

DDSD SUPPORTS WAIVER OPERATIONS: THERAP GUIDANCE

THERAP MODULES

The following functions in Therap will be used by Community Support Coordinators (CSC) in operation of the Supports Waiver:

- Individual Data Forms (IDF)
- Scomm (Secure Communication)
- Case Notes (Monthly required documentation)
- GER (General Event Reporting)

AGENCY ADMINISTRATOR

CSC agencies must have a designated agency administrator. This person is responsible for administering the provider Therap account for their agency. This includes creating user accounts for CSCs and other agency personnel in the provider's Therap account; ensuring that all DDSD defined requirements are met for each user and the records for participants; setting up each individual record at the agency; providing other Therap support to your agency's staff; and facilitating Therap assistance from DDSD.

Each CSC is required to have access to records of individuals they support and privileges to update the Individual Demographics Forms, send/receive SComms, submit Case Notes, and submit GER Reports per Supports Waiver Standards. The administrator is expected to facilitate, maintain, and discontinue this access of users as needed. User Account access is made up of Super Role (Shareable), Caseload (Individual or Programmatic), and Administrative Roles (Individual [SComm]). DDSD recommends enabling self-password reset for each user, each user will need to enter and confirm information for *Self Password Reset*.

Supports Waiver Recipients receive services through one Therap provider account only and do not have oversight access to other providers. Each individual record/case assigned will be referred to the agency by DDSD and the individual needs to be assigned by the administrator to a program to ensure availability of GER. Depending on the agency's setup, the administrator may also need to update the CSC's individual caseload. Maintain shared contacts for the group. DDSD recommends that all individual records be discharged no later than 120 days after transitioning from the agency.

Other support for your agency users and staff includes password reset as needed, user demographic updates, provider preferences, etc. Therap is a web-based record and has updates from time to time that the administrator should be aware of.

Therap provides Live Help/Issues Track that help when there are issues related to coding and other technical assistance. When you have questions or assistance needed from DDSD, it is usually related to state specific use, please contact the 'Therap Unit' at DDSD and include Jennifer Roth in the recipients.

INDIVIDUAL DATA FORMS

The Individual data form must be opened and updated at least monthly by the CSC following monthly monitoring or as updated information becomes available to the CSC. The following information is required:

1. Individual Demographic Form

Name – Legal Name. Contact DDSD if you need to update.

Goes By – If the individual goes by a preferred name, please use this field

Date of Birth – Contact DDSD if you need to update

Email – Please keep update

Residential Address

Mailing Address

2. Contacts List

Current MCO Care Coordinator information in the contact list. To enter MCO Care Coordination, select contact List and Add New Contact.

Individual Contact New ⓘ

Individual Ethan Williams, 01234

Complete Care Coordinator First Name, Last Name; Agency (Enter MCO Agency Name; Relationship to Individual (Case Worker)

* First Name	<input type="text" value="Marie"/>	* Last Name	<input type="text" value="Sanders"/>
Middle Name	<input type="text"/>	Agency	<input type="text" value="MCO NAME"/>
* Relationship To Individual	<input type="text" value="Case Worker"/>		

When a Care Coordinator is unknown, not assigned or care coordination declined, complete first name, last name as below

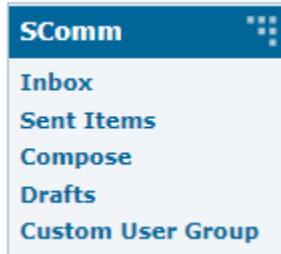
* First Name	<input type="text" value="NOT"/>	* Last Name	<input type="text" value="ACTIVE"/>
--------------	----------------------------------	-------------	-------------------------------------

3. Individual Details

If the region is updated take precaution to not change or replace the ID number information. The individual oversight ID must remain as the individual ID (JON-KA-7127 in the example below).

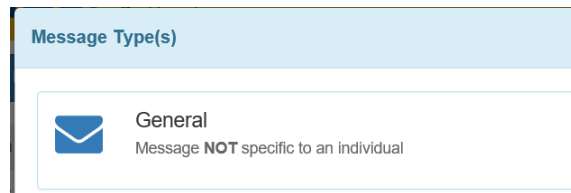
ID Numbers	
ID	NM, Metro Region, Supports Waiver
	JON-KA-7127
Additional ID	
Medical Information	

SCOMM



Scomm is the secure communication email system on the Therap platform. CSCs need to use this email system for secure communication with DOH as needed.

