

Frequently Asked Questions: OPI-M Power Hour

April 22, 2026

Will power hours be recorded?

The power hours are recorded for record keeping purposes only and will not be distributed. The power hour handouts and FAQs are posted on the CM tools website.

Will the CPC date ever be added to the OPI-M application?

Yes, we are working with Publications on an updated OPI-M application and can include that change.

Will the OPI-M application be rearranged so the applicant signature page and AVS consent form are consecutive?

The current OPI-M application page arrangement is intentional, so the AVS page is not missed.

Will OPI-M renewals be quicker for consumers?

The Central Office Financial Eligibility (COFE) Team is already very quick with their determinations, but the idea is renewals should be even quicker with less information to be verified again.

Where it says "select or enter text" on the COFE referral template, should a drop down be opening up to be able to select text?

It's not a drop down, but you can type text in each of those areas.

Is the COFE referral template required for all renewals?

No, the template is only used for APD offices working with AAA partners. Type B AAAs manage eligibility in their own offices and do not refer to COFE.

If the 231 is in ONE, do we still need to attach it to the referral?

No, if the form is already in ONE, there is no need to send it with the referral.

Who is responsible for completing voter registration at the initial application?

The ECM is responsible for completing voter registration.

How is an SCM to determine if the consumer has the ability to pay privately for a service? Do we ask the consumer if they can pay privately and leave it at verbal attestation?

There is no expectation for the SCM to do an in-depth review of resources. The expectation is for the SCM to ask about resources available to the consumer before pursuing paid OPI-M services.

How is this information about how to request a renewal from COFE being shared with APD partners?

All staff will be notified of the updated template via a CM Tools update transmittal and was reviewed in detail during this Power Hour which contains both AAA and APD staff. COFE staff will also share the template if the wrong one is submitted.

Should we consider not talking about services that are available if the consumer has no need for the service?

Part of the service planning process is to review unmet needs and all available services. It is best practice to share the available services, so consumers are aware of them in case their needs change in the future.

How often does the K-Plan Provider List get updated?

The list is updated monthly. There is a chance that providers will change the type of work they will do or change the supplies that they carry. This will not be reflected on the provider list.

For the two-year renewal, are we using the date of the OPI CAPS conversion or the date the financial assessment was completed?

Renewals should align with the CAPS due date.

How long is it taking for OPI-M ancillary requests to be approved or denied?

If everything is submitted correctly and there are no questions, it is taking about 3 weeks on average for a decision to be made.

Would the COFE template be used by a SCM if someone on Title XIX services wants to switch to OPI-M?

In that instance, the APD SCM would also be acting as an ECM if completing the OPI-M service eligibility and referring to the COFE team.

Are there concerns with starting an OPI-M renewal too soon? Are we shortening the CE period by completing the CAPS early?

Yes, this is a concern. The OPI-M CA/PS should occur in the month it is due and not be completed early. New guidance on the renewal process is coming soon.

If ECMs are waiting until the month the CAPS is due to complete the renewal CAPS, it doesn't give the SCMs enough time to complete their portion. What should we do in these situations?

If the SCM needs more time to complete the PLAN, the current service plan may be extended.

Do we check the boxes off on the Service Options page on the PLAN when the consumer accepts the referral for it? What if the consumer declines it later, do we have to update that page?

You should check off the service options that the individual is requesting to be part of their PLAN development. If they decline the service in the future or want to add new services, the PLAN should be updated with those changes. These changes can be made over the phone and you can accept a verbal signature from the consumer.

Is central office working on recruiting providers for OPI-M services and benefits?

Central office is always looking for new providers for services but not actively recruiting. Any vendor can apply to become a Medicaid enrolled provider by going through the provider relations unit and completing the steps of the Medicaid provider enrollment agreement.

What is the point of sending the consumer the 003N?

The 003N is the only way that we can share information on the risk assessment. The other portions of the 003N are included in the PLAN.

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact Medicaid Services and Supports Policy Unit at or [503-945-5811](tel:503-945-5811). We accept all relay calls.