

CROSSWALK

11-12 Indicators Cross-walked to 12-13

Please Note: "ID/RD has replaced MR/RD" in all Indicators		
Administrative Issues		
11-12	12-13	
A1-01	A1-01	
A1-02	A1-02	
A1-03	A1-03	
A1-04	A1-04	
A1-05	A1-05*	Service Coordination Meets Minimum Requirements Only
A1-05	A1-06*	Early Intervention Meets Minimum Requirements Only
A1-06	A1-07*	Residential Staff Meets Minimum Requirements
A1-06	A1-08*	Day Services Staff Meets Minimum Requirements Only
New	A1-09	The Board / Provider employs/ contracts Respite/ Home Support who meet the minimum requirements for the position
A1-07	A1-10	Service Coordination staff receive training as required
A1-07	A1-11	Early Intervention staff receive training as required
A1-08	A1-12	Residential staff receive training as required
A1-08	A1-13	Day Services staff receive training as required
New	A1-14	Respite/ Home Supports staff/ contractors receive training as required
A1-09	A1-15	
A1-10	A1-16	
A1-11	A1-17	
A1-12	A1-18	
A1-13	A1-19	
A1-14	A1-20	
A1-15	A1-21	
A1-16	A1-22	
A1-17	A1-23	Added to Guidance: and all systems (SPM and CDSS) are updated
A1-18	A1-24	
A1-19	A1-25	
A1-20	A1-26	
	Special Note to Providers	The Initial Draft of Indicators A1-10 – A1-14 reflected 12 hours of Annual Training. This was incorrect. The indicators were changed back to 10 hours
	*	A1-05 -A1-08 were split into 8 separate Indicators A1-05- 08; A1-10-13

11-12	12-13	Fiscal Issues
A2-01	A2-01	
A2-02	A2-02	
A2-03	A2-03	

General Agency			
Service Coordination Support Plan Non-Waiver Indicators			Potential Recoup / or notes
** Please note all G1's and G2's were also integrated into all Waiver Indicators			
G1-01			R
G1-02			
G1-03			
G1-04			
G1-05			
G1-06			
G1-06			
Service Coordination			
G2-01W			
G2-02W			
G2-03			
G2-04			
G2-05			
G2-06			
G2-07			
G2-08			

Employment / Day Services			
G3-01	G3-01		
G3-02	G3-02	Observation – Only those admitted within 30 days of review	
G3-03	G3-03		
G3-04	G3-04		
G3-05	G3-05		
G3-06	G3-06	<p>New Guidance:</p> <ul style="list-style-type: none"> (a) If more than one service is authorized, the plan must include a Section II page for each service authorized (b) If 2 units per day are received, the plan must include interventions and goals/objectives for both the 1st and the 2nd unit (c) Medications taken by the consumer during day services must be listed an any assistance in medicated must be documented (self medicate or assisted medication) 	
G3-07	G3-07		
G3-08	G3-08		
G3-09	G3-09		
G3-10	G3-10	<p><i>Removed the 1st bullet point “interventions in the plan must support the provisions of the Day Service as defined in the Standards” This is measured in G3-09</i></p> <p>Observation:</p>	
G3-11	G3-11		
G3-12	G3-12	Added to Guidance : If no progress is made over the previous month’s percentage, a comment is required on the Monthly Data Recording Sheet detailing the changes to the intervention or methods, or an explanation for the lack of progress and justification for continuing with the intervention and methods unchanged	
G3-13	G3-13	Added to Guidance: Amendments must be made using the “Employment/Day Services Amendment to Plan of Service”	

Employment - Individual Placement

Employment - Individual Placement			
G4-01	G4-01	Added to Guidance: NOTE: Review for those enrolled or re-enrolled during the review period	
G4-02	G4-02	Added to Guidance : <ul style="list-style-type: none"> • If using a plan of employment other than The Individual Plan of Supported Employment (IPSE) the plan must contain all the information that is recorded on an IPSE NOTE: Review for those enrolled and re-enrolled during the review period	
G4-03	G4-03		
G4-04	G4-04	Added to Guidance: <ul style="list-style-type: none"> • N/A for participants who are not employed during the review period 	
G4-05	G4-05		
G4-06	G4-06		

Individual Rehabilitation Supports for HASCI Only

"The participant" verbiage was removed from all G5 Indicators and added to the Guidance

