

2023 Family Empowerment Application Checklist

Individuals Name: _____ Date Application Received: _____

Care Manager: _____

Are all of the required documents included?

- The completed application using OPWDD form
- Verification of OPWDD eligibility
- Verification that the individual resides with a non-paid family member/caregiver
- Receipts for the items/services to be reimbursed
- Medicaid denial letters (for items that can be funded by Medicaid)
- Additional documentation if requesting reimbursement for emergency items/services, camp, electronic devices, or medical/ clinical devices and services
- Life Plan with CWI listed as an FSS provider in Section 5

Is the request reimbursable per the 7/1/22 ADM?

- Items/ services that are not covered or available through other means and are reviewed and approved by the committee and OPWDD Central Office
- Respite (cannot be used to supplement waiver services)
- Camp
- Recreation Programs
- Electronic Devices (with clinical justification)
- Supplements approved by a clinician and outline in the treatment plan
- Legal fees associated to guardianship or special needs trusts
- Clothing as a necessity or if there are specific needs relation to the individuals I/DD as clinically indicated in the Life Plan
- If Other, date Special Request tracker submitted to the DDRO: _____

Date of FSS Committee Meeting: _____

Date Tracker Submitted To DDRO : _____

DDP1 Completed On: _____

Award Letter Sent to Family On: _____

Denial Letter Sent To Family On: _____