

Philadelphia Intellectual disAbility Services

Talking Points-Offering Feasible Alternatives

Following are suggested talking points for Registration Specialists when explaining what might be available through the Philadelphia County Intellectual disAbility (IDS) Service System:

1. The importance of exploring natural and community supports for that individuals with intellectual disabilities have maximum opportunities within their communities.
2. The range of programs for which the individual may be eligible, including programs outside the Philadelphia IDS system such as OVR, EPSDT, and Special Education, as well as waiver services available through other agencies.
3. The range of services and supports, which may be available through IDS, including FDSS, Supports Coordination and the two waivers: Consolidated Waiver & PFDSW.
4. What is an ICF/ID? Explain limits on State Center admissions.
5. What is a waiver?
6. Discuss how the county priorities for service are determined through PUNS and the PA Department of Public Welfare's allocation of waiver capacity. Discuss the realities of service capacity. Discuss how service preference relates to priority for services.
7. Discuss the individual planning process, how services are based on needs-as determined by PUNS-and the expectation that the individual and the family will participate in planning.
8. Discuss the steps in determining eligibility for the waiver, including eligibility for ICF/ID level of care, Medicaid Eligibility and service preference.
9. The rights that the individual and family have to meetings with the County IDS, independent mediation, and DPW Fair Hearing and Appeal. (DP 458)
10. The rights that the individual and family have with regard to the reporting and investigation of abuse and neglect.
11. Offer the choice of IFC/ID or Community Based Services. (DP 457)
12. Offer annual physical examination form to be completed by physician.
13. Review materials explaining the Charting the LifeCourse Model.
14. Self Directed options
15. Supports Coordination Choice

I acknowledge that the above-mentioned points have been discussed with me. At this time:

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I request Service Preference

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I decline Service Preference

Name of Individual: _____

Signature of Individual: _____ Date: _____

Other Authorized Signature: _____ Date: _____

Registration Specialist: _____ Date: _____