STATE OF IOWA DEPARTMENT OF

Health AND Human

SERVICES

FFS Iowa Integrated Health Home IoWANS

September 2023

IoWANS Training

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Purpose

➢ The purpose of the Institutional and Waiver Authorization and Narrative System (IoWANS) is to assist workers in the facility and waiver programs in both processing and tracking requests for FFS members. Member records will be tracked in IoWANS until that member is no longer accessing a facility or waiver program. Upon approval, participants will use IoWANS to provide the Medicaid fiscal agent with information and authority to make accurate payments to providers of facility or waiver services.

➢ For the IHH program, the IHHs will use IoWANS for FFS members enrolled or enrolling in the Children's Mental Health Waiver and/or Habilitation.

- **Important:** IHHs will not use IoWANS for members enrolled with an MCO.

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Acronyms & Roles

CM/SW = Case Manager

BIP = Telligen Assessment Team

QIO = Iowa Medicaid's Quality Improvement Organization (QIO)

Slot Manager = Iowa Medicaid's QIO Slot Manager

Medical Services = Iowa Medicaid's QIO Medical Services Unit

RS Reviewer = Iowa Medicaid's QIO Medical Services Unit

CSR = Continued Stay Review

Note: Throughout this resource guide the terms "member" and "consumer" are used interchangeably.

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IoWANS Access

- To request IoWANS access, complete and save the [IoWANS Security form](#)
  - Before entering your user role, be sure to review the list of roles in the comment box attached within the roles field (hover over or click in Roles field)

  - Under Programs, **all** IHHs will select Habilitation. Only IHHs that serve children will include CMH.

IoWANS Access
(continued)

- Email your completed form to the IoWANS Help Desk IoWANSHelpDesk@dhs.state.ia.us.

- **Note:** It is the responsibility of each IHH with access to log into IoWANS on a regular basis. Your access will disable if you have not logged in after 60 days. If this occurs, you will need to complete the IoWANS Security form again and email to the IoWANS Help Desk to have it reenabled. If you have questions regarding how to complete the IoWANS Security form, contact the IoWANS Help Desk.

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IoWANS Access
(continued)

- Once your new access has been activated or your previously deactivated access is reactivated, you will receive an email notification from the IoWANS Help Desk.

- **For REACTIVATION requests only:**
  - **BE SURE** to change your password the **same day** (prior to 6PM) you receive the email notification (see example below) from the IoWANS Help Desk.
  - If you do not change your IoWANS password the same day you receive notification that your password was reactivated, the system will automatically disable it again.

Example Notification:

Your request to re-activate IoWANS login/user ID _____ has been completed. Please use the following instructions to change the password.

PLEASE NOTE: THE PASSWORD MUST BE CHANGED TODAY OR THE SYSTEM WILL AUTOMATICALLY DISABLE IT AGAIN TONIGHT DURING THE NIGHTLY UPDATES.

1. Go to the IoWANS login screen
2. Click on CLICK HERE TO CHANGE PASSWORD (will go to another screen)
3. Enter USER NAME (TAB to move to next field)
4. Enter "Iowans@99" as OLD PASSWORD
5. Enter NEW PASSWORD (minimum 8 characters, including one upper case letter, one lower case letter, one number, and one special character.)
6. CONFIRM PASSWORD (re-enter new password exactly)
7. Click UPDATE (will get message password has been changed successfully)
8. Click BACK TO LOGIN (will go back to login screen)
9. Enter USER NAME (TAB to move to next field)
10. Enter new PASSWORD

Your new password will not work for MY REPORTS until tomorrow. Overnight IoWANS and MY REPORTS will sync and your new password will work in both.

If you have questions, or require additional assistance, contact us at IoWANSHelpDesk@dhs.state.ia.us Please do not respond directly to my personal email.

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Logging into IoWANS

- Link to IoWANS: https://secureapp.dhs.state.ia.us/Iowans/Login.aspx

- Be careful when logging into IoWANS. If you mistype your username or password on three attempts, you will be locked out.
  - If locked out of IoWANS due to exceeded login attempts or need to reset your password, send an email to the IoWANS Help Desk IoWANSHelpDesk@dhs.state.ia.us and include the following information:
    - Your login username
    - The last 4 digits of your Social Security Number (SSN)
    - Your mother's maiden name

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Logging into IoWANS
(continued)

- You are required to change your password every 60 days.
  - To change your password, use the "Click Here to Change Password" on main log in screen

Consumer Screens

- The tabs and subtabs shown below may vary from what you see when logged in. System capabilities are determined by role.

Consumer Screens
(Continued)

- The **Consumer** tab allows IHHs to access screens regarding consumers (members).

- The **Provider** tab allows IHHs to access screens to locate and maintain provider information.

- The **Add/Cancel Program** tab allows IHHs to access screens to add or cancel habilitation program requests for consumers.