G5-01	G5-01	Added to Guidance: "Days" added to statement- When RS were not received for 45 consecutive <u>days</u> , there must be a new MNS signed prior to reinstatement of RS.	
G5-02	G5-02	Indicator changed to RS Record documents a valid comprehensive assessment of needs and strengths to guide development or update of an <u>IPOC</u> ; <i>Previously said Support Plan</i>	
G5-03	G5-03		
G5-04	G5-04	Indicator Changed: Review participant's RS Record to confirm presence of a 90 Day Progress Review of the IPOC conducted <u>within 90 calendar days</u> <i>Previously said conducted at least 90 calendar days from the signature date of the initial IPOC</i>	
G5-05	G5-05		
G5-06	G5-06		
G5-07	G5-07		

Residential Services

G6-01			
G6-02		Added to Guidance: Events that may trigger When Interventions yields 100% accuracy the first month	
G6-03W			
G6-04	G6-04	Added to Guidance Miscalculations of data, i.e. incorrect computations of percentages should be corrected during monitoring and will be cited if they affect the outcome of the training (result in no amendments to the plan when amendment should have occurred).	
G6-05	G6-05	Added to Guidance: <u>Note:</u> Monitoring of all Interventions not just skills training / all components	
G6-06			
G6-07			
G6-08			
G6-09			
G6-10			
G6-11			

Health & Behavior Support Services

G7-01W			
G7-02			
G7-03			
G7-04			
G7-05			
G7-06			
G7-07			
G7-08			

HASCI Waiver

**** All G8 Indicators and Guidance have been rewritten and the G1-& G2 Indicators have been incorporated within the Indicators**

11-12	12-13		
G1-01	G8-01R	The Plan is developed by the Service Coordinator within 365 days	R
G1-02	G8-02	Needs in the Plan are justified by formal or informal assessment information in the record	
G8-01 R	G8-03R	Waiver services correctly documented in Support Plan	R
G1-03	G8-04	Services/ Interventions are appropriate to meet assessed needs	
G1-04	G8-05	The Plan identifies appropriate funding sources for services/interventions	
G1-05	G8-06	The Plan is amended / updated as needed	
G2-01W	G8-07W	Contact occurs as required: a) Face-to-face contacts occur every 6 months b) Every other month (bi-monthly), at least one contact (as defined by SC Standards) is made	
G1-06	G8-08	The Plan is reviewed at least every 6 months.	
G2-03	G8-09	A valid Service Agreement is present and signed as appropriate	
G2-02W	G8-10W	If determined eligible for DDSN services after 9/2001, an eligibility correspondence from the CAT is on file	
G2-05	G8-11	The person/legal guardian (if applicable) will receive information on abuse and neglect annually	
G2-04	G8-12	Upon notification of an identified health care need, the Service Coordinator has provided information for, offered choice of and monitored a person's access to health care services/providers (inclusive of primary health care provider / physician) when health care needs are identified	
G8-10	G8-13	Acknowledgement of Choice and Appeal Rights form completed prior to Waiver enrollment and annually	
G8-11	G8-14	Acknowledgement of Rights & Responsibilities form completed prior to Waiver enrollment	
G8-02	G8-15	Freedom of Choice documented prior to Waiver enrollment	
G8-03	G8-16	Level of Care (LOC) initial certification properly completed within 30 days prior to or on date of Waiver enrollment New in Guidance: For participant <u>initially enrolled or re-enrolled</u> in HASCI Waiver in review period, review NF Level of Care or ICF-ID Level of Care initial determination to verify it was completed by the appropriate entity within 30 days prior to or on the date of enrollment.	
G8-04R	G8-17R	Level of Care (LOC) re-certification properly completed within 365 days after previous certification Added to Guidance: The date the Level of Care re-evaluation "staffing" was completed is effective date	R
G8-05	G8-18	Current Level of Care (LOC) determination supported by appropriate information and assessment New: Review most recent LOC determination in review period and verify it is consistent with corresponding SCDHHS Form 1718 for NF Level of Care or with assessments/information cited for	

