



Office for Citizens with Developmental Disabilities (OCDD)
Request for Services Registry and Tiered Waiver System
FREQUENTLY ASKED QUESTIONS (FAQ)

1. What is the Request for Services Registry (RFSR)?

Once you are determined eligible for services offered by the Office for Citizens with Developmental Disabilities (OCDD) by your Human Services District or Authority, you will be asked if you want to be included on the Request for Services Registry (RFSR). The RFSR is a listing of all persons that have requested waiver services, whether they need these services now or may need them in the future. It is no longer considered just a waiting list. The date that you sign indicating that you / your family member would like to be placed on the RFSR is called your “protected date.” Everyone who has requested OCDD Waiver services that has a current statement of approval and has completed a Screening for Urgency of Need (SUN) is on the Registry.

2. What changes are being made to the RFSR?

Previously, OCDD had two Request for Services Registries. One for the New Opportunities Waiver (NOW), which was used for both individuals waiting for the NOW and Children’s Choice Waiver Services, and a Request for Services Registry for those persons waiting for the Supports Waiver.

- One of the major changes being made is that OCDD will merge the two Registries into a single Registry that will be the DD Request for Services Registry.
- Only persons identified as having emergent (SUN score of 4) or urgent (SUN score of 3) needs will be considered “waiting.”
- All other individuals who have been identified as having future needs or no current unmet needs are considered “requestors” of services but are not considered “waiting” for services. Individuals who are “requestors” of services may ask for a re-screening at any point their situation changes, which may result in emergent or urgent unmet needs.

3. Why is OCDD making these changes?

In 2012, OCDD began a statewide initiative known as System Transformation to improve access to quality of, cost effectiveness of, and efficiency of community services for persons with developmental disabilities. OCDD engaged stakeholders in discussions to identify areas needing to be addressed. In those discussions the two major areas identified as needing to be immediately addressed included the 25-year-old registry or “waiting list” and a move from four waiver options to a single consolidated waiver. The following goals were established during these discussions:

- Serve more persons in home and community-based services (HCBS)
- Achieve cost effectiveness in HCBS vs. institutional options
- Reduce institutional reliance in both the private and public settings
- Provide access to appropriate services based on need
- Increase use of natural and community supports vs. paid supports

4. What do you mean by prioritization?

Over the last several years, OCDD has been evaluating the persons waiting for NOW services and in that process, we learned a lot of things:

- Many people that are waiting for the NOW already have some type of service(s) in place;
- Some people identified needed supports not offered by the NOW;

- More than 50% of the people waiting are EPSDT eligible;
- More than 88% are Medicaid eligible
- Some people reported that they did not know they were on a waiting list

In order to be more responsive and get services to persons with urgent needs, OCDD is moving from making offers on a first come, first serve basis to prioritized offers based on urgency of need.

5. How will you determine what my priority is?

OCDD will utilize the Screening for Urgency of Need (SUN) to determine your priority. This tool is designed to evaluate your current situation and urgency of support needs. It is important to make sure everyone understands that the SUN is not a waiver offer. Urgency of Need is not solely based on the severity/complexity of your disability. It identifies supports in place, supports needed and consideration is given overall to changes in your life and living situation. For example, when considering the urgency of your need, the person conducting your screening will ask questions about supports you now have, the ability of your caregiver to provide supports, eligibility/availability of various types of supports. If something is changing in your life, such as your caregiver is no longer able to provide the same level of supports for reasons such as life-changing illness, physical disability themselves, etc. then this would change the urgency/priority of your need. This is just one example of an area that might be considered when evaluating your urgency of need. There are four (4) areas that are considered during the screening to identify your urgency of need:

1. Change in Caregiver Status
2. Change in Individual’s Needs/Circumstances
3. Change in Availability/Eligibility Status
4. Change in External Factors

6. What does the urgency of need level or SUN score mean?

- 4-Emergent (supports will be needed in the next 90 days)
- 3-Urgent (supports will be needed in the next 3-12 months)
- 2-Critical (support will be needed in the next 1-2 years)
- 1-Planning (support will be needed in the next 3-5)
- 0-Currently there are no unmet needs

7. After we complete the SUN, will my date change on the RFSR?

No one’s protected RFSR date will change. OCDD will be using the results of the SUN along with your RFSR dates to make waiver offers. Offers will be made first to persons with a SUN score of 4 starting with earliest registry date followed by offers to persons with a SUN score of 3 starting with earliest registry date. OCDD will also be using the results of the SUN to inform future LDH waiver requests for funding to the legislature.

