



## **Pathways to Adult Services (for Individuals with Developmental Disabilities)**

### **NAVIGATION CHECKLIST**

Child/Individual Name: \_\_\_\_\_  
 Date of Birth (DOB): \_\_\_\_\_  
 Anticipated Graduation Date: \_\_\_\_\_

AGENCY		CONTACT INFORMATION	NEXT STEPS	Deadline	☑
1.	Supplemental Security Income (SSI) (Under age 18)	1-800-772-1213 <a href="http://www.socialsecurity.gov">www.socialsecurity.gov</a>			.
	Supplemental Security Income (SSI) (Over age 18)	1-800-772-1213 <a href="http://www.socialsecurity.gov">www.socialsecurity.gov</a>			.
2.	Healthcare Transition	Contact Pediatric Health/Dental Provider <ul style="list-style-type: none"> <li>Ask about transition plan to an adult provider for both medical and dental</li> </ul>			.
3.	Medicaid (Katie Beckett) (Under age 19)	RIPIN Parent Consultant 401-462-0633			.
	Medicaid (Over age 18)	Contact DHS office (see handout)			.
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>			.
		• HBTS			
		• Kids Connect			
		• PASS			
		• Respite			
5.	Office of Rehabilitation Services (ORS) (supports available at age 16)	<a href="http://www.ors.ri.gov/Forms.html">http://www.ors.ri.gov/Forms.html</a> ORS, 40 Fountain Street, Providence, RI 02903 401-421-7005			.
6.	Supported Decision Making and Alternatives to Guardianship (Age 18)	Disability Rights RI (formerly RI Disability Law) 401-831-3150 <a href="https://www.drri.org/">https://www.drri.org/</a>			.

AGENCY		Additional Information	Next Steps	Deadline	☑		
7.	<b>Division of Developmental Disabilities</b>		401-462-3421 <a href="http://www.bhddh.ri.gov/developmentaldisabilities/index.php">http://www.bhddh.ri.gov/developmentaldisabilities/index.php</a>			.	
	<b>STEP #1</b>	<ul style="list-style-type: none"> <li>Apply for eligibility via website</li> <li>Complete application and gather necessary documentation</li> <li><b>Submit 60 days prior to 17<sup>th</sup> birthday</b></li> </ul>	Include birth certificate, SS Card, insurance card, Medicaid and/or Medicare card, proof of RI residency, Probate Court Appointment of Guardianship or Power of Attorney; official DSM Diagnosis, IQ tests, vocational records, SSAID#, Medical history, psychiatric records; and any other agency records that document the applicant's abilities and limitations, including but not limited to CEDAR, PASS, HBTS reports, IEP or school testing such as OT or PT.			.	
		<ul style="list-style-type: none"> <li>Reviewed within 30 days</li> <li>Notice of eligibility determination</li> </ul>					
		<ul style="list-style-type: none"> <li>State Transition Coordinator</li> </ul>					Monitors case until last year student exits high school. <a href="mailto:Carolee.Leach@bhddh.ri.gov">Carolee.Leach@bhddh.ri.gov</a> or 401-462-1723
	<b>STEP #2</b>	<b>During last year of High School:</b> <ul style="list-style-type: none"> <li>Complete <i>Support Intensity Scale</i> (SIS)</li> </ul>	Once eligibility determined, <b>SIS-A may be coordinated between one to two years prior to student's exit from school.</b> Interview process time may vary. Questions will be based on the individual's ability to live independently, <b>without support.</b>				.
		<ul style="list-style-type: none"> <li>Resource Allocation</li> </ul>	DD will notify you by letter <b>of your SIS Service Tier Package</b> and the resource allocation for your services, which are adult DD Medicaid Waiver funded (contact DHS for further details).				
	<b>STEP #3</b>	<b>During last year of High School:</b> <ul style="list-style-type: none"> <li>Social Case Worker (SCW) Assigned</li> </ul>	<ul style="list-style-type: none"> <li>Assist in service planning</li> <li>Assist in identifying community support/natural supports</li> <li>Provide information on services available including Employment First initiatives</li> <li>Provide information on <b>Self-Directed Services</b> and <b>Service Provider Options</b></li> </ul>				.
<b>STEP #4</b>	<ul style="list-style-type: none"> <li>Choose a Service Model: Agency Services OR Self-Directed Services</li> <li>Develop Individualized Support Plan (ISP)</li> <li>Complete DHS-2 Waiver</li> </ul>	Interview and choose Developmental Disabilities Organization (DDO-Service Provider) for Agency Services or Self Direction, then start developing an <b>Individual Support Plan (ISP)</b> . Once agreement with service provider completed, you have <b>90 days to complete your first ISP, DHS-2 Waiver, and submit to DDD Social Case Worker.</b>				.	
<b>STEP #5</b>	<ul style="list-style-type: none"> <li>Annual Review of Plan</li> </ul>	When renewing funding, you will need to complete updated 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.				.	