		ICF-ID Level of Care	
G8-06	G8-19	Risks associated with refusing a Waiver service identified	
G8-09 W	G8-20W	Choice of provider offered for each new Waiver service	
G8-12	G8-21	Waiver services provided consistent with service definitions	
G8-17	G8-22	Waiver services properly authorized prior to provision of services	
G8-18W	G8-23W	Index provided and followed for Waiver documentation in participant record	
G8-13 R	G8-24 R	Medicaid Waiver Nursing Services authorized consistent with Physician' s Order and SCDDSN Centralized Review of Nursing Services	R
G8-14 R	G8-25 R	Documentation obtained from VR Agency that Prevocational Services and/or Supported Employment Services could not be provided	R
G8-15	G8-26	Minimum of one Waiver service received during 30 days in a calendar month	
G8-16W	G8-27 W	Needs of participant outside scope of Waiver services identified and addressed	
G8-19	G8-28	Ongoing Waiver services monitored within 2 weeks following start date of new service or new provider	
G8-20	G8-29	One-time Waiver services monitored within 2 weeks following receipt	
G8-21	G8-30	Environmental Modifications monitored on-site within 2 weeks following completion	
G8-22	G8-31	Private Vehicle Modifications monitored on-site within 2 weeks following completion	
G8-23	G8-32	One-time item of Medical Supplies, Equipment, and Assistive Technology costing \$1500 or more monitored on-site within 2 weeks following receipt	
G8-24	G8-33	Waiver Tracking System (WTS) consistent with Support Plan and authorized services	
G8-25	G8-34	Written notification made for denial, reduction, suspension, or termination of a Waiver service and information for reconsideration and appeal provided	
G8-08	G8-35	Waiver termination properly completed	
G8-26	G8-36	Provision of Board-Billed Waiver services properly documented and billed	
G8-27	G8-37	Unavailability of Waiver service provider documented and actively addressed	
G8-28	G8-38	Nurse supervision of Attendant Care/ Personal Assistance Services monitored	
G8-29	G8-39	Copies of Daily Logs for Self-Directed Attendant Care received and service monitored	
	Note to Providers	Medicaid Paid Claims verbiage has been replaced by HASCI Waiver Budget (G8-22, G8-26, G8-33)	
Deleted			
G8-07	Deleted	G8-07 is redundant with G8-03, G8-04, & G8-05	
G2-06	Deleted	Not Incorporated into G8's: It does not apply to HASCI Waiver Participants	
G2-07	Deleted	Not Incorporated into G8's: It does not apply to HASCI Waiver Participants	
G2-08	Deleted	Not Incorporated into G8's: It does not apply to HASCI Waiver Participants	

ID/RD Waiver**			
<i>G1- & G2 Indicators have been incorporated within the G9 Indicators</i>			
11-12	12-13		
G1-01 R	G9-01 R	The Plan is developed by the Service Coordinator within 365 days	
G9-02 R	G9-02 R	The plan includes ID/RD Waiver service(s) name, frequency of the service(s), amount of service(s), duration of service(s) and valid provider type for service(s)	R
G9-12 W	G9-03 W	Service needs outside the scope of Waiver services are identified in Plans and addressed	
G1-02	G9-04	Needs in the Plan are justified by formal or informal assessment information in the record	
G9-01	G9-05	Assessment(s) justify the need for all ID/RD Waiver services included on the plan New in Guidance: Review the Plan, DDSN Service Coordination Annual Assessment, service assessments (e.g. Respite Assessment , PC/Attendant Care Assessment, etc.)	
G1-03	G9-06	Services/ Interventions are appropriate to meet assessed needs	
G1-04	G9-07	The Plan identifies appropriate funding sources for services/interventions	
G1-05	G9-08	The Plan is amended / updated as needed	
G2-01W	G9-09 W	Contact occurs as required: a) Face-to-face contacts occur every 6 months b) Every other month (bi-monthly), at least one contact (as defined by SC Standards) is made	
G1-06	G9-10	The Plan is reviewed at least every 6 months	
G2-03	G9-11	A valid Service Agreement is present and signed as appropriate	
G2-02 W	G9-12 W	If determined eligible for DDSN services after 9/2001, an eligibility correspondence from the CAT is on file	
G2-05	G9-13	The person/legal guardian (if applicable) will receive information on abuse and neglect annually	
G2-06	G9-14	Beginning 3/1/2011, at the time of annual planning, all children enrolled in the ID/RD or CS Waiver receiving CPCA services must have a newly completed physician's order (Physician's Information Form – MSP Form 1), assessment (CPCA Assessment – MSP Form 2), and authorization (MSP – Form 3)	
G2-07	G9-15	If a child is assessed to need over 10 hours of Children's PCA services per week, DDSN prior authorization is obtained	

