

Developmental Disabilities Worker's Guide



Topic:	Children's Extraordinary Needs (CEN) Program
Date Issued:	October 24, 2024

Overview

Description: This worker guide describes the Children's Extraordinary Needs (CEN) Program, including important case management entity (CME) and provider agency activities. The CEN Program allows a limited number of children to have their parents as paid attendant care providers. The CEN program operates under a 1915(c) waiver.

Purpose/Rationale:

1. To assist CMEs in understanding the CEN Program so they can provide choice advising, support children to get enrolled, and monitor CEN services.
2. To support provider agencies in knowing their additional responsibilities when employing parent providers.

Applicability: Service coordinators who support children and agencies that employ parent providers.

Background: In 2023, the Oregon Legislature passed Senate Bill 91 (SB 91) into law which directs ODDS to develop a program to pay some parents to provide attendant care services to their own children who have very high medical or very high behavioral needs based on the Oregon Needs Assessment (ONA).

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Summary of Senate Bill 91 (SB 91):

- Directs ODDS to start and operate a waiver that will allow payment to a parent to provide attendant care services to their own child who has very high medical or very high behavioral needs.
- For a parent to be paid through this program, the parent must work for an agency and cannot be involved with the agency in any way other than as a Direct Support Professional (DSP). This means a parent cannot own the agency, be a board member, or be related to anyone in a similar role in the agency.
- The agency cannot hire the parent as a contractor.
- The agency cannot pay for any attendant care services during regular school hours except if a child is home sick or on an “abbreviated school day”.
- The parent cannot provide paid attendant care if they are responsible for a child under 10 years of age or another person of any age who needs (or: in

need of) care and monitoring at the same time.

- The parent cannot perform typical errands, like grocery shopping, while being paid to provide attendant care unless the tasks are included on the child's individual support plan (ISP) and the tasks are related to the child's disability.
- ODDS may require the parent provider to assign another person to make decisions about the child's individual support plan while the child has a parent provider.
- Parent providers are mandatory abuse reporters, 24/7.
- Requires ODDS to adopt rules for the program related to workforce and training of parent providers, children, and case managers.
- Rules must address parent-child relationship impacts when parents are paid caregivers.
- Must allow child to be able to object to a parent as a provider.
- Must ensure consistent, equitable implementation across Oregon.

Eligibility Requirements

To be eligible for the CEN Program, a child must:

1. Be a resident of Oregon.
2. Meet ICF/IID, Hospital, or Nursing Facility Level of Care.
3. Be receiving Medicaid Title XIX benefit package through OSIPM or HSD medical programs.
 - Children receiving Children's Health Insurance Program (CHIP) are not eligible for CEN, but will be given the opportunity and additional time, if needed, to move from CHIP to a qualifying Medicaid package if they choose.
4. Be assigned to the highest Oregon Needs Assessment (ONA) service group due to their very high medical (5m) or very high behavioral (5b) support needs according to a current, valid ONA. It is the responsibility of the CME to ensure that the accurate ONA assessment score is reflected in eXPRS.

If a child is found to be ineligible for the CEN Program, they will be given a Notice of Planned Action (NOPA) by ODDS and the CME will be notified.

Enrollment in the CEN Program

Enrollment and Waitlist Development Background

There are more children in the Oregon Needs Assessment (ONA) service group 5b and 5m than the CEN Program can accommodate. To identify children offered enrollment and establish the waitlist, ODDS included all children in service group 5b or 5m or on a CIIS referral list as of May 2, 2024, in a random ordering process. The first 155 children were offered the opportunity to join the CEN program and the remainder formed the initial waitlist.

Initial and Ongoing Enrollment

About 1/3 of those first offered enrollment declined, and in August 2024, ODDS turned to the first 53 children on the waitlist to offer them space. ODDS will continue turning to the waitlist to ensure there continues to be 155 children enrolled in the program as long as this is the number that can be supported within the program budget.

Anytime a child is offered CEN enrollment, ODDS will:

- Send an offer letter via **postal mail** letting them know they have an opportunity to join CEN. It will explain basics of the program, key deadlines, and encourage them to be in contact with their service coordinator. The letters also explain that eligibility must be verified by ODDS before a child will be enrolled.
- Send an email the child's CME letting them know the child has been offered enrollment so they can contact the family.

CME actions required to support getting the waiver to full capacity remain the same as the first 155 children.

