

APD iConnect Powered by WellSky

Florida Agency for Persons with Disabilities
in partnership with WellSky



Agency for Persons with Disabilities

The Agency for Persons with Disabilities (APD) works in partnership with local organizations to support people with unique abilities in living, learning, and working in their communities by creating multiple pathways to possibilities. APD provides critical services and supports for individuals with developmental disabilities so they can reach their full potential.



Agency Focus

1. Embody and display a true servant's heart while demonstrating an ambition of constant pursuit to establish APD as a sought-after resource and navigator for Floridians with unique abilities.
2. Enrich the experience for individuals and families through efficient and meaningful service delivery to achieve greater program effectiveness.
3. Ensure a systematic approach towards transparency and accountability to achieve quality and operational excellence.



Who Do We Serve?

As of June 1, 2023, APD serves approximately 61,403 individuals with developmental disabilities.

- Currently over 35,000 Floridians are enrolled in the iBudget Florida waiver program.
- Services for individuals enrolled are customized to the individual and include a wide array of supports to assist with living, learning, and working in the community.
- APD provides employment and other supplemental services to an additional 26,000 individuals annually.



Service Offerings

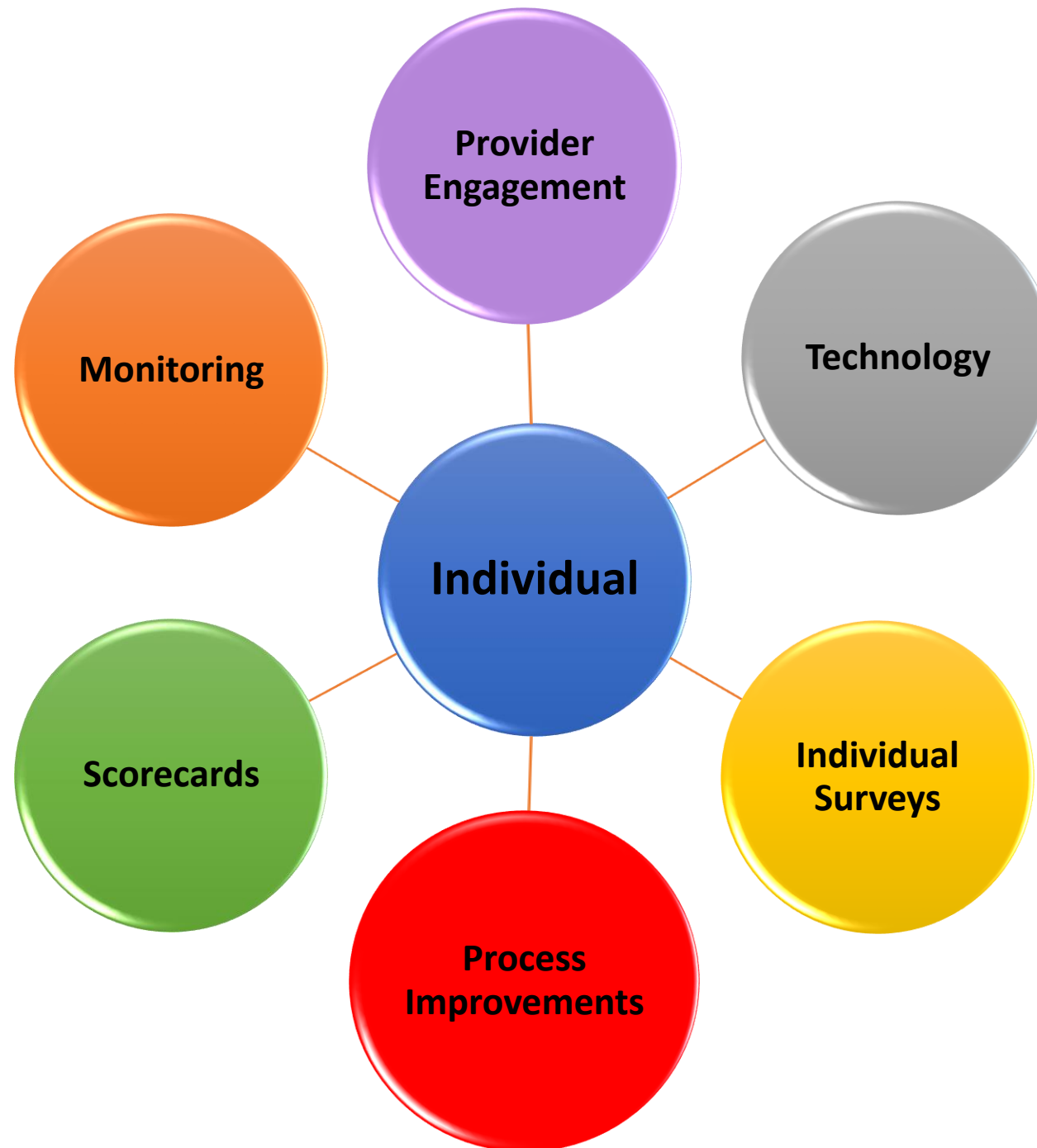
The iBudget Florida waiver offers 26 services that are grouped into the following 8 service categories:

