

Independent Choices Program Screening Tool

Updated: Aug. 8, 2025

Participant name: _____

Participant prime: _____ Date: _____

1. Does the individual meet all the eligibility requirements for the in-home services program?
☐ Yes – continue to step 2 ☐ No – individual is not eligible for ICP
2. Has the individual provided evidence of a stable living situation for the past three (3) month? (no evictions or houselessness)
☐ Yes – continue to step 3 ☐ No – individual is not eligible for ICP
3. Does the individual demonstrate the ability to manage money as evidence by timely and current housing payments?
☐ Yes – continue to step 4 ☐ No – individual is not eligible for ICP
4. Does the individual have an ICP checking account or do they have the ability to establish an ICP checking account?
☐ Yes – continue to step 5 ☐ No – individual is not eligible for ICP
5. Is the individual able to manage their own employer responsibilities including payroll without the assistance of others?
☐ Yes – continue to step 6 ☐ No – must have an ICP Rep. or FI
6. If an ICP Rep. is selected, is the Rep. able to pass a criminal history background check?
☐ Yes – continue to step 7 ☐ No – ineligible for ICP if Rep. is required
7. Is the individual or the ICP Rep. able to locate, screen, interview, hire, train, pay, terminate employee provider(s), develop and follow a service plan and a budget to meet their service needs?
☐ Yes – continue to step 8 ☐ No – may be a disqualifying factor **
8. Is the individual eligible for OSIP medical?
☐ Yes – eligible for ICP ☐ No – individual is not eligible for ICP

** Consult with the ICP policy analyst at icp.spd@odhsoha.oregon.gov.

Review Oregon Administrative Rule [411-030-0100](#) for ICP eligibility.

ICP Rep. = ICP Representative

FI = Fiscal Intermediary

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the Aging and People with Disabilities at apd.ltss@odhs.oregon.gov or 503-945-5600. We accept all relay calls.



OREGON DEPARTMENT OF
Human Services

Aging and People with Disabilities

Medicaid Services and Supports

500 Summer St. NE, E-10

Salem, OR 97301-1076

503-945-5600

odhs.info@odhs.oregon.gov

www.oregon.gov/odhs