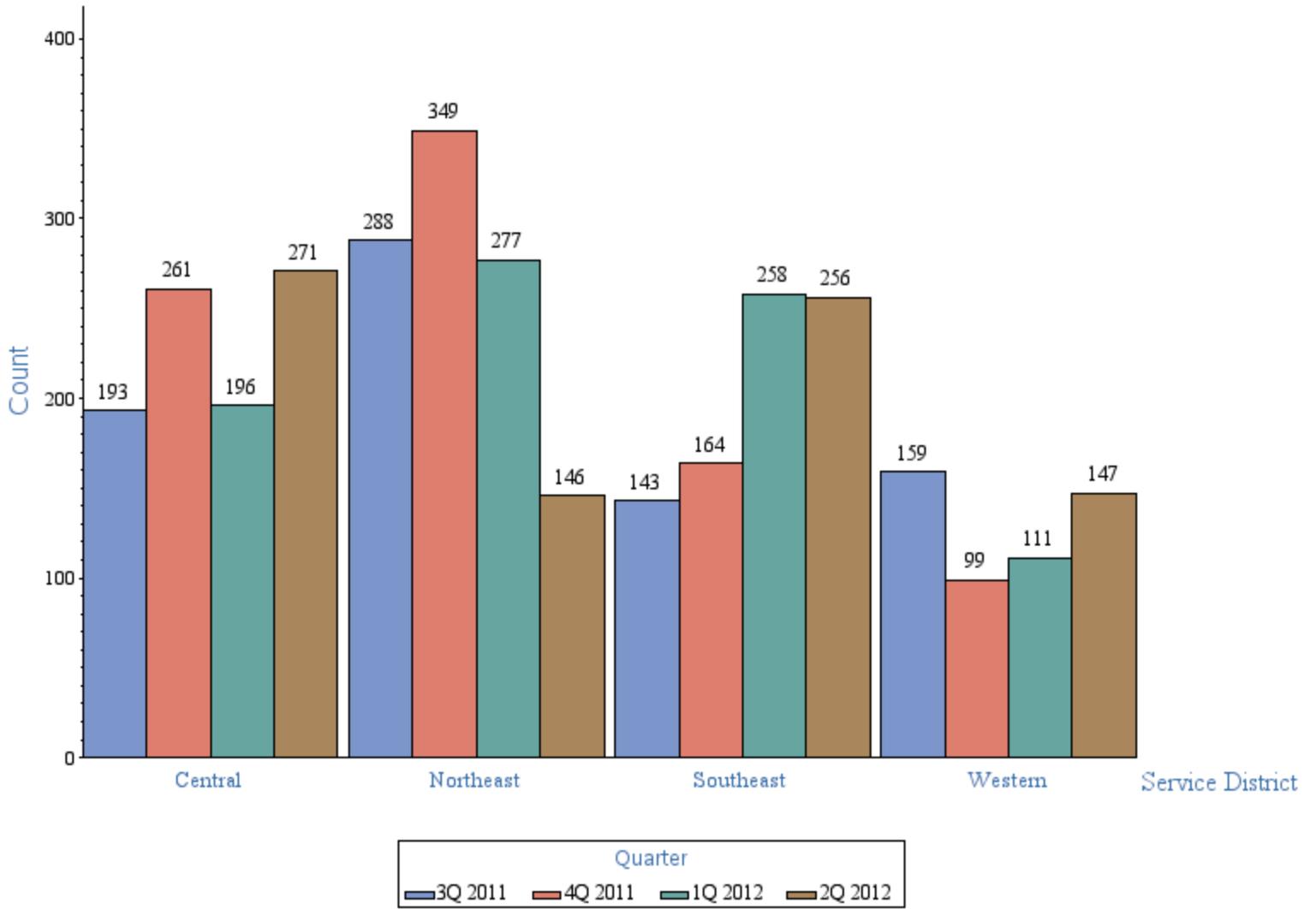
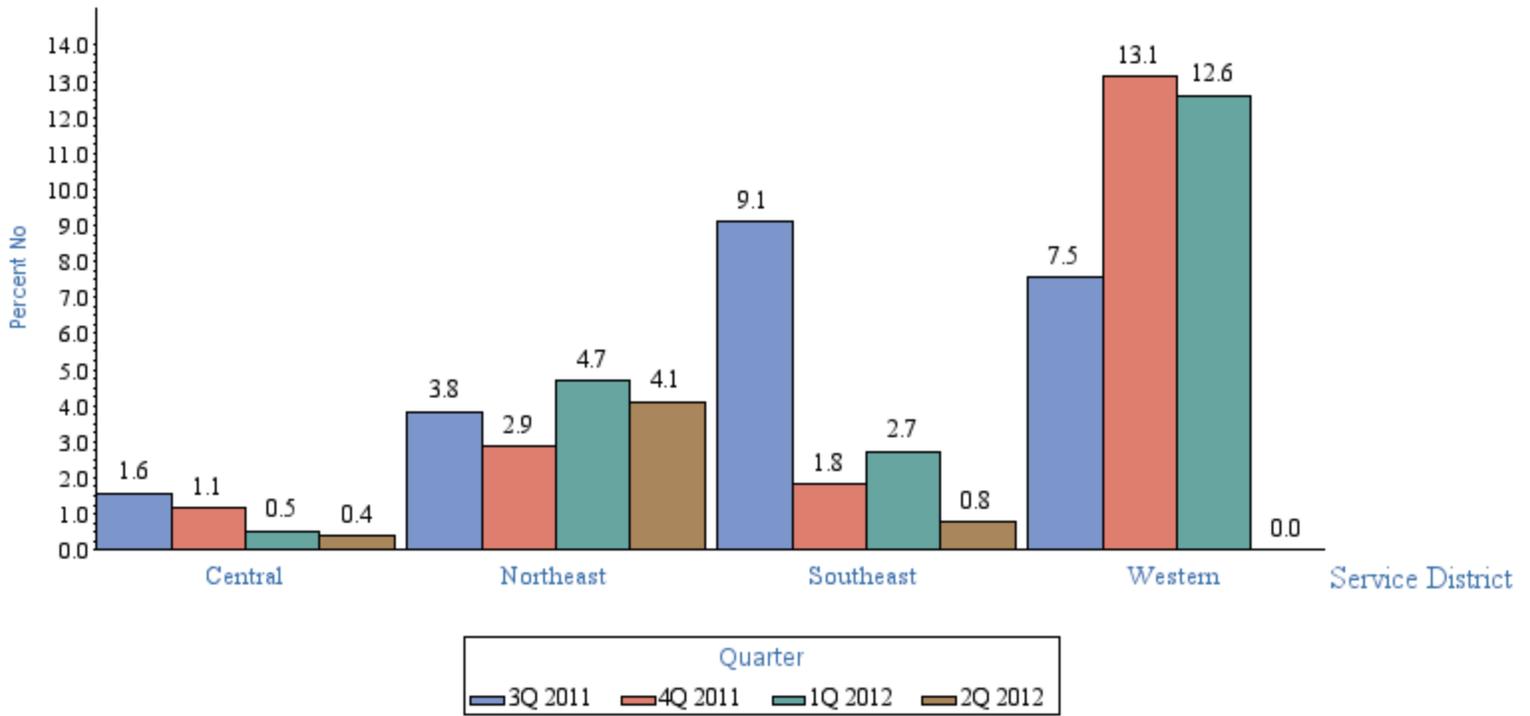