- Life Skills Development
- Supplies and Equipment
- Personal Supports
- Residential Services
- Support Coordination
- Therapeutic Supports and Wellness
- Transportation
- Dental

Additionally, APD provides services like supportive employment and supportive living through other funding mechanisms.



Transparency and Accountability



iConnect for APD

- WellSky is the vendor that was selected, through a competitive procurement process, to design and implement a technology solution to create a single client record and Electronic Visit Verification.
- The iConnect system is utilized by both internal APD team members and external stakeholders including Waiver Support Coordinators and other APD providers.
- Provide a system that elevates the client by uncovering opportunities to increase quality engagements and service delivery, enabling the system of care to achieve a state of thriving.

iConnect Updates



Functionality Rolled out to Date –

What we've accomplished so far...



Functionality on the Horizon –

Where we're heading...

Functionality In Place Now

2018	2019	2020	2021	2022
<ul style="list-style-type: none">• Incoming Calls• Eligibility Determinations• Pre-Enrollment (formerly Waiting List)• WSC Assignments• QSI• Enrollments• CDC+• Support Plans• Annual Reviews• WSC Documentation• Nursing Forms• Reports• Interfaces	<ul style="list-style-type: none">• Consumer Budgets• Cost Plans• Authorizations• SAN• Interfaces• Cost Plan Rollover• Rate Changes	<ul style="list-style-type: none">• Provider Documentation• EVV• Cost Plan Rollover• Rate Changes	<ul style="list-style-type: none">• EVV• Supported Living• Cost Plan Rollover• Rate Changes	<ul style="list-style-type: none">• EVV• Forensic Services• Cost Plan Rollover• Rate Changes• Enhancements – Build Update• Interface Enhancements

Future Rollout Schedule

2023	2024
<ul style="list-style-type: none">• Plan Validation Rule Enhancements• Intermediate Care Facility Transitions & Residential Planning• Life Skills Development Services• Provider Administrative Actions• Behavioral Services• Provider Service Level Designations• Rate Changes	<ul style="list-style-type: none">• Licensing (New Applications, Renewals)• Monthly Monitoring• eMAR• Roster Violations/Arrest Notifications• Quality Assurance• Consumer Portal• Mobile Assessment with Sign-On

To deliver on the remaining functionality and to ensure further system efficiencies are gained, APD and WellSky have made numerous adjustments to business processes, project management, and resource dedication.

2023 Functionality Review

- **Plan Validation Rule Enhancements**

- *Example: The iConnect system will incorporate legislative changes regarding Life Skills Development Services (Supported Employment).*

- **Intermediate Care Facilitates Transitions & Residential Planning**

- *Example: Group home providers will receive residential referrals for consumers seeking group home placement. Waiver support coordinators will coordinate choice selection of providers communicating interest.*
- **Projected Rollout Date: Fall 2023**

2023 Functionality Review

- **Life Skills Development Services (Supported Employment)**
- *Example: Waiver support coordinators will be able to request and track Supported Employment services for their consumers.*
- Projected Rollout Date: Fall 2023