8. How often will the SUN be completed?

OCDD recognizes that people’s needs and status change. As such, OCDD has identified a schedule at which re-screenings will be conducted. For persons already receiving one of OCDD’s waivers, your support coordinator will complete screenings as part of your annual plan of care development at certain intervals. For those on the RFSR, the OCDD team will conduct the re-screen. The following are the intervals at which these screenings will occur:

- Individuals at “Urgent” need or SUN score 3 = every year
- Individuals at “Critical” need or SUN score 2 = every 2 years
- Individuals at “Planning” need or SUN score 1 = every 3 years
- Individuals at “Needs Met” or SUN score 0 = every 5 years

9. What if my needs change during the year?

If your needs or status change at any time prior to when you are scheduled to be screened, you can request to have a new screening conducted. To make the request to be re-screened, please contact your local Human Service Authority or District. You can find your local office and contact information by visiting, <http://ldh.louisiana.gov/index.cfm/directory/category/145>.

10. Can I have a copy of the SUN?

Yes, you can receive a copy of the completed screening by calling your local Human Service Authority or District and requesting a copy. You can find your local office and contact information by visiting, <http://ldh.louisiana.gov/index.cfm/directory/category/145>.

11. What if I do not agree with the information that you have scored on the SUN?

If you do not agree with the way that an item has been scored, we can look at the technical guide and talk about why you believe the item should be scored differently. Again, we will need to make sure we have documentation/information to support why it should be scored a certain way. If we cannot agree, then there is a place on the first page of the SUN that we can note this. That information will be kept with your SUN and if the SUN information is used in the future to decide anything about your services, you will receive notice of any changes in the waiver and RFSR, have an opportunity to respond and comment on the changes, and get an opportunity to appeal anything that is an adverse action for you.

12. You said that if I do not agree with the scoring that there is a place to note the reason, but you are still asking me to sign the SUN. By signing the SUN, am I agreeing with the way it is scored?

No, we are asking you to sign the SUN to show that you were present and participated in the discussion about your support needs.

13. I completed the SUN some time ago, but I do not know my SUN score and now that I have a better understanding, I am not sure that the information I gave was correct. How do I find out what my SUN score is and if I do not agree with it what do I do?

If you completed the SUN and we have a score for you, you should have gotten or will be receiving a letter that will identify your SUN score and your RFSR date. If you have questions regarding the score, there is information in the letter about how to request an informal review of your score. An example of the letter is posted on the webpage, www.dhh.louisiana.gov/systemtransformation.

14. I have heard that OCDD has screened 100% of the persons on the RFSR, but I have not been contacted for a screening, what do I need to do?

OCDD has attempted contact with all persons on the RFSR to schedule and complete screenings. If we have not been able to get in touch with you it may be that we do not have the right contact information on file for you. Please contact your local Human Services Authority or District and request a screening. You can find your local Human Services Authority or District office by visiting, <http://ldh.louisiana.gov/index.cfm/directory/category/145>. Make sure that you give current contact information where we can reach you and OCDD will contact you to schedule your screening. If you just recently requested waiver services, you may not have been on our original list to contact, we are working on processes to make sure that as people are added to the registry we schedule and complete screenings.

15. I have been waiting for the New Opportunities Waiver for 10 years and now you are telling me that someone who may have only been waiting for a year could get the NOW before I do because OCDD changed the way they are doing things. What if I do not agree with this decision, is there a way for me appeal this?

