

## Pathways to Adult Services for Adults with Developmental Disabilities NAVIGATION CHECKLIST



Child/Individual Name: \_\_\_\_\_  
 Date of Birth (DOB): \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_

AGENCY		Contact Information	Next Steps	Deadline	<input checked="" type="checkbox"/>
1.	Supplemental Security Income (SSI) (Under age 18)	1-800-772-1213 <a href="http://www.socialsecurity.gov">www.socialsecurity.gov</a>			<input type="checkbox"/>
	Supplemental Security Income (SSI) (Over age 18)	1-800-772-1213 <a href="http://www.socialsecurity.gov">www.socialsecurity.gov</a>			<input type="checkbox"/>
2.	Healthcare Transition	Contact Pediatric Health/Dental Provider <ul style="list-style-type: none"> <li>Ask about transition plan to adult provider or if provider has patients into adulthood.</li> </ul>			<input type="checkbox"/>
3.	Medicaid (Katie Beckett) (Under age 19)	RIPIN Parent Consultant (401) 462-0633			<input type="checkbox"/>
	Medicaid (Over age 18)	Contact DHS office (see handout)			<input type="checkbox"/>
4.	Cedar Family Centers (up to age 21) <ul style="list-style-type: none"> <li>support</li> <li>care coordination</li> <li>connection to services</li> </ul>	Centers available statewide (see handout) <a href="http://www.eohhs.ri.gov/Consumer/FamilieswithChildren/ChildrenwithSpecialNeeds.aspx">http://www.eohhs.ri.gov/Consumer/FamilieswithChildren/ChildrenwithSpecialNeeds.aspx</a>			<input type="checkbox"/>
		• HBTS			
		• Kids Connect			
		• PASS			
		• Respite			
5.	Office of Rehabilitation Services (ORS) (supports available at age 16)	<a href="http://www.ors.ri.gov/forms/application">www.ors.ri.gov/forms/application</a> ORS, 40 Fountain Street, Providence, RI 02903 (401) 421-7005			<input type="checkbox"/>
6.	Alternatives to Guardianship (Age 18)	RI Disability Law (401) 831-3150 <a href="http://www.ridlc.org">www.ridlc.org</a>			<input type="checkbox"/>

AGENCY		Contact Information	Next Steps	Deadline	<input checked="" type="checkbox"/>	
7.	Division of Developmental Disabilities <i>(one year prior to when services needed)</i>	(401) 462-3421			<input type="checkbox"/>	
	<b>STEP #1</b>	<ul style="list-style-type: none"> <li>Apply via website</li> <li>Complete application, releases/consent forms, copies of birth certificate, SS card, and if applicable, guardianship paperwork/probate court paperwork</li> </ul>	<a href="http://www.bhddh.ri.gov/developmentaldisabilities/application_eligibility.php">http://www.bhddh.ri.gov/developmentaldisabilities/application_eligibility.php</a>		<input type="checkbox"/>	
		<ul style="list-style-type: none"> <li>Meet with caseworker in DD Eligibility Unit, (if needed) to determine eligibility</li> </ul>				<i>DD <b>Eligibility</b> Case Worker will work with you to complete the DD Waiver Packet.</i>
	<b>STEP #2</b>	<ul style="list-style-type: none"> <li>Notice of eligibility determination</li> <li>Receive list of service provider agencies</li> </ul>	<i>Connected with <b>DD Social Worker/Case Manager</b></i>			<input type="checkbox"/>
		<ul style="list-style-type: none"> <li>DD Social Worker/Case Manager assigned</li> </ul>				
	<b>STEP #3</b>	<ul style="list-style-type: none"> <li>Complete <b>Support Intensity Scale (SIS)</b></li> </ul>	<i>Interview process may require additional time. Questions will be based on the individual's ability to live independently, <b>without support.</b></i>			<input type="checkbox"/>
		<ul style="list-style-type: none"> <li>Resource Allocation</li> </ul>	<i>DD will notify you by letter <b>90 days prior to your anniversary date of your SIS Service Tier Package</b> and the resource allocation for your services.</i>			<input type="checkbox"/>
		<ul style="list-style-type: none"> <li>Choose Developmental Disability Organization (DDO) <b>OR</b> Fiscal Intermediary (Self-Direction)</li> <li>Develop Interim Individualized Support Plan (ISP)</li> </ul>	<i>Choose Developmental Disabilities Organization (DDO) or Fiscal Intermediary (Self Direction) in developing Individual Support Plan (ISP). Once agreement with service provider completed, you have <b>90 days to complete your 1<sup>st</sup> ISP and submit to DDD.</b> Provider or Fiscal Intermediary can provide assistance.</i>			<input type="checkbox"/>
<b>STEP #5</b>	<ul style="list-style-type: none"> <li>Final Authorization</li> </ul>	<i>DDD approves the ISP and creates authorizations for services in quarterly increments.</i>			<input type="checkbox"/>	
<b>STEP #6</b>	<ul style="list-style-type: none"> <li>Review of Plan</li> </ul>	<i>When renewing funding, you will need to complete ISP and have delivered to DDD <b>no later than 45 days prior to your anniversary date.</b> DDD will review your ISP and services are re-authorized.</i>			<input type="checkbox"/>	
<b>ADDITIONAL NOTES:</b>						