- The **Supervisor Utilities** tab allows IHHs with supervisor access to access these screens to maintain their organization chart, reassign cases, and manage worker teams.
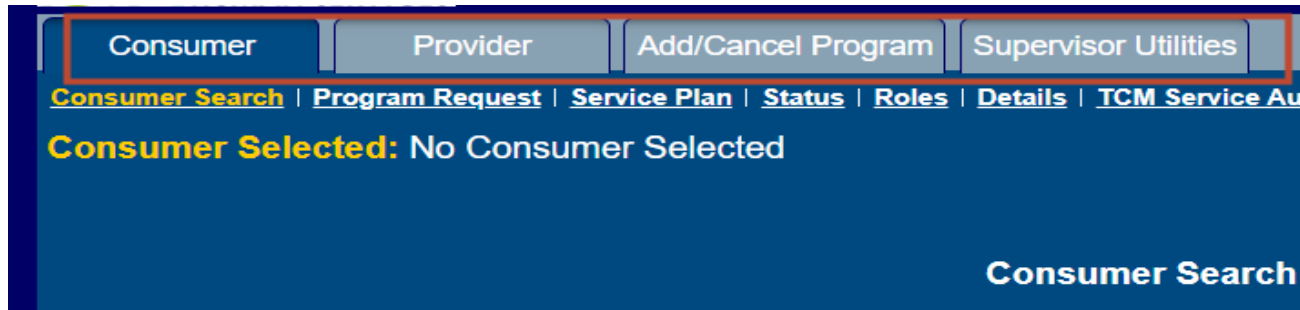
Consumer Tab

Consumer Search Screen

- To search for a member, enter the applicable search criteria in the search field(s). Not all field options need to be entered.

- The Worker field shows whose cases are to be searched. IoWANS will automatically display your name in the Worker field. However, supervisors may select subordinates from the Worker pull-down menu and search the cases of the selected subordinate.
  - **Note:** If you have more than one worker number or role in IoWANS, the worker field may show your name more than once, and the search result will return all active consumers on your caseload regardless of the worker role chosen.

Consumer Search Screen
(Continued)

- Once Search options have been entered. Click "Search" at the bottom of the screen.
    - If you want to search all members assigned to you in IoWANS, select your name in the Worker field and leave all other search fields blank.

Consumer Search Screen
(Continued)

- Member information will display in the table. Depending on the search criteria entered, more than one member may display.
  - If you would like to print your list of search results, click "Print"

- Click on the member row to select.

Program Request Screen

- Once the member is selected the Program Request screen will display. This screen allows users to access program request information for a selected member.
  - A program request is a record in IoWANS that displays details of a member's request for Medicaid facility, HCBS waiver, or state plan enhanced services.

Program Request Screen
(continued)

- **Begin Date**: The start of the program request.
  - If no start or end date appears, this means the program request is not active yet.
  - If no begin date appears but there is an end date, this means the program request has been denied.
- **Tier:** This is **NOT** the member's Health Home tier.
- **End Date:** The final date for the program request.
  - If there is a begin date but no end date appears this means the program request is active/open (current).

Program Request Screen
(continued)

- **LOC:** The approved level of care (LOC). The QIO worker (Medical Services) responding to the workflow sets the LOC.

- **Assessment Date:** The date in which the assessment (LOCUS/interRAI) was conducted

- **Program:** The Medicaid long-term care program for the consumer.

Program Request Screen
(continued)

- Click on the applicable CMH or Habilitation program line you are wanting to take action on/review.

Service Plan Screen

- The service plan screen allows you to view a service plan for a consumer, add a new plan, or change a current service plan.
  - If you clicked on a program request that does not have a service plan entered yet, the screen will look like this:

Service Plan Screen
(continued)

Below are the fields (with descriptors) that are included on the Service Plan screen:

- **Select a service plan or create a new one:** view or modify an existing service plan or create a new one for selected consumer.

- **Service Plan Start Date**: date services are to start. This date must be on or after the program begin date, if present (when available). It may not be known when the plan is initially created.

- **Service Plan End Date:** this date must be no more than 12 months after the service plan start date. Service plans should end on the last day of the month. Service plans that have a start date of the 2nd of the month or later must end on the last day of the 11th month.

- **Plan Review Date:** this date must be between the service plan start date and end date, inclusive.

- **Level of Care:** this data is entered automatically from the QIO milestone.

- **CSR Date:** the level of care annual continuing stay review (CSR) date.

Service Plan Screen
(continued)

Service Plan screen continued…

- **CP 1st month:** the client participation amount is calculated by the im worker and comes over automatically from the eligibility system.

- **CP Ongoing:** the client participation amount is calculated by the IM worker and comes over automatically from the eligibility system.

- **CP Ongoing Effective Date:** the date that the consumer's regular participation starts.

- **Authorized:** an entry of "no" indicates the plan has not been approved yet. A "yes" entry means the service plan is valid and a worker has completed an approval milestone.

- **Is Plan Valid:** confirms the validity of the service plan and individual services.

- **Exception:** identifies that the service is an exception to policy.

- **Save Change To Plan** button - saves changes.

- **Delete plan** button - appears after you have entered a service plan. Before the plan is approved, this button allows you to delete the service plan if the program request is pended (not active).