G2-08	G9-16	If a child receives CPCA services, the Service Needs Requirement and, unless otherwise specified, a Functional deficit exists (check only for those receiving 10 hours or less of CPCA services)	
G2-04	G9-17	Upon notification of an identified health care need, the Service Coordinator has provided information for, offered choice of and monitored a person's access to health care services/providers (inclusive of primary health care provider / physician) when health care needs are identified	
G9-07W	G9-18W	Documentation is present verifying that a choice of provider was offered to the participant/ family for each new ID/RD Waiver service	
G9-03	G9-19	The Freedom of Choice Form is Present	
G9-04 R	G9-20 R	The most current Level of Care Determination is dated within 365 days of the last Level of Care determination and is completed by the appropriate entity	R
G9-05	G9-21	The current Level of Care is supported by the assessments and documents indicated on the Level of Care determination	
G9-06 R	G9-22 R	Review the most current LOC determination to ensure all sections of the LOC Determination Form are complete with appropriate responses. Note: Ensure that all areas are complete or checked. Source: ID/RD Waiver Manual	R
G9-08	G9-23	Acknowledgment of Rights and Responsibilities (ID / RD Form 2) is completed annually	
G9-09	G9-24	ID/RD Waiver services are provided in accordance with the service definitions found in the Waiver document	
G09-10 R	G9-25 R	If Nursing Services are provided, an order from the physician is present and is consistent with the authorization form (ID/RD Form A-12)	R
G9-11	G9-26	ID/RD Waiver services are received at least every 30 calendar days	
G9-13	G9-27	Authorization forms are properly completed for services as required, prior to service provision	
G9-14	G9-28	Service notes reflect monitorship within the first month of the start of an ongoing ID/RD Waiver service or provider change	
G9-15	G9-29	Service notes reflect monitorship within the second month from the start of an ongoing ID/RD Waiver service or provider change	

G9-16 W	G9-30 W	Service notes reflect on-site monitorship of Adult Day Health, Adult Attendant Care, Personal Care, and/or Nursing, while service is being provided. This monitorship must occur within 1 month of the start of service (within 2 weeks of start of Adult Attendant Care Services) or provider change and once yearly unless otherwise noted by supervisor exception and documented approval	
G9-17	G9-31	Service notes reflect monitorship with the recipient within 2 weeks of a one-time service and reflect the service was received	
G9-18	G9-32	Services notes reflect an on-site monitorship of environmental modifications within 2 weeks of completion	
G9-19	G9-33	Service notes reflect an on-site monitorship of private vehicle modifications within 2 weeks of completion	
G9-20	G9-34	Service notes reflect an on-site monitorship, if hearing aid is provided, within 2 weeks of the participant receiving the aide(s)	
G9-21	G9-35	For any one-time assistive technology item costing \$2500.00 or more, the Service Coordinator has made an on-site visit to observe the item	
G9-22	G9-36	The Participant/Legal Guardian (if applicable) was notified in writing regarding any denial, termination, reduction, or suspension of ID/RD Waiver services with accompanying reconsideration/appeals information	

PDD Program No Changes			
G10-01			
G10-02			
G10-03			
G10-04			R
G10-05W			
G10-06			
G10-07			
G10-08			
G10-09			
G10-10			
G10-11			
G10-12			
G10-13			
G10-14			
G10-15			
G10-16			
G10-17			
G10-18W			
G10-19			R
G10-20			R
G10-21			
G10-22			
G10-23			
G10-24			
G10-25			
G10-26			
G10-27W			
EIBI Providers Only			
G10-28			
G10-29			
G10-30			
G10-31			
G10-32			
G10-33			

