

INDEPENDENT CHOICES PROGRAM CHECKLIST

- All the following criteria must be met. All forms must be saved to the consumer's EDMS file except for the 7262i Direct Deposit form.
- If any of this criterion cannot be met, the consumer may not be eligible or able to participate in the ICP without a representative. If unsure, you may email ICP.SPD@odhsoha.oregon.gov to staff the case.
- If the consumer is no longer eligible an email must be sent to the ICP Coordinator at the email address listed above.

Consumer Eligibility

- ☐ The consumer is eligible for In-Home Services
- ☐ The Participation Agreement has been signed
- ☐ The service plan and budget has been created
- ☐ The consumer lives in a stable living situation
- ☐ The consumer has demonstrated the ability to manage money and can manage their ICP benefit or has designated a representative to manage their ICP benefit on their behalf
- ☐ Form SDS 0541 Notice of Eligibility and Responsibility has been sent to the consumer
- ☐ Form SDS 0546IC2Wk Independent Choices Benefit Calculation has been sent to the ICP Coordinator and the consumer
- ☐ Form SDS 0548 Independent Choices Program Employee Provider(s) Information has been completed, signed and sent to the ICP Coordinator
- ☐ Form SDS 0353 Workers' Compensation Consent and Agreement has been completed and signed
- ☐ Form DHS 7262i Direct Deposit and an original voided check has been sent to the address indicated on the form to Salem (Note: Originals must be sent. Emails/Faxes are not sufficient).
- ☐ The coding has been updated in the Mainframe to include the ICP Case Descriptor
- ☐ The consumer is complying with their legal and financial employer responsibilities
- ☐ Natural supports have been adequately addressed
- ☐ The consumer has a back-up plan

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Representative

☐ Does the consumer have a representative? ☐ Yes / ☐ No (If no, you may skip this section)

If yes, did the representative complete a criminal history check?

☐ The representative is ensuring the consumer's health and well-being needs are met

☐ The representative can manage the service plan and budget

☐ The Representative Agreement has been signed

☐ The representative is NOT getting paid for their services

☐ Form SDS 0546IC2Wk Independent Choices Benefit Calculation has been sent to the representative

☐ The representative is complying with the legal and financial employer responsibilities on behalf of the consumer

Employee Provider(s)

☐ All employee provider(s) have submitted a criminal history check

☐ The employee provider(s) are ensuring the consumer's health and well-being needs are met

☐ The consumer is making regular payments to their employee provider(s)

ICP Money Management

☐ The consumer or their representative is purchasing and directing in-home services and staying within the service budget

☐ The consumer or their representative has opened and is maintaining a separate ICP checking account with no co-mingling of other resources

☐ The consumer has not overdrawn their ICP checking account

☐ The consumer is depositing their service liability (pay-in) into the ICP checking account

☐ The contingency/discretionary fund has been approved by the case manager and is 10% or less of the ICP cash benefit