### IPP Reviews by Service District by Quarter



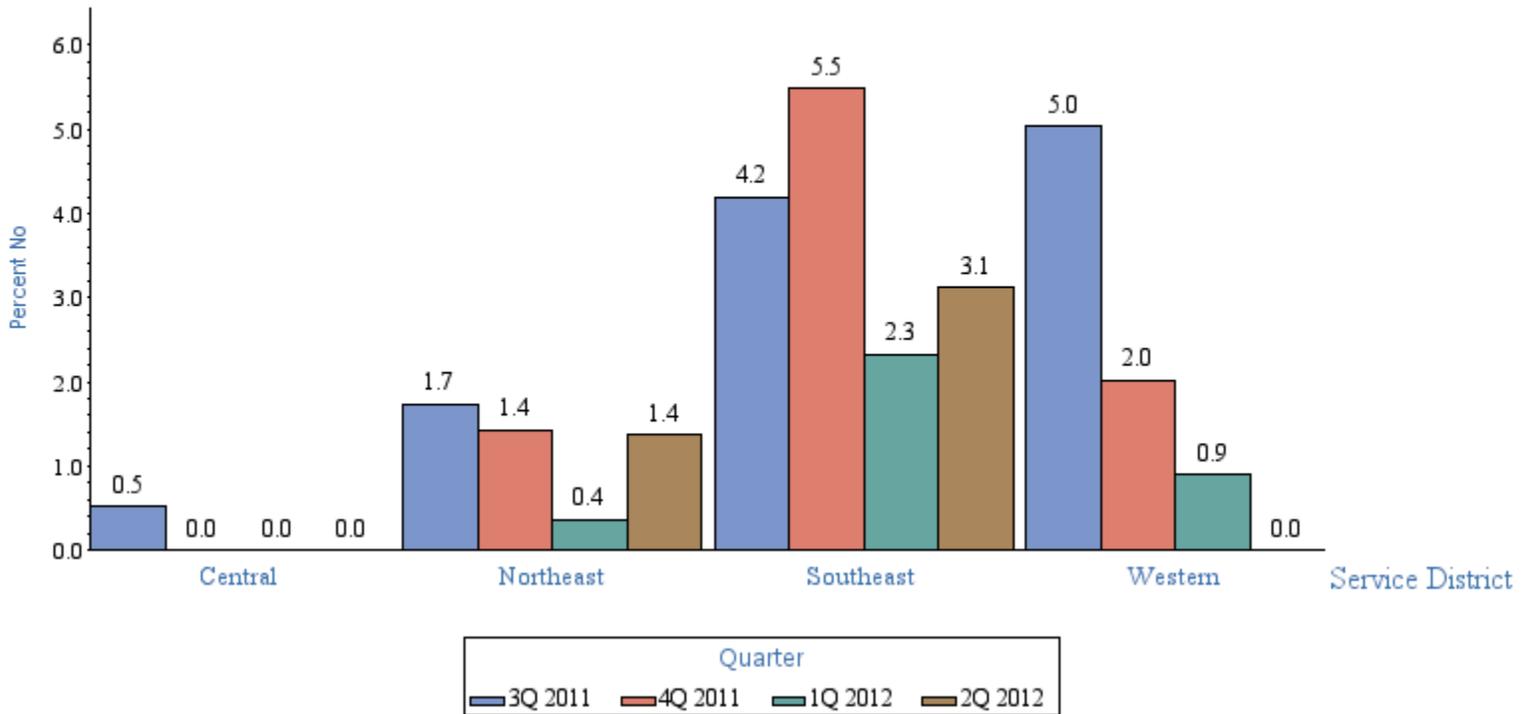
### IPP Reviews, 3rd Qtr 2011 - 2nd Qtr 2012

At a minimum the IPP/IFSP is developed annually and reviewed semi annually.