We understand that you may be frustrated especially since you have been waiting for 10 years for the New Opportunities Waiver. OCDD had to make some changes as the current system was not fiscally sustainable nor is it responsive to those most in need. We currently have more than 16,000 people waiting for waiver services, which grows each year. In order to

offer a NOW to every person it would require an additional \$832 million dollars annually. Unfortunately, with the budgetary climate in the State of Louisiana it is unlikely that we would receive the dollars from the Louisiana Legislature to eliminate the waiting list. Our best effort to address the needs is to have a prioritized system allowing us to be responsive to those most in need.

Prior to making any of these changes we engaged our stakeholders and overwhelmingly they agreed that this was the best option to making significant changes in our service delivery system. OCDD posted all changes being made to both the waiver applications and rules for public input and comment so that all would have an opportunity to provide input/opinions on the proposed changes. We did not receive a significant amount of negative feedback or disagreement with this approach. A RFSR, “waiting” list is not a service, so there is not anything to appeal in terms of the changes made to the application and rules. If you receive an offer and we deny a request for a specific service or we deny your request to move into one of the other tier waiver options, it would be at that point that you could choose to appeal a decision. OCDD held a series of presentations to share information with the public. The flyer with dates and times are posted on the webpage, www.dhh.louisiana.gov/systemtransformation.

16. I have heard some information about offers being made to the most appropriate waiver and about tiered waiver, what does that mean?

In the past, OCDD made offers on a first come, first serve basis to the waiver type based on the RFSR list that a person was on (Supports Waiver RFSR or CC/NOW Waiver RFSR). We requested and received approval from the Center for Medicaid and Medicare Services (CMS) to combine each existing RFSR into a single RFSR. In addition, we received approval to change how people enter our waiver by offering the most appropriate waiver type based on a person’s identified needs. We have established each of our waiver types to be one of the tiers. The expectation is that people will receive the lowest waiver tier that will meet their needs starting with Supports Waiver (Tier 1), Residential Options Waiver (Tier 2), and the New Opportunities Waiver (Tier 3). Children will be offered our Children’s package, which would be the Children’s Choice Waiver.

17. I have heard that there have been changes to the Children’s Choice Waiver, what are the major changes?

In the past, Children would age out of Children’s Choice waiver at age 19 into the NOW. We have requested and received approval from CMS to increase the age limit for Children’s Choice to 21 to align with the age for EPSDT services, and when it is time to transition, they will transition to the most appropriate adult waiver. This means that 90 days prior to a person’s 21st birthday their support coordinator will begin the transition process into the most appropriate adult waiver. If your child is 18 and no longer attending school, you can choose to remain in the children’s choice until 21 or if your child is interested in pursuing employment options you could choose to transition to the Supports Waiver.

18. My child is currently receiving Children’s Choice waiver, and I was anticipating that they would be transitioning to the NOW at 19. Will they still get to transition to the NOW?

We received approval from CMS for the Children’s Choice changes on February 20th, 2018. With this approval, we must implement the approved changes. For all others the approved changes will be in effect, thus transition into an adult waiver will not occur until age 21 and the person will transition to the most appropriate adult waiver. You should have received or will be receiving a letter detailing these changes. Please work with your support coordinator to make sure through the planning process we are addressing your child’s needs.

19. How will the most appropriate waiver be determined?

In making waiver offers the following criteria will be considered:

- If the person is under the age of 21 they will receive a Children’s Choice offer.
- If the person is 18 and no longer attending school, they will have the option to choose Children’s Choice Waiver or Supports Waiver.

- Adults 21 and up, -will receive a supports waiver offer. The person will participate in needs-based assessment and person-centered planning to determine if a higher tiered waiver will be needed. Factors to be considered during the needs-based assessment and person-centered planning include the following:
- Independence and/or whether the person could have unsupported time
- Type and amount of support needed to complete activities of daily living around the home and in the community. Activities that will be considered include: dressing, bathing, grooming, mobility, managing money, transportation, making purchases, etc.
- Use of both formal/informal supports (LT-PCS, EPSDT-PCS, other Medicaid/Private insurance services, natural/community supports, use of technology, etc.)

