

Expenditure

DDD IT Department

Author:DDD IT DepartmentTitle:ExpenditureApplication:iRecord

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Expenditure

Expenditure is a new feature on iRecord. It provides the FI or SFI to post expenditure for a service. The option to post expenditure depends on the status of the plan and the payment source of the service. Expenditure is available for an approved plan (most recent macro plan and any of its approved revisions) and a service with the Fiscal Intermediary payment source.

Refer to User Privileges to view the available permissions for your user role.

Expenditure Tile

The Expenditure pop-up tile is available from the menu options of the appropriate service on an approved plan, shown in the following figure.

The tile is divided into 3 sections.

Division of Developmental Disabilities						
James Harmony	Demographics	Plans ≡	Documents	Notes	Tosti	ng
ID : 101304 Age : 29	PLANS	ACTIONS			162	
DOB : 8/20/1986 County : Somerset Program : Supports Program SSN :	James needs to be pro	Ou vided with equipment train	Version : 1.07			
Medicaid ID : Medicaid Type : Disability-CN Medicaid Only-NMP DDD Status : Eligible For DDD Services Eligibility : Age FC Medicaid					Interim 10890/16480)
	View Exceptions		Service 1	: Individual Supports		e
Outcomes [Outcome 1 : \$1,840.00	View Exceptions View Service Expenditure Claims : FI(A	PT	Provider : Location :	AddCare, Inc. Home	Start Date : 7/27/2015 End Date : 9/18/2015 Unit Type : Hour(s) Frequency : Weekly	Rate : \$20.00 Total Units : 18 Total Cost : \$360.00 Expended : \$200.00 Balance : \$160.00
Outcome 2 : \$360.00	Testing	5	sting	resting	, cti	ng
Outcome 3 : \$0.00	Test					
Outcome 5 : \$3,940.00	Testing					
Outcome 6 : \$4,750.00						

Service Details

• The **Service Details** is self-explanatory and lists the basic information of the service, as shown in the following figure. For a service provided by an SDE (Self-Directed Employee), this section also displays the name of the provider.

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				Service 2 : Assis	tive Technology
	Code	: Individua : H2016IS : AddCare		Service Z : Assis	Units \$20
Date 09/16/15 09/09/15	Units 1	Total \$20.00 \$20.00	Post Date 10/14/15 10/14/15	Clear Filter Post By JE	Description
09/02/15 08/26/15 08/19/15 08/12/15 08/05/15	1 1 1 1 1 1	\$20.00 \$20.00 \$20.00 \$20.00 \$20.00 \$20.00	10/14/15 10/14/15 10/14/15 10/14/15 10/14/15 10/13/15	JE JE JE JE	Notes
Showing 1	to 7 of 8	entries		(>	\$ V

Expenditure Grid

• View the message, shown in the following figure, for a service that does not have any posted expenditure.



	istive Technology
Service Details Procedure : Individual Supports Code : H2016ISE Provider : AddCare, Inc. Location : Home	Service Delivery Date Units Rate \$0.00
No expenditure has been posted for this service.	Description
	Notes
	Notes

• For a service with posted expenditure details, view the grid as shown in the following figure.



				Service 2 : Assis	ive Technology
		Servi	ce Details		
	Code	: H2016IS : AddCare			Units \$20
Date 09/16/15	Units 1	Total \$20.00	Post Date 10/14/15	Clear Filter Post By JE	Description
09/09/15 09/02/15	1	\$20.00 \$20.00	10/14/15 10/14/15	JE	
08/26/15 08/19/15 08/12/15	1 1 1	\$20.00 \$20.00 \$20.00	10/14/15 10/14/15 10/14/15	JE JE	Notes
08/05/15 Showing 1	1 to 7 of 8	\$20.00 entries	10/13/15	JE	



		Servi	ce Details		
P	rocedure	: Individua	l Supports		
	Code	: H2016IS	E		
	Provider	: AddCare	, Inc.		Units \$20
	Location	: Home			
					Total
_					
Ŀħ				Clear Filter	Description
Date	Units	Total	Post Date	Post By	
	1	\$20.00	10/14/15	JE	
09/16/15		\$20.00	10/14/15	JE	
09/16/15 09/09/15	1	Q20.00			
09/09/15	1 1	\$20.00	10/14/15	JE	
			10/14/15 10/14/15	JE	Notes
09/09/15 09/02/15	1	\$20.00			Notes
09/09/15 09/02/15 08/26/15	1	\$20.00 \$20.00	10/14/15	JE	Notes
09/09/15 09/02/15 08/26/15 08/19/15	1 1 1	\$20.00 \$20.00 \$20.00	10/14/15 10/14/15	JE	Notes

Sort the grid from any column in ascending or descending order. By default, the grid is sorted in the descending order of **Date**. View ▼ or ▲ adjacent to the column header that sorts the grid (the grid is sorted according to the column that displays the icon). ▼ represents a descending order sort and ▲ denotes an ascending order sort.