Service Plan Screen
(continued)

Service Plan screen continued...

- **Start Approval Process** button: starts the approval process when a new plan is added to an active consumer. This is commonly used when a new plan is added at the time of the annual review.

- **Add Service** – a link to worksheet screens that enable you to add services.

- **Print NOD** – allows you to print the NOD.

- **Monthly Cap** – monthly maximum for all services totaled in dollars. Appears after you have entered a service plan. Monthly dollar totals are differentiated by calendar month.

- **Yearly Cap** – yearly maximum for all services totaled in dollars.

- **Begin Date** – must be between the service plan start date and end date, inclusive.

- **End Date** – must be between the service plan start date and service plan end date, inclusive.

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Service Plan Screen
(continued)

Service Plan screen continued…

- **Provider Number/Name:** identifies the name of the provider responsible for the service.

- **Monthly Total 1st Month:** the first-month cost of the service minus CP first month. This amount is calculated from data in other fields.

- **Monthly Total Ongoing:** ongoing monthly cost of the service minus CP ongoing months. This is calculated from data in other fields.

- **Units:** the number of units to be used in a month for the identified provider and service.

- **Rate:** the rate per unit for the identified provider and service.

- **Exc:** identifies that the service is an exception to policy.

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Add a Service Plan

- To enter a new service plan:
  - Select -New Service Plan-
    - Note: there may be additional options available in the drop down depending if a service plan has been added previously.
  - Enter Service Plan Start date
  - Enter Service Plan End date
  - Enter Service Plan Review date
- Click on Add New Service Plan

Add a Service Plan
(continued)

- The Add Service link will appear to the left just above the grid. This may be used to access a series of screens that serve as waiver services agreement worksheets used to enter a new service for the consumer. This link is not shown until you have entered the basic service plan dates (start, end, and review dates).

- As you navigate through the series of worksheets, please note the following:
  - **Dates:** A link that takes you to the Dates worksheet screen.
  - **Service and Provider:** A link that takes you to the worksheet screen where services may be entered.
  - **Rates and Units:** A link that takes you to the worksheet screen where you enter rates and units.
  - **CP:** A link that takes you to a worksheet screen to enter client participation.
  - **Confirm:** A link that takes you to the final worksheet screen to view and save the service you entered.
  - **<< Back:** Proceeds to previous worksheet screen
  - **Next >>:** Proceeds to next worksheet screen
  - **Cancel:** Exits worksheet abandoning all entries made

Add a Service Plan
(continued)

Service Agreement Worksheet – Date Screen

The Services Agreement Worksheet Date screen allows you to enter a start and end date for the service (sometimes called the service span). The starting date must be no earlier than the current month.

If service periods include partial months, enter a separate service line for each partial month, with units prorated to the partial service period.

- **Service Start Date**: This date must be between the Service Start Date and the Service Plan End Date, inclusive. The date cannot be less than the first day of the current month.

- **Service End Date:** This date must be between the Service Plan Start Date and the Service Plan End Date, inclusive. The date cannot be less than the last day of the previous month.

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Add a Service Plan
(continued)

Service Agreement Worksheet – Date Screen

Add a Service Plan
(continued)

Service Agreement Worksheet – Service and Provider Screen

This screen allows you to identify the service and assign a provider for the service.

- **Procedure Code:** Choose from pull-down list. The procedure codes on this list are limited to those authorized for the waiver program type.

- **Provider (Num/Name):** Enter the provider number (vendor ID). Despite the label, this field will accept only the provider's vendor ID number. The Magnifying Glass Icon can be used to search a provider vendor number.

- **Site Number:** This field appears only if the service chosen is "supported community living daily." It is the number, obtained from the provider, associated with the site where or from which the provider will provide services for the consumer.
    - The system will not accept a blank Site Number field. If a site number is not required, enter "1" (one) so you can advance to the next worksheet entry screen.

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Add a Service Plan
(continued)

Service Agreement Worksheet – Service and Provider Screen

Add a Service Plan
(continued)

Service Agreement Worksheet – Rate and Units Screen

This screen allows you to enter the rate for a unit, the number of units, and billable units authorized for this service.

- **Rate($):** The approved rate for a given provider for a specific service.
  - The Rate($) field behaves differently than other fields on worksheet screens. When there are entries already in other fields, you may highlight the entry (by holding down your left mouse button while sweeping the cursor across the entry) and start typing. What you type will replace what was there.
  - This process won't work for the Rate$) field. If there is a value in the Rate($) field that you want to change, you need to highlight that value, and either depress your keyboard's Delete button or Backspace button. Once you have cleared all or any part of the value from the field, you may then enter your correction.

- **Units:** The maximum number of units that may be billed for this service for each month of partial month in the services period.

- **Billable Units:** An adjustment to the number of units billed if the provider serves more than one consumer at the same time at the same location. This number must not exceed the total units authorized for this service.

