

Policy Transmittal Developmental Disabilities Services



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Number: DD-PT-22-009
Issue date: 1/20/2022

Topic: Developmental Disabilities

Due date: 1/20/2022

Transmitting (check the box that best applies):

- New policy
 Policy change
 Policy clarification
 Executive letter
 Administrative Rule
 Manual update
 Other:

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All ODHS Employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging: {Select type} | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Aging and People with Disabilities | <input checked="" type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children’s Intensive In Home Services |
| <input checked="" type="checkbox"/> County DD Program Managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> Support Service Brokerage Directors | <input checked="" type="checkbox"/> Other (<i>please specify</i>): CDDP Eligibility Specialists |
| <input type="checkbox"/> ODDS Children’s Residential Services | |
| <input type="checkbox"/> Child Welfare Programs | |

Policy/rule title:	Missing Eligibility Notification Corrective Action Requirements		
Policy/rule number(s):	OAR 411-320	Release number:	
Effective date:	1/20/2022	Expiration date:	
References:	Secretary of State OAR 309 DHS-MHDDSD Archive: http://records.sos.state.or.us/ORSOSWebdrawer/RecordView/8136235		
Web address:			

Discussion/interpretation: This policy replaces [SPD-IM-09-033](#). This transmittal provides guidance for case management entities when a file record for a currently eligible individual is missing an eligibility determination notification and CDDP’s have made unsuccessful attempts to obtain to locate any eligibility determination notification reference, letter or notice of eligibility for individuals from previous CDDP’s.

Previous to 2001 eligibility standards and requirements varied from current policy and 2009 rule versions; this policy does not invalidate those standards of eligibility which were applied at the time of the original determination. Brokerages should obtain documentation indicated in this transmittal from the Community Developmental Disabilities Program (CDDP) for the individual's eligibility.

When an eligible individual's record does not include any decision notice (SDS 5103), statement or other document (letter, progress note) identifying a CDDP made a determination of eligibility, as required in Oregon Administrative Rule 411-320-0070(4) and 411-415, the CDDP must follow this policy guidance for file corrective action.

- No re-evaluation of eligibility, nor interruption of services, should occur when historical eligibility standards at the time were met and a determination document is missing.
- For all file corrections, a notice created to resolve missing file documentation **does not** need be sent to an individual or their representative

Corrective Action Timelines

For Quality Assurance Field Reviews (QA) discovery: If the missing eligibility documents are found during an ODDS QA review, complete actions outlined in this policy within the timelines outlined in the corrective action plan.

For all other discovery: Complete actions outlined in this policy within 30 days of identification of the issue.

Adult Determinations prior to July 12, 2009

These eligible individuals are considered to have historical eligibility, and barring extenuating circumstances, a redetermination should not occur unless approved by ODDS. These recommendations are for file corrective actions only.

If there is no statement, letter or notice of eligibility for individuals determined eligible and attempts to locate one from previous CDDPs have been unsuccessful, an ES must:

1. **Review the file** to affirm that records continue to support eligibility
2. **Complete a replacement 5103** for the file as follows:
 - a. Cite the **OAR 411-320 only**

- b. Use the eXPRS Initial Eligibility as the notice effective date, unless other information is available indicating an earlier eligibility date
 - c. Leave the Service Coordinator assignment section blank.
 - d. In the ES section indicate your CDDP name and “QA replacement notice” and the ES creating the duplicate notice (e.g.: “Somewhere CDDP QA replacement notice by Your Name”)
 - e. If original eligibility documents are available, list those on the documents used section of the form
3. **Create a progress note** citing the missing information was identified in a review, and:
- a. Affirm the determination date indicated in the eXPRS Initial Eligibility Date
 - b. Cite this policy, historical eligibility is affirmed, and it is assumed the eligibility standards at the time were met, and
 - c. Reference information supporting eligibility (see below examples)
4. **Complete eXPRS action:** Attach the 5103 to the eXPRS eligibility line; if there is more than one, use the most current eligibility line.
5. **For transfer cases,** the ES in the sending county should provide the information as required in transfer policies and OAR 411-320-0070(5)(a), attach the records to eXPRS and refer the new CDDP to eXPRS.

Case Examples:

Individual Scenario	File Resolution	Other considerations:
DD diagnosis only	<ul style="list-style-type: none"> - Create file copy 5103 and upload to eXPRS - Progress note individual determined eligible according to eligibility standards at the time, per eXPRS Initial Eligibility Date of 1/15/1995 based on a medical diagnosis of xxxx (list condition) and noted impairment (e.g.: communication; functional academics; self-direction; leisure; social; community use; home/school living; self-care; health and safety; work) and eligibility continues. Note ongoing individual support needs and eligibility. 	Cite the recent ONA/LOC areas of impairment, or other annual reviews supporting ongoing support needs.