		Serv	ice Details		
Р	rocedure	e : Individu	al Supports		Service Delivery Date
	Code	e : H2016I	SE		
	Provide	r : AddCar	e, Inc.		Units \$20
	Locatio	n : Home			
					Total
]	
Ŀ		Enter	Keywords	Clear Filter	Description
Date 🔻	Units	Total	Post Date	Post By	
09/16/15	1	\$20.00	10/14/15	JE	
09/09/15	1	\$20.00	10/14/15	JE	
09/02/15	1	\$20.00	10/14/15	JE	
00.02.10	1	\$20.00	10/14/15	JE	Notes
	1	\$20.00	10/14/15	JE	
08/26/15		\$20.00	10/14/15	JE	
08/26/15 08/19/15 08/12/15	1		10/13/15	JE	
08/26/15 08/19/15	1	\$20.00			•

• Export the grid details to an Excel file using the 😰 icon. Click 😰 and iRecord opens the Save As dialog box on your device.



		Servi	ce Details		
Р	rocedure	: Individua	I Supports		
	Code	: H2016ISI	E		
	Provider	: AddCare	, Inc.		
	Location				Units (\$20
					Total
					Total
D:				Clear Filter	Description
Date	Units	Total	Post Date	Post By	Description
	1	\$20.00	10/14/15	JE	
09/16/15			40144145	15	
09/16/15 09/09/15	1	\$20.00	10/14/15	JE	
	1	\$20.00 \$20.00	10/14/15	JE	
09/09/15					Notes
09/09/15 09/02/15	1	\$20.00	10/14/15	JE	Notes
09/09/15 09/02/15 08/26/15	1	\$20.00 \$20.00	10/14/15 10/14/15	JE	Notes
09/09/15 09/02/15 08/26/15 08/19/15	1 1 1	\$20.00 \$20.00 \$20.00	10/14/15 10/14/15 10/14/15	JE JE	Notes

• Filter the grid using the text box. The grid displays the line items containing the characters entered within the box. Click the Clear Filter Button to clear the text box and the filter.



		Serv	vice Details		
P	rocedure	: Individu	al Supports		Service Delivery Date
		: H2016IS			
	Provider	AddCare	e, Inc.		Units \$20
	Location	: Home			
					Total
		C			
Ŀ		Enter	Keywords	Clear Filter	Description
Date 🔻	Units	Total	Post Date	Post By	
	1	\$20.00	10/14/15	JE	
09/16/15		\$20.00	10/14/15	JE	
	1	\$20.00	10/14/15	JE	
09/09/15	1	φ20.00			
09/09/15 09/02/15		\$20.00	10/14/15	JE	Notes
09/09/15 09/02/15 08/26/15	1		10/14/15 10/14/15	JE	Notes
09/09/15 09/02/15 08/26/15 08/19/15	1	\$20.00			Notes
09/16/15 09/09/15 09/02/15 08/26/15 08/19/15 08/12/15 08/05/15	1 1 1	\$20.00 \$20.00	10/14/15	JE	Notes

View or Post Expenditure

• To view the expenditure details, select a line item on the grid and it is available in the section shown in the following figure.



		Servi	ce Details		
P	rocedure	: Individua	I Supports		
	Code	: H2016IS	E		
	Provider	: AddCare	, Inc.		Units \$20
	Location				
					Total
					- Total
D,				Clear Filter	Description
					Description
Date	Units	Total	Post Date	Post By	
	Units 1	Total \$20.00	Post Date 10/14/15	Post By	
09/16/15					
09/16/15 09/09/15	1	\$20.00	10/14/15	JE	
09/16/15 09/09/15 09/02/15	1	\$20.00 \$20.00	10/14/15 10/14/15	JE	Notes
09/16/15 09/09/15 09/02/15 08/26/15	1 1 1	\$20.00 \$20.00 \$20.00	10/14/15 10/14/15 10/14/15	JE JE	Notes
Date 09/16/15 09/09/15 09/02/15 08/26/15 08/19/15 08/12/15	1 1 1 1	\$20.00 \$20.00 \$20.00 \$20.00	10/14/15 10/14/15 10/14/15 10/14/15	JE JE JE	Notes
09/16/15 09/09/15 09/02/15 08/26/15 08/19/15	1 1 1 1 1	\$20.00 \$20.00 \$20.00 \$20.00 \$20.00	10/14/15 10/14/15 10/14/15 10/14/15 10/14/15	JE JE JE JE	Notes

- Click 🖄 to remove the selection and/or clear the expenditure details within the section.
- Post the expenditure details (by the appropriate role) within this section.