Add a Service Plan
(continued)

Service Agreement Worksheet – Rate and Units Screen

Add a Service Plan
(continued)

Service Agreement Worksheet – Client Participation Screen

This screen allows you to apply all or a portion of the client participation (the amount the consumer must pay to providers) to a specific service. You can enter up to the total client participation amounts as identified on the Service Plan screen and apply it toward the particular service.

If client participation exceeds the cost of the particular service, divide client participation among various services. If the total client participation amount shown on the Service Plan screen is zero, or client participation will not be applied to this service, then no entry is required.

- **CP First Month($):** The dollar amount of client participation for first month.
- **CP Ongoing Months($):** The dollar amount for monthly client participation, beginning with the month after the starting month of the program request.

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Add a Service Plan
(continued)

Service Agreement Worksheet – Client Participation Screen

Add a Service Plan
(continued)

Service Agreement Worksheet – Confirm Screen

This screen will show a summary of the entries you have made. If you decide to change any of the entry was made, change or correct your data, and then use the Next>> buttons to navigate back to this Confirm screen. Once satisfied with all entries, click on the Finish button to have the system accept everything as a service; this will place the service as a new entry (record) on the Service Plan screen.

- **Service Span:** The service start and end dates from your entries made on the Dates screen.

- **Service:** The names of the services you selected on the Service and Provider screen.

- **Provider:** The names of the providers you selected on the Service and Provider screen.

- **Site Number:** A number identifying the provider site where (or from which) the consumer will be served; taken from your entry on the Service and Provider screen.

- **Rate:** The cost per unit. This matches your entry on the Rate and Units screen.

- **Units:** The maximum number of units that may be billed. This matches your entry on the Rate and Units screen.

- **Billable Units:** An adjustment to the number of units billed if the provider serves more than one consumer at the same time at the same location. This number must not exceed the total units authorized for this service. It matches your entry on the Rate and Units screen.

- **Sum:** The total cost of the units or billable units (if billable units were less than maximum units) for a single month. This is calculated from the data entered on the Rate and Units screen.

- **CP First Month:** The amount of client participation to be paid toward this service for the first month of this service; matches your entry on the Client Participation screen.

- **CP Ongoing Months:** The amount of ongoing client participation to be paid toward this service, starting in the month after the begin date from the eligibility system. This entry matches your entry on the Client Participation screen.

- **Monthly** Impact First Month: The first-month cost of the service minus CP First Month. This amount is calculated from data in other fields.

- **Monthly Impact Ongoing Months field:** Ongoing monthly cost of the service minus CP Ongoing Months. This is calculated from data in other fields.

- **Finish button:** Submits all data shown as one complete service.

Add a New Service Plan
(continued)

Service Agreement Worksheet – Confirm Screen

Add a Service Plan
(continued)

- The service plan is "submitted" when you receive and respond to the milestone "Complete Service Plan." See Milestone section for more information on milestones. After responding to that milestone, you should **not** make any further changes to the plan (nor the services attached to it) except through coordination with the authority that reviews and approves the plan.

- Approval of the service plan will be for the entire service plan as you have defined it. Therefore, it is very important that the "final" service plan be exactly as you want it before you respond to the "Complete Service Plan" milestone.

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Request for Program Changes

▪ A *Request for Medicaid Services Data Changes and Verifications* form (Form 470-3923) is required to request Service Plan/Service Span changes for past months.

  ▪ Once the form has been completed. Click the 'SUBMIT ONLINE' button to submit the request.

  ▪ See Instructions for completing the *Request for Medicaid Services Data Changes and Verifications* form

Instructions for Completing the *Request for Medicaid Services Data Changes and Verifications* form

<u>SERVICE</u> <u>PLAN</u>
- Complete Parts 1, 2 and 3 ————→

Part 1: Consumer/Staff Information		
Consumer State ID	Consumer Name (Last, First)	Case Number
Worker Name	Worker Number	Worker Phone Number
Part 2: Program Type	**Part 3: Level of Care**	
		LOC Date

- Part 4:
  - To <u>delete</u> a Service Plan, enter Current Service Plan Dates (both Start Date and End Date). Then in Correct Service Plan Dates, enter "delete" in the Start Date field.

  - To <u>change</u> a Service Plan, enter Current Service Plan Dates (both Start Date and End Date). In Correct Service Plan Dates, enter the correct Start Date and/or End Date.

  - To <u>add</u> a Service Plan for past dates, leave Current Service Plan Dates blank, and enter Start Date and End Date for Correct Service Plan Dates. Then follow the instructions for <u>adding appropriate Service Span(s)</u>.

