

Long-Term Care Regulation Waiver Survey & Certification (WSC) Provider Portal

Training Guide for External Users

**April 28, 2021
Version 2.7**



TEXAS
Health and Human
Services

Contents

1. Logging into the Provider Portal.....	4
1.1 Existing Provider Users.....	4
1.2 Logging into to Provider Account	5
1.3 New Provider Registration.....	7
1.3.1 Resetting your password	9
2. Provider Actions	10
2.1 Homepage	10
2.1.1 Pick a Component Code.....	12
2.1.2 Contracts	12
2.1.3 Pending Provider Actions	13
2.1.4 Previously Submitted Provider Actions	14
2.1.5 Pending Provider Actions – Residential Review Database (RRD).....	15
2.2 Common Functionalities	16
2.2.1 List Views.....	16
2.2.2 Managing List Views	17
2.2.3 Related Lists	19
2.2.4 Auto Formatting	20
2.2.5 Print	20
2.2.6 Audit Trail	22
2.2.7 Alerts.....	22
2.3 Create a New Record	23
2.3.1 Death Reports.....	23
2.3.2 Notifications for Finalized DFPS/PI Reports	29
2.3.3 Plan of Correction (POC)	36
2.3.4 Evidence of Correction	43
2.3.5 Additional Comp Code.....	50
Contact WSC	53

Overview

Texas Health and Human Services Commission (HHSC) has developed the WSC Provider Portal, an online system for Home and Community-based Services (HCS) and Texas Home Living (TxHmL) Waiver program providers. This effort will retain core and enhanced functionalities in a way that will reduce operational costs. We thank you for your patience and cooperation during this transition.

The WSC Provider Portal will allow HCS and TxHmL program providers to:

- Submit notification and accompanying documentation for finalized Provider Investigations (PI) reports.
- Submit notification and documentation related to the death of an individual.
- Receive survey reports and letters.
- Submit Evidence and Plans of Correction.
- Provide access to program provider accounts.

This training guide is organized into the following major categories:

- **Portal Login:** Provider registration, login, reset password.
- **Provider Actions:** Common functionalities and creating records.

Creating records includes:

- ▶ Notification for Death Cases
- ▶ Notification for final DFPS/PI Reports
- ▶ Plan of Correction (POC)
- ▶ Evidence of Correction (EOC)

Please note that the portal is optimized for Google Chrome and should be used in this browser whenever possible.

1. Logging into the Provider Portal

1.1 Existing Provider Users

Users will first be prompted with the question “**Are you an existing account holder with Texas Unified Licensure Information Portal (TULIP) or Intellectual and Developmental Disabilities (IDD) or Waiver Survey and Certification(WSC)?**”

If you are:

An existing provider registered as TULIP user, including:

- Assisted Living Facilities (ALF)
- Day Activity and Health Services Facilities (DAHS)
- Home and Community Support Services Agencies (HCSSA)
- Intermediate Care Facilities for Individuals with an Intellectual Disability or related conditions (ICF/IID)
- Nursing Facilities (NF)
- Prescribed Pediatric Extended Care Centers (PPECC)

or

An existing provider registered as IDD/ Community Partner Program (CPP) User, including:

- Community First Choice (CFC)
- Community Living Assistance and Support Services (CLASS)
- Deaf-Blind with Multiple Disabilities (DBMD)
- Home and Community-based Services (HCS)
- Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)
- Texas Home Living (TxHmL)

Please refer to [section 1.2 Logging into the portal](#)

If you are not registered under any of the above programs, please refer to [section 1.3 New provider registration](#)

2.1 Logging into to Provider Account

Waiver Survey And Certification Portal (WS&C)

TEXAS Health and Human Services

Waiver Survey And Certification(WSC)

Are you an existing User with Texas Unified Licensure Information Portal (TULIP) or HHS Community Portal(IDD) or Waiver Survey and Certification(WSC)?

Yes

Select an option

Yes

No

This application works best in the newest version of Google Chrome

[Click here for additional information about WSC](#)

[Click here for HHSC Privacy Policies and Practices](#)

Figure 1.1 Provider Portal Login Page

Link <https://txhhs.force.com/WSC>

If the users choose **Yes** to the question 'Are you an existing User with Texas Unified Licensure Information Portal (TULIP) or HHS Community Portal (IDD) or Waiver Survey and Certification (WSC)?', then users will be taken to the login screen.

It is highly recommended that providers bookmark the login screen for easy access to their TULIP account portal.

To log in, enter your existing username and password.

Figure 1.2A Provider Credentials Page

The system will then navigate to the following page where users are required to fill the empty fields with their account information.

Figure 1.2B Provider Account Details

Once information provided is validated successfully, users will be given access to the WSC portal.

3.1 New Provider Registration

If you are new to Texas Unified Licensure Information Portal (TULIP), HHS Community Portal (IDD), or Waiver Survey and Certification (WSC),

Select **No** when prompted with the question 'Are you an existing User with Texas Unified Licensure Information Portal (TULIP) or HHS Community Portal (IDD) or Waiver Survey and Certification (WSC)?'. New users will be required to enter the following account specific details to create their provider account.

Field	Description
First Name	First Name of the user
Middle Initial	Initial of the Middle Name
Last Name	Last Name of the user
Component Code	Component code related to the contract
Phone	Primary phone number for communication
Email	Primary email to receive updates and communication
Tax Payer ID	Taxpayer ID used for the account
Contract No	Contract number

Figure1.3 Provider Portal Login Fields Description

Fields with * are mandatory fields to complete registration.

Waiver Survey And Certification Portal (WS&C)

Already have an account?

* First Name

* Last Name

* Component Code

Phone

Submit

Middle Initial

* Email

* Tax Payer Id

Contract No

Figure 1.4 Provider Portal Registration Page

When you have completed providing information on the registration page, click **Submit**. An email will be sent to the email address provided confirming your registration and prompting you to reset your temporary password using the link provided in the email. Please also check your spam/junk folder.

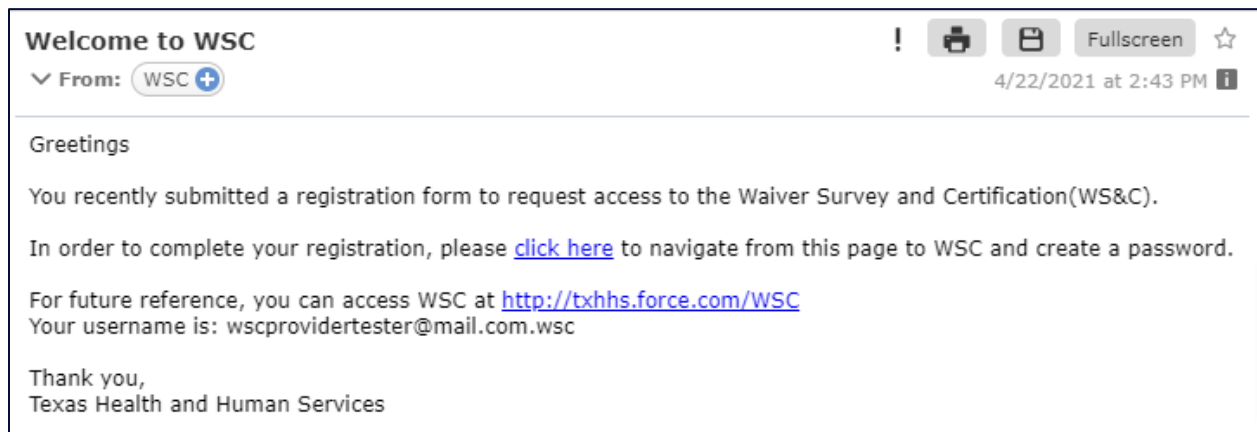



Figure 1.4A Provider Welcome email

Once you receive the link, your initial portal access is temporary, and you will be required to change your password on your first login.

If you are a returning WSC user and have your login credentials, select the “Already have an account?” link on the top, under the ‘Waiver Survey and Certification’ banner to log into the portal with your existing provider credentials.

1.1.1 Resetting your password

Home icon

 **TEXAS**
Health and Human
Services

Waiver Survey And Certification(WSC)

Email

Password

Log in

Forgot your password?

Not a member?

This application works best in the newest version of Google Chrome

[Click here for additional information about WSC](#)
[Click here for HHSC Privacy Policies and Practices](#)


Figure 1.5 Forgot your password?

If you have forgotten your password, select the “Forgot your password?” link from the screen above, just under the login fields.

You will be prompted to enter your username (the email address used to register). The following screen will be displayed, allowing you to return to the login screen or resend the password reset email.

PASSWORD RESET

To reset your password, we'll need your username.
We'll send password reset instructions to the email
address associated with your account.

 Username

Reset Password

[Cancel](#)


Figure 1.5 Password Reset Page

2. Provider Actions

2.1 Homepage

The image below is an example of a provider homepage, the screen you will see when you log into the WSC portal.

From here you can perform provider actions such as: submit individual death reports, DFPS/PI reports, upload Plan of Correction, upload Evidence of Correction, and access your contract information related to Waiver and Residential Surveys.


Waiver Survey And Certification Portal (WSC)
portaluserwsc1@protonmail

[Home](#)
[Death Case](#)
[DFPS Report](#)
[Plan Of Correction](#)
[Evidence Of Correction](#)
[Additional Comp Codes](#)

Comp Code
TID

Contract Number	Contract Name	Waiver Type	Contract Status
100001241	TID HEALTH SERVICES INC	HCS	Open
100001242	TID HEALTH SERVICES INC	HCS	Open
100001243	TID HEALTH SERVICES INC	HCS	Open
100001244	TID HEALTH SERVICES INC	HCS	Open
1019977	TID HEALTH SERVICES INC	HCS	Open
1019999	TID HEALTH SERVICES INC	HCS	Open
1012429	TID HEALTH SERVICES INC	HCS	Open
102345	TID HEALTH SERVICES INC	HCS	Open

Pending Provider Actions

Report Log ID	Contract #	Contract Name	Due Date	Type	
RLID-18620	100001241	TID HEALTH SERVICES INC	2021-04-13	Waiver Survey	Submit
RLID-18653	100001242	TID HEALTH SERVICES INC	2021-04-21	Waiver Survey	Submit
RLID-18640	100001243	TID HEALTH SERVICES INC	2021-04-07	Waiver Survey	Submit
RLID-18688	100001244	TID HEALTH SERVICES INC	2021-04-29	Waiver Survey	Submit
RLID-18689	100001244	TID HEALTH SERVICES INC	2021-04-30	Waiver Survey	Submit
RLID-18691	100001244	TID HEALTH SERVICES INC	2021-04-21	Waiver Survey	Submit
RLID-18669	1019977	TID HEALTH SERVICES INC	2021-04-27	Waiver Survey	Submit
RLID-18675	102345	TID HEALTH SERVICES INC	2021-04-28	Waiver Survey	Submit

