FREQUENTLY ASKED QUESTIONS REGARDING TRANSFERS

1. What process should be followed if an individual needs an emergency residential living situation?

The sending Support Coordinator will ensure that basic health and safety information will be sent to the provider before the individual moves. In the event that a move occurs without prior planning described in the guidelines, the sending Community Living Coordinator and Support Coordinator will ensure that a transition meeting is arranged as soon as possible, but no later than two weeks following the placement. The sending Regional Office and TCM provider will maintain responsibility for the individual until a transition meeting can be held.

2. Who maintains responsibility when an individual is residing in respite in another region?

When an individual is residing in another region in a respite situation, the current TCM provider and Regional Office will maintain responsibility for all services including TCM, service authorizations, incident reporting, etc. If a decision is made for the individual to permanently reside in the new region, the transfer procedures will then be in effect.

3. How are transfers involving Children's Division handled?

Transfers involving children in the custody of Children's Division will follow the transfer procedures outlined in the directive to ensure that communication necessary for planning occurs, and all necessary supports and services for the health and safety of the child are in place. Providers accepting children through child-specific contracts are responsible to inform their Support Coordinator and Regional Office of the placement before it occurs to allow the teams for other individuals in the home an opportunity to consider roommate compatibility and adjust the budgets as needed.
The Regional Office or TCM provider serving the location of the Children's Division placement will be asked to provide TCM service coordination while the child is living in Children's Division placement. If a child is placed in a very short term placement (eg. 30 to 60 days) with intention of returning to his/her home area, the sending and receiving Regional Offices will determine on a case by case basis if a transfer will be completed or if the sending Regional Office will maintain responsibility.

4. What if an individual's eligibility is questioned by the receiving TCM provider during the transfer process?

If an individual who has been determined eligible for DD services transfers, and eligibility is questioned by the receiving Regional Office or TCM provider, the transfer will be accepted and a review of eligibility will be completed by the receiving Regional Office Intake Team, with formal documentation of the review completed. If the review does not confirm that the individual is eligible for services, then the receiving Regional Office will begin the formal redetermination process.

5. What if an individual moves during the intake process?

In the event an individual moves prior to being determined eligible during the intake process, the sending Regional Office will complete the intake and transfer the individual to the receiving Regional Office and TCM provider without an ISP being completed. The receiving TCM entity will complete the initial ISP as with all new intakes.

6. Who should be involved if an individual who receives Self-Directed supports moves from one area to another?

If the individual who is moving receives Self-Directed supports, the sending and receiving Self Directed Supports Coordinator (SDSC) must maintain communication and follow up closely during the transfer process to ensure a smooth transition. The Support Coordinator will inform the current SDSC of the individual's plan to move. The sending and receiving SDSC's will collaborate to ensure timesheets and billing are in place and the services are authorized to begin in the new location on the correct date. The sending SDSC and receiving SDSC will coordinate who will notify the Fiscal Management Service (FMS) regarding change of address and other needed information. The receiving SDSC will notify FMS of the updated Support Coordinator and Support Coordinator Supervisor and is responsible for ensuring that FMS receives all updated and current information, and will work closely with accounting office to ensure that the authorization is transferred.

7. What steps should be taken if an individual who receives supports moves to an area where similar supports are not available?

If service gaps are identified, the receiving Support Coordinator or Community Living Coordinator will inform the Provider Relations team member at the Receiving Regional Office of the need for service development.

8. How are transfers handled for an individual who is participating in the Partnership for Hope waiver?

If the individual is utilizing Partnership for Hope (PfH) services and they transfer to a county that also participates in PfH, the services should continue and will be funded through DMH until the end of the fiscal year. At the end of the fiscal year, PfH services will be reauthorized with the match being split by DMH and the receiving county.

If the individual is utilizing PfH services and they transfer to a county that does not participate in PfH, services will need to be terminated. Before the transfer occurs, the sending SC will inform the individual/guardian of why the PfH services are being terminated and assist with coordinating services through natural resources. There is no appeal process regarding this.

9. Does funding from an SB 40 board transfer with the individual?

If the individual is utilizing funds from an SB 40 other than PfH, the sending SC will inform the individual/guardian that these funds will not transfer. The sending SC will seek and advocate for services to meet the needs that have been covered by funds that will not transfer.

10. What should accompany an individual to a new residential living situation?

At a minimum, the following must be provided to the receiving provider no later than the day of the move:

- Current Individual Support Plan, including any addendums and budget authorizations
- Behavior Support Plan
- Current Physician's orders
- A minimum of a seven day supply of current medications
- Current physical, vision and dental exams
- Current specialized medical information
- Information regarding diet and allergies
- Medicaid, Medicare and Social Security cards
- Current immunization record
- Adaptive equipment
- Clothing
- Personal care items
- Personal property inventory
- Documentation of guardianship and payee
- Funding authorization

Personal spending money which has been assigned to the individual will move with the individual. Personal spending money still in the provider's account is returned to the Regional Office, or as otherwise directed by the Regional Office.

11. Do both sending and receiving Regional Offices need to sign the budget?

No. The sending Regional Office signs the approved budget and shares with the receiving Regional Office.