Part 4: Current Program Request Dates (Dates come from IABC)			
Start Date		End Date	
Current Service Plan Dates (Dates come from SW/CM):		*Correct Service Plan Dates:*	
Start Date	End Date	Start Date	End Date

Instructions for Completing the *Request for Medicaid Services Data Changes and Verifications* form
(continued)

SERVICE SPAN

- Complete Parts 1, 2 and 3 →

Part 1: Consumer/Staff Information		
Consumer State ID	Consumer Name (Last, First)	Case Number
Worker Name	Worker Number	Worker Phone Number
Part 2: Program Type	**Part 3: Level of Care**	
		LOC Date

- Part 4:
  - There are two sections on the form for service span changes. For both sections:
    - The first row is for *Information Currently Shown* (exactly as shown in IoWANS)
    - The second row is for *Correct Information* (what needs to be changed).
  - To *change* a Service Span, enter all *Information Currently Shown* exactly as it appears in IoWANS. Then enter *Correct Information* only in the fields that are to be changed.
  - To *add* a Service Span, leave the *Information Currently Shown* blank, then enter the *span* information in the *Correct Information* row.
  - To *delete* a Service Span, enter the *Information Currently Shown* for the span being deleted in the first row of the section, then leave the *Correct Information* row blank.

Part 4: Current Program Request Dates (Dates come from IABC)							
Start Date				End Date			
Current Service Plan Dates (Dates come from SWICM):				Correct Service Plan Dates:			
Start Date		End Date		Start Date		End Date	
Information currently shown on the IoWANS system (service spans):							
Begin Date	End Date	Procedure Code	Provider No.	Rate/Unit	No. of Units/Mo.	1st Month CP	Ongoing CP
Correct information:							
Begin Date	End Date	Procedure Code	Provider	Instructions for Completing th...	No. of Units/Mo.	1st Month CP	Ongoing CP
Information currently shown on the IoWANS system (service spans):							
Begin Date	End Date	Procedure Code	Provider No.	Rate/Unit	No. of Units/Mo.	1st Month CP	Ongoing CP
Correct information:							
Begin Date	End Date	Procedure Code	Provider No.	Rate/Unit	No. of Units/Mo.	1st Month CP	Ongoing CP

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Can a Health Home edit an authorized Service plan?

- As a case manager you can only change the current and future months. Plans cannot overlap.

- If past dates need corrected, please complete form 470-3920 and email to: IoWANShelpdesk@dhs.state.ia.us

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Status Screen

- The Status screen displays a list of the key tasks (milestones) that have been completed for the selected consumer and displays the current milestone(s) that is waiting for a response (if any) for the selected program. Milestones in gray indicate they have been completed/closed out. Milestones in white are current milestones that have not yet been completed.

- The "Response" and "Response Date" fields will also be blank for those milestones not completed.

Status Screen
(continued)

- This screen also provides the phone number and other demographic data in a pop-up box for each worker assigned when you place the cursor over each worker in the Worker Name column. Workers should check their own demographic information and contact the IoWANS help desk IoWANShelpdesk@dhs.state.ia.us if corrections are needed.

Status Screen
(continued)

- Workflows can be accessed by clicking the red headers in the Description column

Responding to a Milestone

- From the Status screen, you can access the Milestone screen by clicking on the row displaying a current milestone assigned to you.
    - Be sure to read the responses and any comments made that lead up to the milestone on the Status screen prior to responding to your milestone. Responses in the previous questions and comments may help the worker understand what is happening outside of the IoWANS system.
    - Comments can be accessed by clicking on the paper icon under the Comments column.

Responding to a Milestone
(Continued)

- A Milestone screen will present a question, instruction, or a statement, as well as a comment section followed by a choice of responses.

  - The comment section allows entry for information that will be useful to others
  - Reaching a choice for a response may take quite a bit of activity outside of IoWANS. If you do not have the correct information to respond, then don't respond. Instead, use the Cancel response to exit the screen. This will postpone answering until that information is available. **Please be sure you are making note of the due date of the milestone so a timely response can be provided.**

Responding to a Milestone
(continued)

- When responding to a milestone, enter any applicable comments in the comments box. If no comments are needed, leave blank.

- Click on the appropriate response.
  - Note: most milestones require only a response, however some may also require an entry to the response.

- Respond to any additional milestones (as applicable)

Milestone Errors

- If you fail to either respond or cancel, this may lock the milestone so that no other users will be able to respond. If this occurs, send a request to the IoWANS HelpDesk.

- If it is possible to undo the milestone, a Trash Can icon will be present in the last column of the milestone's record in the Status screen.

- If the undo is not permitted, as would likely be the case if "downstream" milestones have been accomplished, it will be necessary to contact the IoWANS HelpDesk.

Responding to a Milestone
(Continued)

- **REMINDER:**
  - ➢ You will **not** be sent an email notification when a milestone is assigned to you. It is your responsibility as an IHH to check IoWANS on a regular basis for any milestone that have been assigned to you.

Roles Screen

- Click on Roles to access the list of workers assigned in IoWANS to each specific role for the consumer's selected program request.
  - For a complete list of roles and their descriptions see pages 44-45 of the IoWANS User Guide.
  - Example: For the member's Habilitation Services Program Request, below is the list of assigned workers.