1. Within five days of receiving the ODDS email about a child's CEN offer, contact the family to let them know that their child has an opportunity to participate in the CEN Program.
2. If a family is not responsive, make no fewer than three (3) attempts to contact the family through various formats such as phone call, text message, and email to offer choice advising and document these attempts in the progress notes.

3. Explain to parents what being a paid provider to their child entails so that parents can make an informed decision on whether to participate in the CEN Program. You will find helpful information for this conversation detailed in [Parent Considerations](#).

Parents must let the child's SC know that they would like to move forward with the enrollment process within 60 calendar days from the date of the initial letter of notification mailed to the family from ODDS. This deadline is included on the postal mail letters and the emails to CMEs. CMEs must pass the family's decision onto ODDS via email for next steps.

If the family declines to participate in CEN Program the SC will offer the parent a choice:

- to be moved to the bottom of the waitlist (the child will not retain their assigned number on the waitlist); or,
- to be removed from the waitlist.

The SC should also inquire why the family has decided to decline to participate in the CEN Program. CMEs must pass the family's decision onto ODDS via email for next steps.

If the family does not respond to the SC by the deadline (60 calendar days from the date of the letter of notification sent by ODDS), ODDS will move the child to the end of the waitlist. ODDS will mail the family a letter to inform them that their child has been moved to the end of the CEN waitlist due to no response to the CEN Program participation offer.

Once the waiver is at **full capacity** serving 155 children, the CME contact requirements for new enrollments will change as reflected in OAR 411-415-0080(4). This section of rule requires CMEs to attempt to contact families within two weeks from the date they are notified that their child has been offered enrollment in CEN Program.

At least annually and regardless of service group, a CME must inform a child's parent or guardian that their child may be eligible for the CEN Program and provide information about how to apply for the program.

In accordance with OAR 411-415-0080(4), a CME must assist with adding a child to the Department's waitlist for the CEN Program regardless of service group, if requested.

When a child's parent or guardian has been offered enrollment to the CEN Program by the Department, a CME must:

- Attempt to contact the child's parent or guardian within two weeks from the date the Department informed the CME of the child's offer to enroll in the CEN Program.
- Inform ODDS of the parent's or guardian's decision, or lack of response, no later than 60 calendar days from the date the parent or guardian was notified by the ODDS of the offer to enroll in the CEN Program. During the 60 calendar day period, the CME must make no less than three attempts to contact the parent or guardian through various formats such as phone call, text message, and email. These attempts to contact the parent or guardian must be documented in the progress notes.
- Provide or direct a parent or guardian who chooses to participate in the CEN Program to a list of any provider agencies willing to consider employing a parent provider.
- Prior to a child's enrollment in the CEN Program, a CME must provide information to the child about advocating for themselves with respect to choosing and managing direct support professionals.

Important:

If the child's parent agrees to participate in the CEN Program, ODDS will verify the child's eligibility for the CEN Program before completing the CEN enrollment. This is not the CME's responsibility. ODDS will notify each CME when a child is verified as eligible for the CEN Program.

After Eligibility Verification: Required Steps

Once a child is verified as eligible for the CEN Program, there are additional steps to get a child fully enrolled in the CEN Program.

CME Steps:

1. Support the Parent Provider to be Hired by a Provider Agency

Parents must be hired by a provider agency before they can provide paid attendant care to their children in the CEN Program. No parent can be paid to provide attendant care to their child until they have met all minimum agency employee requirements including those in Oregon Administrative Rule, [chapter 411, division 323](#).

2. Update the Individual Support Plan (ISP)

Include parent attendant care to the existing ISP through an ISP update (using the ISP Change Form) or creating a new ISP (if needed) that includes parent attendant care. Use procedure code OR525 for parent attendant care at up to 20 hours per week and not to exceed the child's monthly hour allocation.

If new for the child, also update the case management services section of the ISP or change form to **monthly** case management contacts. At least two contacts per ISP year must be in-person for children in the CEN program.

3. New Freedom of Choice Form

Anytime someone changes to a different waiver, such as when choosing the CEN Program, a new Freedom of Choice form is required.

NOTE: All ISP related forms must be signed by an unpaid parent or a designated representative.