Post Expenditure

Post expenditure is permitted for FI and SFI user roles of the most recently approved macro plan and any of its approved revisions. You can post expenditure only for services with the Fiscal Intermediary payment source.

The instructions below discuss the procedure to post expenditure for a service.

To post expenditure

1. Click for an appropriate service and view the menu options, shown in the following figure.



Division of Developmental Disabilities		,		10	10	
James Harmony	Demographics	Plans =	Documents	Notes	Testin	
ID : 101304 Age : 29	PLANS	PLANS ACTIONS				
DOB : 6/201996 County : Somerset Program : Supports Program SSN : Medicaid ID : Medicaid Tips : Disability-CN Medicaid Only-NMP DDD Status : Eligible For DDD Services Eligibility : Age FC Medicaid	James needs to be pro	ovided with equipment tr	Plan Info Version : 1.07 Status : A Due Date : 9/19/2015 Start Date : 7/21/2015 Interim 10890/15480			
			Service 1	: Individual Supports		60
Outcomes	View Service ode : H20		Provider : Location :	AddCare, Inc. Home	Start Date : 7/27/2015 End Date : 9/18/2015	Rate : \$20.00 Total Units : 18
Outcome 1 : \$1,840.00	Expenditure nce : PCI Claims : FI(A				Unit Type : Hour(s) Frequency : Weekly	Total Cost : \$360.00 Expended : \$200.00 Balance : \$160.00
Outcome 2 : \$360.00	Testing	2	esting	Testing	Testir	B
Outcome 3 : \$0.00	Test					
Outcome 5 : \$3,940.00	Testing					
Outcome 6 : \$4,750.00				ing		

2. Click **Expenditure** and view the expenditure pop-up tile, as shown in the following figure.

D	emographics	Plans =	Documents	Notes			
		ACTIONS					
		Out	come 2	[2	Pla	n Info
Já	ames needs to be prov	ided with equipment train		ound the home.		Version : 1.07 Due Date : 9/19/2015	Status : A Start Date : 7/21/2015
	_		2 : Assistive Technology			10890/16480	
Ţ	Procedure : Indivi Code : H201 Provider : AddC Location : Home	6ISE are, Inc.	Se	Service Delivery Date Units Rate			
		-	\$0.00	Description		ate: 7/27/2015 ate: 9/18/2015 /pe: Hour(s) ncy: Weekly	Rate : \$20.00 Total Units : 18 Total Cost : \$360.00 Expended : \$0.00 Balance : \$360.00
	No expenditure has been posted for this service.			Description			IB TE
				Ś		Test	

3. Enter the details within the fields. For more information, refer to the following table.

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Field	Description Select the date that the service was delivered to the participant. Jun 2015 O Su Ma Tu Wa Th Fr Sa									
	Select the dat	e that	the se	rvice	was de	livere	d to th	ne par		
		0	Jun		✔ 20	015	~	0		
		Su	Мо	Tu	We	Th	Fr	Sa		
			1	2	3	4	5	6		
		7	8	9	10	11	12	13		
Service Delivery Date		14	15	16	17	18	19	20		
		21	22	23	24	25	26	27		
		28	29	30						
	section. Click and select the date. Mandatory/Optional: Mandatory Date format: MM/DD/YY Enter the number of units provided on the selected date.									
Units	The units cannot exceed the number planned for the service on that particular week. For a day service, this field displays 1 and it is disabled. Mandatory/Optional: Mandatory									
Rate	The unit rate maximum val For a service v value and it is For a service v maximum val	of serv ue. with a disab with a	vice is e define led.	either d rate	define , the fi	eld dis	splays	the a		
	Mandatory/O	ptiona	ıl: Man	dator	У					