Previously Submitted Provider Actions

Record ID	Contract #	Contract Name	Type	Date Submitted
5807	100001243	TID HEALTH SERVICES INC	Death Case	4-4-2021
5808	100001243	TID HEALTH SERVICES INC	Death Case	4-4-2021
POC-020	1019977	TID HEALTH SERVICES INC	Plan Of Correction	4-11-2021
POC-002	100001241	TID HEALTH SERVICES INC	Plan Of Correction	3-29-2021
POC-003	100001241	TID HEALTH SERVICES INC	Plan Of Correction	3-29-2021
POC-017	1012429	TID HEALTH SERVICES INC	Plan Of Correction	4-7-2021
POC-009	100001243	TID HEALTH SERVICES INC	Plan Of Correction	4-1-2021
POC-010	100001241	TID HEALTH SERVICES INC	Plan Of Correction	4-4-2021
POC-011	100001241	TID HEALTH SERVICES INC	Plan Of Correction	4-4-2021
POC-014	100001241	TID HEALTH SERVICES INC	Plan Of Correction	4-6-2021
POC-015	100001242	TID HEALTH SERVICES INC	Plan Of Correction	4-6-2021
POC-022	1019999	TID HEALTH SERVICES INC	Plan Of Correction	4-13-2021
POC-018	100001241	TID HEALTH SERVICES INC	Plan Of Correction	4-8-2021
POC-025	100001244	TID HEALTH SERVICES INC	Plan Of Correction	4-15-2021
POC-021	1019977	TID HEALTH SERVICES INC	Plan Of Correction	4-11-2021
014	100001244	TID HEALTH SERVICES INC	Evidence Of Correction	4-13-2021
010	100001244	TID HEALTH SERVICES INC	Evidence Of Correction	4-12-2021
011	100001244	TID HEALTH SERVICES INC	Evidence Of Correction	4-12-2021
006	100001242	TID HEALTH SERVICES INC	Evidence Of Correction	4-11-2021
005	100001242	TID HEALTH SERVICES INC	Evidence Of Correction	4-11-2021
008	100001242	TID HEALTH SERVICES INC	Evidence Of Correction	4-12-2021
009	100001242	TID HEALTH SERVICES INC	Evidence Of Correction	4-12-2021
012	100001244	TID HEALTH SERVICES INC	Evidence Of Correction	4-12-2021
013	100001244	TID HEALTH SERVICES INC	Evidence Of Correction	4-12-2021

Pending Provider Actions for RRD

Record ID	Contract #	Contract Name	Type	Date Submitted
-----------	------------	---------------	------	----------------

Figure 2.1A Provider Homepage

To return to this page from anywhere in the portal, simply select the Home icon on the leftmost side of the page banner.

The home page also provides users with an 'at a glance' view of the account's current activity, with use of the following sections:

2.1.1 Picking a Component Code

Users can select a component code (comp code) from the comp code list to display records linked to that comp code.

TEXAS Health and Human Services Waiver Survey And Certification Portal (WSC)

portaluserwsc1@protonmail

Home Death Case DFPS Report Plan Of Correction Evidence Of Correction Additional Comp Codes

Comp Code

Select an Option

1AB

T1D

Contract Number Contract Name Waiver Type Contract Status

Pending Provider Actions

Report Log ID	Contract #	Contract Name	Due Date	Type
---------------	------------	---------------	----------	------

Previously Submitted Provider Actions

Record ID	Contract #	Contract Name	Type	Date Submitted
-----------	------------	---------------	------	----------------

Pending Provider Actions for RRD

Record ID	Contract #	Contract Name	Type	Date Submitted
-----------	------------	---------------	------	----------------

Figure 2.1.1 A Select Comp Code

Users can add comp codes to their account which is covered in [section 2.3.5](#).

2.1.2 Contracts

This list provides a list of all contracts linked to the comp code. User can view details of any contract by clicking the contract number which will open the contract's details page.

Comp Code

T1D

Contract Number	Contract Name	Waiver Type	Contract Status
100001241	T1D HEALTH SERVICES INC	HCS	Open
100001242	T1D HEALTH SERVICES INC	HCS	Open
100001243	T1D HEALTH SERVICES INC	HCS	Open
100001244	T1D HEALTH SERVICES INC	HCS	Open
1019977	T1D HEALTH SERVICES INC	HCS	Open
1019999	T1D HEALTH SERVICES INC	HCS	Open
1012429	T1D HEALTH SERVICES INC	HCS	Open
102345	T1D HEALTH SERVICES INC	HCS	Open

Figure 2.1.2A Linked Contracts to Comp Code

2.1.3 Pending Provider Actions

The Pending Provider Action list displays list of records that need a response. These actions typically have a due date, so it is ideal to complete them as soon as the user is able.

Pending Provider Actions

Report Log ID	Contract #	Contract Name	Due Date	Type	
RLID-18620	100001241	T1D HEALTH SERVICES INC	2021-04-13	Waiver Survey	Submit
RLID-18653	100001242	T1D HEALTH SERVICES INC	2021-04-21	Waiver Survey	Submit
RLID-18640	100001243	T1D HEALTH SERVICES INC	2021-04-07	Waiver Survey	Submit
RLID-18688	100001244	T1D HEALTH SERVICES INC	2021-04-29	Waiver Survey	Submit
RLID-18689	100001244	T1D HEALTH SERVICES INC	2021-04-30	Waiver Survey	Submit
RLID-18691	100001244	T1D HEALTH SERVICES INC	2021-04-21	Waiver Survey	Submit
RLID-18669	1019977	T1D HEALTH SERVICES INC	2021-04-27	Waiver Survey	Submit
RLID-18675	102345	T1D HEALTH SERVICES INC	2021-04-28	Waiver Survey	Submit

Figure 2.1.3A Pending Provider Actions

Users can click on submit to take the necessary action. Clicking on **submit** will open up a Plan of Correction (PoC) page where users can upload or enter all necessary information.

You will notice that survey and contract are automatically linked to the Plan of Correction

Plan Of Correction

Provider Name	Phone
T1D HEALTH SEVICES INC	
Section Of Rule Cited	Waiver Survey
	RLID-18688
Email	Date of Exit
	Apr 2, 2021
	Survey Type
Contract	Contact City
100001244	Richmond
WCA	Contact Phone
20	(333)444-5555
Contact Address	Comp Name
123 Main St	T1D HEALTH SEVICES INC
Waiver Type	Contract Name


Figure 2.1.3B Pending Provider Actions

Users are required to fill all the relevant fields and click on **submit** to send the record for the program's review. The record will be denied and sent back if any further corrections or clarifications are required.



For more information on Plan of Correction, refer [section 2.3.3](#)


2.1.4 Previously Submitted Provider Actions


This section shows all records submitted to the program team for their review. Users can see the date submitted and the Record ID. The Record ID and Contract# fields are hyperlinks that can be used to access the respective records.





Waiver Survey And Certification Portal (WSC)


portaluserwsc1@protonmail

Death Case

DFPS Report

Plan Of Correction

Evidence Of Correction

Additional Comp Codes

Previously Submitted Provider Actions

Record ID	Contract #	Contract Name	Type	Date Submitted
5807	100001243	T1D HEALTH SERVICES INC	Death Case	4-4-2021
5808	100001243	T1D HEALTH SERVICES INC	Death Case	4-4-2021
POC-020	1019977	T1D HEALTH SERVICES INC	Plan Of Correction	4-11-2021
POC-002	100001241	T1D HEALTH SERVICES INC	Plan Of Correction	3-29-2021
POC-003	100001241	T1D HEALTH SERVICES INC	Plan Of Correction	3-29-2021
POC-017	1012429	T1D HEALTH SERVICES INC	Plan Of Correction	4-7-2021
POC-009	100001243	T1D HEALTH SERVICES INC	Plan Of Correction	4-1-2021
POC-010	100001241	T1D HEALTH SERVICES INC	Plan Of Correction	4-4-2021
POC-011	100001241	T1D HEALTH SERVICES INC	Plan Of Correction	4-4-2021
POC-014	100001241	T1D HEALTH SERVICES INC	Plan Of Correction	4-6-2021

Figure 2.1.4A Pending Provider Actions

2.1.5 Pending Provider Actions – Residential Review Database (RRD)

This section is similar to the Pending Provider Action section above but is exclusively for items that are related to residential reviews.

Users can work on pending actions by clicking on the submit button

Pending Provider Actions for RRD				
Record ID	Contract #	Contract Name	Type	Date Submitted
RSD-143040	100001244	T1D HEALTH SERVICES INC	HCS	Submit
RSD-143041	100001244	T1D HEALTH SERVICES INC	HCS	Submit

Figure 2.1.5A Pending Provider Actions

Users see the following pop-up when they click on submit.

Figure 2.1.5B Evidence of Correction pop-up

You can notice that the Residential Survey and the location are automatically linked to the Evidence of Correction.

For more information on submitting an Evidence of Correction, refer [section 2.3.4 Evidence of Correction](#)

3.1 Common Functionalities

2.1.1 List Views

Standard list views have been created for ease of access and record organization. Below is an example of a list views users may find useful.