### IPP Reviews, 3rd Qtr 2011 - 2nd Qtr 2012

Individual or legal guardian participated in make a choice of waiver providers.



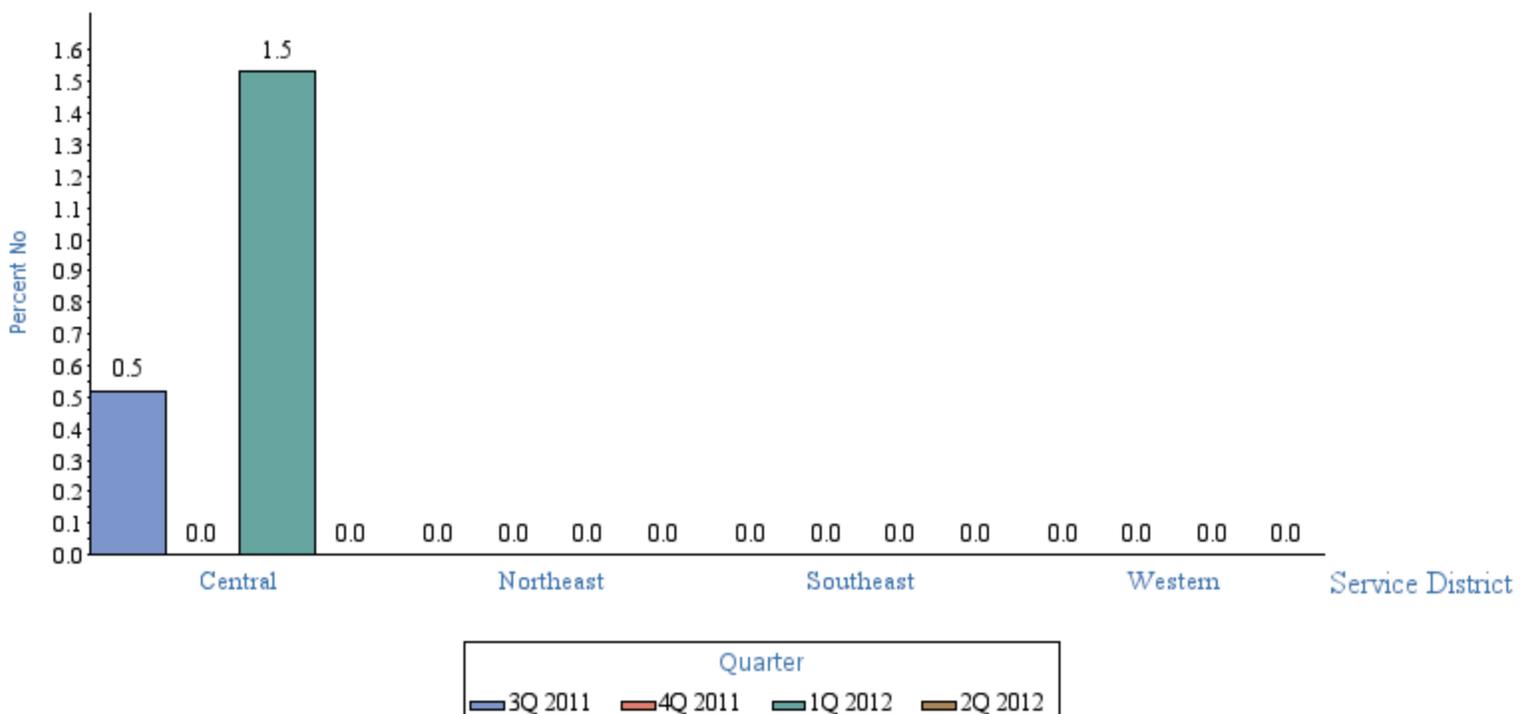
### IPP Reviews, 3rd Qtr 2011 - 2nd Qtr 2012