Roles Screen
(continued)

- The assignment of people to roles determines who will get milestones that are going to be generated during the process.
  - **Important:** Assignment from this screen does not automatically inform people that they have been assigned. However, the milestones that will eventually be generated for them will inform them.
  - Note: Most of the roles are automatically assigned by the system but there are some exceptions.
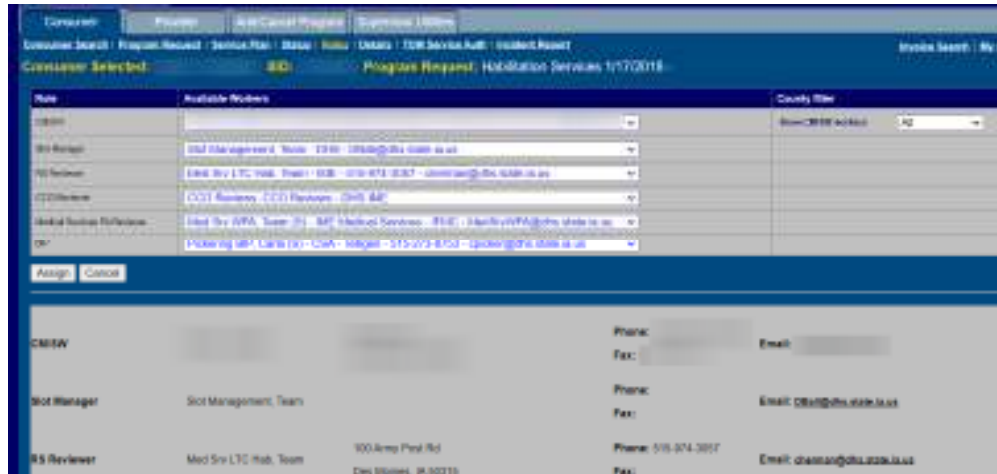
Roles Screen
(continued)

▪ The Roles screen is also where you can find the IM worker information.

Reassignment of Roles

- The Roles screen is also used for reassignment of roles. A worker can only reassign a case to a supervisor. Supervisors can reassign cases among people they supervise or to other supervisors of like role.

- To reassign:
  - Click the dropdown arrow next to CM/SW
  - Select the worker you are reassigning to
    - The worker's name you are reassigning should now appear in the CM/SW field
  - Click Assign
  - Once reassigned, the newly assigned worker's contact information should appear next to CM/SW at the bottom half of the screen

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Details Screen

- The Details screen provides demographic data regarding a consumer. The IM worker is responsible for making updates to this screen via the eligibility system. Contact the IM worker for any updates that are needed.

Workload Screens

- My Workload or Team Workload subtabs can be accessed on the right side of the Consumer tab. These subtabs display a list of consumer cases that require some action by you or a team.
  - To access your workload, click on the link:
    - My Workload
  - To access your team's workload, click on the link:
    - Team Workload
      - Workers will login using their individual login IDs. Any team logins will be disabled and workers will not be able to login under a team name.
      - Workers must change the worker to All Consumer in order to search for a member that is not assigned to them.
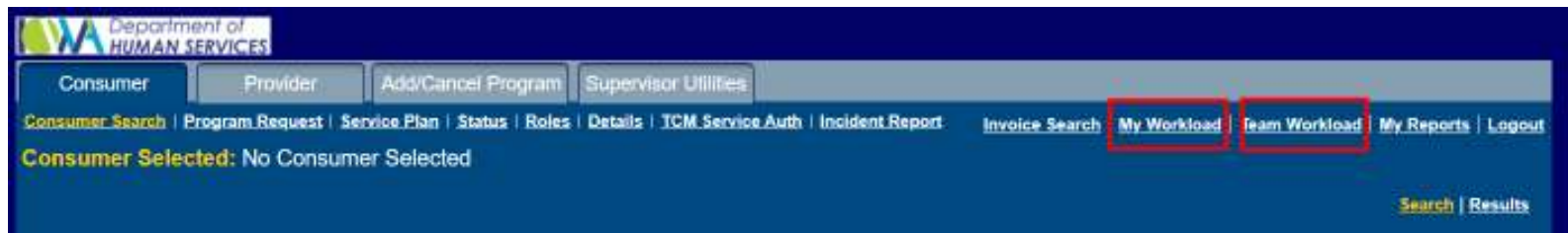
Workload Screens
(Continued)

- If no key tasks (also referred to as milestones) are waiting for your attention:
  - The screen will display "No Workload Items Found."

- If tasks are waiting for your attention:
  - The task or list of tasks will display.
  - When you click on View Status button for the selected consumer you will be taken to the Status page which allows you to see what steps have already been completed and the worker that completed each task.

Workload Screens
(Continued)

- Consumer cases are listed on the workload screens by their due date in descending order. Cases with the latest due dates are placed at the bottom of the list.

- If you are anticipating new actions (such as a new case or milestones for existing cases), it would be wise to refresh the page from time to time. Refreshing can be done by going to another page and then returning to the Workload page.

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Team Workload

- Workers can view and work on any case/milestone on the team's workload. Workers can also work on any milestone assigned to any other team member.

Team Workload
(Continued)

- Any team member can respond to an active milestone.

- Multiple team members can potentially respond to various milestones. IoWANS will track who responded to the milestone.

- Once milestone is pulled by a worker it is locked to that worker until they answer the milestone.