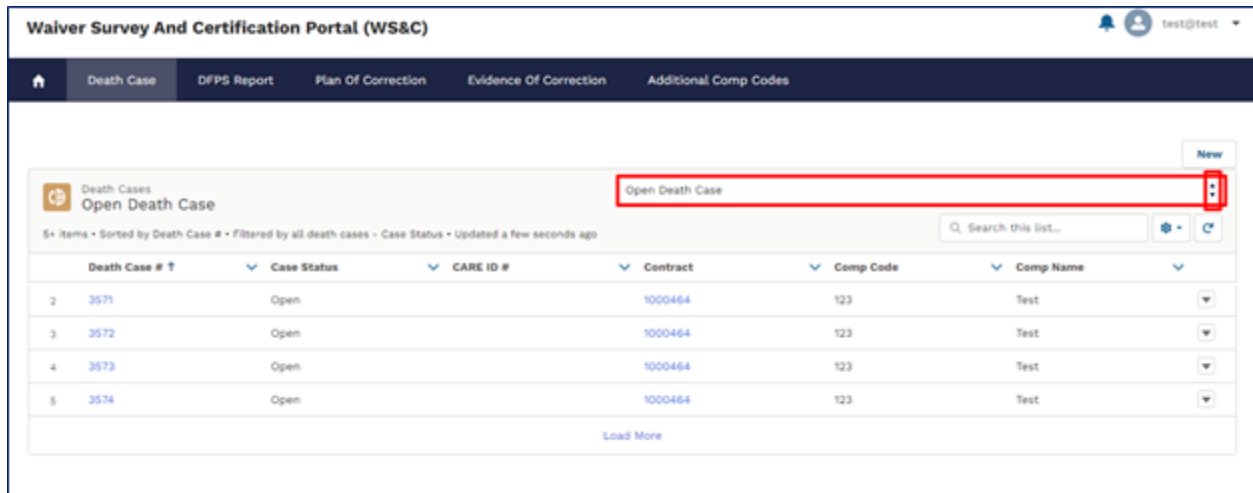


Figure 2.2.1 List-view Example

2.1.2 Managing List Views

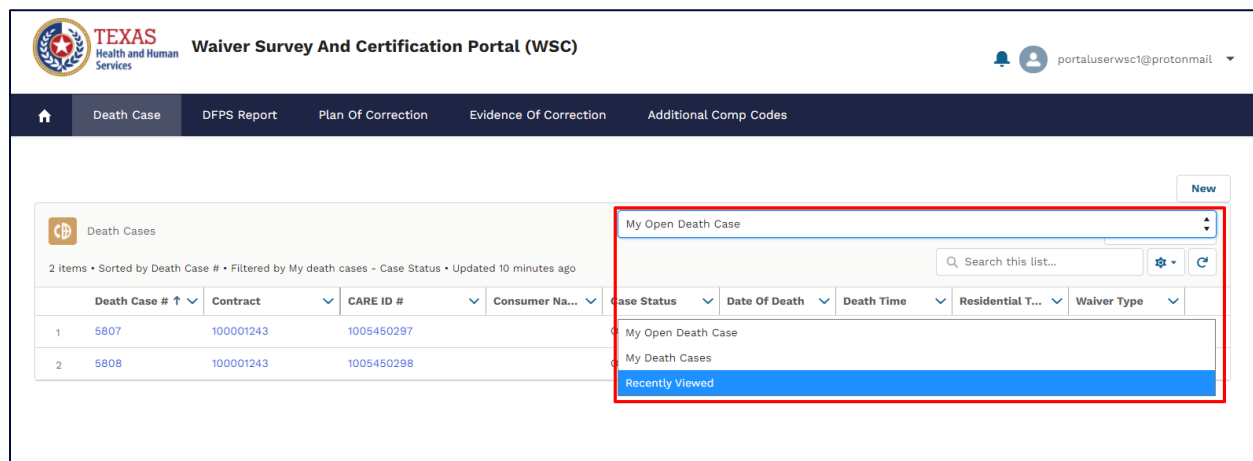


Figure 2.2.2A Manage List-View

To change the list-view displayed, selected the dropdown arrow on the right-hand side and shown in the image below.

Default worklist view for each tab is as follows. This has been done for ease of access.

Tab	Default List View
Death Case	Open Death Cases
DFPS/PI Report	My DFPS/PI Reports
Plan of Correction	My Plan of Corrections
Evidence of Correction	Recently Viewed
Additional Comp Code	Recently Viewed

Table 2.2.2 – Tabs Description The additional Comp Code tab has slightly different orientation and the list view can be found on the left-side of the page, as shown in the image below.

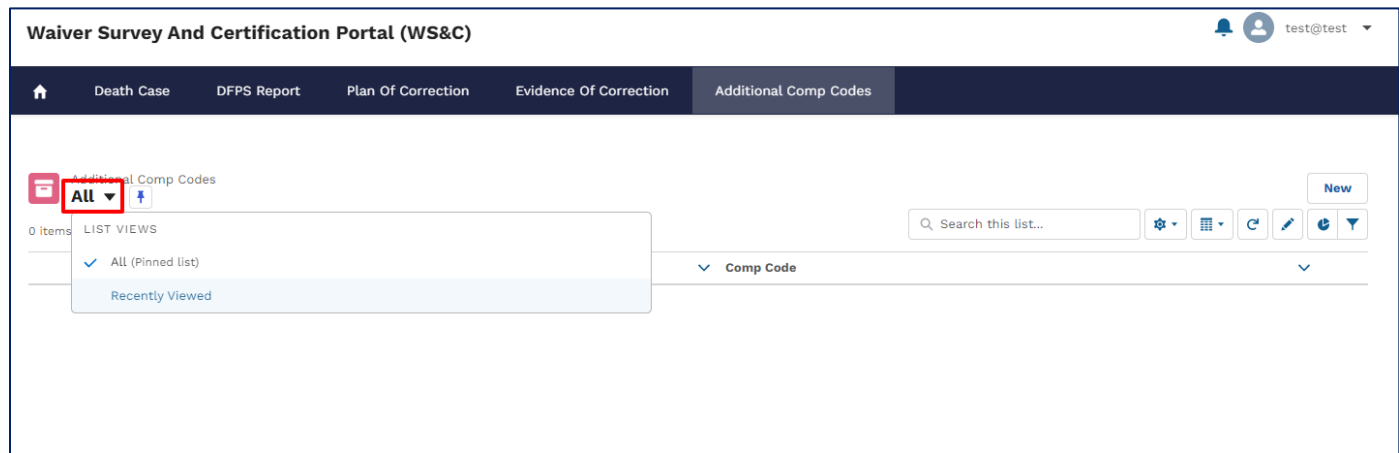


Figure 2.2.2B Additional List-view Example

2.1.4 Auto Formatting

System provides formatting for the following fields throughout the system:

- Dates MM-DD-YYYY
- Zip Codes XXXXX-XXXX (last four optional)
- State Abbreviation XX
- Phone Numbers XXX-XXX-XXXX
- Names as Last, First

2.1.5 Print

Print functionality has been made available through-out the system. Users can print or save to PDF, records, reports, letters, notes, or screens..

Click on the 'Print View' button as shown in the image below:

The screenshot displays the 'Waiver Survey And Certification Portal (WSC)' interface. At the top, there is a header with the Texas Health and Human Services logo and the portal title. Below the header is a navigation bar with links: Home, Death Case, DFPS Report, Plan Of Correction, Evidence Of Correction, and Additional Comp Codes. The main content area shows a 'DFPS/PI Report' for 'DFPS-086963'. On the right side of this report, there are two buttons: 'ANE Cover Sheet' and 'Print View'. The 'Print View' button is highlighted with a red rectangular border. Below the report title, there is a 'Summary' section with fields for 'DFPS/PI Unique Case ID' (DFPS-086963), 'DFPS/PI Case #' (2154), 'Provider Name', 'Test Provider', 'Date Final Investigation Report Received' (4/8/2021), and 'Allegation disposition appealed' (checked). There is also a 'Case Status' field showing 'Open' and a 'Date Alleged Incident' field showing '4/4/2021'. Below the summary, there is an 'Allegation Information' section with fields for 'Date Provider Notified WSC' (4/20/2021), 'Action Taken' (test action taken), 'Provider- Remediation' (Staff suspended; Staff training; Disciplinary action; Other), and 'Other'.

Figure 2.2.5A Printable View button

Users will then be shown a preview of the print page

WSC

[Close Window](#)
[Print This Page](#)
[Expand All](#) | [Collapse All](#)

DFPS-086963

Summary

DFPS/PI Unique Case ID	DFPS-086963	Case Status	Open
DFPS/PI Case #	2154	Date Alleged Incident	4/4/2021
Provider Name	Test Provider		
Date Final Investigation Report Received	4/8/2021		
Allegation disposition appealed	✓		

Allegation Information

Date Provider Notified WSC	4/20/2021	
Action Taken	test action taken	
Provider- Remediation	Staff suspended; Staff training; Disciplinary action; Other	
Other	test other	
Created By	WSC Portal User One, 4/12/2021 6:59 AM	Last Modified By WSC Portal User One, 4/20/2021 11:31 AM
	Owner	WSC Portal User One

DFPS/PI Report History

4/20/2021 11:31 AM

User: WSC Portal User One

Action: Changed Action Taken.

4/20/2021 11:30 AM

User: WSC Portal User One

Action: Changed Date Alleged Incident to 4/4/2021.

4/20/2021 11:30 AM

User: WSC Portal User One

Action: Changed Date Provider Notified WSC to 4/20/2021. Changed Action Taken.

4/12/2021 6:59 AM

User: WSC Portal User One

Action: Created.

Figure 2.2.5B Print Preview

From the Print preview, click the 'print this page' on the top right as show above or type Ctrl+P on the keyboard.

Users can then choose to either save the print view as a PDF document or to physically print it.

4/20/2021

DFPS-086963 - WSC

[Close Window](#)
[Print This Page](#)
[Expand All](#) | [Collapse All](#)

WSC

DFPS-086963

Summary

DFPS/PI Unique Case ID	DFPS-086963	Case Status	Open
DFPS/PI Case #	2154	Date Alleged Incident	4/4/2021
Provider Name	Test Provider		
Date Final Investigation Report Received	4/8/2021		
Allegation disposition appealed	✓		

Allegation Information

Date Provider Notified WSC	4/20/2021	
Action Taken	test action taken	
Provider- Remediation	Staff suspended; Staff training; Disciplinary action; Other	
Other	test other	
Created By	WSC Portal User One, 4/12/2021 6:59 AM	Last Modified By WSC Portal User One, 4/20/2021 11:31 AM
	Owner	WSC Portal User One

DFPS/PI Report History

4/20/2021 11:31 AM

User: WSC Portal User One

Action: Changed Action Taken.

4/20/2021 11:30 AM

User: WSC Portal User One

Action: Changed Date Alleged Incident to 4/4/2021.

4/20/2021 11:30 AM

User: WSC Portal User One

Action: Changed Date Provider Notified WSC to 4/20/2021. Changed Action Taken.

4/12/2021 6:59 AM

User: WSC Portal User One

Action: Created.

Print

1 page

Destination

Save as PDF

Pages

All

Layout

Portrait

More settings

Save

Cancel

Figure 2.2.5C Print Options

2.1.6 Audit Trail

The system is set up to log activities performed on each record to help track the most recent staff member to have processed an application at a prior stage.

Audit trail on records will appear as shown in the image below.

Created By User Admin2 , 8/21/2020 5:14 PM	Last Modified By Nishant Madireddy , 10/6/2020 3:56 PM
---	---

Figure 2.2.6A Audit Trail

2.1.7 Alerts

The system will provide alerts to users for records that need their action. Users will receive a notification as shown in the image below.

The screenshot shows the 'Waiver Survey And Certification' interface. A notification alert is displayed in the top right corner, indicating that a POC is required for Waiver Survey (RLID-18111). The alert is highlighted with a red box. Below the notification, a table lists contract details for T1D Health Services Inc. contracts. The table has columns for Contract Number, Contract Name, Waiver Type, and Contract Status. The most recent alert is at the top of the list.