The screenshot displays the iConnect web application interface. At the top, the logo 'iConnect' is visible on the left, and the user 'Carrie Abner' with the timestamp '3/23/2023 12:50 PM' and a 'Forms' link are on the right. Below the header, a 'File' tab is active. A dropdown menu shows 'Please Select Type: Individual Plan for Employment (IPE)'. The 'Consumer Forms' section contains a table with fields for 'Review' (As Needed), 'Review Date' (03/23/2023), 'Division' (APD), 'Approved By', 'Worker' (Buck, Jennifer), 'Status' (Draft), 'Provider/Program' (1 CARE LLC), and 'Approved Date'. Below this, a blue header bar reads 'Individual Plan for Employment (IPE)'. A note states 'Please note this form is for Consumers on Waiting List ONLY.' The form includes fields for 'Date of IPE Meeting', 'Annual', and 'IPE Status Change'. A green header bar follows, titled 'Provider/Support Coordinator/Employment Specialist Information', with fields for 'Provider Agency', 'Waiting List Coordinator (WLC) Name', 'WLC Phone', 'WLC Email', 'Employment Specialist (ES) Name', 'ES Phone', and 'ES Email'. A final green header bar is titled 'Applicant Background Information', with a field for 'Applicant Name' (First Name: Carrie).

2023 Functionality Review

- **Provider Administrative Actions (Expansions and Terminations)**
 - *Example: APD will be able to process actions or requests involving provider performance or status in iConnect.*
 - *Example: A provider will be able to apply for an expansion to render additional services through iConnect.*
- Projected Rollout Date: Fall 2023

The screenshot displays the 'Notes Details' form in the iConnect system. The form includes fields for 'Division' (APD), 'Note By' (Reed, Monica), 'Note Date' (05/19/2023), 'Note Type' (Provider Expansion Request), 'Note Sub-Type' (Request Complete), 'Associated Form ID#' (1256), and 'Description' (Request Complete). A large text area for the 'Note' is visible, with a 'New Text' dialog box open over it, showing a rich text editor and an 'Append Text to Note' button. The 'Status' is set to 'Complete' and the 'Date Completed' is 05/19/2023. Below the form, there is an 'Attachments' section with an 'Add Attachment' link, and a 'Note Recipients' section with an 'Add Note Recipient' field and a 'Clear' button. Arrows point to the 'Note Sub-Type', 'Description', 'Status', and 'Add Note Recipient' fields.

Notes Details	
Division *	APD
Note By *	Reed, Monica
Note Date *	05/19/2023
Note Type *	Provider Expansion Request
Note Sub-Type	Request Complete
Associated Form ID#	1256
Description	Request Complete
Note	
Status *	Complete
Date Completed	05/19/2023
Attachments	
Add Attachment	
Document	Description
There are no attachments to display	
Note Recipients	
Add Note Recipient:	

2023 Functionality Review

- **Behavioral Services**
- *Example: A provider will be able to complete and submit their monthly Reactive Strategies report in iConnect.*
- **Projected Rollout Date:**
Fall 2023

The screenshot shows the 'iConnect' logo at the top left. Below it is a 'File' menu bar. The main title of the form is 'BEHAVIOR ANALYSIS SERVICES PLAN' in a dark blue header. The form contains several input fields: 'Plan type:' with a dropdown menu, 'Date of Plan:' with a date picker, 'Consumer's First Name:' and 'Consumer's Last Name:' with text boxes, and 'Author1 (Name and Credentials):' with a text box and a '100 characters remaining' indicator. Below these are two questions with radio button options: 'Do you need to add a second Author?' (Yes/No) and 'Do you need to add a Supervisor?' (Yes/No). A note states: 'In each of the remaining sub-sections, please hover over each item with your cursor as some will display additional instructions on how to best answer the item.' The form is divided into three colored sections: a green section for 'Rationale for Plan:' with a 'Medical Rule-Out Status:' dropdown, a blue section for 'Statement of medical necessity:' with a rich text editor (showing bold, italic, underline, 16px font size, and a color picker), and a final section for 'Statement of medical necessity:' with a large text area.

2023 Functionality Review

- **Provider Service Level Designations**
 - *Example: Licensed group home providers will be able to request behavioral designation for a home through iConnect.*
- **Projected Rollout Date:**
Fall 2023

The screenshot displays the iConnect web application interface. At the top, the 'opod iConnect' logo is visible. Below the logo is a 'File' menu. The main content area is titled 'SECTION A - REGION-TO-REGION & SERVICE EXPANSION ONLY'. The form is divided into several sections, each with a green header bar:

- Region-to-Region (Check all Regions you intend to serve)**: This section contains six rows, each with a label and a dropdown menu:
 - Central:
 - Northeast:
 - Northwest:
 - Southeast:
 - Southern:
 - Suncoast:
- Service Expansion (Check all new service(s) you are requesting to expand, then complete Section B)**: This section contains three rows, each with a label and a dropdown menu:
 - Support Coordination
 - CDC Consultant (Limited, Full, Enhanced):
 - Personal Supports
 - Personal Supports:
 - Respite (Under 21)
- Life Skills Development**: This section contains four rows, each with a label and a dropdown menu:
 - Life Skills Development I (Companion):
 - Life Skills Development II (Supported Employment):
 - Life Skills Development III (Adult Day Training):
 - Life Skills Development IV (Prevocational):
- Dental Services**: This section contains one row with a label and a dropdown menu:
 - Adult Dental Services:

2024 Functionality Review

- **New Provider Application**
- *Example: APD will be able to process initial applications for group home licensure in iConnect.*
- **Projected Rollout Date: Winter 2024**

Prospective Applicant Information Section

Provider Business Name **required**

First and Last Name if a Solo Provider

Enter response...

Provider Business Number **required**

Enter response...

Provider Email Address **required**

Enter response...

Provider EIN/SSN **required**

Include dashes

Enter response...

Provider Physical Address Section

Provider Street Address **required**

Enter response...

Provider Street Address 2

Enter response...

Provider City **required**

Enter response...

2024 Functionality Review

- **Licensure Renewal**
- *Example: Group home providers will be notified when their license is going to expire and will be able to submit their annual licensing renewal applications in iConnect.*
- **Projected Rollout Date: Winter 2024**

iConnect Welcome, Monica Reed 6/16/2023 2:42 PM **Preview ScreenDesign**

FACILITY APPLICATION FORM (APD 2014-01 Revised July 2019)

Instructions: Please ensure that all applicable parts of this form are completed legibly and in their entirety. If you have questions regarding this form or the application process, please contact your area APD office for assistance.

Indicate whether this an application for an initial license or an application for renewal of an existing license.

This application must be completed by the prospective licensee or the designated representative of a partnership, corporation or association. A letter of designation should accompany this application if the applicant is not a member of the partnership, association or corporation. When Provider organizations subcontract with individual live-in caregivers for the provision of residential services within those caregiver's homes, a representative of the contracting provider organization and the live-in caregivers should complete and sign this application

[Hide Text](#)

Is the facility operated by a subcontracted live-in caregiver?

Section II: Description of Services to be Provided and Types of Residents to be Served:

Requested Capacity*

Age Range to be Served*

Sex*

This facility would be willing and able to serve individuals with one or more of the following conditions (check all that apply):*

☐ Autism
☐ Cerebral Palsy
☐ Children in Foster Care
☐ Chronic medical issues (including those individ
☐ Criminal Offenses
☐ Diabetes
☐ Dual Diagnosis (Mental Retardation and Menta

In addition to those categories that were not checked above, please describe any other types of residents whom you would not be willing to serve:

Check one or more of the following levels of support which the applicant would be willing and able to provide to residents

☐ Basic
☐ Minimal
☐ Moderate
☐ Extensive 1
☐ Extensive 2

For a definition of the Res Hab descriptors proceed to Page 9 in the following link - http://apd.myflorida.com/budget/docs/59G-13%20081_IBudget_Rate_Table_Adoption.pdf

[Hide Text](#)

2024 Functionality Review

- **Monthly Monitoring**
- *Example: APD Group home monitors will be able to complete the required monthly monitoring form in iConnect.*
- Projected Rollout Date: Winter 2024

The screenshot displays the 'iConnect' logo at the top left. Below it is a 'File' menu bar. The main content area is titled 'Residential Monitoring Checklist' in a dark blue header. The form includes several sections: 'Time Arrived:' and 'Time Left:' each with three dropdown menus; 'Type of Visit:' with radio buttons for 'Announced' and 'Unannounced'; 'Standard Monthly Monitoring?' with radio buttons for 'Yes' and 'No'; and four text input fields for 'Other reason for visit (please specify):', 'Names of residents present (at foster and group homes only):', 'Name(s) of resident(s) whose records/personal funds reviewed:', and 'Names of staff present (at foster and group homes only):'. A green header section titled '1.0 Resident Records' follows, containing a sub-header '1.1 Name, address, phone # of client's resident physician and dentist is in record as well as current support plan'. Below this is a 'Hide Text' link, a citation '1.1 Citation: 65G-2.009(5)(b)(2)', and three radio buttons for 'Met', 'Not Met', and 'Not Applicable'. The final section is '1.1 Comments:' with a large text area.