20. What if during the planning process we find out that my supports are greater than what I am able to get through the waiver I am offered?

There will be a mechanism/process to request exception to move to another waiver tier if during the person-centered planning process, it is determined that there are unmet needs that cannot be met with current waiver tier AND could be met with waiver. Your support coordinator will assist you with requesting/completing the request process and making sure that you have all the justification/documentation needed to support the request to move to the next waiver tier.

21. If I do not agree with the waiver offer I have received can I appeal the waiver type?

There will not be appeal rights for the waiver type initially offered. We are strongly encouraging you to accept the waiver tier you are offered and to complete the needs-based assessment and person-centered planning process to begin the waiver certification process. OCDD is committed to making sure that you have access to the supports that you need, and we have worked diligently to assure that we have a responsive process to get you the supports needed in the waiver tier that will meet your needs. It is not until you exhaust the exception process and receive a formal decision to deny your request to move to another waiver tier that you would have appeal rights. At the time that your exception request is denied, you will receive a letter detailing the reasons that your request was not approved and with information regarding how to appeal that decision. You will have an opportunity to discuss your case during a fair hearing with an administrative law judge should you choose to initiate the appeal process.

22. What if after I complete the waiver certification process my needs change? Do I have to go back on the Registry to ask for a different waiver?

No, once you are in one of the tiered waiver options, if your needs change and you can no longer be supported in the current tier, and you have exhausted all formal/informal supports as well as technology support options, you will be able to request consideration to move into the next waiver tier. You will need to work with your support coordinator to update your SUN, plan of care, and complete the process to request moving to another waiver tier. You will not have to go back on the RFSR to wait for a different waiver tier.

23. What happens if I do not accept the waiver tier I am offered?

If you choose to not accept the waiver tier that you are offered, you will be closed and removed from the RFSR. If you decide later that your needs are no longer being met and you need additional supports and would like to request waiver services in the future, you can contact your local office to make that request.

24. You said that for all individuals that are under the age of 21 would receive a Children’s Choice wavier offer. I know someone that has a family member under the age of 21 that received a Supports Waiver offer, how come they got a SW offer and my child received the Children’s Choice offer?

Remember if someone is 18 and they can choose to transition to the Supports Waiver if they are no longer attending school and would like to pursue vocational/employment options.

25. I was offered a Children’s Choice wavier in the past and declined that offer to wait for the New Opportunities Waiver. Now you are offering me that wavier again, what if I do not want the Children’s Choice Waiver can I decline the offer and wait for another waiver option?

You can certainly choose to not accept the offer; however, with the new approved process your child would not be eligible for a different waiver type until they either turn 18 to access Supports Waiver or they turn 21. At 21, you would need to complete the needs-based assessment process and person-centered planning to determine the most appropriate adult waiver. If you decline the Children’s Choice waiver now, your case will be closed and your name removed from the RFSR. In the future if your child’s needs changed, you would have to contact the local office to request the services again and meet the urgency criteria (SUN score of 4) to meet the priority criteria for a waiver offer.

26. I was offered the Residential Options Waiver in the past and declined that offer to wait for the New Opportunities Waiver. Now you are offering me that waiver again, what if I do not want the Residential Options Waiver, can I decline the offer and wait for another waiver option?

You can certainly choose to not accept the ROW offer; however, with the new approved process you would be closed and removed from the RFSR. In the future, if your needs changed, you would have to contact the local office to request the services again and meet the urgency criteria (SUN score 4) to meet the priority criteria for a waiver offer. If you have declined the ROW offer in the past because you did not think it would meet your needs, but you are in need of waiver services, we would strongly encourage you to accept the offer and proceed with the needs-based assessment process and person-centered planning. If during that process you all have identified unmet needs that cannot be met with the ROW AND the unmet needs could be met with waiver services, you could certainly initiate the exception request to move to the next waiver tier option (NOW).