

# Policy Transmittal Aging and People with Disabilities



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**Number:** APD-PT-24-008

**Issue date:** 4/26/2024

**Topic:** Long Term Care

**Due date:**

**Transmitting (check the box that best applies):**

- New policy   
  Policy change   
  Policy clarification   
  Executive letter  
 Administrative Rule   
  Manual update   
  Other:

**Applies to (check all that apply):**

- |  |   |
|--|---|
| <input type="checkbox"/> All DHS employees                             | <input type="checkbox"/> County Mental Health Directors                       |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Type B     | <input type="checkbox"/> Health Services                                      |
| <input checked="" 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 type="checkbox"/> County DD program managers                    | <input type="checkbox"/> Stabilization and Crisis Unit (SACU)                 |
| <input type="checkbox"/> Support Service Brokerage Directors           | <input type="checkbox"/> Other ( <i>please specify</i> ):                     |
| <input type="checkbox"/> ODDS Children’s Residential Services          |   |
| <input type="checkbox"/> Child Welfare Programs                        |   |

<b>Policy/rule title:</b>	Intake Guide for Case Managers		
<b>Policy/rule number(s):</b>	OAR 411-015-0008	<b>Release number:</b>	
<b>Effective date:</b>	Upon release	<b>Expiration date:</b>	
<b>References:</b>	APD-PT-23-006		
<b>Web address:</b>			

**Discussion/interpretation:**

This transmittal provides policy direction for local office staff working with individuals requesting APD services.

An Intake Guide for Case Managers has been created to provide clear expectations and guidance for completing a new request for services. The guide was created with input from Oregon Eligibility Partnership (OEP) and APD Medicaid Financial Eligibility.

The guide is available for use and can be found in the Case Management Tools site under "[Assessment, Service Planning and CA/PS](#)"> "Oregon ACCESS (OA), CA/PS

Information, and Service Intakes”.

The guide may periodically be updated to reflect changes or clarification to policy. When change occurs, section headers will be updated to reflect the month and year an update occurred. Changes to the guide will also be communicated in the “Weekly Update for CM Tools Website” Information Memorandum (IM) and include a brief description of the change.

**Training/communication plan:** None

**Local/branch action required:**

- Staff and supervisors of staff must review the guide.
- Update local processes to reflect the expectations and guidance from the worker guide.

**Central office action required:**

- Provide technical support as needed.

**Field/stakeholder review:** X Yes  No

**If yes, reviewed by:** APD Policy Review

**Filing instructions:**

*If you have any questions about this policy, contact:*

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