

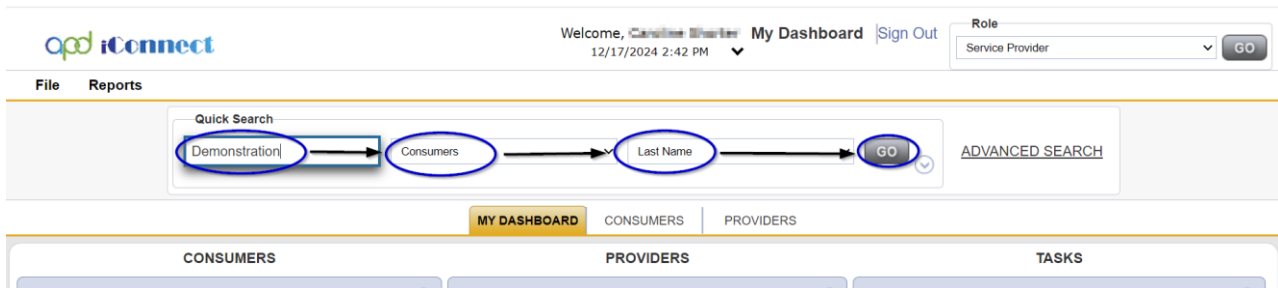
## Documenting, Environmental Accessibility Adaptations (EAA), Durable Medical Equipment (DME), Consumable Medical Supplies (CMS), Personal Emergency Response System (PERS) and Adult Dental Services as Notes

Service Logs (sometimes referred to as invoices), Prescriptions, Treatment Plans, Records, and any other documentation for billing must be included in iConnect as a note.

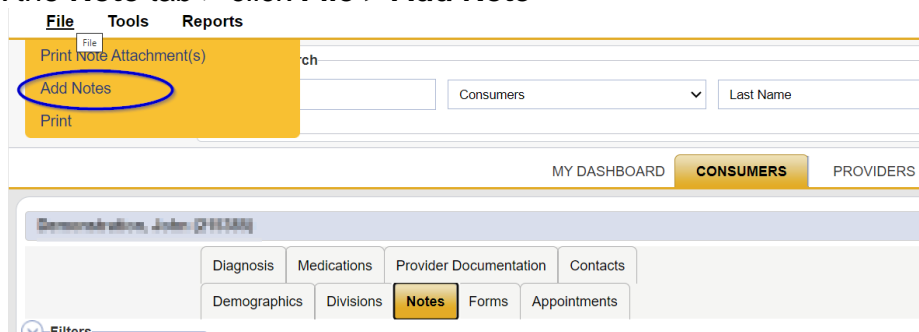
Please refer to the [Developmental Disabilities Individual Budgeting Waiver Services Coverage and Limitations Handbook](#) for specific documentation requirements.

**NEW!** Please notice that there is a new note subtype identified below.

1. To begin, log into iConnect and set Role = Service Provider or Service Provider Worker. Click **Go**.
2. Navigate to the Consumer's Record.
  - a. Type the consumer's last name in the Quick Search text field (1<sup>st</sup> field on the left).
  - b. Ensure that the second field contains "consumers," the third field contains last name, and click "Go".



3. Click the **Note** tab > click **File > Add Note**



4. The Note Details page is displayed. Update the following fields:
  - a. Program/Provider = Name of your Agency

***If the Program/Provider is not available – contact the Waiver Support Coordinator (WSC) to have a Provider Selection Record for your organization added to the consumer’s record.***

- b. Update the Note Type and Sub-type in accordance with the instructions below. Notice that instructions are separated by provider type.

