

EXHIBIT C2 – APPLICATION FOR ELIGIBILITY DETERMINATION (FORM DODD 1014)

The Title XX Application for Eligibility Determination/Redetermination (Form DODD 1014) is required for documentation of proper intake and determination of services. The form was designed to document step-by-step the decision process in meeting individual needs in statewide objectives. The form will also assist agencies in demonstrating a consistent correlation between approved national goals and program availability to all applicants. Properly maintained individual client records will document the client eligibility and determination of the appropriate service category (free, for a fee, or without regard to income). Local agencies that contract with DODD to provide Title XX services are required to maintain records of program activity in accordance with Section 3.4 of the grant agreement.

****By September 30, 2015 this form should be phased out and replaced by the Certification of Proper Billing (Form DODD 1014-2)****

Instructions

Section AA must be completed with accurate and current individual information.

Section BB must contain the date of application and document that the individual is eligible for DD services as determined under OAC 5123:2-1-02. Indicate that the individual has been determined by the proper local agency to meet the requirements for county board of dd services based upon dd program(s) as of July 1, 1991. Indicate whether this is an initial application or redetermination of eligibility.

Section CC must identify the individual's need as it relates to Title XX services.

Section DD must identify the Title XX specific national goal that addresses the individual's need.

Section EE must identify the objective of the Title XX service and the corresponding Title XX service name and billing code.

Section FF must identify the service category under which the provider offers the approved Title XX services. This category must be stated in the provider Title XX policy and the approved Title XX services profile for the period.

Section GG must be signed and dated by the individual, legally authorized representative, or head of household at the time the determination of services is agreed, generally during the service plan meeting.

The provider must be complete the "For Title XX Provider Only" section. Notification of approval or disapproval must be indicated with documentation of appeal action attached if necessary. The reviewer must be indicated with documentation of appeal action attached if necessary. The reviewer must sign and date the completed form.

