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STATE OF IOWA DEPARTMENT OF

# Health <sup>AND</sup> Human

SERVICES

## Service Planning

January 2023

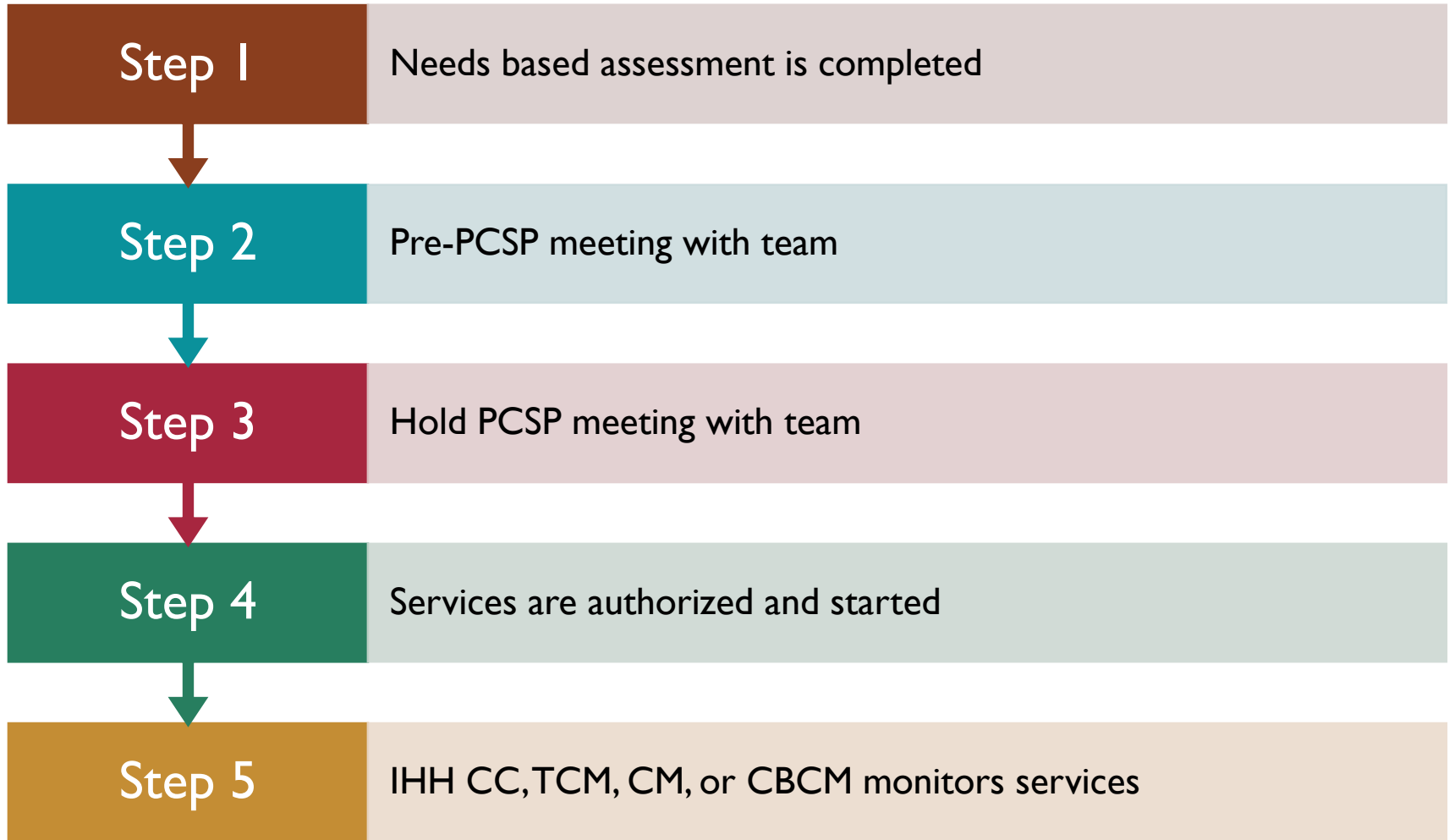
# Agenda

1. Frequency of service planning
2. Service planning process
3. Questions

# Service Plan Completion

- Initial Person-Centered Service Plan (PCSP) - completed within 30 days of notification by the Agency of level of care or needs-based eligibility approval
- Annual Person-Centered Service Plan – completed at least every 12 months
- Addendum to Person Centered Service Plan – completed when there is significant change in the member’s circumstance or needs; or at the request of the member

# Service Plan Process



# Service Plan Process

**Step 1:**  
**A needs-based  
assessment is  
completed**

- Each member will have a needs-based assessment completed when they are assigned a Waiver slot. A needs-based assessment is completed annually prior to the completion of the member's PCSP.
- A needs-based assessment identifies the member's areas of need, and a service plan will be developed based on this.

# Service Plan Process

## Step 2:

A Pre-PCSP meeting  
is held with the  
member.

- IHH CC, TCM, CM, or CBCM will schedule with the member. The member can have others attend if they choose.
- Additional assessments may be completed by the IHH CC, TCM, CM, or CBCM during this meeting
- Items the IHH CC, TCM, CM, or CBCM will discuss with the member:
  - Goals
  - Service providers - The IHH CC, TCM, CM, or CBCM will educate the member on services and providers that are available.
  - Current and potential restrictions
  - Service changes
  - Date, time, location, and participants of the PCSP meeting

# Service Plan Process

## Step 3: Hold PCSP

- Referencing the needs-based assessment, the member, IHH CC, TCM, CM, or CBCM, and other team members will develop/modify the PCSP
  
- When completing the PCSP the following should be included:
  - Member preferences and goals including those related to community participation, employment, income and savings, health care and wellness, education and others
  - Services and supports including Paid and Unpaid, who provides them, and whether an individual chooses to self-direct services
  - Member strengths
  - Risk assessment
  - Emergency back-up support
  - Members of the crisis response team
  - A back-up plan for service delivery of authorized services
  
- Prior to the end of the PCSP meeting, the IHH CC, TCM, CM, or CBCM will assure that all agree to the PCSP that was developed during the meeting and required signatures will be gathered.

# Service Plan Process

## Step 4: Services are authorized and started

- Upon completion of the PCSP, the IHH CC, TCM, CM, or CBCM will request services be authorized as discussed during the meeting and as noted in the PCSP.
- After approval of the authorizations, the IHH CC, TCM, CM, or CBCM should ensure the member and the members of the IDT receive a copy of the approved authorization(s).



# Service Plan Process

## Step 5 : IHH CC, TCM, CM, or CBCM monitors services

- The IHH CC, TCM, CM, or CBCM is responsible to confirm member services are being provided as authorized and needs are being met.
- Upon new service need, the IHH CC, TCM, CM, or CBCM will outreach to the member to determine if the new services started within 5 days of the PCSP start date
- The IHH CC, TCM, CM, or CBCM will monitor the member's status and progress of goals as noted in the PCSP at least monthly and adjust services as needed or requested by the member

# Questions