**Required medical assessment has been submitted.**



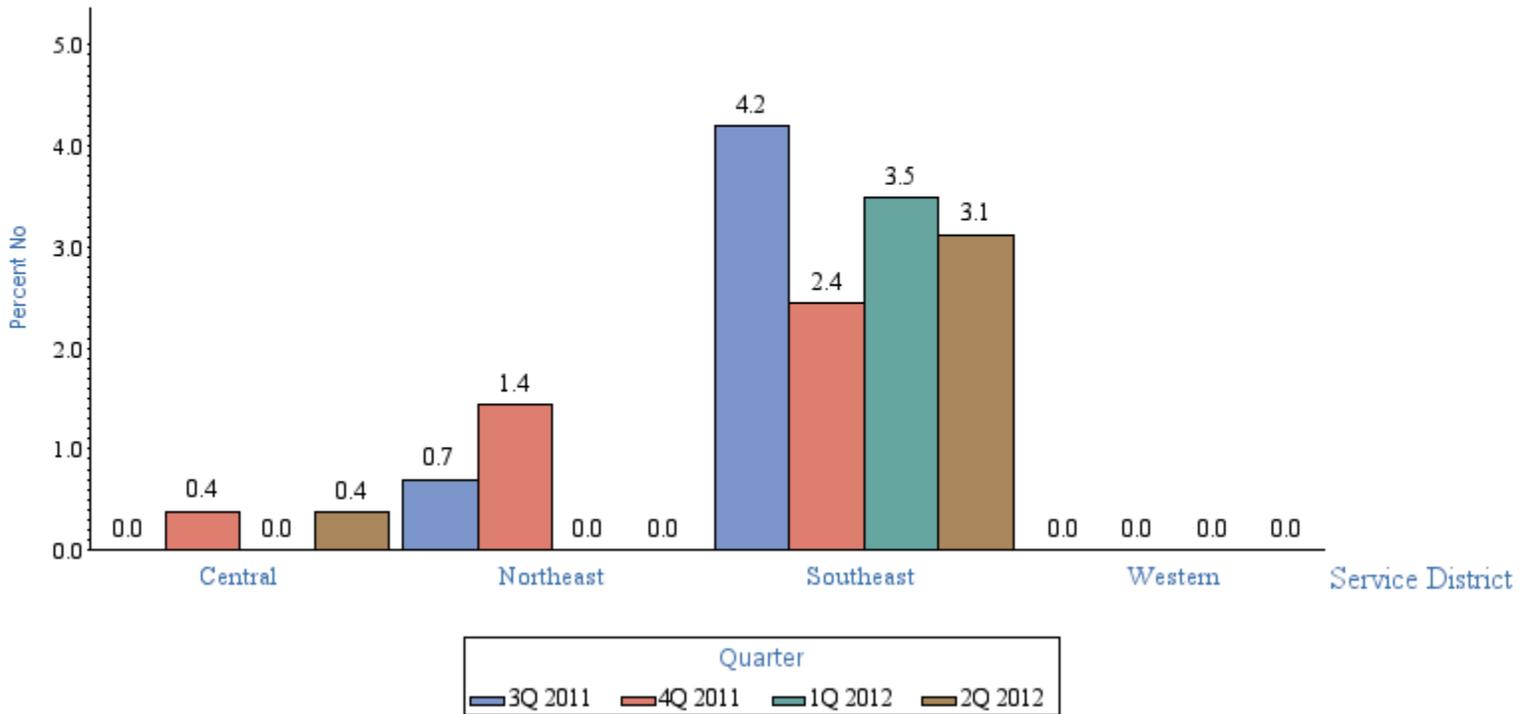
### IPP Reviews, 3rd Qtr 2011 - 2nd Qtr 2012

