

# Action Request Transmittal Developmental Disabilities Services



Lilia Teninty

**Number:** APD-AR-18-053

**Authorized signature**

**Issue date:** 9/7/2018

**Topic:** Developmental Disabilities

**Due date:** 10/1/2018

**Subject:** Funding Review and Exceptions

**Applies to (check all that apply):**

- |  |   |
|--|---|
| <input type="checkbox"/> All DHS 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 checked="" type="checkbox"/> ODDS Children's Intensive In Home Services  |
| <input checked="" type="checkbox"/> County DD program managers           | <input checked="" type="checkbox"/> Stabilization and Crisis Unit (SACU)  |
| <input checked="" type="checkbox"/> ODDS Children's Residential Services | <input checked="" type="checkbox"/> Other ( <i>please specify</i> ):<br>DD Support Service Brokerage<br>Directors and Personal Agents;<br>all CDDP Managers, Supervisors,<br>and Service Coordinators |
| <input type="checkbox"/> Child Welfare Programs                          |   |

**Introduction: APD-AR-18-053 replaces and supersedes all versions of APD-AR-14-019, and:**

- **Updates** the prior *ODDS Funding Review and Exceptions Request* form (SDS 0514DD) and the *Form Instructions* (SDS 0514DDi) for requesting prior approval by the Department through the ODDS (Office of Developmental Disabilities Services) of funding or services.
- **Updates** weblinks to the *ODDS Funding Review and Exceptions Request* Form and Instructions (shown below).
- **Replaces** the *ODDS Tier Review Information* form (DHS 0383), for requesting any type of SIS Tier Review and 2:1 staffing level in foster homes.

- **Replaces** the *Request Form State Plan Personal Care Exception* form (SDS 0514PC) for individuals in ODDS services.

**APD-AR-18-053** supersedes all references to the process and forms for requesting Department funding reviews and exceptions which appear in the following Policy Transmittals, Action Requests, and Worker Guides. They will be updated or obsoleted at a later date, as needed:

- APD-PT-17-007 State Plan Personal Care services authorized in eXPRS Plan of Care
- APD-PT-14-023 ReBAR Employment Rate Model, Day Support Activities Agency Rate Matrix, Interim Tier Assignments and Reviews
- APD-AR-16-070 Tier Review Practices
- APD-AR-17-004 Maintenance Job Coaching requests after 12/23/16 deadline
- Worker Guide 10/1/2017 Foster Care 2:1 Staffing Authorization Procedure
- Worker Guide 11/2/2016 Job Coaching Requirements

The ODDS has a process for requesting Department prior approval for services when the service:

- Meets the threshold for Department review established in the 1915(k) State Plan Amendment or 1915(c) HCBS waivers or Oregon Administrative Rules (OARs);
- May require a payment rate above ODDS published rate guidelines; or
- May require the use of General Funds.

Requirements for Department prior review may be found in the [ODDS Expenditure Guidelines](#), established policies, or Oregon Administrative Rules (OARs). Reviews help the Department monitor expenditures and assure fiscal accountability.

## **Action Required:**

Effective October 1, 2018, Community Developmental Disabilities Programs (CDDPs) and Brokerages are required to use the procedures and form described below for services that require prior approval by the Department. Requests for Department prior approval using the updated form and procedures are not required if a request was submitted before 10/1/2018.

The funding review process, request form [SDS 0514DD](#), and form instructions [SDS 0514DDi](#) are to be used for the following types of requests which require prior approval by the Department:

1. Service levels, staffing ratios, or exceptional rates that exceed assessed level or established rates for all services in any setting, including service levels or rates that exceed what has been determined by an ANA, CNA, SIS or SNAP.
2. Rates that exceed the published amount for the service.
3. Foster rates when a 2:1 staffing level for an individual has been assessed through a SNAP.
4. Supports and services exceeding limits included in the *Expenditure Guidelines*.
5. Brokerage geographic exception.
6. Employment Supports over 25 hours/week OR for individuals under 18 years old.
7. Job Coaching Maintenance exceptions.
8. PSW Work Week hours exceeding CBA limit.
9. General Fund Requests for exceptions such as:
  - a. Administrative or CME Errors or ISP/LOC/eligibility lapses
  - b. Qualified non-citizens
  - c. Sex Offender or Fire Setting Risk Assessment or Treatment
10. Shortened ISP Period.
11. Determination of the presence of exceptional support needs.
12. Other exceptions not listed.

## **Submitting Funding Requests**

The “*Funding Review and Exceptions Request*” Form [SDS 0514DD](#) must be completed and submitted for all requests for Department approval. Instructions for using the [SDS 0514DD](#) Form are in a separate document, [SDS 0514DDi](#). Both can be found on our [DHS forms website](#). Requests for approval should be submitted one month prior to the requested effective date for the service or exception. Requests must be submitted electronically to: [ODDS FundingReview](#). Step-by-step instructions for submitting requests are described in [SDS 0514DDi](#).

## **Required information and supporting documentation**

Information and documentation that must accompany a request is described in the *Request Form* [SDS 0514DD](#) and *Form Instructions* [SDS 0514DDi](#). Information and documentation requirements are specific to the type of request.

Plan development for services needing ODDS prior approval

If Department prior approval for a service is needed, the service may be written into a plan with the condition that the service is not authorized pending approval from the Department. No funding allocation should be made or funds expended for the service in the plan prior to the approval by the Department. After a Department approval is granted, funds may be authorized consistent with the approval. The ODDS will not be responsible for expenditures made prior to Department approval when it is required.

**Reason for Action:** A new review process and form is being implemented for more efficient processing of all requests requiring Department prior approval.

**Field/stakeholder review:**

Yes  No

**If yes, reviewed by:**

Representatives of CDDPs, brokerages, advocacy groups, ODDS Engagement and Innovation webpage, and Department staff

*If you have any questions about this action request, contact:*

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