

**PERSONAL CARE SERVICES PROGRAM & IDD WAIVER DUAL SERVICES REQUEST**

<b>MEMBER DEMOGRAPHICS – TO BE COMPLETED BY THE IDD WAIVER PROVIDER</b>			
Date of Referral to PC Provider		Member's IDDW Anchor Date	
Member's Name		Member's IDDW Record ID	
<p><b>ITEMS 1-3 MUST BE COMPLETED BY THE IDDW PROVIDER.</b>  <b>ITEMS 4-5 MUST BE COMPLETED BY THE PC PROVIDER.</b>  <b>THE PC PROVIDER MUST SUBMIT PAGE 1 OF THIS FORM WITH PC AUTHORIZATION REQUEST.</b></p>			
<p><b>1. Member is using (authorized for) the maximum number of Direct Care service units in the IDDW program.</b></p>			
How many units are included in the IDDW authorizations for Direct Care services?	<ul style="list-style-type: none"> <li>• Child (must have 7,320 units/service year)</li> <li>• Adult (must have 11,680 units/service year)</li> </ul>	<input type="checkbox"/> Child - Units= <a href="#">Click here to enter text.</a> <input type="checkbox"/> Adult - Units= <a href="#">Click here to enter text.</a>	
<p><b>2. IDDW Member has an ICAP Service Level of 1, 2, 3 or 4 (Service Level ranges from 1 through 9).</b></p>			
What is the IDDW member's ICAP Service Level, as completed by the UMC?		<input type="checkbox"/> ICAP Service Level = <a href="#">Click here to enter text.</a>	
<p><b>3. IDDW Member does not reside in a 24-hour staffed setting (must reside in a biological or adoptive family or specialized family care home).</b></p>			
In what type of IDDW residence does the member reside?		<input type="checkbox"/> Biological or Adoptive Family <input type="checkbox"/> Specialized Family Care Home <input type="checkbox"/> Waiver ISS <input type="checkbox"/> Waiver Group Home	
<p><b>4. Must have a completed Personal Care PAS.</b></p>			
Has the PC PAS and request been submitted?		<input type="checkbox"/> PC PAS is completed and attached to the request in PC UMC web portal by the PC Provider	
<p><b>5. Must have a completed Personal Care Plan of Care.</b></p> <p><b>a. Must include signatures of the IDDW Case Manager, the Personal Care RN, and member/Legal Representative (if applicable)</b></p> <p><b>b. Must include a schedule outlining when IDDW and PC services are to be provided - THERE MAY BE NO DUPLICATION OF SERVICES.</b></p> <p><b>c. Must be attached in the IDDW UMC's web portal by the CM.</b></p>			
Have all of the following been attached in the appropriate web portal?		<input type="checkbox"/> Meeting including IDDW and PC providers and member/Legal Rep. if applicable was held [DATE]: <a href="#">Click here to enter text.</a> <input type="checkbox"/> PC Plan of Care includes a tentative schedule <input type="checkbox"/> PC Plan of Care has been attached in IDDW UMC web portal by IDDW CM	

IDDW defines a "child" as anyone who is age 17 or under. If the individual is age 18 or older, they are considered in the "adult" category.

- For a child in IDDW wishing to access dual services, the maximum number of Direct Care units is defined as 7,320 (15-minute) units.
- For an adult in IDDW wishing to access dual services, the maximum number of Direct Care units is defined as 11,680 (15-minute) units.

\*\*Page 1 of this Checklist must be included with any PC request

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The IDD Waiver services below are defined per policy as Direct Care services. Please note that Respite Care is not considered a Direct Care service in IDD Waiver.

		Service	Code	Unit	Adult Limit - Units	Child Limit - Units	
Direct Care Services	Day Services	Facility Based Day Habilitation (1:1-2)	T2021U5	15 min	11,680 units per member's service year		
		Facility Based Day Habilitation (1:3-4)	T2021U6	15 min			
		Facility Based Day Habilitation (1:5-6)	T2021U7	15 min			
		Pre-vocational Training 1:1-2	T2021U1	15 min			
		Pre-vocational Training 1:3-4	T2021U2	15 min			
		Pre-vocational Training 1:5-6	T2021U3	15 min			
		Supported Employment (1:1)	T2019	15 min			
		Supported Employment (1:2-4)	T2019HQ	15 min			
			Family Person-Centered Support (1:1)	S5125U5		15 min	7,320 units per member's service year
			Family Person-Centered Support (1:2)	S5125U6		15 min	
			Family Person-Centered Support (1:1)—Personal Options	S5125UA		15 min	
			Home-Based Person-Centered Support (1:1)	S5125U7		15 min	
			Home-Based Person-Centered Support (1:2)	S5125U8		15 min	
			Licensed Group Home Person-Centered Support (1:1)	S5125U1		15 min	
			Licensed Group Home Person-Centered Support (1:2)	S5125U2		15 min	
			Licensed Group Home Person-Centered Support (1:3)	S5125UD		15 min	
			Licensed Group Home Person-Centered Support (1:4)	S5125UQ		15 min	
			Skilled Nursing - LPN (1:1)	T1003U4		15 min	
			Skilled Nursing - LPN (1:2)	T1003U3		15 min	
			Skilled Nursing - LPN (1:3)	T1003U2		15 min	
			Unlicensed Residential Person-Centered Support (1:1)	S5125HI		15 min	
			Unlicensed Residential Person-Centered Support (1:2)	S5125UN		15 min	
			Unlicensed Residential Person-Centered Support (1:3)	A5125U3		15 min	
			Unlicensed Residential Person-Centered Support (1:1)—Personal Options	S5125UD		15 min	