CCRSS PROVIDER NAME		CERTIFICATION NUMBER
RCS CONTRACTED EVALUATOR / STAFF NAME	CERTIFICATION EVALUATION DA	TE(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.