Contract Number	Contract Name	Waiver Type	Contract Status
100001241	T1D HEALTH SERVICES INC	HCS	Open
100001242	T1D HEALTH SERVICES INC	HCS	Open
100001243	T1D HEALTH SERVICES INC	HCS	Open
100001244	T1D HEALTH SERVICES INC	TXHML	Open
100001245	T1D HEALTH SERVICES INC	HCS	Open
100001246	T1D HEALTH SERVICES INC	HCS	Open
100001247	T1D HEALTH SERVICES INC	TXHML	Open
100001248	T1D HEALTH SERVICES INC	HCS	Open
100001249	T1D HEALTH SERVICES INC	HCS	Open
100001250	T1D HEALTH SERVICES INC	TXHML	Open

Pending Provider Actions

Report Log ID	Contract #	Contract Name	Type	Review Status
RLID-18111	100001245	T1D HEALTH SERVICES INC	Waiver Survey	POC Required

[Submit](#)

Figure 2.2.7A Alert Notification

When the user clicks on the notification, they are provided with a list of recent alerts with a short description. The most recent alert will appear on the top.

The system will also generate email alerts. These alerts will be sent to all the email IDs linked to the provider's comp code.

4.1 Create a New Record

In the WSC System, any new report or event is referred to as a **record**. Each new record created will have a unique 'Record ID'. With the provider account, users will be able to perform actions such as, submit notification of an individual death and accompanying documentation, notification of finalized DFPS/PI reports, submit Plan of Correction, submit Evidence of Correction, and add additional comp codes. Each of this action is referred to as a record.

Some actions have exceptions, but the general workflow is as follows:

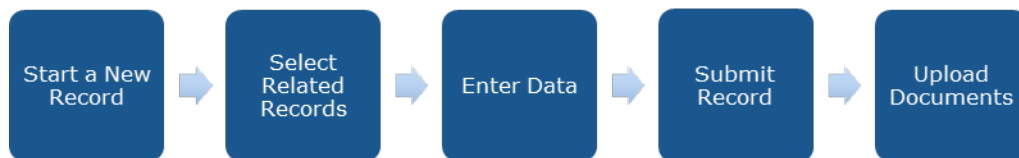


Figure 2.3A Create a New Record Workflow

We will look at individual workflows in the sections below.

2.1.8 Death Reports

The 'Death Case' tab can be used for creating a new notification of a death case or to view previously submitted individual death cases.

Creating a New Individual Death Report/Case



Figure 2.3.1B Create a New Death Case – Step 1

To create a New Death Case, click on the **New** button within the **Death Case** tab as shown in the image below:

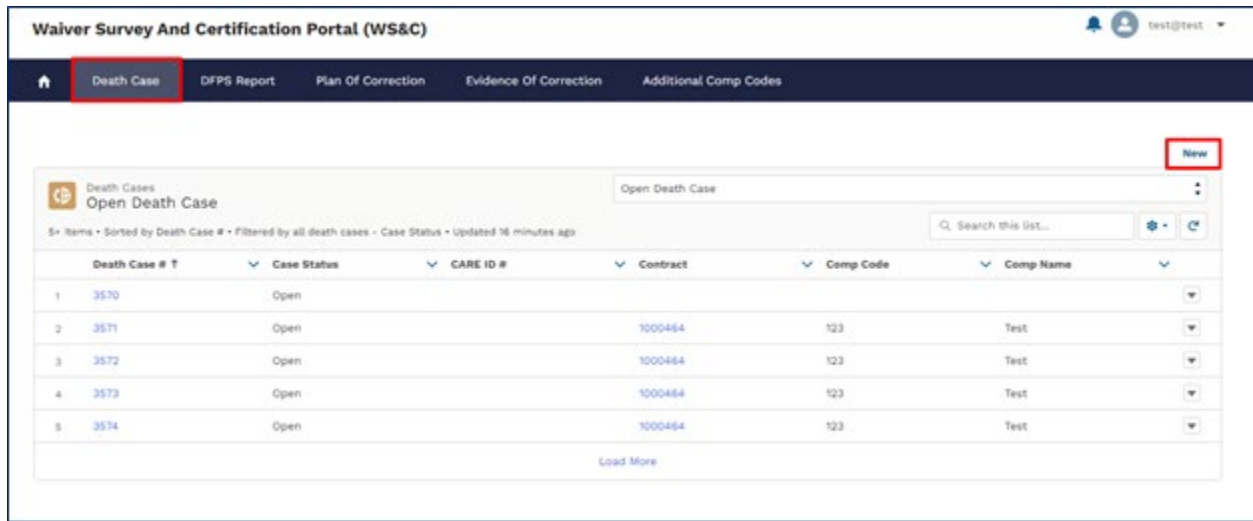


Figure 2.3.1A New Death Case – Step 1

Enter Information



Figure 2.3.1C Create a New Death Case – Step 2

This will open a new "Death Report" popup box in the same window.

The user will first search for the contract number under which they wish to file an individual death report for, then input information in the empty fields.

Waiver Survey And Certification Portal (WS&C)

test@test

Death Case DFPS Report Plan Of Correction Evidence Of Correction Additional Comp Codes

Death Report

Contract Name

search...

1004445

1004444

100014

100012

100013

Figure 2.3.1D New Death Case – Select Contract

Death Report

Create Death Case

DEATH CASE DETAIL

Case Status: Open

Cause Of Death:

Date Case Closed:

Place Death: --None--

Date Of Death:

Telephone Contact:

Date Of Notification:

Residential Type: --None--

DFPS Notified:

Type of Death: --None--

DEATH INFORMATION

* Reporter:

Brief description of events surrounding death:

Figure 2.3.1E New Death Case – Enter Information

Submit the Record



Figure 2.3.1F Create a New Death Case – Step 3

When fields are completed, click “Submit” to submit your record to the WSC team. The user will see a green success ribbon that reads “Death Report was created”.


Users will only be able to submit 1 death report for 1 CARE ID at a time.



The screenshot displays the 'Waiver Survey And Certification Portal (WS&C)' interface. The top navigation bar includes links for 'Death Case', 'DFPS Report', 'Plan Of Correction', 'Evidence Of Correction', and 'Additional Comp Codes'. The main content area is titled 'Death Report' and contains a form with the following sections:

- DESCRIPTION OF THE EVENT SURROUNDING THE DEATH:** A large text area for notes.
- PROVIDER INFORMATION:**
 - Contract: 1004445
 - Contract Name: Demo 4.5
 - Contact Address: [Empty]
 - Provider name: DEMO 4.5
 - Comp Code: 445
 - Contact City: [Empty]
 - Waiver Type: HCS
 - WCA: 3
 - Contact Name: [Empty]
 - Contact Phone: [Empty]
- CONSUMER INFORMATION:**
 - CARE ID: 4451 (highlighted with a red box)
 - Full Name: [Empty]
 - Birth Date: 2020-05-14


At the bottom of the form are 'Cancel' and 'Submit' buttons. The 'Submit' button is highlighted with a red box.

Figure 2.3.1G New Death Case – Submit to WSC


Waiver Survey And Certification Portal (WSC)



portaluserwsc1@protonmail

[Home](#)
[Death Case](#)
[DFPS Report](#)
[Plan Of Correction](#)
[Evidence Of Correction](#)
[Additional Comp Codes](#)


Death Case
1005450297

[Print View](#)

CARE ID # [1005450297](#) Birth Date [9/25/1984](#) Date Of Death

Summary

Death Case # [5807](#) Case Status [Open](#)

Provider Name [T1D HEALTH SERVICES INC](#) Date Of Death

Cause Of Death Date Of Notification

Place Of Death DFPS Notified ☐

Telephone Contact ☐ Age At Death

Residential Type Waiver Type

Type of Death

Death Time

Consumer Personal Information

CARE ID # [1005450297](#) Consumer Name

Birth Date [9/25/1984](#)

Provider Information

Contract [100001243](#) Comp Code [T1D](#)

Contract Name [T1D HEALTH SERVICES INC](#) Comp Name [T1D HEALTH SERVICES INC](#)


Contact Name [Dominics Victoria](#) Contact Phone [\(713\)505-0122](#)

Contact Address [19022 Golden Heath Ln](#) WCA [19](#)

Contact City [Richmond](#)


Death Information

Reporter

Description of the event 


Created By [WSC Portal User One, 4/5/2021 12:45 PM](#) Last Modified By [WSC Portal User One, 4/5/2021 12:45 PM](#)

Owner [WSC Portal User One](#)

 Files (0) [Add Files](#)

[Upload Files](#)

Or drop files

 Death Case History (6+)

Date	Field	User	Original Value	New Value
4/5/2021 12:45 PM	Created	WSC Portal User One		
4/5/2021 12:45 PM	Comp Code	WSC Portal User One		T1D
4/5/2021 12:45 PM	Comp Name	WSC Portal User One		T1D HEALTH SERVICES INC
4/5/2021 12:45 PM	Contract Name	WSC Portal User One		T1D HEALTH SERVICES INC
4/5/2021 12:45 PM	Contract #	WSC Portal User One		100001243
4/5/2021 12:45 PM	Birth Date	WSC Portal User One		1984-09-25

[View All](#)

Figure 2.3.1H New Death Case – Record Page

Upload Files



Figure 2.3.1I Create a New Death Case – Step 4

The screenshot shows the 'Waiver Survey And Certification Portal (WS&C)' interface. The header includes the Texas Health and Human Services logo and a user profile for 'portaluserwsc1@protonmail'. The navigation bar contains links for 'Death Case', 'DFPS Report', 'Plan Of Correction', 'Evidence Of Correction', and 'Additional Comp Codes'. The main content area is titled 'New Death Case – Record Page' and includes a 'Restraint Used' checkbox, a 'Description of the events' text area, and a table for 'Created By' and 'Last Modified By'. The 'Files (0)' section at the bottom features a red box around the 'Upload Files' button and a 'Death Case History (6+)' link.

Figure 2.3.1J New Death Case – Record Page

After the final data entry screen, providers may upload supporting documents to the record.

Users may select the 'Upload files' link or the "add files" link from the files section at the bottom of the record details page. Once the document upload is complete, the user can click "Done" and see their document name reflected in the document row.

2.1.9 Notifications for Finalized DFPS/PI Reports

Create a Notification Regarding an Investigation of Abuse, Neglect, or Exploitation



Figure 2.3.2A Create a Notification Regarding an Investigation of Abuse, Neglect, or Exploitation – Step 1

The 'DFPS Record' tab can be used for creating a new notification regarding a DFPS/PI case or to view previously submitted notifications of DFPS/PI Reports, reported using Form 8494, Notification Regarding An Investigation of Abuse, Neglect or Exploitation.

To create this notification, the user has to click on the 'New' button within the "DFPS Report" tab as shown in the image below.