4. CIIS-CDDP Case Management Transfer, If Needed

Children served in CIIS who have established I/DD eligibility must be transferred to CDDP case management when enrolling in the CEN waiver. Children who do not have I/DD and are served in CIIS due to medical needs will remain in CIIS case management. The transfer to a new case

management entity as a result of choosing CEN **does not** require a Notice of Planned Action.

5. Child Self-Advocacy Training

Provide training, information, or materials to the child about self-advocacy and choosing providers. There is flexibility on how to relay the information to meet the child and family's needs. The self-advocacy training can be virtual or in-person and should account for the child's age and abilities.

There are many ways to provide this information, and parents can assist in identifying what will work best for their child. Services coordinators can access ODDS-developed training materials on <https://www.oregon.gov/odhs/idd/pages/childrens-extraordinary-needs.aspx> under "Self- Advocacy for Children". Document this training/conversation in progress notes.

6. Update Plan of Care

Add OR525 to the child's plan of care in eXPRS once a parent is confirmed as hired by a provider agency.

Agency Provider Steps (Hiring Agency):

1. Parent Provider Training

Ensure parent provider has taken required ODDS Parent Provider training. The ODDS Parent Provider training can be found on the CEN Program website under "Training for parents and guardians" This training is available on Workday and parent providers will need to sign up for an ODDS affiliated Workday account. A comprehensive guide on how to create a Workday account can be found [here](#).

- As proof of completing the training, parents must produce a Workday certificate (available to print from Workday) or confirmation email from ODDS that they have passed the required post-training assessment.

2. CEN User Enrollment Form

The eXPRS Paid Parent Direct Support Professional User Enrollment Form can be found in the eXPRS system.

Path:

Help → Agency Providers → User Enrollment Forms → Paid Parent Direct Support Professional Agency User Enrollment Form.

Link: [Paid Parent Direct Support Professional Agency User Enrollment Form](#)

- This form is required even if the parent provider is using the agency's own EVV solution. This form establishes a parent-child relationship in eXPRS.
- The provider agency is responsible to complete this form and send it to info.exprs@odhsoha.oregon.gov.

3. Inform the CME

Let the child's CME know when the parent provider has completed all required CEN Program enrollment steps:

- Successfully completed the hiring process, including passing a background check.
- Completed the required ODDS Parent Provider training.
- Sign the change form, ISP, or service agreement.
- Completed the Paid Parent Direct Support Professional User Enrollment form to establish a parent-child relationship in eXPRS.

Summary of All Steps After Eligibility Verification:

Step	Responsible to Complete	Documentation Needed
Offer information on working for a provider agency	CME	Progress note
Complete a New Freedom of Choice form	CME	Form in child's file
Update ISP/complete ISP change form to add new service	CME	Progress note and change form
Provide Self- Advocacy training to the child	CME	Progress note
Parent employed by provider agency	Parent/provider agency	Email from provider agency to CME
Ensure parent completes the required ODDS Parent Provider training	Provider agency	Workday certificate or email from ODDS
Submit eXPRS user enrollment to ODDS	Provider agency	Emailed to info.exprs@odhsoha.oregon.gov
Inform CME when the parent provider has completed all required enrollment steps	Provider agency and CME	Email, phone call, or other established method *CME, document this information has been received in progress notes
Update POC	CME	Plan line entered, provider linked

The CEN Waitlist

Adding a Child to the Waitlist

The waitlist sign-up is available on the [CEN webpage](#) to submit electronically or to download, print, and mail in a variety of languages. CMEs should provide hard copies as needed to families. The day and time that the electronic form is submitted (or postal mail copy received) will be used to determine the waitlist order. Any child determined to be eligible for DD services or on a waitlist for CIIS can be added to the waitlist, regardless of service group.

Eligibility is not verified when a child is added to the waitlist. Eligibility will be determined by ODDS at the time the child's name has been accepted and enrollment offer for CEN.

There are two ways to add a child's name to the waitlist:

1. As requested by a child's parent or guardian, service coordinators or residential specialists can add the child's name to the waitlist.
2. Parent may add their child's name to the CEN Program waitlist.
Parents are not required to seek SC approval to add their child's name to the CEN Program waitlist.

Viewing Waitlist Information in eXPRS

A child's waitlist number is available on the "view client" page in eXPRS. It will automatically move children "up" as children move off the waitlist, so that the child at the top of the waitlist will always be assigned the number one (1).

