

CORE Outside Review Cover Sheet Instructions version 1.5

Purpose: The Outside Review coversheet is necessary in all email submissions to the HSC Core. The coversheet indicates the nature of the submission and should detail any exceptions to the standard review process. This document dictates how the packet is setup within the OR database and what type of review is necessary.

Please make sure to use a CLEAN OR Coversheet with each submission Initial Check Boxes

- Check applicable boxes for a Child budget submission, 3 day Imminent, 5 day imminent, Crisis Support and/or a Retro Submission.

Please note: if a submission is a retro, the submission should be sent to DDS Regional office for approval prior to submitting to the OR. If approved, DDS will provide a signed approval form that needs to be included in the packet sent to the OR.

Individual's Information-

- When submitting an annual review that isn't a new allocation the previous ISP terms PA# is required.
 - o i.e., If submitting the annual for ISP term 2021 – 2022, please enter the 2020 – 2021 PA# on the OR coversheet.
 - o New allocations will not have a PA # to submit.
- When submitting a revision, the PA# assigned to the corresponding ISP term needs to be entered onto the OR Coversheet.
 - o i.e., If submitting a revision for ISP term 2021 – 2022, please enter the 2021 – 2022 PA# on the OR Coversheet.
- Provide the mailing address for the individual where they can receive mail.
- Ensure all information is current.
- Use the individual's "LEGAL" name as listed in Omnicaid, not a nickname.

Guardian's Information-

- If there are multiple "LEGAL" guardians, please utilize the "Additional Notes" section under the Annual or Revisions sections below.

Case Manager Information-

- Please ensure all contact information is validated to ensure the CORE has current contact information.

Annual Section-

- ISP Begin and ISP End dates.
- Check box to notify the CORE if this is an initial allocation so the OR does not request a PCA erroneously.
- Check box to notify the CORE if CCS and/or CIE is a new service, so the OR does not request a PCA erroneously.
- Additional Notes section-
 - o Please type any information you feel will be useful for the OR to know when completing their review. This box will expand as you type.
 - o Previous recipient of Supported Living category H and 55 or older
 - o This is a check box for those individuals grandfathered into Supported Living services as detailed in Clinical Service Criteria v6.

Revision Section-

- o Revision number
- o Please notate the revision you are submitting, i.e., Rev#1, Rev#4
- Check boxes added to notify the OR of the reason for the revision.
 - End/Close a service
 - Transfer/Change provider
 - Provider ID correction only
 - Closing BWS*
 - Initial Eval
 - Decreasing units
 - Transfer to/from Mi Via*
 - Adding new service
 - Increasing units
 - LCA Change*
- Multiple reasons can be checked, please check whatever applies to the revision request.
- If the reason for a revision is due to a transfer to/or from Mi Via, closing BWS, provide the correct **PA Begin and End** dates.
 - o **Please note that selections are marked with an asterisk * as a reminder.**
- Explain Revision section
 - o Include any information you feel will be useful for the OR to know when completing their review. This box will expand as you type.

RFI Response Section-

- Copy and paste the reference number from the RFI email, i.e., 02.19.21.ISP.2154.AA.
 - o This information is vital for the OR to apply the RFI documents to the correct file.
- Additional Notes section-
 - o Please type any information you feel will be useful for the OR to know when completing their review. This box will expand as you type.

Justification and additional notes

- For requesting Imminent or Crisis Supports provide justification in the Justification and additional notes section at the bottom of the page. This area can be used for any other notes that are needed to explain the submission and will expand as you type.