for planned services without provider.

2. Notice that the new Planned Services now have an Auth ID
3. Click **Plan Information** subpage
4. Set Status equal to '**Active**'
5. From the **File** menu, select **Save & Close Plan**

Practice Exercise # 33



1. Find the Participant
2. Open the Plan, Status to Draft - Amendment
3. Duplicate Person-Centered Plan form, make some changes
4. Update an existing Planned Service
5. Update at least 1 Assessed Risk, Objective, Intervention and Mitigation
6. Add 1 additional Planned services
7. Run Plan Validation and submit the plan for the State to Review

Chapter 14 Quiz



1. What status triggers the workflow wizard to begin capturing data for the Person-Centered Plan amendment?
2. True or False? For Amendments you must start the person-centered plan form from scratch/blank form.
3. True or False? Amendment must be submitted to the State for review.
4. If the State determines that something needs to be changed/updated on the plan that was submitted, what status will the State set the Person-Centered Plan to?
 - a. Draft
 - b. Pending
 - c. Draft – Initial
 - d. Submitted for Review
 - e. Returned for Revision
 - f. Active