Community Supports Waiver			
<i>G1-& G2 Indicators have been incorporated within the G11 Indicators</i>			
11-12	12-13		
G1-01 R	G11-01 R	The Plan is developed by the Service Coordinator within 365 days	R
G11-02 R	G11-02 R	The Plan includes COMMUNITY SUPPORTS Waiver service/s name, frequency of service/s, amount of service/s, duration of service/s, and valid provider type for service/s	R
G11-11	G11-03	Service needs outside the scope of Waiver services are identified in Plans and addressed	
G1-02	G11-04	Needs in the Plan are justified by formal or informal assessment information in the record	
G11-01	G11-05	Assessment(s) justify the need for all COMMUNITY SUPPORTS Waiver services included on the plan	
G1-03	G11-06	Services/ Interventions are appropriate to meet assessed needs	
G1-04	G11-07	The Plan identifies appropriate funding sources for services/interventions	
G1-05	G11-08	The Plan is amended / updated as needed	
G2-01 W	G11-09 W	Contact occurs as required: a) Face-to-face contacts occur every 6 months b) Every other month (bi-monthly), at least one contact (as defined by SC Standards) is made	
G1-06	G11-10	The Plan is reviewed at least every 6 months	
G2-03	G11-11	A valid Service Agreement is present and signed as appropriate	
G2-02 W	G11-12W	If determined eligible for DDSN services after 9/2001, an eligibility correspondence from the CAT is on file	
G2-05	G11-13	The person/legal guardian (if applicable) will receive information on abuse and neglect annually	
G2-06	G11-14	Beginning 3/1/2011, at the time of annual planning, all children enrolled in the ID/RD or CS Waiver receiving CPCA services must have a newly completed physician's order (Physician's Information Form – MSP Form 1), assessment (CPCA Assessment – MSP Form 2), and authorization (MSP – Form 3)	
G2-07	G11-15	If a child is assessed to need over 10 hours of Children's PCA services per week, DDSN prior authorization is obtained	

G2-08	G11-16	If a child receives CPCA services, the Service Needs Requirement and, unless otherwise specified, a Functional deficit exists (check only for those receiving 10 hours or less of CPCA services)	
G2-04	G11-17	Upon notification of an identified health care need, the Service Coordinator has provided information for, offered choice of and monitored a person's access to health care services/providers (inclusive of primary health care provider / physician) when health care needs are identified	
G11-07	G11-18	Documentation is present verifying that a choice of provider was offered to the person/ family for each new COMMUNITY SUPPORTS Waiver service	
G11-03	G11-19	The Freedom of Choice Form is Present	
G11-04 R	G11-20 R	The most current Level of Care Determination is dated within 365 days of the last Level of Care determination and is completed by the appropriate entity	R
G11-05	G11-21	The current Level of Care is supported by the assessments and documents indicated on the Level of Care determination	
G11-06R	G11-22 R	The Current Level of Care is completed appropriately	R
G11-08	G11-23	Acknowledgment of Rights and Responsibilities (CSW Form 2) is completed annually	
G11-09	G11-24	COMMUNITY SUPPORTS Waiver services are provided in accordance with the service definitions	
G11-10	G11 -25	COMMUNITY SUPPORTS Waiver services are received at least every 30 calendar days	
G11-12	G11-26	Authorization forms are completed for services as required, prior to service provision	
G11-13	G11-27	Service notes reflect monitorship within the first month of the start of an ongoing COMMUNITY SUPPORTS Waiver service or provider change	
G11-14	G11-28	Service notes reflect monitorship within the second month from the start of an ongoing COMMUNITY SUPPORTS Waiver service or provider change	
G11-15	G11-29	Service notes reflect on-site monitorship of In-Home Support services and Personal Care while service is being provided. This monitorship must occur within 1 month of the start of service (within 2 weeks of start of In-Home Support Services) or provider change and once yearly unless otherwise noted by supervisor exception and documented approval	

G11-16	G11-30	Service notes reflect monitorship with the recipient within 2 weeks of a one-time service and reflect the service was received	
G11-17	G11-31	Services notes reflect an on-site monitorship of environmental modifications within 2 weeks of completion	
G11-18	G11-32	Service notes reflect an on-site monitorship of private vehicle modifications within 2 weeks of completion	
G11-19	G11-33	For any one-time assistive technology item costing over \$2500.00, the Service Coordinator has made an on-site visit to observe the item	
G11-20	G11-34	The Person/Legal Guardian (if applicable) was notified in writing regarding any denial, termination, reduction, or suspension of COMMUNITY SUPPORTS Waiver services with accompanying reconsideration/appeals information	

