

STC Intake Process with Active Medicaid

Please note: The intake process will take differing amounts of time based on individual circumstances.

STEP 1: INITIAL CONTACT W/CARE COORDINATION ORGANIZATION (CCO)

- Admin Assistant connects with referring party and obtains basic information about potential member
 - Sends family introductory packet with releases and information to complete and return



STEP 2: CONVERSATION W/ ASSIGNED STC INTAKE COORDINATOR

- STC Intake Coordinator calls referring party/family:
 - Assess circumstances and where family is in the process of eligibility
- Discuss next steps and answer any questions



STEP 3: OBTAIN SIGNED PACKET (RELEASES) BACK FROM FAMILY



STEP 4: OBTAIN SUPPORTING DOCUMENTS FOR ELIGIBILITY

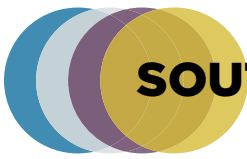
- STC reaches out to providers to obtain records on behalf of the family (medical records, psychiatric reports, school records, etc.)



STEP 5: SUBMIT FOR OPWDD ELIGIBILITY REVIEW

NOTE: Eligibility department has 30 days from submission to respond

- **DEEMED ELIGIBLE**
 - Level of Care Determination (LCED) is generated by OPWDD and completed by CCO
 - STC Intake Coordinator discusses with family and proceeds to Step 6 on the next page
- **DEEMED INELIGIBLE**
 - STC Intake Coordinator discusses options (including appeal or fair hearing) with family
- **ADDITIONAL DOCUMENTS/NEW ASSESSMENTS REQUESTED:**
 - STC Intake Coordinator discusses next steps and obtaining additional documents/assessment with family. Once obtained these are submitted back to OPWDD for continued eligibility review until 'eligible' or 'ineligible' determination is made



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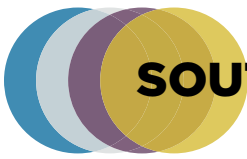
All steps below occur only for individuals determined OPWDD Eligible

STEP 6: COMPLETE STC INTAKE ENROLLMENT PACKET

Completion of this packet can be in person or completed via physical mail, however the process is unable to move forward until all documents are completed, signed and received by the CCO



STEP 7: CCO ENROLLMENT OCCURS FIRST DAY OF FOLLOWING MONTH



Post Enrollment Process

Note: Steps below may occur prior to official enrollment or in another order.

STEP 1: OPTIONAL NEW ENROLLEE ORIENTATION SESSION

All members with an email address on file will be invited to attend a virtual New Enrollee Orientation Session to meet STC Care Manager Supervisors, ask questions, learn more about next steps and connect with members of the Southern Tier Connect Family Advisory Board



STEP 2: CONTACT WITH CARE MANAGER

During the first month of CCO enrollment Care Coordination Manager (CCM) will complete the following with member/family member/advocate:

- Care Manager Checklist
- Developmental Disabilities Profile-2 (DDP2)
- Review CAS/CANS (if applicable) to utilize in Life Plan development



STEP 3: COMPLETE ASSESSMENTS

Care Manager will meet with member/family member/advocate and complete:

- I Am Me (IAM) Assessment
- Health Related Social Needs (HRSN) Assessment



STEP 4: DISCUSSION WITH CARE MANAGER REGARDING APPROPRIATE AND NEEDED SERVICES

Option 1: Family Support Services (FSS) Only

Option 2: Home and Community Based Waiver (HCBS) and FSS Services

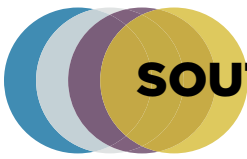
- OPWDD's HCBS Waiver funds services like respite, community habilitation, day habilitation, supported employment (SEMP), and self-directed services (SDS). To receive these services, you will also be required to enroll in the HCBS Waiver.



STEP 5: APPLY FOR FAMILY SUPPORT SERVICES (FSS) AS APPLICABLE



CONTINUE TO NEXT PAGE FOR STEPS 6 - 10



STEP 6: LIFE PLAN MEETING

Within 60 days of enrollment a Life Plan meeting must be held in person with the individual receiving services at a location, time and place that is chosen by the member/family/advocate.



STEP 7: APPLY FOR HOME & COMMUNITY BASED SERVICES [HCBS] WAIVER ENROLLMENT (AS APPLICABLE)

Note: OPWDD has 30 days from application to make a determination.

- **APPROVED**

- › Continue to Step 8

- **DENIED**

- › Care Manager will explain and explore alternative options including FSS only services or appeal of denial.



STEP 8: LIFE PLAN FINALIZED

Must be done within 90 days of CCO enrollment/HCBS Waiver enrollment (whichever happens first)



STEP 9: SEEK SERVICES

The STC Care Manager will work with the member/family member/advocate to complete referrals for service providers so services can begin.



STEP 10: ONGOING SUPPORT

The Care Manager is the main contact for support and questions. The Care Manager will connect with the member/family member/advocate on a regular and ongoing basis to assist the member in accessing needed services, supports, providers, benefits and more.