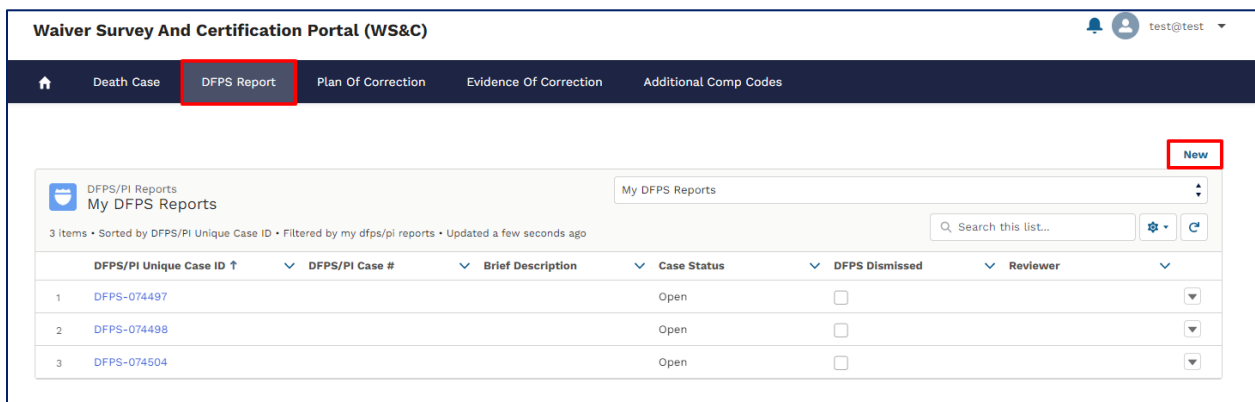


Figure 2.3.2B New DFPS/PI Record – New Button

Enter Information



Figure 2.3.2C Create a New DFPS Record – Step 2

This will open a new “DFPS Record” popup box in the same window.

Users are required to enter the DFPS Case Number to proceed.

The screenshot shows the 'Waiver Survey And Certification Portal (WS&C)' interface. The 'DFPS Report' tab is selected in the top navigation bar. A 'DFPS Report' popup box is open, displaying a search field for 'Case No'. The search field contains the text 'ABC1234' and is highlighted with a red border. Below the search field, the search results show two entries: 'ABC1234' and 'abc1234', each with a small yellow icon to its left. The popup box has a close button (X) in the top right corner.

Figure 2.3.2D New DFPS Record – Enter Case Number

System will initially check if a DFPS/PI record exists for the provided case number.

If there is a matching DFPS/PI record shown, users are **required** to select it.

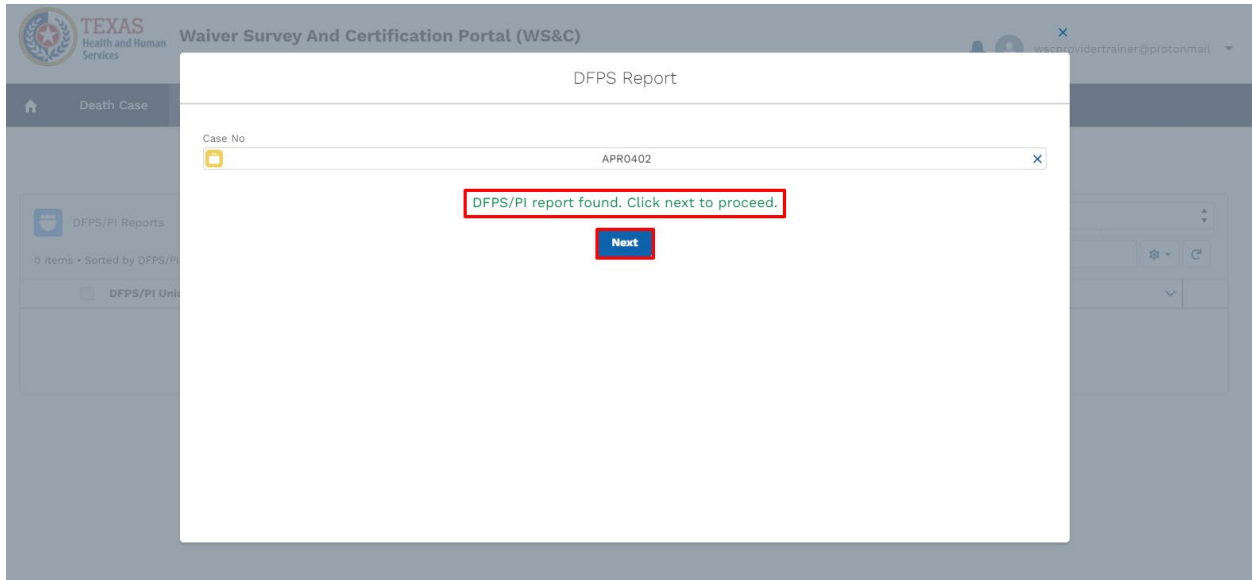


Figure 2.3.2D New DFPS Record – Matching Case Number

Kindly enter the complete DFPS case number and ensure that the case# result is an **exact match** to the case number entered.

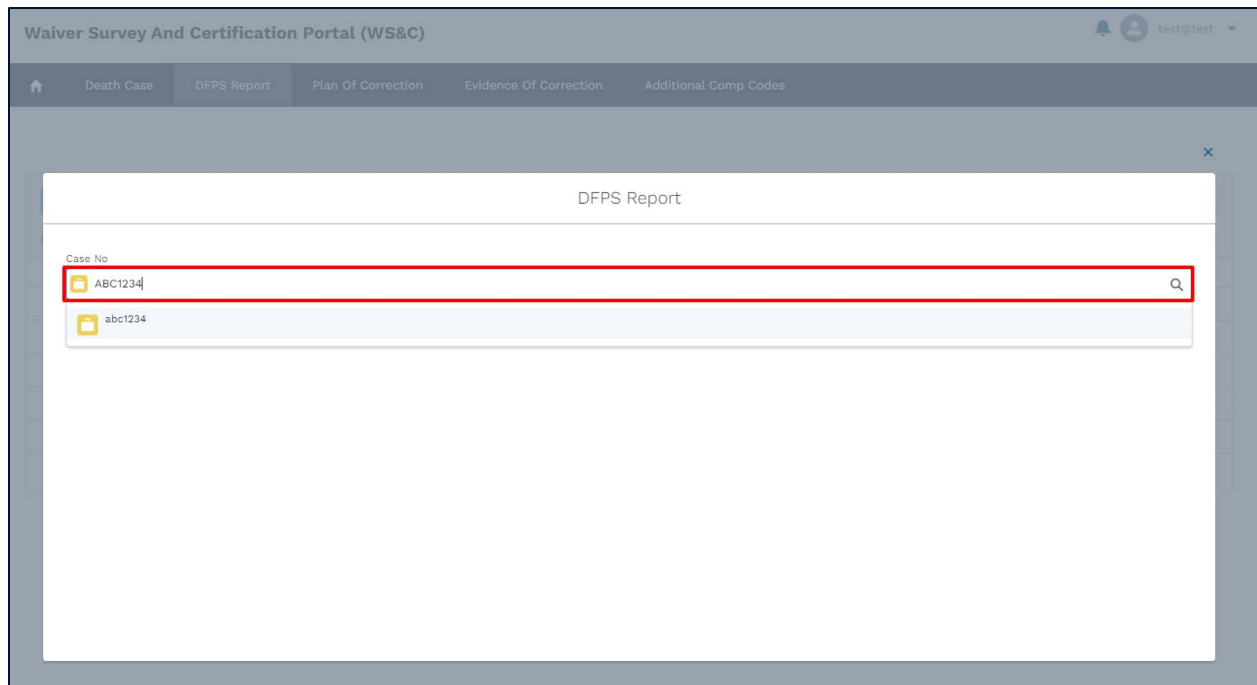


Figure 2.3.2E New DFPS Record – Enter Case Number

If a DFPS/PI record does not exist for the provided case#, the system will automatically create a DFPS/PI record.

Waiver Survey And Certification Portal (WS&C)

test@test

Death Case DFPS Report Plan Of Correction Evidence Of Correction Additional Comp Codes

DFPS Report

Case No

ABC1234

No Result Found...

Create New

Figure 2.3.2F New DFPS Record – Create New

Proceed to enter the required information.

Waiver Survey And Certification Portal (WS&C)

test@test

Death Case DFPS Report Plan Of Correction Evidence Of Correction Additional Comp Codes

DFPS Report

DFPS/PI Case # abc1234 Date Provider Notified WSC Feb 17, 2021

Contact Phone Date Final Investigation Report Received

Action Taken Administrator Alleged Perp

Provider- Remediation

Available Chosen Other

Host home/compani... Alternate residence off... test

Change in service pr... Change in level of supe...

Updated special nee...

Other

* Created By ID kohoha6860@qlevjh * Created Date Feb 17, 2021

Date Time

Feb 17, 2021 10:02 PM

Submit

Figure 2.3.2G New DFPS Record – Enter Information

Submit the Record

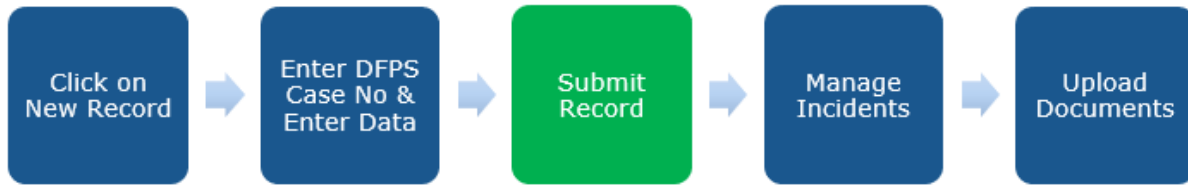


Figure 2.3.2H New DFPS Record – Step 3

After all the required information is entered, click on the **Submit** button.

Waiver Survey And Certification Portal (WS&C)

Home | Death Case | DFPS Report | Plan Of Correction | Evidence Of Correction | Additional Comp Codes

DFPS Report

DFPS/PI Case # abc1234 Date Provider Notified WSC Feb 22, 2021

Contact Phone Date Final Investigation Report Received

Action Taken test 2 Administrator Alleged Perp ☒

Provider Remediation

Available: Change in service pr..., Change in level of su..., Alternate residence ..., Other

Chosen: Staff reassigned, Updated special needs ...

Other:

* Created By ID kohoha6860@qlevjh * Created Date Date Feb 17, 2021 Time 10:02 PM

Submit

Figure 2.3.2I New DFPS Record – Submit

A new DFPS/PI record is created, and user will automatically be redirected to the record's details screen.



Figure 2.3.2J New DFPS Record – Step4

Manage Incidents

On the record's details page, there is a section at the bottom of the page titled **Manage Incidents**. This section allows providers to add individuals and alleged perpetrators to the DFPS/PI record being created.

Figure 2.3.2K Manage Incidents

To add individuals, click on the **New** button and enter the CARE ID of the individual(s).

User will be able to add multiple CARE IDs to a DFPS/PI record.

Figure 2.3.2L Manage Incidents – Create New

Once a CARE ID is added, the system will autofill the contract number, First name, and the Last name of the individual.

The system will only allow users to add CARE IDs of individuals linked to account's **Comp Code**. If an unlinked CARE ID is added, system will display as error message as shown below:

The screenshot shows the 'Manage Incidents' page in the WSC portal. A red error banner at the top states 'Error: Invalid CARE ID#'. The page contains a table with incident details. The second incident, with CARE ID 1021, is highlighted with a red box. Below the table, there are input fields for Consumer Name, Contract Name, Comp Name, and Comp Code. The 'Add Files' button is also visible at the bottom right.