Residential Observation		
RO-01	RO-01	
RO-02	RO-02	
RO-03	RO-03	
RO-04	RO-04	
RO-05	RO-05	
RO-06	RO-06	
RO-07	RO-07	
RO-08	RO-08	
RO-09	RO-09	

Early Intervention			
11-12	12-13	Category	Potential Recoup / or notes
BabyNet Only			
E1-01	E1-01	Child and Family Rights removed	
E1-02	E1-02	Child and Family Rights removed	
E1-03	E1-03		
E1-04	E1-04	Added to Guidance : IFSP must be current within one year, not to exceed 180 days from the last 6 month review, if applicable	R
E1-05	E1-05	Added to Guidance: Ensure the IFSP six-month review was completed within 180 days of the IFSP.	
E1-06	Deleted	Early Childhood Outcomes (ECO) were assessed and documented on the Child Outcome Summary Form (COSF), if applicable, at entry	
E1-07	E1-06	Note: Must have an end date from plan to plan. No exit required if provider did not complete entry.	
E1-08	E1-07	In Guidance “Relevant “sections” In lieu of listing applicable Sections: 5, 5b, 6a,6b & 6c (if applicable)	
E1-09	E1-08	Added to Guidance Note: Must have an end date from plan to plan.	
E1-10	E1-09		
New	E1-10	Indicator: Were all needs that are documented on the child’s IFSP provided within 30 days of identification unless there was a child/parent driven reason why the service wasn’t provided	
E1-11	E1-11		
E1-12	E1-12		
E1-13	E1-13		
E1-14	E1-14	Indicator: Goals -Outcomes are/have been addressed by the Early Interventionist In Guidance: “ Outcomes” replaced Goals	
E1-15	E1-15	Indicator: Goals -Outcomes are/have been addressed by the Early Interventionist In Guidance: “ Outcomes” replaced Goals	
E1-16	Deleted	Goals are adjusted, terminated or added based on ongoing assessment, lack of progress, or parent / professional request	
E1-17	E1-16		
E1-18	E1-17		
E1-19	E1-18		
E1-20	Deleted	Family training activities are appropriate for the child's developmental needs	
E1-21W	E1-19W	Indicator: Entries for Family training visits include how family member parent /caregiver(s) participated in visit In Guidance: Parent added in lieu of family member	
E1-22	E1-20	Indicator: Family Training activities should vary. Activities planned must be based on identified Goals outcomes on the IFSP In Guidance: “ Outcomes” replaced Goals	
E1-23	E1-21	Indicator : Family Training activities correspond to goals outcomes on the IFSP outcome pages In Guidance: “ Outcomes” replaced Goals	
E1-24	E1-22		
E1-25	E1-23		

E1-26	E1-24	Indicator: Entries are clear and are documented within 5 (five) 7 business days of services being rendered In Guidance: 5 business days replaced 7	
E1-27	E1-25		
E1-28	Deleted	Service Note entries reference the appropriate Family Training summary sheet	
E1-29	E1-26		
E1-30	E1-27		
NEW	E1-28	Indicator: BabyTrac is up to date and reflects current services being received, current IFSP date and transition conference date, if applicable	
E1-31	E1-29		
<i>E1-32</i>	<i>E1-30</i>	<i>Months exceeding 2 hours of SC will be noted in report (with exceptions)</i>	<i>Not scored</i>