When the child has moved to the top of the waitlist and space is available in the program, ODDS will send a postal letter to the family and an email to the CME, notifying them of the enrollment offer.

Parent Considerations:

There are important factors for parents to consider when choosing whether to be paid to provide attendant care to their child:

- Becoming a paid provider means earning income, which could impact

the parent or family's eligibility for different benefits. Visit the following resources for more information:

- [SNAP Food Benefits](#)
- [TANF Cash Benefits](#)
- A child may receive no more than 20 hours per week of paid attendant care from a parent(s). There are no exceptions. More than one parent can be their child's DSP. eXPRS will lock at 20 hours per week per child for the parent attendant care procedure code, regardless of the number of parents providing attendant care.
- A child must live in the family home to participate in the CEN Program. A child cannot receive services in a residential program (24-hour residential, host homes, and foster care) while participating in the CEN Program. If a child living in a residential program is offered CEN Program enrollment, the child's service coordinator or residential specialist will work with the parent to explain the CEN Program and offer the option of the child moving back home to enroll in the CEN Program. Parents should be made aware that their child's place in a residential program cannot be "held" for them if a transition to in-home supports is unsuccessful.
- A child that participates in the CEN Program and who has an established **intellectual or developmental disability** eligibility and meets ICF/IID level of care cannot have Children's Intensive In-home Services (CIIS) case management.
 - If they currently have CIIS case management, the child will exit the CIIS program and will receive case management from their local county entity. If they choose to return to CIIS, they may be added to a waitlist.
 - When a child exits a CIIS waiver and enrolls in the CEN waiver, any PSWs they have will lose the CIIS differential but may qualify for the enhanced or exceptional differential.

If a child indicates that they do not want their parent as their paid provider, ask clarifying, open-ended questions and explore the reasons why. You may use the Charting the Life Course Trajectory tool to better understand what the child wants and does not want from a paid provider. Problem-solve with the parent and child together to try to resolve the issue. Document these conversations in

progress notes.

- A parent may not be paid for attendant care delivered to their child until the parent is hired by a provider agency and has completed the required, ODDS-approved parent provider training. This training is available in Workday at: [Training for Parents](#)
- A parent must be hired by a provider agency within 90 calendar days of an offer to enroll in the CEN Program. A parent provider must provide attendant care to their child at least once every 90 days for the child to remain enrolled in the CEN Program.
- Parents must be eligible to work in the United States.
- The parent is subject to a background check.
- The parent provider will become a 24-hour [mandatory reporter](#).
- Parents must understand that when they are being paid to provide support to their child, they are required to follow all applicable state and federal rules and laws that pertain to the paid care of children receiving ODDS services.

One or more of these rules may conflict with how someone chooses to parent. For example, DSPs may not be authorized to place a child in “time out” or send them to their room (to be alone). This may be considered involuntary seclusion and might fall under the category of abuse while working as a DSP.

Limitations:

An agency will not receive payment for claims when:

- The parent DSP is also responsible for another child under the age of 10 or a vulnerable person of any age who requires physical care or monitoring.
- During activities not for the primary benefit of the child in the CEN Program, such as:
 - Grocery shopping for the parent provider’s household.

- Housekeeping not required for the disability-related support needs of the client child.
- Remote work or operating a home business while providing attendant care to their child.
- The delivery of attendant care by a parent provider in any of the following circumstances:
 - During the hours available to a child at the public school where the child is enrolled, except:
 - When the client child is temporarily absent from school due to surgery or illness;
 - When a school district places the client child on an abbreviated school day program; or,
 - When the client child has been expelled or suspended.
 - Due to a parent's choice to have the client child attend public or private school for fewer hours than the regular instructional hours of the child's assigned public school.
 - During homeschooling, tutoring, or as a supplement to the public, private, or homeschool education of a client child.

Designated Representative:

Unless there is an unpaid parent in the child's life, the paid parent must choose a designated representative to direct the ISP. An unpaid parent does not need to become a designated representative. The designated representative might be an adult family member or another adult who knows the child well.

The parent not being paid to provide attendant care, or the designated representative will become responsible for signing the ISP and related documents.

For the monthly case management contact requirement to be fulfilled, the SC must contact the unpaid parent or designated representative.