Field	Description						
Time In	This field appears when the service is provided by an SDE. Select the time that the service started on the selected date.						
	Mandatory/Optional: Optional						
Time Out	This field appears when the service is provided by an SDE. Select the time that the service ended on the selected date.						
	Mandatory/Optional: Optional						
Parking	This field appears for the Transportation service. Enter the amount paid for parking.						
	Mandatory/Optional: Optional						
Tolls	This field appears for the Transportation service. Enter the amount paid for tolls.						
	Mandatory/Optional: Optional						
Public Trans	This field appears for the Transportation service. Enter the amount paid for public transportation.						
	Mandatory/Optional: Optional						
Total	View the total amount for the service delivered on the selected date. Total = Units * Rate + Parking + Tolls + Public Trans						
	Enter the description of service delivery on the selected date.						
Description	Mandatory/Optional: Optional Max limit: 500 characters						
Notos	Enter any relevant notes related to service delivery on the selected date.						
Notes	Mandatory/Optional: Optional Max limit: 500 characters						

4. Click 🗸 , shown in the following figure, to save and post the expenditure.



Demographi	cs	Plans 🗏	Documents	Notes	Test	INB
PLANS		ACTIONS			0	
			Service 1: Indiv	vidual Supports		Plan Info
James needs	C Prov	Service Details dure : Individual Supports code : H2016ISE rider : AddCare, Inc. ation : Home		07/29/2015	97 972 80	Status : A 2015 Start Date : 7/21/2015
Ξ				\$20.00		60
Proce Refer Cl	No exp	enditure has been posted fo	or this service.	Individual Supports provided to J. James is shown basic features of equipment.		Rate : \$20.00 Total Units : 18 Total Cost : \$360.00 Expended : \$200.00 Balance : \$160.00
Te	Te			This is the first expenditure post service.	ed for this	ing Te
					৩	

5. View the posted expenditure on the grid.

Demograph	ics	Plan	is ≡		Documents		Notes		Te	still	15 Te
PLANS			ACTION							~	
					Service 1: Indi	vidual Sup	ports			8 Pla	n Info
James needs		Service Details Procedure : Individual Supports Code : H2016ISE Provider : AddCare, Inc. Location : Home					Service Units	Delivery D	Date)7 9/2015 80	Status : A Start Date : 7/21/2015
Ξ								Total	a		
Proce Refer Cl	Date ▼ 07/29/15			Post Date 10/16/15	Clear Filter Post By JE		De	scription			Rate : \$20.00 Total Units : 18 Total Cost : \$360.00 Expended : \$200.00 Balance : \$160.00
Te	Showing 1	to lof le	ntries						<u>ি</u>	stir	

Note: Select the line item on the grid and edit the fields to modify the expenditure detail.



View Expenditure

All user roles are allowed to view the expenditures of an approved service. Many of the features of the grid are mentioned in the Expenditure Grid.

The following instructions discuss the procedure to view an expenditure entry.

To view an expenditure entry

1. Click for an appropriate service and view the menu options, shown in the following figure.

Division of Developmental	10	10		100	100		
						£₽ ₽	
James Harmony	Demographics	Plans ≡	Documents	Notes	Testir		
ID : 101304 Age : 29	PLANS	ACTIONS					
DOB : 8/20/1986 County : Somerset		Ou	itcome 2	ta ta	Plan Info		
Program : Supports Program SSN : *** - ** - 6390	James needs to be pro	wided with equipment train	Version : 1.07 Due Date : 9/19/2015	Status : A Start Date : 7/21/2015			
Medicaid ID : Medicaid Type : Disability-CN Medicaid Only-NMP DDD Status : Eligible For DDD Services Eligibility : Age FC Medicaid					Interim		
	₹5		Service 1:	Individual Supports		60	
Outcomes	View Exceptions	vidual Supports	Provider : A		Start Date : 7/27/2015 End Date : 9/18/2015	Rate : \$20.00 Total Units : 18	
Outcome 1 : \$1,840.00	Expenditure nce : PCF Claims : FI(A	PT	Location : P	lome	Unit Type : Hour(s) Frequency : Weekly	Total Cost : \$360.00 Expended : \$0.00 Balance : \$360.00	
Outcome 2 : \$360.00	Testing	5	sting	recting	Testir	18	
Outcome 3 : \$0.00	Jest						
Outcome 5 : \$3,940.00	Testing						
Outcome 6 : \$4,750.00	an		ing	ante		1g	