2024 Functionality Review

- **eMAR**
- *Example: Medication Administration Records (MARs) will be completed in iConnect electronically making recordkeeping more efficient for providers.*
- **Projected Rollout Date: Spring 2024**

iConnect

Welcome, Lisa Daniel
Last Updated by WaiverRM
at 11/13/2019 9:38:01 AM

My Medication Administration Record Detail

File

Photo

Name

Kena Jones

Street

12120 Sunset Hills Road

Case No

274153

Street 2

Date of Birth

3/11/1975

City

Reston

Gender

Female

State

Virginia

SSN

XXX-XX-4164

Zip Code

35952

Cell Phone

(567)202-3552

Med Admin Date/Time Span

6/16/2023 7:22 AM - 6/16/2023 9:22 AM

Home Phone Number

(589)134-5421

Medications Administered in Previous 24 Hours

2 My Work My Medication Administration Record Detail record(s) returned - now viewing 1 through 2

Medication	Dosage	Route	Schedule Date	Schedule Time	Administered	Admin Date	Admin Time	Admin By	Reason	Category	Explanation	Notes
Cylert			06/16/2023	8:00 AM	Yes	06/16/2023	8:12 AM	Daniel, Lisa		Scheduled		
Prozac	20 mg	oral	06/16/2023	8:30 AM	Yes	06/16/2023	8:12 AM	Daniel, Lisa		Scheduled		

First

Previous

Records per page

15

Next

Last

Medications To Be Recorded After Administration

Save changes

X

Cancel changes

Medication	Dosage	Route	Schedule Date
No records to display.			

<< First

iConnect

Medication Administration Record

June, 2023

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

Medication

Time

Cylert 8:00 AM

Dosage

Route

Prescribed By

LD

Prozac 8:30 AM

Dosage 20 mg

Route oral

Prescribed By Dr. Sheil Alwood

LD

Singular Oral

Dosage 10 mg

Route oral

Prescribed By Dr. Sheil Alwood

2024 Functionality Review

- **Roster Violations and Arrest Notifications**

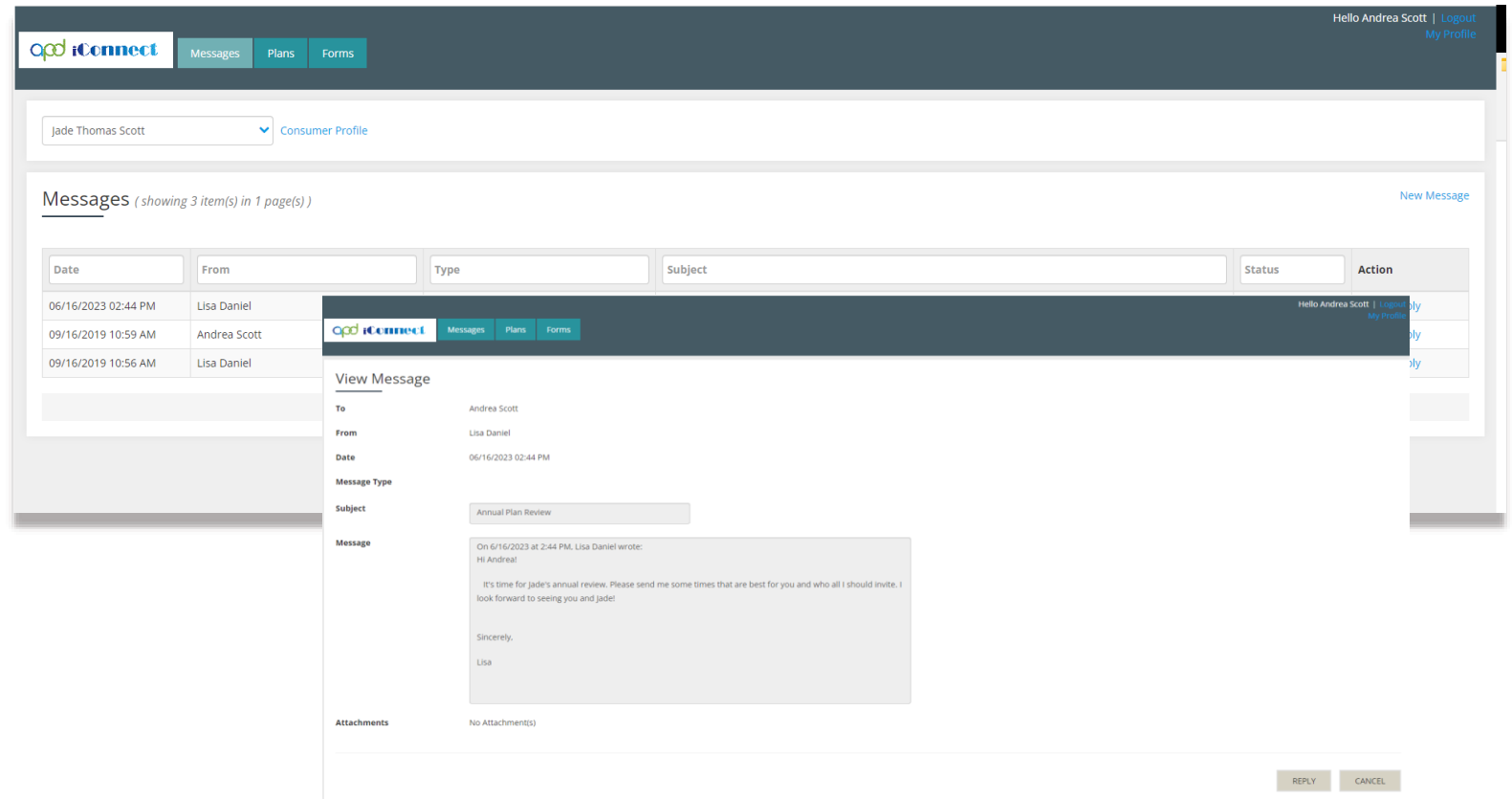
- *Example: APD will communicate with providers in iConnect regarding background screening roster violations to help ensure compliance with requirements.*
- Projected Rollout Date: Spring 2024