DSP Role vs. Parent Role Examples

Role as Direct Support Professional	Role as Parent
Mandatory Abuse Reporter 24/7	Still Mandatory Abuse Reporter 24/7 if also a paid provider
Only provide ADL/IADL services as in alignment with ISP and/or service agreement	No restrictions in the care provided
Cannot provide care for any children under the age of 10 while providing ADL/IADL services to the child in the CEN Program	No restrictions in the care provided
Cannot provide care for a vulnerable adult of any age while providing ADL/IADL services to the child in the CEN Program	No restrictions in the care provided
Cannot do household duties that do not directly benefit the child in the CEN Program	No restrictions with any household duties
Provides behavior supports and implements positive behavior support plan, if applicable, as authorized in ISP	How to address behavior is not restricted by an ISP
Remote work or self-employment is not allowed	No restrictions around remote work or self-employment
Cannot direct ISP due to conflict of interest	Cannot direct ISP if they are also a paid provider

CEN Program Updates in eXPRS

1. The **View Client Page** has a new section called **Extraordinary Needs Eligibility**, where a child's referral to this program will be documented and processed by ODDS.
2. A new page has been added to eXPRS so that a link can be established between a child approved for the program and an identified parent

caregiver. This link will appear in the **View Client > Relationship** section, which will be updated to have a section for **Parent Relationships**.

3. A new Service Procedure Code (**OR525 - Parent Attendant Care**) has been added to eXPRS. When a parent who is a paid caregiver is providing attendant care to their child in the CEN Program, this will be authorized using OR525/NA, ZE, or ZC. Hours claimed using OR525 will draw down from the monthly hour limit in the same way other attendant care does.

4. There is a new search page named **Children's Extraordinary Needs Waiver Enrollment**. This page allows CMEs to search for and see all children associated with their CME on the CEN waitlist. It will also show if they are currently enrolled in the program, and if so, the start and end dates.

For more information, see the [eXPRS Train Email: Section #1 – Children's Extraordinary Needs \(CEN\) Program](#). More eXPRS-related emails and how-to guides will be made available in the eXPRS Help Menu.

Complaints:

Complaints related to the administration of the CEN Program as described in Oregon Administrative Rule (OAR) and this worker guide may be made verbally, in writing at [ODDS Complaints](#), or by using the Department-issued Complaint form 0946 and must be made directly to the Department. A complaint shall be addressed by the Department according to OAR 411-318-0015.

Every person and family member of a person receiving ODDS services has the right to file a complaint at any time.

Making a complaint or filing a grievance is not a pre-requisite or substitute for a Fair Hearing.

Frequently asked questions (FAQs)

Q: Who is the Children's Extraordinary Needs (CEN) Program for?

A: The program is for children under 18 years old. They must have very high medical or behavioral support needs based on their Oregon Needs Assessment.

Q: How many children can be signed up for the CEN Program?

A: No more than 155 children can be in the program at a time. When children leave the program, such as if they move out of state, others will be added to fill the open space.

Q: What is the child's role in choosing to participate in the CEN Program?

A: A parent has the right to choose their child's paid providers. The child's service coordinator (SC) will explain options to the child. The SC will include what the child wants in the ISP during service planning.

Q: What is the difference between a parent and a paid provider?

A: There are important differences between being a parent who is unpaid and being a paid Medicaid provider. One difference is paid providers are mandatory abuse reporters 24 hours a day, 7 days a week. If you are a mandatory reporter, you must report all suspicions of abuse or neglect. Call the abuse hotline at 855-503-SAFE (7233) to make a report. The hotline is open 24 hours a day, 365 days a year.

Q: What is a designated representative?

A: A designated representative helps with a child's service planning when there is not another, unpaid parent to take on this role.

Q: How many hours can a parent work in the CEN Program?

A: A child can never have more than 20 hours per week of paid care by a parent provider. It's okay for more than one parent to be their child's provider, but no matter how many parents provide paid care, they cannot be paid more than 20 hours per week total.

Q: How does a parent sign up to work for a provider agency?

A: Service coordinators can help parents find provider agencies (a place to work as a paid parent) who have already said that they are interested in hiring parents of children enrolled in the CEN Program. In addition, there may be other provider agencies may be willing to hire parents of a child enrolled in the CEN Program. Parents are free to seek employment at any provider agency they choose. Parents must meet all requirements of the provider agency to be hired. A list of interested provider agencies can be found on the CEN Program webpage.

Q: What tasks can a parent provider do for their child while working as a provider agency employee?