2. Click **Expenditure** and view the expenditure details of the service, as shown in the following figure.



Demograp	hics	PI	lans ≡		Documents		Notes			-	restir	15	Te	
PLAN			ACT	TIONS										
				Ou	itcome 2				ģ		Pla	n Info		
James nee					Service 2 : Assis	tive Technol	logy			., .	8 .07 9/19/2015	Status : A Start Date : 7/21/201	5	
			Serv	ice Details							5480			
	Pr			al Supports							<u>040p</u>)			
			: H2016IS											
		Provider Location	: AddCare	e, Inc.			Units	\$20						
		Location	. Home								-	[50	
								Total					_	
Pro)15		Rate : \$20.00 Total Units : 18	
Re	B				Clear Filter							Total Cost : \$360.	00	
	Date	Units	Total	Post Date	Post By	Description					· ·	Expended : \$180.		
	09/16/15		\$20.00	10/14/15	JE							Balance : \$180.00		
	09/09/15	1	\$20.00	10/14/15	JE									
	09/02/15	1	\$20.00	10/14/15	JE									
50		1	\$20.00	10/14/15	JE			Notes			STI			
74	08/19/15		\$20.00	10/14/15	JE									
	08/12/15		\$20.00 \$20.00	10/14/15	JE									
	Showing 1			10/10/10	5									
										\$	in			
TE											Lesu'			

3. Locate and click the appropriate line item to view the details of the posted expenditure.



Demograp	hics	P	lans ≡		Documents		Notes		-			
PLAN												
				O	utcome 2	2 🚽					n Info	
James nee					Service 2 : Assis	tive Technol	ogy			8.07 9/19/2015	Status : A Start Date : 7/21/2015	
			Servio	e Details								
	F	Code	: Individual : H2016ISE : AddCare, : Home			08/26/1		0.00		548p		
		ocation	. Home									
Pro						\$20.00)15)15	Rate : \$20.00 Total Units : 18	
Re	B				Clear Filter	Description) Total Cost : \$360.00 Expended : \$180.00		
	Date 09/16/15	Units	Total \$20.00	Post Date 10/14/15	Post By						Balance : \$180.00	
		1	\$20.00	10/14/15	JE							
	09/02/15		\$20.00	10/14/15	JE	<u> </u>						
	08/26/15		\$20.00	10/14/15	JE		Notes			-41		
76	08/19/15	1	\$20.00	10/14/15	JE		Notes			320		
	08/12/15	1	\$20.00	10/14/15	JE							
	08/05/15		\$20.00	10/13/15	JE							
	Showing 1 t	o 7 of 8 (entries									
									\$	ctin		
16				10			10-			122		

Delete Expenditure

The SFI user role has the permission to delete an expenditure entry.

The following instructions discuss the procedure for deletion.

To delete an expenditure entry

1. Click for an appropriate service and view the menu options, shown in the following figure.



Division of Divelopmental Disabilities	0					
James Harmony	Demographics	o Plans ≡	Documents	Notes	Testin	Co V
ID : 101304	Demographics	Plans =	Documents	Notes	Tesu	
Age : 29	PLANS	ACTIONS				
DOB : 8/20/1986 County : Somerset		0	utcome 2	f	Plar	n Info
Program : Supports Program SSN :	lames needs to be pr	ovided with equipment trai	ning for mobility in an	d around the home	Version : 1.07 Due Date : 9/19/2015	Status : A Start Date : 7/21/2015
Medicaid ID : Medicaid Type : Disability-CN Medicaid Only-NM DDD Status : Eligible For DDD Services Eligibility : Age FC Medica	P				Interim	
	च्छ		Service 1	: Individual Supports		60
Outcomes	Cl. Minur Exceptions	lividual Supports 016ISE	Provider : Location :	AddCare_Inc_	Start Date : 7/27/2015 End Date : 9/18/2015	Rate : \$20.00 Total Units : 18
Outcome 1 : \$1,840.00	Expenditure nce : PC				Unit Type : Hour(s) Frequency : Weekly	Total Cost : \$360.00 Expended : \$200.00 Balance : \$160.00
Outcome 2 : \$360.00	Testin	B	sting	Testing	Testin	g
Outcome 3 : \$0.00	Test					
Outcome 5 : \$3,940.00	Testin					
Outcome 6 : \$4,750.00		ę.	ing	ang		ę.

