

Important IRIS Plan Process Clarification

(December 1, 2010)

Recently, the IRIS Program has received complaints about IRIS plan approval or change process. The Department of Health Services (DHS) has reviewed the issue and has made changes with the IRIS Consultant Agency to ensure that communication and processes are clearer. DHS apologizes for the misunderstanding that occurred related to reviewing and processing your IRIS Supports and Services Plan.

This memo provides clarification on what you can expect to happen with plan approval or plan changes.

IRIS Plan Approval

Once you and your IRIS Consultant identify your long-term care related goals and how to most cost effectively meet your needs, your IRIS Consultant places the information onto your IRIS plan worksheet. Staff at the IRIS Consultant Agency reviews your IRIS plan worksheet to ensure that:

1. All information listed is complete and accurate;
2. The goods and services listed support your long term care needs and goals;
3. The goods and services listed are allowable (meet state and federal guidelines); and
4. The plan is within your Individual Budget Allocation.

The IRIS Consultant Agency approves your plan after it verifies that the goods and services you selected meet all of the items noted above. If a good or service does *not* meet all requirements on the above list then it cannot be added to your plan. Instead, you will receive a written notice that explains why the good or service in question cannot be added to your plan. If other services on your plan meet all requirements, then these will be approved.

Adding Goods or Services to Your IRIS Plan

Please remember that before a new IRIS funded good or service may begin, the IRIS Consultant Agency must approve adding the new good or service to your IRIS plan.

Each good or service must meet the same requirements:

1. All information listed is complete and accurate;
2. The goods and services listed support your long term care needs and goals;
3. The goods and services listed are allowable (meet state and federal guidelines); and
4. The plan remains within your Individual Budget Allocation.

If a good or service does *not* meet all requirements on the above list then it cannot be added to your plan. Instead, you will receive a written notice that explains why the good or service in question cannot be added to your plan. Please understand that the remaining part of your plan remains unchanged.

The IRIS Consultant Agency will attempt to contact you to resolve any good or service that is in question. If there is not a satisfactory resolution about the good or service, then the IRIS Program will send you a letter informing you that the good or service that is not allowable and will explain how you may request that the decision be reconsidered.

If you have questions on this message you may contact the IRIS Program toll free at 1-888-515-4747.

Thank You