**For Dental and EAA Providers**

- c. Note Type = Specialty Assessment/Treatment Plans
  - d. Note Subtype = Dental or Environmental Accessibility Adaptation

Notes Details	
Division *	APD ▾
Note By *	Sharon, Caroline ▾
Note Date *	01/31/2023 <input type="text"/>
Program/Provider *	A Test Provider ▾ <a href="#">Details</a>
Note Type *	Specialty Assessments/Treatment Plans ▾*
Note Sub-Type	Environmental Accessibility Adaptation ▾

**For CMS, DME, and Personal Emergency Response Providers**

- c. Note Type = Service Provider Supporting Documentation
  - d. **NEW!** Note Subtype = Consumable Medical Supplies or Emergency Response System or Durable Medical Equipment

Notes Details	
Division *	APD ▾
Note By *	Sharon, Caroline ▾
Note Date *	12/17/2024 <input type="text"/>
Program/Provider *	Test Provider ▾ <a href="#">Details</a>
Note Type *	Service Provider Supporting Documentation ▾*
Note Sub-Type	Consumable Medical Supplies ▾
Description	Title of Document required for Billing - For Example: Invoice for CMS

**For CMS, Dental, DME, EAA , and Personal Emergency Response Providers**

e. Description = The name of the documentation required for billing

*Ex. Dental Treatment Plan*

Notes Details	
Division *	APD
Note By *	Whelan, Caroline
Note Date *	12/17/2024
Program/Provider *	Test Provider <a href="#">Details</a>
Note Type *	Speciality Assessments/Treatment Plans
Note Sub-Type	Dental
Description	Title of Document required for Billing - For Example Dental Treatment Plan

*Ex. EAA*

Notes Details	
Division *	APD
Note By *	Whelan, Caroline
Note Date *	12/17/2024
Program/Provider *	Test Provider <a href="#">Details</a>
Note Type *	Speciality Assessments/Treatment Plans
Note Sub-Type	Environmental Accessibility Adaptation
Description	Title of Document required for Billing - For Example: Invoice for EAA

*Ex. CMS*

Notes Details	
Division *	APD
Note By *	Whelan, Caroline
Note Date *	12/17/2024
Program/Provider *	Test Provider <a href="#">Details</a>
Note Type *	Service Provider Supporting Documentation
Note Sub-Type	Consumable Medical Supplies
Description	Title of Document required for Billing - For Example: Invoice for CMS

Documenting, Environmental Accessibility Adaptations (EAA), Durable Medical Equipment (DME), Consumable Medical Supplies (CMS), Personal Emergency Response System (PERS) and Adult Dental Services as Notes

*Ex. DME*

Notes Details	
Division *	APD
Note By *	Blonnie, Caroline
Note Date *	12/17/2024
Program/Provider *	Test Provider <a href="#">Details</a>
Note Type *	Service Provider Supporting Documentation
Note Sub-Type	Durable Medical Equipment
Description	Title of Document required for Billing - For Example: Invoice for DME

*Ex. Personal Emergency Response System*

Notes Details	
Division *	APD
Note By *	Blonnie, Caroline
Note Date *	12/17/2024
Program/Provider *	Test Provider <a href="#">Details</a>
Note Type *	Service Provider Supporting Documentation
Note Sub-Type	Emergency Response System
Description	Title of Document required for Billing - Emergency Response

- f. Status = Complete
- g. Attach documents to this Note.
  - i. Use the “Add Attachment” link provided to search for the documents on your desktop.
  - ii. File Upload Window opens, click the Choose File button, and locate the document on your computer’s local files.
    - 1. Select the File and click the Open button.
    - 2. The document is listed in the File field.
    - 3. OPTIONAL: Use the File Name and Description fields to update the name and description of the files, if needed
      - a. File Name = Select Create New & type the new name of the file.
        - i. *Ensure that you include the file extension at the end of the file name*
          - 1. Ex. *MayInvoice.pdf*
          - 2. Ex. *MayInvoice.docx*
      - b. Description = Type in a description in the text

Documenting, Environmental Accessibility Adaptations (EAA), Durable Medical Equipment (DME), Consumable Medical Supplies (CMS), Personal Emergency Response System (PERS) and Adult Dental Services as Notes

box.