2. Click **Expenditure** and view the expenditure details of the service, as shown in the following figure.

Demograp	hics	Р	lans ≡		Documents	Notes					
				IONS							
				Οι	utcome 2	c		Pla	n Info		
James nee					Service 2 : Assi	stive Technology		8.07 9/19/2015	Status : A Start Date : 7/21/2015		
			Servi	ce Details				5480			
	Pr		: Individual					<u>040p</u>)			
			: H2016ISE								
			: AddCare, : Home	Inc.		Units (\$20					
		location	. Home					÷			
						Total					
Pro		Clear Filter)15	Rate : \$20.00 Total Units : 18		
Re									Total Cost: \$360.00		
	Date	Units	Total	Post Date	Post By	Description		,	Expended : \$180.00 Balance : \$180.00		
	09/16/15	1	\$20.00	10/14/15	JE				Dalance : \$180.00		
	09/09/15	1	\$20.00	10/14/15	JE	l					
	09/02/15	1	\$20.00	10/14/15	JE						
21	08/26/15	1	\$20.00	10/14/15	JE	Notes		sting			
/ 4	08/19/15		\$20.00	10/14/15	JE						
	08/12/15		\$20.00	10/14/15	JE						
	08/05/15 Showing 1		\$20.00	10/13/15	JE	L					
		Showing 1 to 7 of 8 entries					\$ V				
10							sti				
	10										

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3	Locate	and o	click the	annro	nriate l	line	item	for	deletion.	
э.	LOCULC	ana		appio	priace	iiii C	itterii	101	uciction.	

Demograp	hics	Р	lans ☰		Documents		Notes						
PLAP				IONS									
				Ou	itcome 2	4=2					Plan Info		
James nee					Service 2 : Assis	tive Technol	logy			8 .07 9/19/2015	Status : A Start Date : 7/21/2015		
			Servi	ce Details									
	Pro	ocedure	: Individual	I Supports		(08/26/15							
			: H2016ISI										
			AddCare	, Inc.		1) (\$	20.00					
	L	ocation	: Home							-		\odot	
=						\$20.00					Ē	W	
Pro						\$20.00)15	Rate : \$20.00		
)15	Total Units : 18		
Re	Da				Clear Filter	Description					Total Cost : \$360.00 Expended : \$180.00		
	Date	Units	Total	Post Date	Post By						Balance : \$180.00		
	09/16/15		\$20.00	10/14/15	JE								
		1	\$20.00	10/14/15	JE								
	09/02/15 08/26/15		\$20.00 \$20.00	10/14/15 10/14/15	JE					in			
76	08/19/15		\$20.00	10/14/15	JE		Notes			SU			
		1	\$20.00	10/14/15	JE								
	08/05/15	1	\$20.00	10/13/15	JE								
	Showing 1 t	to 7 of 8 e	entries		(<u>)</u>								
	Î								<u> </u>	rin			
TE	_	_		10			10-			Les Cri			

4. Click (available only for the SFI) to delete the expenditure entry, highlighted in the following figure. The entry is now removed from the grid.



Demographics		Pla	ns ≡		Documents		Notes							
PLANS														
Outcome 2							æ				Plan Info			
James nee	ames nee Service 2 : Assis						logy		8.07 9/19/2015	Status : A Start Date : 7/21/2015	;			
			Servio	ce Details						1				
	Р	cedure : I Code : F Provider : A ocation : F	H2016ISE AddCare,			08/26/15 1 (\$20.00) (\$20.00)				5480 				
Pro						320.00)15)15	Rate : \$20.00 Total Units : 18)		
Re	Dare Units Total Post Date			Clear Filter Post By	Description					Total Cost : \$360.00 Expended : \$180.00 Balance : \$180.00				
	09/16/15	1 S	20.00	10/14/15	JE									
	09/09/15 09/02/15		20.00	10/14/15 10/14/15	JE					•				
50	08/26/15		20.00 Ju	10/14/15	JE		Not	es		STI				
1,4	08/19/15 08/12/15		20.00 ×	10/14/15	JE									
	08/05/15		20.00	10/14/15	JE									
Ta	Showing 1 to 7 of 8 entries					٣				sting				

5. A confirmation message appears, as shown below. Click 🖌 to confirm deletion of the expenditure entry.





User Privileges

The table indicates the user role permissions for **Expenditure**.

Feature	SWAC	WAC	SCS	SC	SC-VO	vo	VO-TS	SFI	FI	FI-VO
Expenditure										
View Expenditure	\checkmark	\checkmark	V	V	V	V	V	V	V	\checkmark
Post Expenditure							\checkmark	V	V	
Edit Expenditure							V	V	V	
Delete Expenditure								V		