INCIDENT #	CARE ID #	CONTRACT #	ABUSE TYPE	LIVING SETTING	AP FIRST NAME	AP LAST NAME	AP RELATIONSHIP	DISPOSITION	CONCUR DISPOSITION	REFERRED
X	54503	10000124	Neglect	OHFH	TEST AP	LAST AP	LA ICF-IID Sta	Inconclusive	Yes	<input type="checkbox"/>
X	1021		Physical	4 - Person G			Day Hab Staff	Confirmed	No	<input checked="" type="checkbox"/>

Figure 2.3.2 M Manage Incidents – Invalid Care ID

The screenshot shows the 'New DFPS Record' page in the WSC portal. The page contains a table with incident details. The second incident, with CARE ID 1021, is highlighted with a red box. Below the table, there are input fields for Consumer Name, Contract Name, Comp Name, and Comp Code. The 'Add Files' button is also visible at the bottom right.

INCIDENT #	CARE ID #	CONTRACT #	ABUSE TYPE	LIVING SETTING	AP FIRST NAME	AP LAST NAME	AP RELATIONSHIP	DISPOSITION	CONCUR DISPOSITION	REFERRED
X	54503	10000124	Neglect	OHFH	TEST AP	LAST AP	LA ICF-IID Sta	Inconclusive	Yes	<input type="checkbox"/>
X	1021		Physical	4 - Person G			Day Hab Staff	Confirmed	No	<input checked="" type="checkbox"/>

Figure 2.3.2N New DFPS Record – Record Page

Upload Files



Figure 2.3.2N Create a New DFPS/PI Report Notification Record – Step 4

After the final data entry screen, providers may upload supporting documents to the record.

Users may select the “Upload files” link or the “add files” link from the files section at the bottom of the record details page. Once the document upload is complete, the user can click “Done” and see the document name reflected in the document row.

2.1.10 Plan of Correction (POC)

Submitting a POC from the Homepage

Plan of Corrections can be submitted from the homepage by clicking on the **submit** button under pending provider actions.

Contract Number	Contract Name	Waiver Type	Contract Status
100001241	T1D HEALTH SERVICES INC	HCS	Open
100001242	T1D HEALTH SERVICES INC	HCS	Open
100001243	T1D HEALTH SERVICES INC	HCS	Open
100001244	T1D HEALTH SERVICES INC	HCS	Open
1019977	T1D HEALTH SERVICES INC	HCS	Open
1019999	T1D HEALTH SERVICES INC	HCS	Open
1012429	T1D HEALTH SERVICES INC	HCS	Open
102345	T1D HEALTH SERVICES INC	HCS	Open

Report Log ID	Contract #	Contract Name	Due Date	Type
RLID-18620	100001241	T1D HEALTH SERVICES INC	2021-04-13	Waiver Survey

Figure 2.3.3A New POC from the homepage

Clicking on **submit** will open up a Plan of Correction (PoC) pop up page where users can enter all necessary information.

You will notice that survey and contract are automatically linked to the Plan of Correction when accessed from the **Pending Provider Actions** Section.

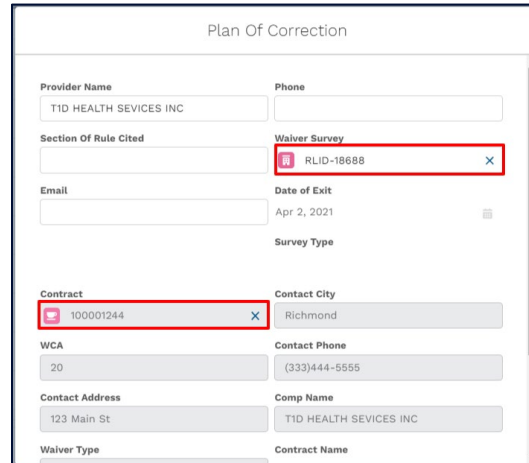
A screenshot of a web form titled "Plan Of Correction". The form is divided into several sections with labels and input fields. The "Provider Name" field contains "T1D HEALTH SERVICES INC". The "Phone" field is empty. The "Section Of Rule Cited" field is empty. The "Waiver Survey" field contains a dropdown menu with "RLID-18688" selected, highlighted by a red box. The "Email" field is empty. The "Date of Exit" field contains "Apr 2, 2021". The "Survey Type" field is empty. The "Contract" field contains a dropdown menu with "100001244" selected, highlighted by a red box. The "Contact City" field contains "Richmond". The "WCA" field contains "20". The "Contact Phone" field contains "(333)444-5555". The "Contact Address" field contains "123 Main St". The "Comp Name" field contains "T1D HEALTH SERVICES INC". The "Waiver Type" field is empty. The "Contract Name" field is empty.

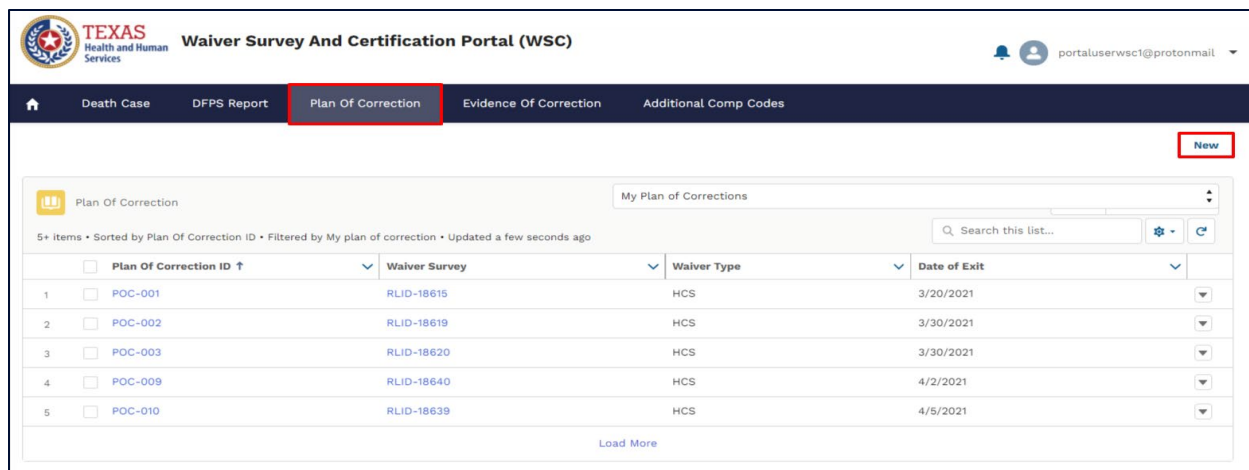
Figure 2.3.3B Pending Provider Actions

Users are required to fill all the relevant fields and click on **submit** to send the record for the program's review. The record will be denied and sent back if any further corrections or clarifications are required.

Once a new POC record is created, system will direct users to the POC tab where they can upload relevant documentation, such as **Form 3724**.

Submitting a New POC from the POC tab

Alternatively, "Plan of Correction" tab can be used for submitting a new Plan of Correction or to view previously submitted Plans of Correction.



The screenshot displays the 'Waiver Survey And Certification Portal (WSC)' interface. The top navigation bar includes the Texas Health and Human Services logo, the portal title, and a user profile dropdown for 'portaluserwsc1@protonmail'. Below this, a dark blue menu bar contains links for 'Death Case', 'DFPS Report', 'Plan Of Correction' (highlighted with a red box), 'Evidence Of Correction', and 'Additional Comp Codes'. The main content area, titled 'Plan Of Correction', features a 'New' button in the top right corner (also highlighted with a red box). Below the button is a table with 5+ items, sorted by Plan Of Correction ID. The table columns are 'Plan Of Correction ID', 'Waiver Survey', 'Waiver Type', and 'Date of Exit'. The table lists five items, each with a checkbox, a POC ID, a RLID, a waiver type (HCS), and an exit date. A 'Load More' link is at the bottom of the table.

	Plan Of Correction ID ↑	Waiver Survey	Waiver Type	Date of Exit
1	<input type="checkbox"/> POC-001	RLID-18615	HCS	3/20/2021
2	<input type="checkbox"/> POC-002	RLID-18619	HCS	3/30/2021
3	<input type="checkbox"/> POC-003	RLID-18620	HCS	3/30/2021
4	<input type="checkbox"/> POC-009	RLID-18640	HCS	4/2/2021
5	<input type="checkbox"/> POC-010	RLID-18639	HCS	4/5/2021

[Load More](#)

Figure 2.3.3B New Plan of Correction – New Button

To submit a new Plan of Correction, click on the 'New' button within the "Plan of Correction" tab as shown in the image below.

Entering Information



Figure 2.3.3C Create a New Plan of Correction– Step 2

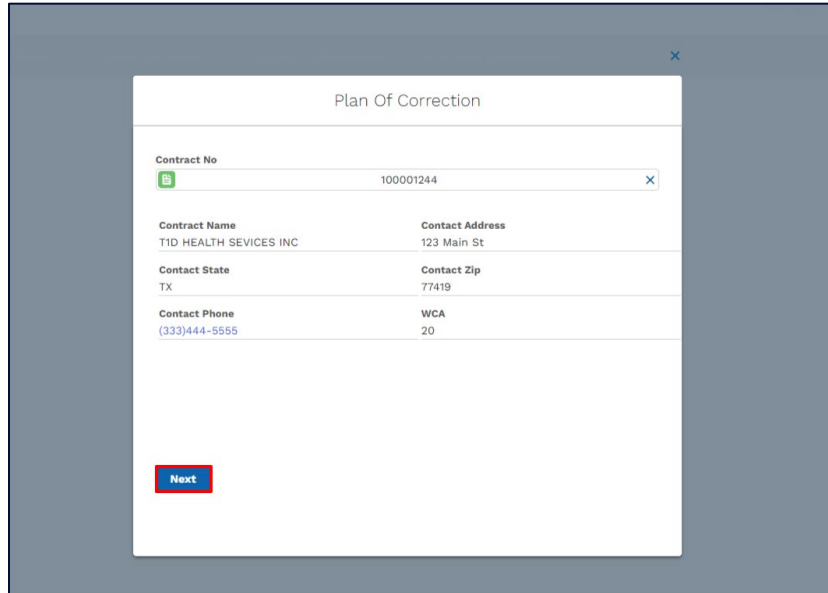
This will open a new "Plan of Correction" popup box in the same window.

The user will first search for the contract number for which they wish to submit a Plan of Correction for, then input information in the empty fields.


The screenshot shows the 'Waiver Survey And Certification Portal (WS&C)' interface. The 'Plan Of Correction' tab is active. A popup box titled 'Plan Of Correction' is open, displaying a search bar for 'Contract Name' and a list of contract numbers: 1004445, 1004444, 100014, 100012, and 100013.