<p>Child only IQ test</p>	<ul style="list-style-type: none"> - Create file copy 5103 and upload to eXPRS - Progress note individual determined eligible prior to 2001 per eXPRS Initial Eligibility Date of xx/xx/xxxx, according to eligibility standards at the time, based on an IQ score of XX completed on (MM/DD/YYYY) and adult testing was not required at the time for adult eligibility when the documented level of intellectual functioning continued to support an intellectual impairment in alignment with the child IQ test score. Note ongoing individual support needs and eligibility. 	<p>Additional medical statements, or other record information (such as the ONA/LOC) could be narrated as supplemental information to support eligibility and continued needs for supports.</p>
<p>Average of IQ scores under 65</p>	<ul style="list-style-type: none"> - Create file copy 5103 and upload to eXPRS - Progress note individual determined eligible based on an average of IQ scores, prior to 2001 per eXPRS Initial Eligibility Date of xx/xx/xxxx, citing the IQ test dates and individual scores, and was determined adult eligible based on the standards in place at the time of the determination. Note ongoing individual support needs and eligibility. 	<p>Cite the recent ONA/LOC areas of impairment, or other annual reviews supporting ongoing support needs.</p>
<p>Pattern of IQ scores 66 – 75; no adaptive assessment</p>	<ul style="list-style-type: none"> - Create file copy 5103 and upload to eXPRS - Progress note individual determined eligible prior to 2009, per eXPRS Initial Eligibility Date of 12/31/2008, according to eligibility standards at the time, based on IQ scores (cite scores and testing dates) and no adaptive assessment was required at the time of the 	<p>Cite the recent ONA/LOC areas of impairment, or other annual reviews supporting ongoing support needs.</p>

	determination. Note ongoing individual support needs and eligibility.	
Adaptives over 70; no areas 2 standard deviations below the mean	<ul style="list-style-type: none"> - Create file copy 5103 and upload to eXPRS - Progress note individual determined eligible prior to 2001 according to eligibility standards at the time, based on (ID or DD condition) and cite scores and continued support needs in specific areas. Include that eligibility is continued as an adult with (ID/DD). Note ongoing individual support needs and eligibility. 	Cite the recent ONA/LOC areas of impairment, or other annual reviews supporting ongoing support needs.
CPMS enrollment; No eligibility documents	<ul style="list-style-type: none"> - Create file copy 5103 and upload to eXPRS - Progress notes the individuals CPMS enrollment date. ODDS may need to verify. Note the supporting information such as notes by a PCP, or other treating provider, types of supports needed. Note ongoing individual support needs and eligibility. 	
If there is no ID/DD diagnosis, submit an ODDS D&E Consultation Request for guidance.		

All Determinations July 13, 2009 to current

Oregon Administrative Rule [411-320-0070\(3\) \(effective 7/13/2009\)](#) requires a Notice of Eligibility Determination (form 5103) to be part of the service record.

OAR 411-320 history is located here: <https://www.oregon.gov/dhs/SENIORS-DISABILITIES/DD/Pages/ODDS-Rules-History.aspx>

If a Notice of Determination does not exist, the Eligibility Specialist must:

1. **Complete a replacement 5103** for the file as follows:
 - a. Cite the OAR 411-320-0080 **and** determination under ID or DD (or both) for the determination rule;
 - b. Use the eXPRS Initial Eligibility as the notice effective date, unless other information is available indicating an earlier eligibility date
 - c. Leave the Service Coordinator assignment section blank In the ES section indicate your CDDP name and “QA replacement notice” and the ES creating the duplicate notice (e.g.: “Somewhere CDDP QA replacement notice by Your Name”)
 - d. If original eligibility documents are available, list those on the documents used section of the form
2. **Place a File Copy** in the file record for quality assurance purposes
3. **Progress note** the corrective action, and the duplicate notice is for administrative purposes only, citing this policy and the appropriate 411-320 OAR and eligibility sections the individual met at the time of the determination, and affirm eligibility determination/notification is verified for quality assurance purposes
4. **Complete eXPRS action:** Attach the 5103 to the eXPRS eligibility line; if there is more than one, use the most current eligibility line
5. **For transfer cases,** the ES in the sending county should provide the information as required in transfer policies and OAR 411-320-0070(5)(a), attach the records to eXPRS and refer the new CDDP to eXPRS.

