DDSD Intake and Eligibility Process

Updated 10/24/2025

1.) PCG conducts an Inquiry Process with potential applicants:
    a. Inform the person of the services DDSD offers.
    b. Gather information including but not limited to - the support the person is interested in, other resources they have explored they may be eligible for (CPCS for example) and other personal/historic information.
    c. Refer the person to the correct resource (i.e. Meals on Wheels) if they are not looking for DS services.
    d. Explains the intake process including the steps to determine their clinical and financial eligibility.
2.) Person decides to move forward with Intake.
3.) PCG confirms Financial Eligibility
4.) PCG coordinates a record review or any necessary evaluations needed to determine clinical eligibility.
5.) Once application is complete-PCG uploads intake documentation including evaluations and report completed by psychologist to CRMS and alerts Melanie Feddersen, Debbi Smith and Nikki Marabella these documents are ready for review.

The 45-day timeline to inform the applicant of their eligibility and funding determination begins the day these documents are uploaded to the CRMS

6.) DDSD confirms clinical eligibility requirements are met
    a. For applicants over 21 years old and for applicants of all ages who are believed to meet a HCBS Funding Priority: PCG is verbally informed of eligibility decision by Specialists within 3 days and DDSD mails Eligibility Notice to applicant/guardian. (see Sample Letter)
    b. For applicants under 21 years old: DDSD mails Eligibility Notice to applicant/guardian. (see Sample Letter)

For applicants under 21 years old:

1.) Applicant contacts DA and requests services.
2.) DA completes a needs assessment and mails notice informing the applicant of the services approved with appeal rights.

For applicants over 21 years old and for HCBS Supports for all ages

1.) PCG provides Options Counseling for CMO choices and connects the applicant to chosen CMO.
2.) PCG scheduled SIS-A Needs Assessment.

3.) CMO provides option counseling for Direct Service Organizations and connects the applicant to chosen provider.
4.) After the Needs Assessment is completed, person-centered planning begins, and budget is developed.
5.) Budget request is uploaded to CRMS for DDSD to review and make funding determinations for HCBS supports.
6.) DDSD uploads funding decisions to CRMS and mails funding determination letters to applicant/guardian.