A: Attendant care. This service helps people with activities of daily living (ADL), instrumental activities of daily living (IADL), and health-related care through hands-on assistance, supervision, or using words or hand gestures. ADLs include self-care such as eating, using the restroom, grooming, dressing, and bathing. IADLs are things like shopping and cooking.

Provider agencies cannot allow some tasks that may sound like ADLs and IADLs. Parent providers cannot be paid to do them. These include general parental responsibilities and services that are available in other places like school or the doctor's office. An example of a nonbillable task is driving to and from school or doctor appointments. Parents should follow the rules of the agency that pays them. Provider agencies must explain the rules to paid parents.

Paid parents must be working toward goals in the child's Individual Support Plan (ISP). The parent should follow their employer's rules and ask their supervisor if they are not sure what to do.

Q: What should a parent provider do if they make a timesheet mistake?

A: The parent provider should let their provider agency know as soon as possible to fix the mistake. This is important, because billing mistakes may be considered Medicaid fraud, even if they are an accident.

Q: Can a parent be paid to provide transportation for their child if it is related to a positive behavior support plan?

A: No.

Q: If a child is on the CIIS waitlist and becomes eligible and chooses to join CEN Program, will they be removed from the CIIS waitlist?

A: They can stay on the waitlist if they choose.

Q: If a child is not receiving school services due to being medically fragile, could they receive support during the school day? What if they are at home from school due to being on hospice?

A: If a child does not attend school at all due to parental decision, even if they are medically fragile, they cannot receive paid support from a provider, including a parent provider, during regular school hours.

If a child is on hospice care or has been expelled or suspended from school, this can be treated the same as when a child is home sick and there would be no restriction on when a paid provider could work related to the school day.

Q: Can a parent's significant other, such as a fiancé, become a DSP for the parent's child outside of the CEN Program?

A: Yes. There is currently no policy against a parent's significant other, like a fiancé, becoming a paid provider.

Q. 411-375-0055(5)(C)(iii) states that a common law employer (CLE) must not currently be employed as a provider in any capacity for the individual receiving services. Does this mean that parents that are currently CLE for other PSWs would need to appoint another CLE if they become a parent provider?

A: This is correct, the parent will need to identify a new CLE.

Q: Can parents claim this income under the Difficulty of Care Act so that it would not count towards their income for SSI and other state benefits and not have to pay taxes on the income?

A: Unfortunately, ODDS is unable to answer this question, and we recommend consulting your provider agency and a tax professional.

Q: What is the difference between 5GSN vs 5B and 5M?

A: **GSN** means general support needs for activities of daily living (ADLs) and instrumental activities of daily living (IADLs). Applicable items are added up to equal a GSN between 14 and 84.

MSN means medical support needs with one or more medical condition(s) that requires a very high degree of support.

The scores from the 28 treatments and therapies questions are added up to determine the MSN score.

A person is assigned to 5m if their MSN score is 5 or more and has at least one daily medical treatment or therapy that meets “support person performs” criteria.

BSN means behavior support needs with behavioral challenges that require a very high degree of support.

There are no number scores associated with the BSN.

A person is assigned to 5b if the person’s behaviors and provided supports meet established criteria.

Q: Will a parent lose their rights as legal guardian if their child is enrolled in the CEN Program?

A: No. The CEN Program does not impact the legal guardianship of a minor child.

Q: If a child's Medicaid eligibility has lapsed, is there time to have their eligibility reinstated to meet the requirements for the CEN Program?

A: If children need more than 90 days due to establish Medicaid due to Medicaid lapse or CHIP coding, this is considered “good cause” and ODDS may grant extensions for another 90 days.

During extensions, children will maintain their enrollment spot in the CEN waiver.

After the second 90 days has passed, if the child’s Medicaid eligibility status is pending, ODDS may consider granting another extension.

Q: Do I need to disclose a conflict of interest for my child when they apply for the CEN Program if I am employed with ODDS or a CME?

A: Any potential conflict of interest matters should be discussed with your employer (provider agency).

Q: If I become a paid parent to my minor child, will the government try to recoup the money through an estate recovery?

A: You can find out more about estate recovery here:

<https://www.oregon.gov/odhs/financial-recovery/pages/estate-recovery.aspx> or email <https://www.oregon.gov/odhs/financial-recovery/pages/estate-recovery.aspx>

Q: What needs to be completed before a child can transfer from CIIS to the CDDP to enroll in the CEN Program?