- IoWANS will display an error message with the worker's name and the date the milestone was locked.
  - Example of a locked milestone message:

Cannot respond to milestone. This milestone is locked because Satish Yeluri from your team is currently attempting to answer this milestone. Locked since 12/22/2020 6:55:07 AM.

Milestones: Last 3 Years

Description:	Worker Name:	Worker Role:	Response:	Response Date:	Due Date:	Comments:	Undo:
PACE Option Flow							
A request for Waiver services has been received for this consumer.	IoWANS IM, TEAM	IM			12/11/2020		

  - Ask the worker to respond to the milestone so that the workflow can continue.

Provider Tab

Provider Search Screen

- This Provider Search screen allows a Case Manager to find the correct provider(s) and the information needed to arrange for services for a consumer.

- To access the Provider Search screen:
  - Click on Provider
  - Then click on Provider Search

- You may search for a provider with data in any single field or combination of fields.

Provider Details Screen

- Access the Provider Details screen by selecting a provider from the list given in the results screen.

Provider Details Screen
(continued)

- Once selected, the Provider Details screen displays information regarding the selected provider, including what services (certified, deemed, or enrolled) are available through the provider.

Provider Certification

- Access the provider service certification screens by selecting Service Certification once a provider has been selected. This will result in a list of all services that the provider is approved to provide, sorted by waiver program name.
    - A provider's services may be deemed or enrolled. "Deeming" means the service is approved by another agency and there's an established expiration date.
    - "Enrolled" means the service is approved by another agency but there is no established expiration date. For purposes of IoWANS, however, an enrolled provider will have a reasonable expiration date entered, since expiration date is a required field in IoWANS.
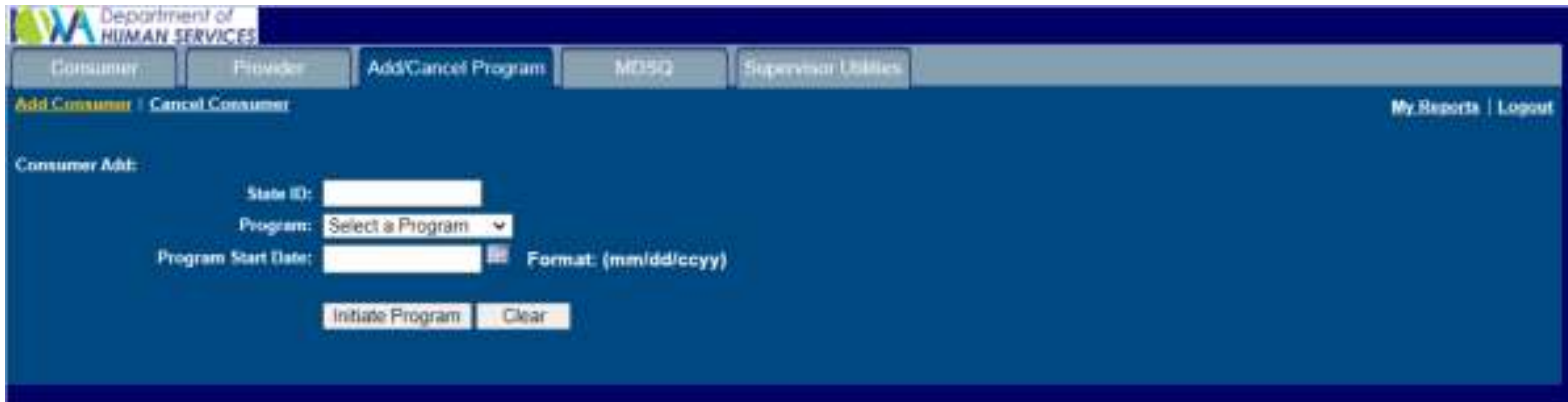
Add/Cancel Program Tab

Add/Cancel Program Screen

- The Add/Cancel tab allows case managers to add or cancel a Habilitation program request for a consumer.
    - Note: There is a monthly job in IoWANS that checks for Medicaid eligibility which runs on the 27th of the month. If Medicaid eligibility is not found then IoWANS will automatically close (add end date) to the Habilitation program request.
    - If the member's Habilitation program request needs to be canceled in IoWANS, it is up to the CM to cancel, not the IMW or IoWANS Help Desk.
        - CMH waiver program requests must be closed by the IMW.

Adding a Habilitation Program Request

- Click on the Add/Cancel Program tab

- Click on Add Consumer

- State ID: Enter the consumer's State ID

- Program: Select Habilitation from the dropdown menu

- Program Start Date
  - Enter the date services will begin. This date will become the Program Request begin date. When adding Habilitation Services, it can be left blank in order to indicate Habilitation Services are pending approval.

- Click the Initiate Program button
  - IoWANS will obtain the member's Medicaid approval and demographic information. Before allowing the program to be added, IoWANS also checks for current Medicaid eligibility.

