

## WEB PAGE REVIEW

## **PROVIDER PROFILES**

## PERFORMANCE AND FISCAL REVIEWS

PORTABILITY

# Web Page Review

## DDS Web Site <u>https://portal.ct.gov/dds</u>

Select **Provider Gateway** – This section should contain all information a provider needs to do business with the State of Connecticut.

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ovider Gateway	>	Add/Remove Services
pards & Councils	>	Become a Provider
ivisions	>	Billing
gions	<u>→</u>	Communications
opics A - Z	<u>`</u>	• Contacts
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vocates' Corner	>	DDS Apps Menu
arch Department of Developmental		Electronic Visit Verification EVV
rvices		Employment First
y Keyword	C	Financial Reporting
		• Forms A - Z
		Grant/Loan Program
		Individual Budgets
		Medicaid Enrollment
		Provider Administators
		Provider Profiles
		Rate Transitions

- Rates
- Resources
- RFP

## Web Page Review - Continued

Contact your Provider Specialist if you have questions. The Provider Specialist assigned to you is located on the Provider Assignment List:

### **Provider Assignment List**

https://portal.ct.gov/dds > Provider Gateway > Contacts > RM Provider Assignments

### **DDS Manual of Policies & Procedures**

https://portal.ct.gov/dds > Provider Gateway > Topics A – Z >
Policies & Procedures > DDS Manual



#### **NEW PROVIDERS**

New providers will be given a Provider Profile Form by the Provider Qualification Specialist to complete when becoming a qualified provider. It contains information about each qualified provider.

#### **PROVIDER PROFILE FORM**

Profiles and the list of qualified providers can be found on the DDS web page: <u>https://portal.ct.gov/dds</u> > Provider Gateway > Provider Profiles

**VIEW PROFILES -** You can view for one provider at a time, view the entire list of qualified providers or by town served.

#### **CORRECTIONS/UPDATES**

Changes to provider information, i.e., contact names, phone numbers, email addresses, etc. should be submitted on the Provider Profile Correction Form. The form can be found on the DDS web page:

<u>https://portal.ct.gov/dds</u> > Provider Gateway > Forms A-Z > Provider Profile Correction Form

**Contact person(s) will receive all information from DDS and is responsible for inter-agency distribution.** An agency can have up to five contact people: Executive Director, Main Contact, CFO, Provider Administrator, Medicaid Contact

## **Performance and Fiscal Reviews**

DDS will hold two meetings with providers each year. You will be notified via e-mail with the date and time of your scheduled meeting:

- 1. Performance/Quality Meeting
- 2. Fiscal Meeting.

#### **Fiscal Meetings**

- Time Typically held in May & June each year.
- Location Held in the Prime Region with participation from other regions as appropriate.
- Agenda The focus of these meetings are fiscal issues, participant lists, FI issues , etc.

#### **Quality Review Meetings**

- Time Typically staggered throughout the year with the exception of May, June & July.
- Location Held in the Prime Region with participation from other regions as appropriate.
- Agenda The focus of the meeting is on a review of Quality Improvement (QI) data and the Continuous Improvement Plan. This meeting will result in a recommendation for agency certification.

**QI data is forwarded to providers prior to the meeting for their review and analysis**. Be sure to look at trends and issues. Incorporate these into the Continuous Improvement Plan. *Note: The Continuous Improvement Plan will be discussed in another section of the training materials.* 

# Portability

- If the individual isn't happy with supports, they can choose to change them.
- Portability Policy defines the process to be followed when an individual desires/needs a change in support plans which includes a change in provider.
- Procedure applies to all individuals who are funded by DDS
- Agency is given notification that individual is leaving program with date.
- Policy applies to home and work/day supports