Example Progress Note: “Review of 2010 eligibility determination under OAR 411-320-0080 effective 7-13-2009, the individual met the determination standards at the time for eligibility with an ID based on a FSIQ of 70 by a PhD completed in 2009. Ongoing eligibility is affirmed, and eligibility review meets DD-PT XX-XXXX quality assurance and documentation purposes. Duplicate SDS5103 eligibility affirmation uploaded to eXPRS this date.”

eXPRS Eligibility (eligibility transfer new line entries):

When a county transfer occurs on cases determined prior to 2001 the new CDDP should follow the below guidance for eXPRS eligibility entry if existing file information does not align with eXPRS eligibility fields:

1. Review the Level of Care (LOC) Summary areas marked * which indicate areas LOC is met; if no LOC is on record, use other current annual assessments

2. In the eXPRS eligibility significant impairment drop down menu select “Composite Score 70 or less”
3. Use the LOC approval date as the adaptive assessment date
4. Choose “Other” for assessment type
5. In the Note section at the bottom, cite this PT and current eXPRS eligibility entry created based on review of LOC areas of substantial impairment (marked with an asterisk *) and eligibility standards at the initial determination did not require eXPRS entry and eligibility is assumed

eXPRS Review and Verification of Level of Care for eligibility example:

To complete the eXPRS steps to view, verify LOC and enter into eligibility adaptive assessment fields when required, follow the below steps:

1. In eXPRS, go to “Client” then “Oregon Needs Assessment”
2. Enter a Prime number and select “Find”
3. Select “Approved” in the current LOC column from the most recent ONA
4. View the LOC areas noted with an * as requiring substantial impairment to crosswalk to areas in the eXPRS eligibility adaptive assessment categories, using the most reasonable match

Example: Using the LOC example here, and the eXPRS LOC areas noting substantial impairment marked with an asterisk, the eXPRS eligibility adaptive assessment entry actions are:

- Use the ONA date as the Assessment Date
- Select “Other” for Assessment type, and make a note on use of the LOC in the “Notes” section
- Select either:
 - Assessment Completed; 2 or more domains 70 or less; Communication, Daily Living Skills
- OR**
- Assessment Completed; 2 or more Skill Areas; Self-Care, Self-Direction, Communication, Functional Academics and Home/School Living
- **SAVE**

Level of Care Determination

DHS has determined the individual requires the support, training and care provided in an intermediate care facility for individuals with intellectual disabilities (ICF/IID) because the individual has a diagnosis of intellectual disability or a closely related condition and substantial limitations in the following areas of major life activity. An asterisk indicates that the individual has substantial limitations in the applicable area.

Capacity for Independent Living:	6/10 *	[III.7.a, III.8.a, III.12.a, III.13.a, III.14.a, III.17.a]
Learning:	3/3 *	[III.15.a, III.16.a, V.40.a]
Mobility:	0/2	[]
Self-Care:	7/9 *	[III.3.a, III.3.b, III.3.c, III.6.b, III.9.a, III.10.a, VI.47.c]
Self-Direction:	8/14 *	[IV.19.a, IV.21.a, IV.22.a, IV.25.a, IV.27.a, IV.28.a, IV.30.a, IV.31.a]
Understanding and Use of Language:	4/4 *	[II.2.a, II.2.b, II.2.c, II.2.e]

Review and Verification of Level of Care

LOC Status: Approved

LOC Type: ICF/IID

Date: 09/07/2021 03:15 PM PDT



Training/communication plan: Review during monthly statewide Eligibility Specialist meetings and Transmittal calls.

This transmittal will be discussed during the next Monthly Transmittal Review. Please send questions in advance to ODDS.Questions@dhsosha.state.or.us.

The Monthly Transmittal Reviews are held the second Wednesday of every month at 2 pm using the Zoom platform. Please register in advance for these meetings: <https://www.zoomgov.com/meeting/register/vJlsc-qvqD8iGURx5OQk8TAdIS6Arg9ZAf4>

After registering, you will receive a confirmation email containing an appointment and information about joining the meeting. American Sign Language (ASL) and live captioning will be provided. To request other accommodations or languages, please send an email to ODDS.Questions@dhsosha.state.or.us at least three business days prior to the meeting.

Local/branch action required: Review and implement standard operating procedures on this policy immediately upon the effective date.

Central office action required: Ongoing consultation and technical assistance as needed.

Field/stakeholder review: Yes No

If yes, reviewed by: Engagement & Innovation website stakeholder feedback

If you have any questions about this policy, contact:

Contact(s): ODDS Diagnosis & Evaluation Coordinators	
Phone:	Fax:
Email: odds.de@dhsoha.state.or.us	