A: A child can't be enrolled in the CEN waiver until CEN waiver eligibility is verified. The transfer from CIIS can happen any time after that, including before parent training is completed and before a parent is hired by an agency. For assistance with issues regarding transfers, please let ODDS know by emailing cenprogram@odhs.oregon.gov so we can help.

Q: Do parents have to do a quiz after the parent training and how can SC's help them with that?

A: Yes, they must complete a quiz before the parent training requirement is met. The CEN Program Parent Provider training is available on demand in Workday. Parent Providers can access the training at any time.

For help troubleshooting Workday issues, please email the ODDS Training

Unit at: odds.training@odhsoha.oregon.gov

Q: If PSW rates are going down because a child is exiting CIIS, do we have to complete a new PSW Service Agreement (SA)?

A: No. when there is a PSW wage change in the middle of a SA period, we don't require changes to the service agreement.

Q: If a child is going to county case management (CDDP) to access the CEN waiver, does the county have to sign the ISP change form?

A: Whichever CME initiates the change form can sign it. It is valid whether CIIS or the receiving CDDP sign it.

Q: If a child does not currently have a DD eligibility determination, do families need to apply for DD services for their child or else they are effectively declining the CEN waiver?

A: Children with previously established DD eligibility must move to the CDDP as part of enrollment in the CEN Program.

Children in CIIS without established DD eligibility can choose to apply for DD eligibility with the CDDP or to stay with CIIS.

Q: What happens if a parent is not hired by the 90 calendar day deadline established in OAR 411-440-0030(d) and the hiring agency has not requested an extension? Is the child removed from the CEN Program waitlist or moved to the bottom of the waitlist?

A: If a parent needs more time because they can't find an agency employer or have a hardship, such as illness or hospitalization, ODDS may extend the time for good cause. The parent should tell the CME why they need more time and CME should contact ODDS. **Non-responders are moved to the bottom of the CEN Program waitlist.**

Q: Can you clarify who changes the Developmental Disability Eligibility Enrollment (DDEE) form for a child who is eligible for the CEN Program, is it the CME or ODDS?

A: Per the Eligibility and Enrollment Worker Guide, the DDEE form is not required. ODDS will only notify the CME that the child is eligible or not eligible. The steps for the CME to complete once the child is confirmed eligible for the CEN Program can be found on page 7 of this CEN Program Worker Guide.

Q: Does the CEN Program cover the cost of the same supplies that CIIS covers?

A: The CEN waiver also has Specialized Medical Supplies.

Q: Will the Freedom of Choice form be updated to include the CEN Program?

A: The family is required to sign a new Freedom of Choice form, but it is the same form we have always used. The form does not list specific waivers,

but a new one is required any time a person changes from one waiver to another.

Q: When will the CEN waitlist be open? How do we add our child's name to the list?

A: The waitlist opened for new submissions November 1, 2024 on the CEN webpage.

Appendix A: Waiver and K Plan Services for Children

NOTE: Children may receive services through **one** Medicaid waiver (Choice is made based on availability, eligibility and desire.) at the same time as accessing K Plan services.

*Parents of minor children may only be paid to provide attendant care through the CEN waiver.

ODDS waiver options for children

Children's Intensive In-Home Services Behavior model waiver	Children's Intensive In-Home Services Medically Fragile and Medically Involved waivers	Children's Waiver (CDDP)	*Children's Extraordinary Needs Waiver
Case management (Intermediate care facility (ICF) level of care (LOC) = case management at CIIS	Case management (hospital and nursing facility level of care) = case management at CIIS	Case management (Intermediate care facility (ICF) level of care (LOC) = case management at CDDP	Case management (If eligible for DD services =case management at CDDP; if not eligible for DD services=case management at CIIS
Vehicle modification	Vehicle modification	Vehicle modification	Vehicle modification
Family training	Family training	Family training	Family training

Specialized medical supplies	Specialized medical supplies	Specialized medical supplies	Specialized medical supplies
Environmental safety modifications	Environmental safety modifications	Environmental safety modifications	Environmental safety modifications
Employment services	Employment services	Employment services	Employment services
Individual directed goods and services	Individual directed goods and services		
			*Attendant care by a parent

Community First Choice State Plan Amendment (K Plan)

Attendant care (in-home hours; foster care; group home; host home)
Relief care
Community nursing – Long-term care community nursing
Professional behavior services
Assistive devices
Assistive technology
Electronic back-up systems

Environmental modifications
Community transportation (when approved in a PBSP or exception)
Transition services

Appendix B: How to Find 5b and 5m Service Groups

How to Find Service Group Information for Individuals with Very High Behavior or Very High Medical Needs

There are instances where service coordinators or personal agents may need to find individuals that are in Service Group (SG) 5 with Very High Medical (5m) or Very High Behavioral Needs (5b).

