

**Western Highlands Network  
Communication Bulletin #65  
August 2, 2007**

**Community Support Plan of Corrective Action Implementation Reviews**

Pursuant to federal regulations regarding utilization of Medicaid services, the Division of Medical Assistance is authorized by Section 1902 (a) (27) of the Social Security Act and Federal Regulation 42 CFR 431.107 to access patient medical records for the purposes directly related to the administration of the Medicaid Program. Western Highlands Network (WHN) serves as a contractor of DMA for the purposes of monitoring.

WHN will be conducting Community Support Plan of Corrective Action Implementation reviews beginning August 13, 2007.

Due to the mandated, co-occurring timelines for multiple monitoring functions, it is imperative that WHN adhere to the content and the structure of the attached schedule. **Please read the following information carefully.** Your cooperation in this process is greatly appreciated.

**WHERE:** First floor, Western Highlands Network  
356 Biltmore Avenue  
Asheville, NC 28801

**WHEN TO ARRIVE:** Check-in **8:45** for AM session, **12:45** for PM session  
**Reviews will begin promptly at 9 and 1**

**WHAT TO BRING:**

1. The **complete** medical record for **the last 10 Medicaid funded** consumers as of the date of this notification, who have received Community Support through your agency and for which you have billed Medicaid.
2. **Complete** records of training, supervision planning, and records of ongoing supervision for all agency personnel who have either delivered Community Support or who have reviewed and signed documentation for Community Support for the selected 10 consumers.
3. A **complete** list of agency personnel who either delivered Community Support or reviewed and signed documentation for Community Support for the selected consumers. This list must associate the consumer with the appropriate staff.

**(Please note: All information must be received at the appropriate check-in time. Additional information will not be considered.)**

**Questions? Contact Kathy Rubendall at [kathyr@westernhighlands.org](mailto:kathyr@westernhighlands.org) or 828-225-2800.**

**Community Support Plan of Corrective Action  
Implementation Review Schedule  
August 2, 2007**

<b>Date</b>	<b>Time</b>	<b>Provider</b>
<b>8/13/07</b>	<b>9:00</b>	<b>Easter Seals UCP</b>
<b>8/13/07</b>	<b>1:00</b>	<b>Families First</b>
<b>8/14/07</b>	<b>9:00</b>	<b>Footprints of the Carolinas</b>
<b>8/14/07</b>	<b>1:00</b>	<b>Liberty Corner Enterprises</b>
<b>8/20/07</b>	<b>9:00</b>	<b>Mountain Area Community Services</b>
<b>8/20/07</b>	<b>1:00</b>	<b>Ona's Place</b>
<b>8/21/07</b>	<b>9:00</b>	<b>Skill Creations</b>
<b>8/21/07</b>	<b>1:00</b>	<b>Universal Mental Health</b>
<b>8/27/07</b>	<b>9:00</b>	<b>Carolina Habilitation</b>
<b>8/27/07</b>	<b>1:00</b>	<b>CNC-ACCESS</b>
<b>8/28/07</b>	<b>9:00</b>	<b>Alpha Omega</b>
<b>8/28/07</b>	<b>1:00</b>	<b>Quality Mental Health</b>
<b>9/4/07</b>	<b>9:00</b>	<b>Home Care Management</b>