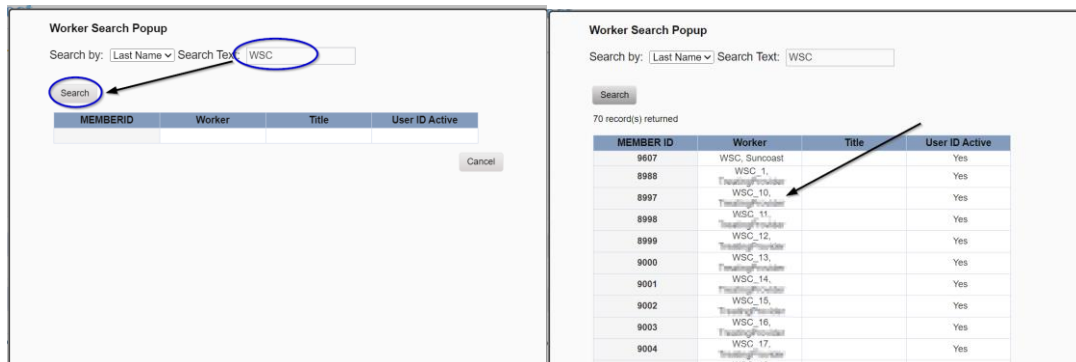
- c. Click Upload.
- d. The File will be listed as a Document.

**IMPORTANT: When attaching a file in iConnect, please do not include any punctuation or special characters in the name of the file. This will ensure the file can be opened and viewed by other iConnect users.**

h. Note Recipient = Waiver Support Coordinator



- i. Use the Lookup button to open the worker search popup.
- ii. Type the WSC’s last name and click the search button.
  - 1. A list of people with the last name will appear in the grid below.
  - 2. If multiple names appear, the Control Find (Ctrl. + F) keyboard shortcut can be used to find the WSC.
- iii. Double-click on the WSC’s name to include the WSC as a Note Recipient. In this example, we searched for individuals with the last name equal to WSC.
  - 1. The WSC’s name will now appear in the last field as a Note Recipient.
    - a. If an error was made, delete the selection, and add a new note recipient.



MEMBER ID	Worker	Title	User ID Active
9907	WSC, Suncoast		Yes
9988	WSC_1	Training Provider	Yes
9997	WSC_10	Training Provider	Yes
9998	WSC_11	Training Provider	Yes
9999	WSC_12	Training Provider	Yes
9000	WSC_13	Training Provider	Yes
9001	WSC_14	Training Provider	Yes
9002	WSC_15	Training Provider	Yes
9003	WSC_16	Training Provider	Yes
9004	WSC_17	Training Provider	Yes
	WSC_18		

i. **File > Save and Close Note**



# Documenting, Environmental Accessibility Adaptations (EAA), Durable Medical Equipment (DME), Consumable Medical Supplies (CMS), Personal Emergency Response System (PERS) and Adult Dental Services as Notes

**Notes Details**

Division *	APD ▾
Note By *	<span style="background-color: black; color: black;">[REDACTED]</span> ▾
Note Date *	08/28/2024 <input type="text"/>
Program/Provider *	Provider - 19248 ▾ <a href="#">Details</a>
Note Type *	Service Provider Supporting Documentation ▾*
Note Sub-Type	Consumable Medial Supplies ▾
Description	Title of Document Required for Billing - Invoice of CMS
Note	<div style="border: 1px solid #ccc; padding: 5px; min-height: 100px;"> <div style="border-bottom: 1px solid #ccc; padding-bottom: 5px;"> <span style="font-weight: bold;">B</span> <span style="font-style: italic;">I</span> <span style="font-variant: small-caps;">U</span> 10pt ▾ <span style="font-weight: bold;">A</span> ▾         </div> <div style="height: 80px;"></div> </div>
Status *	Complete ▾
Date Completed	08/28/2024

**Attachments**

[Add Attachment](#)

**Attachments Grid**

Document	Description	Category	Action
<a href="#">Supply Invoice May 2024.pdf</a>			<a href="#">Remove</a>

**Note Recipients**

Add Note Recipient:

**Note Recipients Grid**

Name	Date Sent	Date Read	Status	Date Signed	
WSC_1_TreatingProvider	8/28/2024		Unread		<a href="#">Remove</a>