Figure 2.3.3D New Plan of Correction – Select Contract

Once a contract is selected, the basic details will be auto-filled as shown below:



The screenshot shows a web form titled "Plan Of Correction" with a close button (X) in the top right corner. The form contains the following fields:

Contract No	
	100001244

Contract Name	Contact Address
TID HEALTH SERVICES INC	123 Main St

Contact State	Contact Zip
TX	77419

Contact Phone	WCA
(333)444-5555	20

A red "Next" button is located at the bottom left of the form.

Figure 2.3.3E New Plan of Correction – View Contract Information

Submitting the Record



Figure 2.3.3F New Plan of Correction – Step 3

Users are required to fill all the relevant fields and click on submit to send the record for the program manager's review. If any corrections are needed or the plan of correction is not accepted, the user will receive a notification.

Plan Of Correction

Survey Type

Contract: 100001244

Contact City: Richmond

WCA: 20

Contact Phone: (333)444-5555

Contact Address: 123 Main St

Comp Name: T1D HEALTH SERVICES INC

Waiver Type: HCS

Contract Name: T1D HEALTH SERVICES INC

Contact Name: John Doe

Comp Code: T1D

Submit

Figure 2.3.3G New Plan of Correction – Submit

Once on the user clicks submit, the system will create a new **Plan of Correction** record.

Uploading Files



Figure 2.3.3I Create a Plan of Correction – Step 4

After the final data entry screen, providers may upload supporting documents to the record, such as **Form 3724**.

Users may select the 'Upload files' link or the "add files" link from the files section at the bottom of the record details page. Once the document upload is complete, the user can click "Done" and see their document name reflected in the document row.

Waiver Survey And Certification Portal (WS&C)

Home Death Case DFPS Report Plan Of Correction Evidence Of Correction Additional Comp Codes

Plan Of Correction 045 Clone

Plan Of Correction ID: 045

Provider Name: DEMO 4.5

Phone:

Survey Type:

Section Of Rule Cited:

Contract: 1004445

Contract Name:

Contact Name:

Contact Address:

Contact City:

Contact Phone:

Owner: testf testf

Waiver Survey

Email:

Date of Exit:

Targeted Completion Date:

Comp Code:

Comp Name: DEMO 4.5

Waiver Type: HCS

WCA: 3

> Provider's Corrective Action Plan for this Citation

Files (0) Add Files

Upload Files

Or drop files

Cancel Capture


Figure 2.3.3H Plan of Correction – Record Page

POC Corrections

The program may request corrections for submitted POCs.

Providers will have **5 calendar days** from the day corrections are requested, to submit a revised POC.



The procedure for submitting a revised POC is the same as submitting a new POC. Users are required to click on **Submit** under the **Pending Provider Actions** section on the homepage, as shown below.



TEXAS

Health and Human
Services

Waiver Survey And Certification Portal (WSC)



portaluserwsc1@protonmail

Home

Death Case

DFPS Report

Plan Of Correction

Evidence Of Correction

Additional Comp Codes

Pending Provider Actions

Report Log ID	Contract #	Contract Name	Due Date	Type	
RLID-18620	100001241	T1D HEALTH SERVICES INC	2021-04-13	Waiver Survey	Submit
RLID-18653	100001242	T1D HEALTH SERVICES INC	2021-04-21	Waiver Survey	Submit
RLID-18640	100001243	T1D HEALTH SERVICES INC	2021-04-07	Waiver Survey	Submit
RLID-18688	100001244	T1D HEALTH SERVICES INC	2021-04-29	Waiver Survey	Submit
RLID-18689	100001244	T1D HEALTH SERVICES INC	2021-04-30	Waiver Survey	Submit
RLID-18691	100001244	T1D HEALTH SERVICES INC	2021-04-21	Waiver Survey	Submit
RLID-18669	1019977	T1D HEALTH SERVICES INC	2021-04-27	Waiver Survey	Submit
RLID-18675	102345	T1D HEALTH SERVICES INC	2021-04-28	Waiver Survey	Submit

Figure 2.3.3I Pending Provider Actions

Providers have only **1 chance** to submit a revised POC from the **homepage**. If further revisions are required, the provider would be emailed, and further corrections may be submitted by creating a new POC from the POC tab. Refer section [Creating a New POC from the POC tab](#)

2.1.11 Evidence of Correction

Evidence of Corrections can be created from the **Pending Provider Actions for RRD list** on the homepage or by creating a new record from the **Evidence of Correction Tab**.

Submitting an EOC from the homepage

Pending Provider Actions for RRD					
Record ID	Contract #	Contract Name	Type	Date Submitted	
RSD-143040	100001244	T1D HEALTH SERVICES INC	HCS		Submit
RSD-143041	100001244	T1D HEALTH SERVICES INC	HCS		Submit

Figure 2.3.4A Pending Provider Actions

Users see the following pop-up when they click on submit.

Evidence Of Correction

Residential Survey: RRD-0007 X

Provider Name:

Location: 77C-133333-TEJA X

Select Questions

Available Questions:

- Do the individuals' be...
- Are there two means ...
- Is an emergency plan ...
- Do the staff know wh...
- Have fire drills been c...
- Are there adequate w...

Selected Questions:

Figure 2.3.4B Evidence of Correction pop-up

You can notice that the Residential Survey and the location are automatically linked to the Evidence of Correction.

Submit an EOC from the Evidence of Correction Tab

Navigate to the Evidence of Correction tab and click on New'

TEXAS
Health and Human Services

Waiver Survey And Certification Portal (WSC)

portaluserwsc1@protonmail

Evidence Of Correction

New

Evidence Of Correction

Recently Viewed

5+ Items • Updated a few seconds ago

Q Search this list...

	Evid...	Residential ...	Contract No	Co...	Pro...	Res...	Reviewer	Location	Created By	Created Date
1	008	RSD-143018	100001242	T1D			005r00000005SQa	T1D-100001242-TDD	WSC Portal User One	4/13/2021 10:48 AM
2	000	RSD-142995	1000111	1AB			005r00000005SQa	1AB-1000111-TAA	WSC Portal User One	3/31/2021 2:45 PM
3	014	RSD-143033	100001244	T1D			005r00000005SQa	T1D-100001244-TBH	WSC Portal User One	4/14/2021 12:49 PM
4	013	RSD-143020	100001244	T1D			005t00000003Mx98	T1D-100001244-TBD	WSC Portal User One	4/13/2021 8:41 PM
5	012	RSD-143019	100001242	T1D			005r00000005SQa	T1D-100001244-TBH	WSC Portal User One	4/13/2021 8:38 PM

[Load More](#)

Figure 2.3.4C Evidence of Correction New Button

Note that submitting an Evidence of Correction from the tab requires the user to manually select the **location** and **residential survey**.

Select the **location** that requires an Evidence of Correction submission.

The screenshot shows the 'Evidence of Correction' window in the Waiver Survey And Certification Portal (WS&C). A search bar is active with the text 'search..'. Below the search bar, a list of location IDs is displayed: 445-1004445-456, 445-1004445-679, 444-1004444-666, 444-1004444-999, and 12A-100012-112. Each ID is preceded by a green icon representing a location.

Figure 2.3.4D Evidence of Correction – select location

The details of the locations will automatically populate. Cross-check the displayed information and click on **Next**

The screenshot shows the 'Evidence of Correction' window with the details for location T1D-102345-TDO populated. The details are organized into two columns:

Contract Details	
Site ID	T1D-102345-TDO
Comp State	
Contract Phone	
Comp Code	T1D
Open or Closed	Open
Waiver Type	HCS

Contract Details	
Contract Name	T1D HEALTH SERVICES INC
Comp Zip	77479
Unique ID	
Name	102345
Contract Name	T1D HEALTH SERVICES INC
Contact Address	19023 Golden Heath Ln

A red 'Next' button is located at the bottom left of the form.

Figure 2.3.4E Evidence of Correction – Step 2

Then select a **review**, if it is not automatically selected.

The screenshot shows the 'Evidence of Correction' form. At the top, there's a search bar and a user profile 'wscportaluser2@mail'. Below the navigation bar, the form is titled 'Evidence of Correction'. It has fields for 'Residential Survey' (RRD-0001), 'Location' (77C-111111-BHEE), and 'Provider Name'. Under 'Select Questions', there are two columns: 'Available Questions' and 'Selected Questions'. The 'Available Questions' list is highlighted with a red box and contains the following items:

- Are there two means of egre...
- Do emergency plans reflect t...
- Can the staff explain the em...
- Have fire drills been conduct...
- Are there adequate working ...
- Are there adequate, fully cha...

A 'Save' button is located at the bottom right of the form.

Figure 2.3.4F Evidence of Correction – Select review

Users are required to select questions they wish to provide evidence of correction for. Even though the user can choose they will eventually have to provide evidence of correction for all failed questions if the review scores under a 90% or has significant risks.

Selecting Questions

Users can select one, multiple or all questions. They can also unselect selected questions and reverse finalized questions.

Let us look at all these options below.

Users can select one or multiple questions by clicking on the questions

The screenshot shows the 'Evidence Of Correction' modal in a web application. The modal has a title bar with navigation icons. Below the title, there are fields for 'Residential Survey' (with a dropdown showing 'RRD-0007') and 'Provider Name' (an empty text box). Below these is a 'Location' field with a dropdown showing '77C-1333333-TEJA'. The main section is titled 'Select Questions' and contains two columns: 'Available Questions' and 'Selected Questions'. The 'Available Questions' column lists several questions, with 'Are there two means ...' highlighted in blue. The 'Selected Questions' column is currently empty. A 'Save' button is located at the bottom right of the modal. The background shows a table with columns for 'Record ID' and 'Contract #', with rows containing various IDs and contract numbers.

Figure 2.3.4G Evidence of Correction – Selecting Questions (one)

Selecting Multiple

Multiple questions can be selected by holding the Ctrl button and selecting individual questions

This screenshot shows the same 'Evidence Of Correction' modal as Figure 2.3.4G, but with multiple questions selected. In the 'Available Questions' list, 'Do the individuals' be...', 'Are there two means ...', 'Is an emergency plan ...', 'Do the staff know wh...', 'Have fire drills been c...', and 'Are there adequate w...' are all highlighted in blue. A red square highlights the right-pointing arrow button between the 'Available Questions' and 'Selected Questions' columns, indicating the action to move the selected questions. The 'Selected Questions' column is currently empty. The 'Save' button is at the bottom right. The background table is the same as in the previous figure.

Figure 2.3.4H Evidence of Correction – Selecting Questions (Multiple)

Selecting All

All questions can be selected by:

- Holding **Ctrl** and individually selecting all questions
- Holding **Shift** and selecting the first and last question
- Selecting a question and pressing Ctrl and button A together (Ctrl+A)

Finalizing the selection

Once all the required questions are selected, finalize the selection by clicking the arrow pointing to the right as shown below.