# Canceling a Habilitation Program Request

- Click on the Add/Cancel Program tab
- Click on Cancel Consumer
- State ID: Enter the consumer's State ID
- Program: Select Habilitation from the dropdown menu
- Program End Date: Enter Program end date
- Click the Cancel Program button

Supervisor Utilities Tab

Supervisor Utilities Tab

- Access the supervisor organization chart by clicking on the Supervisor Utilities tab and then the Organization Chart subtab.

- Supervisors use this screen to change their organization charts by assigning workers to or from their supervision by using the Add>> and <<Remove buttons.
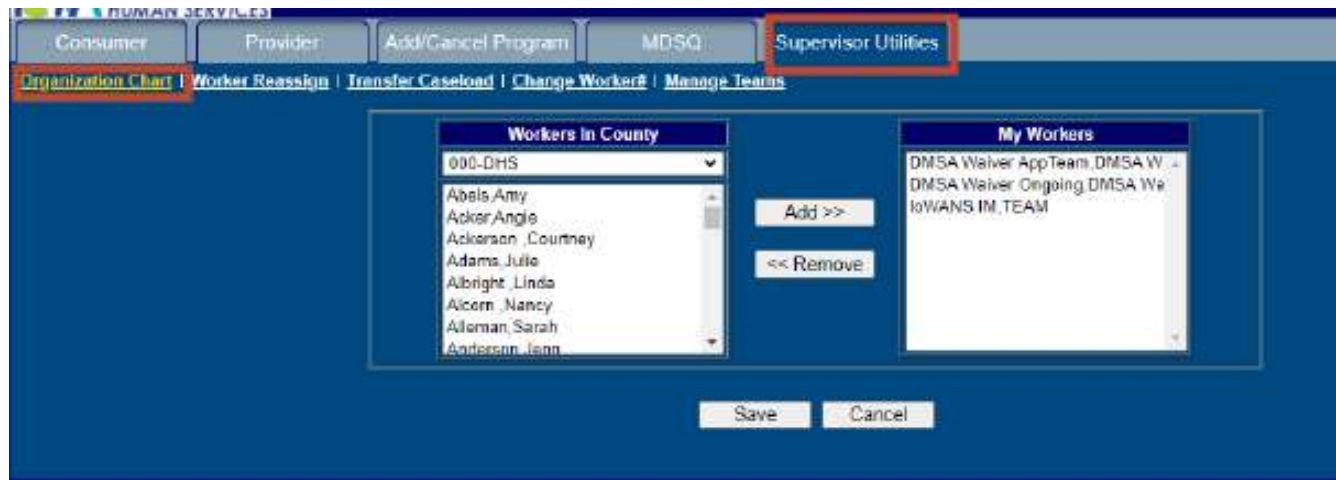
Creating Workers Teams

- A team is created using the same IoWANS Security Request form that is used to get a new worker access to IoWANS.
  - The Last Name field will be displayed as the team name (e.g., if the team is Team 1, Team 1 is the last name).

- Once a team has been built, the Supervisor can add workers to the team.
  1. Under the Supervisor Utilities tab, select "Manage Teams".
  2. Select the team name from the dropdown box.
  3. To add a worker to a team, select the worker's name from under the list under "Teams" and click Add>>.
  4. To remove a worker from a team – select the worker's name from the list under "Team Workers" and click <<Remove.
  5. After all workers have been added or removed click on the Save button to save the changes.
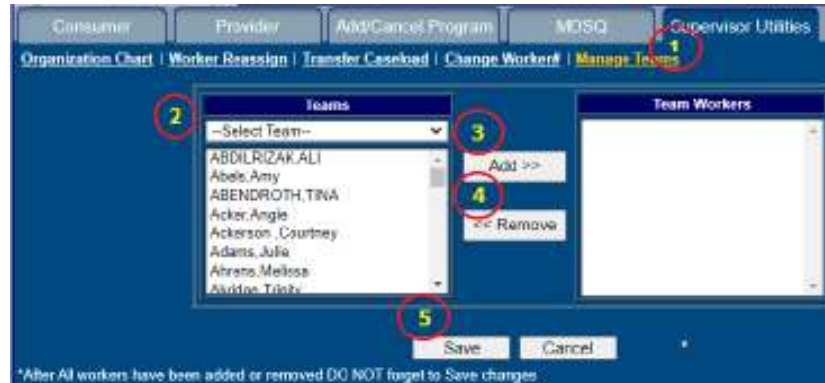
Logging out of IoWANS

- Log out of IoWANS if you will be away from your desk.

- If you are logged into IoWANS but are inactive for 20 minutes, you will automatically be logged out.
  - When you receive the message "The page cannot be found," this is a good indicator that you have been automatically logged out. You must click on the LOGOUT button and log back into IoWANS again before you will be able to continue working.

- To log out, click the x button at the top right corner of your screen. You can also click the Logout subtab link in the upper right corner of your screen.

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Resources

- IoWANS User Guide

- Security Request Form

- QA Form

- HCBS Habilitation LOCUS/CALOCUS Process

- Please contact the IoWANS Help Desk for any questions regarding IoWANS functionality and/or access:
  - IoWANSHelpDesk@dhs.state.ia.us

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