The **ONA Reports** page allows specific users to return a results list with information that can be used to infer that someone is in Service Group 5(m) or 5(b). These reports can pull SG information for an individual or for all those enrolled with your Case Management Entity (CME). [OBJ]

To take the steps in this guide, users will need to be assigned one of following user roles for your type of CME:

- **ONA Viewer**
- **ONA SC/PA**
- **ONA Assessor**

- 1) Log in to eXPRS under the Case Management Provider and select **Client > ONA Reports**

- 2) On the **ONA Reports > Service Group Report** dropdown, select one of the following reports:
 - ONA Full
 - ONA Summary
 - Service Group Letter
 - Service Group Report

ONA Reports

* **Report:** Service Group Report [Report Glossary](#)

At least one search criteria must be entered.

Assessment ID:

Client Prime:

Status: Service Group Report

County:

ONA Submit Date From: **ONA Submit Date To:**

ONA Expiration Date From: **ONA Expiration Date To:**

TIP: Each report in the **Report** dropdown on this page has a specific use. For more information about each of them, hover over the **Report Glossary** on the upper-right hand corner of the page. For the objective in this document, any of the reports highlighted above in blue will work.

3) Enter any search criteria needed to return individuals served by your Case Management Entity, and then select **Find**. Some sample criteria is shown below:

1. **Status:** Approved
2. **ONA Expiration Date From:** The start of the current month (e.g. 5/1/2024)
3. **ONA Expiration Date To:** The end of the month one full year later (e.g. 5/31/2024)

ONA Reports

* **Report:** Service Group Report [Report Glossary](#)

At least one search criteria must be entered.

Assessment ID:

Client Prime:

Status: Approved

County:

ONA Submit Date From: **ONA Submit Date To:**

ONA Expiration Date From: 5/1/2023 **ONA Expiration Date To:** 5/31/2024

4) From the Results list, you can view the Service Group information. Note the **Medical Score** Column (A) and **Behavior Score** Column (B). These are Yes/No columns. If the column is marked **Yes**, it indicates that the individual's ONA identifies them as having Very High Medical or Very High Behavioral Needs respectively.

In the example shown below, the individual in the third row is 5(b), and the individual in the fourth row is 5(m).

- **Behavior Score:** A Yes/No value that indicates whether the ONA for the individual indicates that they are 5(b), having very high medical needs.
- **LOC:** Status of the Level of Care (LOC) generated from the completed ONA. A hyperlink to open the ONA's Level of Care report.
- **Risk Report:** The date the risk report was created; also, a hyperlink to open the Risk report for more details.

Resources

For the most current information about the CEN Program, please visit the Children's Extraordinary Needs Program webpage:

<https://www.oregon.gov/odhs/idd/Pages/sb-91-implementation.aspx>

Senate Bill 91:

<https://olis.oregonlegislature.gov/liz/2023R1/Downloads/MeasureDocument/SB91>

Charting the LifeCourse Nexus: <https://www.lifecoursetools.com/>

Enhanced & Exceptional Needs Expenditure WG: <http://odds-expenditure-guidelines-pdf>

Mandatory Reporting: <https://www.oregon.gov/odhs/report-abuse/pages/mandatory-reporting-employees.aspx>

eXPRS Train email: Section #1 CEN:

<https://content.govdelivery.com/accounts/ORDHS/bulletins/3909aa0>

Assistive Devices & Technology Worker Guide:

<http://www.dhs.state.or.us/spd/tools/dd/cm/Assistive%20Devices%20and%20Technology%20Worker%20Guide.pdf>

Contact

CEN Program Questions: cenprogram@odhs.oregon.gov

Parent Training Questions: odds.training@odhsoha.oregon.gov

ODDS Complaints: odds.complaints@odhsoha.oregon.gov