BabyNet / DDSN			
E2-01	E2-01		
E2-02	E2-02		
E2-03	E2-03		
E2-04	Deleted	Early Childhood Outcomes (ECO) were assessed and documented on the Child Outcome Summary Form (COSF), if applicable, at entry	
E2-05	E2-04		
E2-06 R	E2-05 R	Added to Guidance: IFSP/FSP must be current within one year <i>not to exceed 180 days from the last 6 month review, if applicable</i>	R
E2-07	E2-06		
E2-08	E2-07	Indicator: IFSP/FSP six-month review was completed within 180 days of the IFSP/FSP Added to Guidance: within 180 days of IFSP	
E2-09	E2-08	Indicator: Written Prior Notice and Child and Family Rights was given to the family prior to the six-month review of the IFSP and the annual IFSP Guidance: Child and Family Rights removed	
E2-10	E2-09	Indicator : Written Prior Notice and Child and Family Rights was given to the family prior to a change review of the IFSP Guidance: Child and Family Rights removed	
E2-11	E2-10		
E2-12	E2-11	In Guidance “Relevant “sections In lieu of listing applicable Sections: 5, 5b, 6a,6b & 6c (if applicable)	
E2-13	E2-12	Indicator : Goals Outcomes are based on identified needs and the team's concerns relating to the child's development Guidance: Outcomes replaces Goals and “Relevant “sections” In lieu of listing applicable Sections: 5, 5b, 6a,6b & 6c (if applicable)	
E2-14	E2-13	Indicator: Goals Outcomes are/have been addressed by the Early Interventionist Guidance: Outcomes replaces Goals	
E2-15	Deleted	Goals are adjusted, terminated or added based on ongoing assessment, lack of progress, or parent / professional	
E2-16	E2-14		
E2-17	E2-15		
E2-18	E2-16		
E2-19	E2-17		
E2-20	E2-18		
NEW	E2-19	Indicator: Were all needs that are documented on the child's IFSP provided within 30 days of identification unless there was a child/parent driven reason why the service wasn't provided	
E2-21	E2-20		
E2-22	Deleted	Removed due to duplication of E2-28	
E2-23 W	E2-21W		
E2-24	E2-22		
E2-25	Deleted	Family Training activities are appropriate for the child's developmental needs	
E2-26W	E2-23W	Indicator: Entries for Family training visits include how family member parent /caregiver(s) participated in visit In Guidance: Parent added in lieu of family member	

E2-27	E2-24		
E2-28	E2-25	Indicator : Family Training activities correspond to goals outcomes on the IFSP goals-outcome pages In Guidance : " Outcomes" replaced Goals	
E2-29	E2-26		
E2-30	E2-27		
E2-31	E2-28	Indicator : Entries are clear and are documented within 5 (five) 7 business days of services being rendered In Guidance : 5 (five) business days replaced 7	
E2-32	E2-29		
E2-33	Deleted	Service note entries reference the appropriate Family Training summary sheet	
E2-34	E2-30		
E2-35	E2-31		
NEW	E2-32	Indicator : BabyTrac is up to date and reflects current services being received, current IFSP date and transition conference date, if applicable	
E2-36	E2-33		
<i>E2-37</i>	E2-34	<i>Months exceeding 2 hours of SC will be noted in report (with exceptions)</i>	<i>Not scored</i>

BabyNet / DDSN ID/RD Waiver			
<i>E2-38 – E2-56 Removed</i>			

E2-38	Deleted		
E2-39	Deleted		
E2-40	Deleted		
E2-41	Deleted		
E2-42	Deleted		
E2-43	Deleted		
E2-44	Deleted		
E2-45	Deleted		
E2-46	Deleted		
E2-47	Deleted		
E2-48	Deleted		
E2-49	Deleted		
E2-50	Deleted		
E2-51	Deleted		
E2-52	Deleted		
E2-53	Deleted		
E2-54	Deleted		
E2-55	Deleted		
E2-56	Deleted		

BabyNet / HASCI Waiver			
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E2-57	E2-33		
E2-58	E2-34	R	R
E2-59	E2-35		
E2-60	E2-36		
E2-61	E2-37	R	R
E2-62	E2-38		
E2-63	E2-39		
E2-64	E2-40		
E2-65	E2-41		
E2-66	E2-42		
E2-67W	E2-43W		
E2-68	E2-44		
E2-69	E2-45		
E2-70	E2-46		
E2-71	E2-47		
E2-72	E2-48		
E2-73	E2-49		
E2-74	E2-50		
E2-75	E2-51		
E2-76W	E2-52W		
E2-77	E2-53		
E2-78	E2-54		
E2-79	E2-55		
E2-80	E2-56		
E2-81	E2-57		

