

## FAQs



### **What is LIFEPlan?**

LIFEPlan CCO NY is a Care Coordination Organization (CCO) that specializes as a Health Home for individuals with I/DD. The Health Home model combines developmental disability services and supports with health and wellness services, delivering a greater focus on outcomes and the positive impact they have on individuals. We're dedicated to helping our members live the life they choose, while allowing their loved ones to focus on the joys of family and parenting without worrying about care. We offer choice and stability to our members, upholding our core values of Person-Centered Services and Support, Community Inclusion and Participation, and Independence and Self Direction.

### **What is the role of Care Connection?**

Care Connection Specialists are responsible for helping people and families navigate the eligibility, intake and enrollment process to connect to services within the Care Coordination Organization Network, including Health Home Care Management.

### **What is the role of a Care Manager?**

The Care Manager will assist the family or individual explore and navigate through various services that would benefit the individual and link the individual to the requested supports & services.

### **What is OPWDD?**

The New York State Office for People With Development Disabilities (OPWDD) is a New York State office that offers an array of services for people who have been diagnosed with a developmental disability and are eligible for services. *For more information please visit the OPWDD website at: <https://opwdd.ny.gov/>*



## What types of services can I receive through OPWDD?

Supports and services, include but are not limited to: employment, community and day habilitation, clinical, residential supports and services and respite services.

*For more information on OPWDD services please visit the OPWDD website at: <https://opwdd.ny.gov/>*

## What are the criteria for OPWDD Eligibility?

The individual must have a qualifying diagnosis defined by the Mental Hygiene Law, section 1.03(22); Onset of the condition has to have been present prior to the age of 22; The condition is likely to continue indefinitely; and substantial adaptive deficits must be attributable to the identified qualifying diagnosis. Those diagnosis include: intellectual disability (known as “mental retardation” in Mental Hygiene Law), autism, cerebral palsy, epilepsy, familial dysautonomia, and neurological impairment (injury, malformation, or disease involving the Central Nervous System)

*For more information on OPWDD Eligibility:*

*[https://opwdd.ny.gov/opwdd\\_services\\_supports/eligibility/documents/eligibility\\_important\\_facts](https://opwdd.ny.gov/opwdd_services_supports/eligibility/documents/eligibility_important_facts)*

## What documents are needed for OPWDD Eligibility?

1. All available psychological evaluation reports which include an assessment of intellectual functioning. Intelligence quotient (IQ) scores should be included.
2. Assessment of adaptive functioning (i.e. Vineland Adaptive Behavior Scale, Adaptive Behavior Assessment System (ABAS)
3. Relevant medical reports (e.g. MRI results, CT Scan results, neuropsychological reports)
4. Psychiatric reports
5. Psycho-Social reports and/or social history
6. Educational records including IEP or Annual 504 Accommodations Plans
7. Any other documentation which verifies age of onset of significant functional limitation prior to age of 22.
8. A physical within the last 12 months.

### **Do I need to enroll in a CCO to receive OPWDD services?**

For OPWDD Medicaid funded services the individual must be enrolled with a CCO. You do not need to be enrolled in a CCO if you are looking for OPWDD New York State funded services (ex: Family Support Services).

### **How long does it take to establish OPWDD Eligibility?**

The eligibility process can take anywhere from 2-6 months.

### **What is the “Front Door” information session?**

Must be attended prior to enrollment. These sessions will give you an understanding of OPWDD’s mission and purpose, as well as outline the process of how you can become eligible for OPWDD supports and services, the types of supports and services available and where you can go to get assistance. For more information on OPWDD please visit the OPWDD website at: [https://opwdd.ny.gov/welcome-front-door/information\\_sessions](https://opwdd.ny.gov/welcome-front-door/information_sessions) HYPERLINK <https://opwdd.ny.gov/>

### **When does Enrollment into the CCO take place:**

Enrollments into the CCO are effective the first of the following month after OPWDD Eligibility has been established and Medicaid is active.

### **How are services paid for?**

For enrollment into our CCO/Health Home the individual applying for services will need Medicaid. Our Care Connection Specialist can assist with the Medicaid application.

### **How long does it take to establish Medicaid?**

Medicaid approval can take a minimum of 3 months.

### **Do I need Supplemental Security Income (SSI)?**

No, Supplemental Security Income (SSI) is not required for OPWDD eligibility or for LIFEPlan CCO/HH enrollment.

### **Are other insurances accepted and/or needed?**

To receive Care Management services through LIFEPlan CCO NY the only insurance that is accepted is Medicaid. Care Connection Specialists will assist with the Medicaid process if needed.

### **When can I begin receiving services?**

1. Care Management Services: Once OPWDD Eligibility is established and Medicaid is active, Care Management services will begin the first of the following month.
2. Family Support Services: Family Support Services can begin once OPWDD eligibility has been established.
3. HCBS Waiver Services: For HCBS Waiver services, the individual will need to be OPWDD eligible, have Medicaid, and be enrolled in the HCBS Waiver. The Care Manager can assist with Waiver enrollment.
4. Level of care determined by OPWDD

### **Do I ever need to re-apply for services?**

1. OPWDD Eligibility Services: Provisional Eligibility is granted to an individual under the age of 8. If the individual still meets criteria after the age of 8 then permanent eligibility is established.
2. Care Management services: Once Care Management services have been terminated the person would need to re-enroll in the CCO/Health Home in order to begin receiving Care Management services again.

### **Can I choose my Care Manager?**

As an individual receiving services from LIFEPlan you have the right to choose/change your Care Manager at any given time.

### **What agencies are affiliated with LIFEPlan to help coordinate services for the individual?**

See our list of partnering agencies here: [lifeplanccony.com/partners](http://lifeplanccony.com/partners)