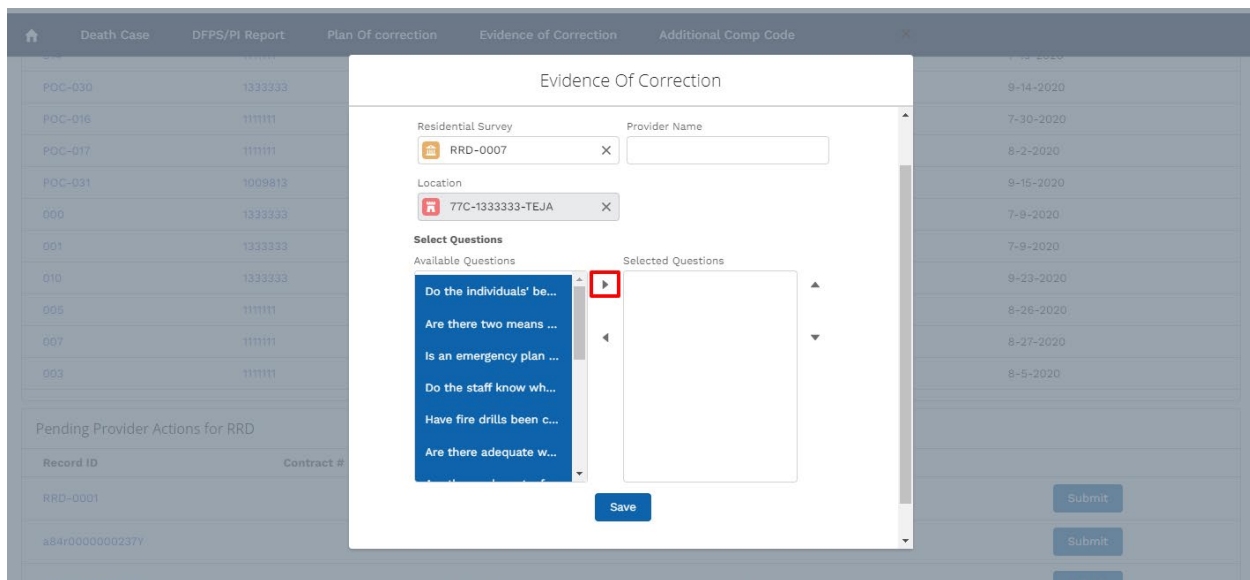


Figure 2.3.4I Evidence of Correction – Selecting Questions (All)

All the selected questions will move to the right side indicating that the questions have been finalized.

If you want to proceed click on save. You can also remove questions from the final selection as shown below:

Reversing finalization

Selected the questions you wish to remove and click on the arrow pointing to the left. The selection questions will be removed from final selection.

Evidence Of Correction

Residential Survey: RRD-0007 X

Provider Name:

Location: 77C-133333-TEJA X

Select Questions

Available Questions:

- Are there two means ...
- Have fire drills been c...
- Are there adequate, f...
- Are emergency numbe...
- Does the residence lo...
- If needed, is a ramp in...

Selected Questions:

- Do the individuals' bedro...
- Is an emergency plan av...
- Do the staff know what ...
- Are there adequate work...

Save

Figure 2.3.4J Evidence of Correction – Reversing finalized questions

Saving the selection

To proceed to the next step, click on **Save**

Evidence Of Correction

Residential Survey: RRD-0007 X

Provider Name:

Location: 77C-133333-TEJA X

Select Questions

Available Questions:

Selected Questions:

- Do the individuals' be...
- Are there two means ...
- Is an emergency plan ...
- Do the staff know wh...
- Have fire drills been c...
- Are there adequate W...

Save

Figure 2.3.4K Evidence of Correction – Finalize selection

Once clicked on save, the system will create a new **Evidence of Correction** record with the selected questions.

Upload Supporting Documentation (Safety Plans)

Upload documents by clicking on the **Upload Files** button under the files list view.

Waiver Survey And Certification Portal (WS&C)

113838

Residential Survey Date: _____ Address: _____

Owner: [Test Systest](#) Last Modified By: [Test Systest](#), 3/5/2021 4:12 PM

Created By: [Test Systest](#), 3/5/2021 4:12 PM

WSC Question and Answer (6) [New](#)

WSC Question and Answer Name	WSC Questionnaire	Answers
QA-1773	Q-0075	Fail
QA-1782	Q-0073	Fail
QA-1783	Q-0077	Significant Risk
QA-1784	Q-0076	Significant Risk
QA-1790	Q-0093	Significant Risk
QA-1797	Q-0099	Significant Risk

[View All](#)

Files (0) [Add Files](#)

[Upload Files](#)

Or drop files

Figure 2.3.4L Files Related List

2.1.12 Additional Comp Code

Adding a New Comp Code

The **'Additional Comp Code'** tab can be used to add additional comp codes to the program provider's account, so the user can access the contracts under that new comp code, if needed.

To add a new comp code, click on the **'New'** button within the tab as shown in the image below.

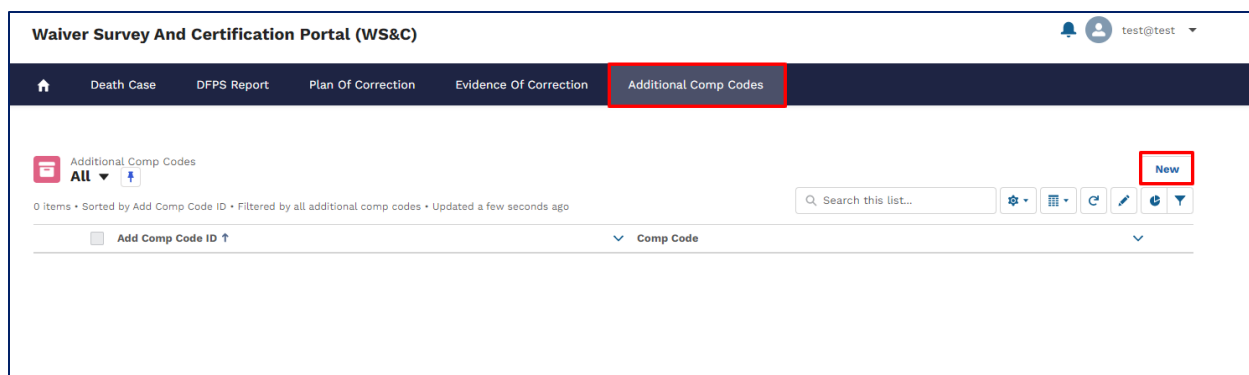


Figure 2.3.5A Additional Comp Code Tab

This will open a **New Additional Comp Code** popup box in the same window. The user will be required to input all the required information and click on **save**.

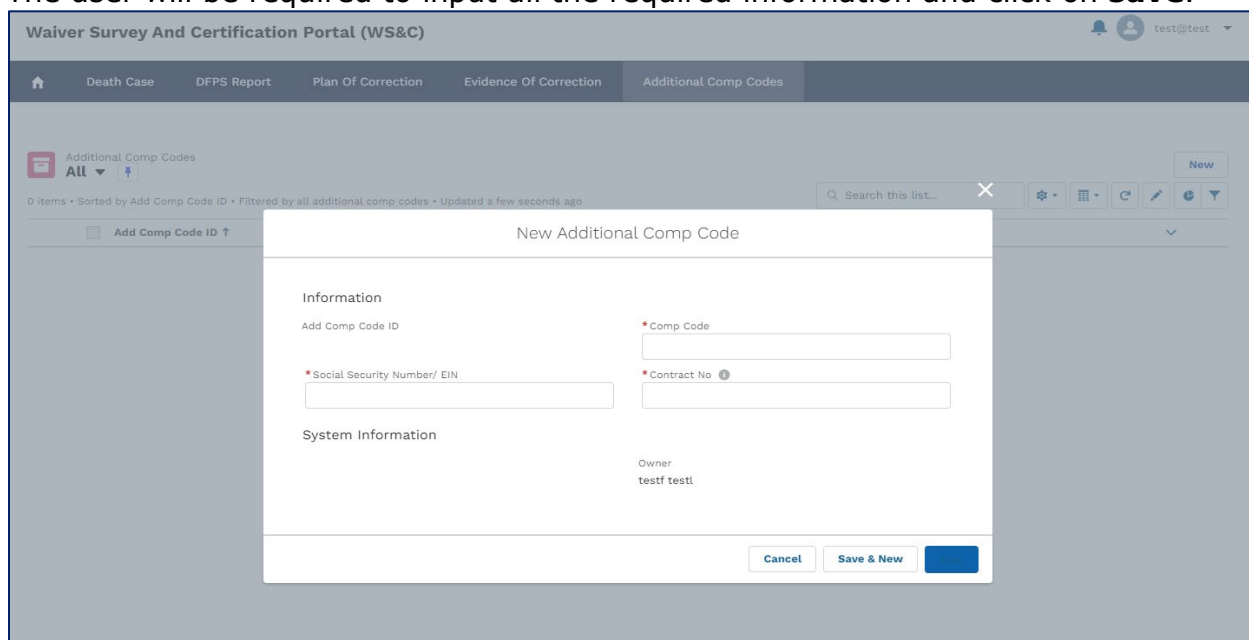


Figure 2.3.5B New Additional Comp Code pop up

The **new comp code** will be added to the user's account

I Certification

Search...

wscportaluser3@mail

Death Case DFPS/PI Report Plan Of correction Evidence of Correction **Additional Comp Code**

Additional Comp Codes Recently Viewed

2 Items • Updated a few seconds ago

Search this list...

	Add Comp Code...	Comp Code	Contract No	Social Security N...	Created By	Created Date	Last Modified By
1	04	2CB	1000222	34567890	WSC PORTAL USER	10/5/2020 9:07 PM	WSC PORTAL USER
2	03	1AB	1000111	12345678	WSC PORTAL USER	10/5/2020 8:00 PM	WSC PORTAL USER

Figure 2.3.5C New Additional Comp tab showing records

User will now be able to select a comp code from available comp codes, as shown below. The dashboard will change accordingly to show records related to the selected comp code.

TEXAS Health and Human Services Waiver Survey And Certification Portal (WSC)

portaluserwsc1@protonmail

Death Case DFPS Report Plan Of Correction Evidence Of Correction **Additional Comp Codes**

Comp Code

Select an Option

1AB

T1D

Contract Number Contract name waiver type Contract Status

Pending Provider Actions

Report Log ID	Contract #	Contract Name	Due Date	Type

Previously Submitted Provider Actions

Record ID	Contract #	Contract Name	Type	Date Submitted

Pending Provider Actions for RRD

Record ID	Contract #	Contract Name	Type	Date Submitted

Figure 2.3.5D Select Comp Code on Homepage

Contact WSC

To contact Waiver Survey & Certification, call (512) 438-4163.