

Information Memorandum Transmittal Developmental Disabilities Services



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Number: APD-IM-18-069

Issue date: 8/10/2018

Topic: Developmental Disabilities

Due date:

Subject: Enrollment with Eligibility in eXPRS

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 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 checked="" type="checkbox"/> ODDS Children's Residential Services | <input checked="" type="checkbox"/> Other (<i>please specify</i>): Brokerage |
| <input type="checkbox"/> Child Welfare Programs | |

Message:

Recently, ODDS has received several questions regarding the process to enroll an individual into services. A worker guide is in process, but until it is complete, please utilize these steps for enrollment.

Here are the current steps for enrollment:

- 1) Determine DD Eligibility. If the individual meets eligibility, a CDDP Eligibility Specialist or Eligibility Specialist Processor enters DD Eligibility in eXPRS under view client within 10 days of issuing an eligibility notice.
- 2) Whoever is assigned at the CDDP creates and submits a Case Management (CM) Client Prior Authorization (CPA) (no DDEE/0337 form required for CM only);
 - a. If the individual has requested Brokerage services, the individual may transfer immediately to a Brokerage for Brokerage CM only until the ONA and service plan are complete for paid services. In order to transfer CM services to a Brokerage, the CDDP must authorize the Brokerage on their Case Management CPA. The Brokerage would then enter their CM CPA (no DDEE/0337 form required).

- 3) If the individual requests funded services, then an ONA must be completed by an assessor;
 - a. If the individual knows which residential service they are requesting, enter the service element on the demographics section of the ONA;
 - b. If the individual is entering Case Management only or an employment service, select “other” and write in the service they are beginning.
- 4) The Completed ONA produces a Level of Care Summary;
- 5) Level of Care:
 - a. Until October 1, 2018 the D&E reviews and Approves/Denies the LOC via eXPRS.
 - b. once Approved/Denied, the LOC determination will show in View Client under the Level of Care section;
 - c. CDDP and Brokerage can view if LOC is Approved/Denied;
- 6) *Prior to enrollment* the CME must complete the ISP and verify the individual has Medicaid and meets Level of Care;
- 7) Funded Services:
 - a. For CDDP funded services: An Eligibility Enrollment Processor with the CDDP submits a DDEE/0337 Enrolling into waived/kplan services;
 - b. For Brokerage funded services: An Eligibility Enrollment Processor with the CDDP submits a DDEE/0337 authorizing brokerage; TAU sends DDEE/0337 to brokerage for waiver/kplan dates).
- 8) TAU will continue to verify eligibility for waiver and k-plan services by ensuring the individual meets LOC, Medicaid financial eligibility and DD eligibility, then codes for service eligibility and completes DDEE.
- 9) CDDP/Brokerage creates funded service authorizations through CPAs and POCs.

If you have any questions about this information, contact:

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