Scomm can also be used for Supports Waiver business using the general message type. Remember to select cross provider checkbox when communicating with DDSD.



CASE NOTES

The Case Notes module is used for both the Initial Waiver Eligibility Reporting and for Monthly Monitoring.

- Case Notes can include a Questionnaire Pop up and a notes section.
- The correct Case Note template name must be selected for the purpose of the Case Note.
- Initial Waiver Eligibility Period- Case Note Template name is **SW Pre-Budget Contact Note**.
 - This form supports billing for:
 - *the pre-eligibility code until COE is established*
 - *the waiver billing code the 1st of the month after the COE is established, while ISP and Budget development and submission is completed*
- Ongoing monthly Monitoring Case Note Template name is **SW Monthly Monitoring**. *Start the use of this form the month the initial budget start date is approved.*
- Case Notes must always be saved. Case notes can be saved in DRAFT form or SUBMITTED when final.



- All updates to a Case Note whether in DRAFT or SUBMITTED form are date and time stamped in Therap and can be accessed through the Case Notes [Update History](#) button.

Case Note Submitted ⓘ

Form ID : CN-
Time Zone : L
Entered By : |
Submitted By
[Update History](#)

Template: Case Management

Case Note Details

SW Pre-Budget Contact Note

Reporting Period = Each month continuously from when your agency receives the PFOC until the active date of ISP/Budget.

1. Reporting during this period is in the Case Note titled *SW Pre-Budget Contact Note*..
2. A new *SW Pre-Budget Contact Note* Case Note must be submitted monthly by the end of each month to support billing.
3. In the case of waiver transfers to DD or Mi Via the CSC should add a note detailing the transition meeting and the agreed date of transfer to DD or Mi Via agency.
4. The CSC Agency should report in the notes section of the SW Pre-Budget Contact Note initial waiver eligibility required activities conducted by CSC. This should include a running log of dates, times and required activities conducted until initial ISP is approved.

For example:

7/1/2020 10:40 am – 10:55 am- Called to schedule initial meeting after receipt of PFOC

7/20/2020 1:00 PM – 2:30 PM Conducted waiver enrollment meeting

8/1/2020 Completed LOC scoring with individual and family member

8/15/2020 Completed home site visit

5. When an individual decides not to enroll in the Supports Waiver, SUBMIT the Case Note and notify Intake and Eligibility Bureau per the SW Withdrawal process.

SW Monthly Monitoring

Reporting Period = From the date of ISP / Budget Implementation each month continuously.

1. Reporting during this period is in the Case Note titled *Supports Waiver Monthly Monitoring*.
2. Use of this Case Note starts in the month of initial approval of Individual Service Plan and budget.
3. Each month a new *SW Monthly Monitoring* Case Note should be initiated per person. The Case Note may remain in DRAFT until the end of the month in which the reporting is complete. The Case Note must be SAVED and SUBMITTED by the end of the month for the month that services are provided and before any billing can occur for the month.
4. All questions in Questionnaire pop up are required to be completed.
5. A new *SW Monthly Monitoring* Case Note must be submitted monthly to support billing.

6. In the case of transfers to DD or Mi Via the CSC should continue to complete the monthly Case Note until the transition is complete. The final monthly reporting form should detail the transition meeting and the agreed date of transfer to DD or Mi Via.
7. Notes on additional monthly contacts or CSC activities in addition to the monthly Questionnaire during the month should be logged in the *Notes* section outside of Questionnaire pop-up with date, time and description of activity.

GER Reporting

Reporting for COVID-19 and other initiatives as determined by DDS.

The following events need to be reported in the Therap GER by the CSC:

- COVID Events
- Other as determined by DDS that occur during delivery of Supports Waiver services.

Entry Guidance: Community Supports Coordinators (CSC) must complete the following sections of the GER with detailed information: profile information, event information, other event information, general information, notification, actions taken or planned, and the review follow up comments section. Please attach any pertinent external documents such as discharge summary, medical consultation form, etc. CSC Agencies must enter and approve GERs within 2 business days.

Event	Description	Entry Requirement	Notification Level
COVID	COVID related events including testing, possible exposure	<p>Basic Information <i>Event Type:</i> Other</p> <p>Event Information <i>Other Event Type:</i> Communicable Disease <i>Subtype:</i> COVID-19 <i>Check Appropriate Status:</i> Contact/Exposure, Negative, Positive, Symptoms, Tested</p> <p><i>Summary:</i> Enter event details and plan of action.</p>	HIGH