**The IPP/IFSP was revised due to a change(s) in a person's needs.**



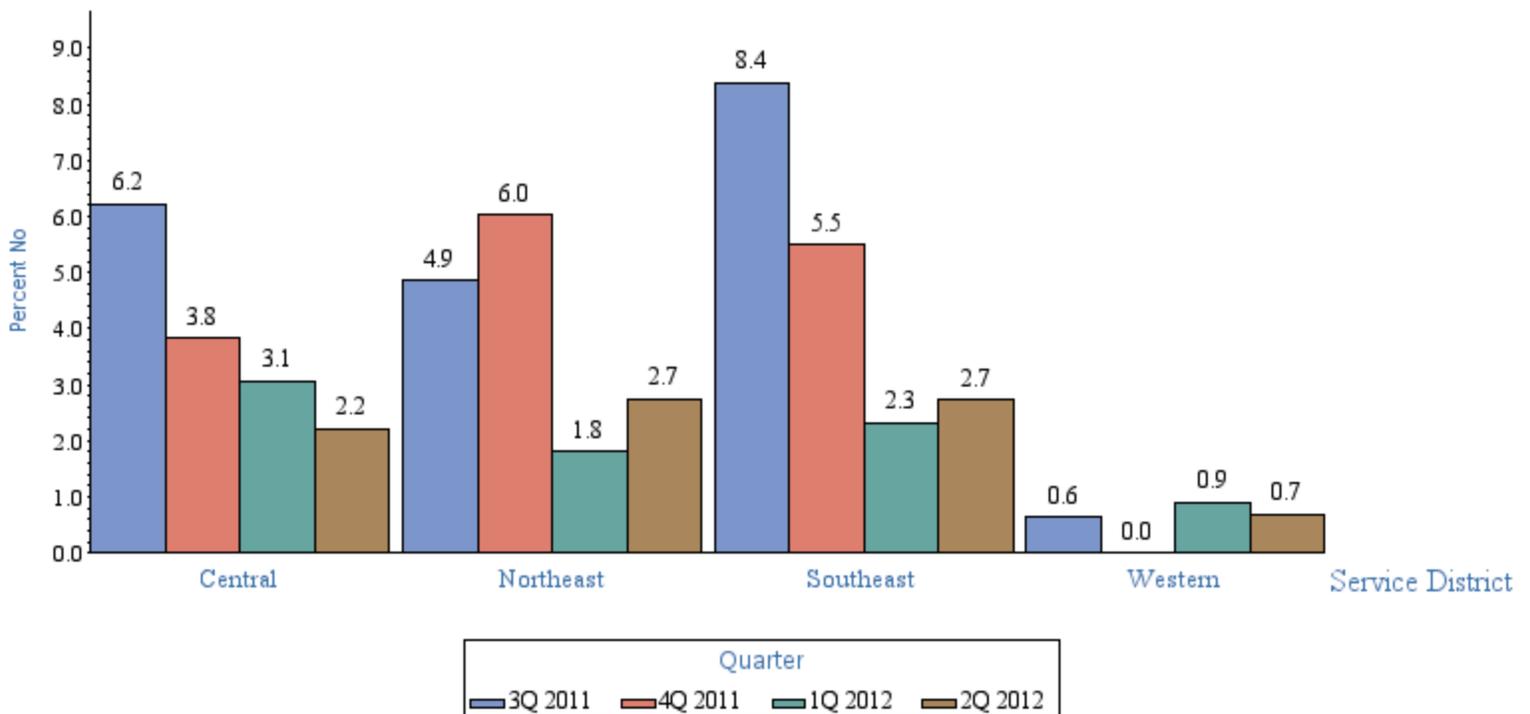
### IPP Reviews, 3rd Qtr 2011 - 2nd Qtr 2012

**Medical services are specified and documented on the IPP/IFSP.**



### IPP Reviews, 3rd Qtr 2011 - 2nd Qtr 2012

**The documented authorized units match the state's electronic authorization and billing system.**



## IPP Reviews, 3rd Qtr 2011 - 2nd Qtr 2012

**Documented authorized service codes match the state's electronic authorization and billing system.**