- **Quality Assurance**

- *Example: APD Quality Assurance staff will receive and review Qlarant reports for providers and waiver support coordinators through iConnect. Providers will submit Plans of Remediation in iConnect.*
- Projected Rollout Date: Spring 2024

2024 Functionality Review

- **Consumer Portal**
- *Example: Consumers will be able to view their records and communicate with their supports in iConnect.*
- Projected Rollout Date: Spring 2024



2024 Functionality Review

- **Mobile Assessment**
- *Example: Providers can complete forms from their mobile device. APD staff will be able to complete QSI assessments using the application from their mobile phone.*
- Projected Rollout Date: Spring 2024

The image displays two overlapping screenshots of a mobile application interface for a 'Central Admiss Cover Sheet'. The background screenshot shows the top half of the form with fields for 'Date Request Made', 'Date Authorization Signed', 'Admissions Date', and 'Consumer Name'. The foreground screenshot shows the bottom half of the form with fields for 'SSN #', 'Date of Birth', 'Type of Current Residence', 'Name of Residence If Applicable', 'Current Address', 'Primary Telephone', and 'Gender'. The foreground form has green checkmarks next to the SSN, Date of Birth, Primary Telephone, and Gender fields, indicating they are completed.

Central Admiss Cover Sheet

CENTRAL ADMISS COVER SHEET

Date Request Made:
The date the family made a request or made a call.
Enter response...

Date Authorization Signed:
Enter response...

Admissions Date:
Enter response...

Consumer Name:

First Name
Abigail

SSN #
Social Security Number
XXX-XX-5175 Unmask

Date of Birth:
Request by SME(Tina): 1. No display on the screen. 2. Print on the word merge.
4/8/2010

Type of Current Residence
Type of Current Residence and Name if Applicable

Name of Residence If Applicable
Type of Current Residence and Name if Applicable
Enter response...

Current Address
Descriptive Address from Demographics
Enter response...

Primary Telephone:
(901)270-5244

Gender
Unanswered

What You Can Expect

- Additional opportunities to inform the process
 - Scheduled Provider Requirements Gathering Call
 - Townhalls
 - 1:1s
 - Helpdesk
 - Provider Technical Assistance Call
- Comprehensive testing
 - Extended timeframe
 - Additional Business Operations & Technology Support
 - Co-location w/Wellsky & APD testers
 - Robust Regression and User Acceptance Testing
- Multiple forms of communication
 - Emails
 - Videos
 - Townhalls
- Enhanced Training
 - In-person
 - Virtual
 - Videos
 - Onboarding
 - Refresher trainings

Thank You

- APD and WellSky appreciate the work you do each day to serve a very sacred population of Floridians.
- We are seeking your continued participation and partnership!



Questions and Answers
APDiConnectTownhalls@apdcares.org