E2-82	E2-58		
E2-83	E2-59		
E2-84	E2-60		
BabyNet / Community Supports Waiver Deleted E2-85 through E-103			
E2-85	Deleted		
E2-86	Deleted		R
E2-87	Deleted		
E2-88	Deleted		R
E2-89	Deleted		
E2-90	Deleted		R
E2-91	Deleted		
E2-92	Deleted		
E2-93	Deleted		
E2-94	Deleted		
E2-95	Deleted		
E2-96	Deleted		
E2-97	Deleted		
E2-98	Deleted		
E2-99	Deleted		
E2-100	Deleted		
E2-101	Deleted		
E2-102	Deleted		
E2-103	Deleted		
DDSN Only			
E3-01	E3-01		
E3-02	E3-02		
E3-03	E3-03		
E3-04	E3-04		
E3-05	E3-05		R
E3-06	E3-06		
E3-07	E3-07		
E3-08	E3-08		
E3-09	E3-09		
E3-10	E3-10	In Guidance: “ Relevant “sections In lieu of listing applicable Sections 6a,6b & 6c (if applicable)	
E3-11	E3-11	Indicator : Goals Outcomes are based on identified needs and the team's concerns relating to the child's development Guidance: Outcomes replaces Goals and “ Relevant “sections” In lieu of listing applicable Sections: 6a,6b & 6c (if applicable)	
E3-12	E3-12	Indicator: Goals Outcomes are/have been addressed by the Early Interventionist Guidance: Outcomes replaces Goals	
E3-13	Deleted	Goals are adjusted, terminated or added based on ongoing assessment, lack of progress, or parent/professional request	
E3-14	E3-13		
E3-15	E3-14		
E3-16	E3-15		
E3-17W	E3-16W		
E3-18	E3-17		

E3-19	Deleted	Family Training activities are appropriate for the child's developmental needs	
E3-20W	E3-18W	Indicator: Entries for Family training visits include how family member parent /caregiver(s) participated in visit In Guidance: Parent added in lieu of family member	
E3-21	E3-19		
E3-22	E3-20	Indicator : Family Training activities correspond to goals outcomes on the FSP outcome pages In Guidance: " Outcomes" replaced Goals	
E3-23	E3-21		
E3-24	E3-22		
E3-25	E3-23		
E3-26	E3-24	Indicator: Entries are clear and are documented within 5 (five) 7 business days of services being rendered In Guidance: 5 (five) business days replaced 7	
E3-27W	E3-25W		
E3-28W	Deleted	Service note entries reference the appropriate Family Training summary sheet	
E3-29	E3-26		
E3-30	E3-27		
E3-31	E3-28		
E3-32	E3-29	Months exceeding 2 hours of SC will be noted in report (with exceptions)	Not scored

**DDSN Only ID/RD Waiver
(E3-33 through E3-51 Deleted)**

E3-33	Deleted		
E3-34	Deleted		
E3-35	Deleted		
E3-36	Deleted		
E3-37	Deleted		
E3-38	Deleted		
E3-39W	Deleted		
E3-40	Deleted		
E3-41	Deleted		
E3-42	Deleted		
E3-43	Deleted		
E3-44	Deleted		
E3-45	Deleted		
E3-46	Deleted		
E3-47	Deleted		
E3-48	Deleted		
E3-49	Deleted		
E3-50	Deleted		
E3-51	Deleted		

DDSN Only HASCI Waiver

E3-52	E3-30		
E3-53	E3-31	R	R
E3-54	E3-32		
E3-55	E3-33		
E3-56	E3-34	R	R
E3-57	E3-35		
E3-58	E3-36		
E3-59	E3-37		
E3-60	E3-38		
E3-61W	E3-39W		
E3-62	E3-40		
E3-63	E3-41		
E3-64	E3-42		
E3-65	E3-43		
E3-66	E3-44		
E3-67	E3-45		
E3-68	E3-46		
E3-69W	E3-47W		
E3-70	E3-48		
E3-71W	E3-49		
E3-72	E3-50		
E3-73	E3-51		
E3-74	E3-52		
E3-75	E3-53		
E3-76	E3-54		

E3-77	E3-55		
E3-78	E3-56		
DDSN Only Community Supports Waiver (Deleted E3-79 through E3-97)			
E3-79	Deleted		
E3-80	Deleted		
E3-81	Deleted		
E3-82	Deleted		
E3-83	Deleted		
E3-84	Deleted		
E3-85	Deleted		
E3-86	Deleted		
E3-87	Deleted		
E3-88	Deleted		
E3-89	Deleted		
E3-90	Deleted		
E3-91	Deleted		
E3-92	Deleted		
E3-93	Deleted		
E3-94	Deleted		
E3-95	Deleted		
E3-96	Deleted		
E3-97	Deleted		