| CCRSS PROVIDER NAME | CERTIFICATION NUMBER |
| --- | --- |
| RCS CONTRACTED EVALUATOR / STAFF NAME | CERTIFICATION EVALUATION DATE(S) |
|  |
|  |  ATTACHMENT I AGING AND LONG-TERM SUPPORT ADMINISTRATION (ALTSA) RESIDENTIAL CARE SERVICES CERTIFIED COMMUNITY RESIDENTIAL SERVICES AND SUPPORTS (CCRSS) **CCRSS** **Residential Cost Report – ISS Hours Review / Questionnaire** |
| The ISS Hours Review / Questionnaire documents a sample of the providers ISS process to determine if there are anomalies requiring more detailed review by the Developmental Disabilities Administration (DDA) and/or the Office of Rates Management. |
| **ISS Verification** |
| Obtain the most recent cost report Schedule B submitted by the provider from the RCS Field Manager (or designee).Ask the provider to reconcile the gross payroll reported on Schedule B, cell N65 with the provider’s internal source payroll summary records. If the gross payroll on Schedule B matches the provider’s payroll record(s) supplied (or the variance is less than 2%), complete the heading on the ISS Review / Questionnaire form and write “Gross payroll amounts match within the guidelines” in the comment section of the form.If the Schedule B reported amount does not match the provider’s payroll summary, forward the information to the RCS Field Manager (or designee), so it can be sent with copies of the working papers to the Office of Rates Management for a further ISS review. Evaluator will submit findings to the RCS Field Manager.The RCS Field Manager will report any material discrepancies found to Office of Rates Management, Management Services Division, and the Developmental Disabilities Administration. |
| **Comments** |
| Schedule B reviewed per new process effective April 2021.Gross payroll amounts match within guidelines. |
| FIELD MANAGER | DATE REVIEWED |
| **Note:** Schedule B will be provided by Office of Rates Management to the RCS Field Manager prior to certification evaluations. |