Instructions to Apply for DDSN Eligibility & an Overview of the Process

I. General Application Phase

A. All requests for eligibility require calling the DDSN Eligibility Division Intake Center at 1-800-289-7012 (toll free) between 8:30am – 5:00pm, Monday through Friday, excluding holidays. Your call will be answered by one of the many trained operators on duty. If the applicant is 2 years 11 months of age or younger, please contact: First Steps/BabyNet toll-free at 1-877-621-0865.

B. At the time of your call, please have available the applicant’s social security number and Medicaid number, if Medicaid eligible. Please call when you have at least 20 minutes available to allow the DDSN Intake Operator time to collect the needed information.

C. The following will occur during the DDSN Intake Operator call:

- You will be asked questions to establish your residency in South Carolina and general information on your disability;

- For all DDSN disability eligibility categories except for Autism Spectrum Disorder [Intellectual Disability, Related Disability; Head and Spinal Cord Injury; Similar Disability; or High Risk Infant], you will be asked to select your top three (3) preferred Intake Service Providers from a list read to you over the phone (no cost to you). DDSN will contact your selected or preferred Intake Service Provider in rank order to identify your designated Intake Service Provider. DDSN encourages you to review your county’s Intake Service Provider list before your initial Intake Operator phone call by clicking on the following link, click on your disability category, and then click on county of residence: https://app.ddsnc.gov/public/directory/landing.do#

- For DDSN eligibility pertaining to autism, your application will be routed to the DDSN Autism Division for further processing as set forth in section “III” below.
II. **Processing All DDSN Disability Eligibility Categories Except for Autism Spectrum Disorder (Intellectual Disability, Related Disability; Head and Spinal Cord Injury; Similar Disability or High Risk Infant)**

A. DDSN will send a letter to your residence confirming the initiation of your application for a DDSN eligibility determination. This letter will explain DDSN’s primary vehicle to provide services is through Medicaid Home and Community Based Services Waivers. The letter offers the applicant an opportunity to request Medicaid waiver services. If desired, the applicant’s name will be placed on a waiting list without delay.

B. Your designated Intake Service Provider will contact you by phone within 1-2 weeks and will:
   - Provide you the detailed steps of the DDSN eligibility intake process;
   - Provide you an overview of the Medicaid Home and Community Based Services Waiver program(s) for which you may be eligible;
   - Collect medical and/or educational records from you which are needed by DDSN to make an eligibility determination. You will be asked to give permission for the Intake Service Provider to directly collect records from third parties, such as medical offices or schools. You will also be asked to sign a form giving DDSN permission to evaluate your records and to conduct psychological testing (at no cost to you) should such testing be needed. Below are the type of records by disability category the Intake Service Provider will request. It would be helpful to locate any records you may have prior to the Intake Service Provider’s initial call:
     - **Intellectual Disability:** Documentation of development prior to age 22, such as school records; evaluations; IEPs; special education classification; IQ tests; adaptive tests; and anecdotal information from family.
     - **Related Disability (related to an Intellectual Disability) such as Cerebral Palsy or Down Syndrome:** Documentation from medical records of the specific condition with an onset prior to age 22 and measures of adaptive behavior.
     - **Head and Spinal Cord Injury (HASIC):** Documentation of injury; medical records pertinent to the injury; medical history; consultations related to the injury; medical tests such as CTs, MRIs, EEGs; PT/OT/ST evaluations; and discharge summary.
     - **Similar Disability:** similar to a traumatic brain or spinal cord injury.
     - **High Risk Infant:** Documentation of CBA/IFSP (current within six (6) months); if CBA does not show significant delays, additional information showing developmental delays from OT/PT/ST records (current within six (6) months), school evaluations, IEPs, and genetic information, if applicable.

C. The Intake Service Provider’s time to complete the record collection can range from several days to months depending on your ability to provide records currently available to you and, if needed, accurately identify the location of needed records from medical offices or schools to help the Intake Service Provider locate and collect.
D. Upon collecting sufficient records, the Intake Service Provider forwards the records to DDSN for an eligibility determination. If sufficient records are available for review, the eligibility determination will take approximately two weeks for most disability categories. Additional time will be necessary if additional testing is required; DDSN will notify your Intake Service Provider to coordinate this testing (no cost to you).

E. You will be notified of your eligibility determination by certified letter. The letter will tell you how to request case management services if you feel you need assistance to gain access to medical, social, educational or other services. The letter will also tell you how to contact DDSN directly for information about available programs such as Medicaid waiver programs. If you are determined ineligible, the letter will explain why you are not eligible and how, if you disagree, you can appeal the decision.

F. After your eligibility is determined, DDSN will send a satisfaction/feedback email survey, via Google Survey Monkey so that you can rate your Intake experience. You are encouraged to complete the survey so that we can continue to improve the process.

G. Requesting MEDICAID WAIVER enrollment: After your initial phone call with the DDSN intake operator (step # I-C above), you will receive a DDSN letter at your residence confirming your DDSN eligibility application along with information about the DDSN eligibility intake process. The letter will offer you an opportunity to request Medicaid waiver services. If desired, your name will be placed on one or more Medicaid waiver waiting lists without delay.

DDSN fully realizes the complexity of navigating medical services and Medicaid benefits, so after your DDSN eligibility determination (step #II-E above), DDSN will review your Medicaid waiver selection, or lack thereof, along with your eligibility determination. If you are determined to be DDSN eligible yet have not placed your name on a Medicaid waiver, you can contact DDSN directly at (803) 898-2236 to assist you with understanding your Medicaid waiver options to ensure you have every opportunity to apply for a Medicaid waiver. Due to waiting lists for Medicaid waivers, it is important to ensure you consider applying for a Medicaid waiver at the earliest possible time.

H. If you have questions or concerns at any time during the DDSN eligibility intake process that your Intake Service Provider cannot answer, please do not hesitate to call back to the DDSN Eligibility Intake Center at 1-800-289-7012. Just identify yourself to the DDSN Intake Operator as already assigned an Intake Service Provider but you need assistance.

III. Processing DDSN Eligibility under The Autism Spectrum Disorder Category

A. Applicants seeking DDSN eligibility under the Autism Spectrum Disorder in this category will be referred by the DDSN Intake Operator to DDSN’s Autism Division, which takes full ownership for all further processing through an eligibility determination.

DDSN’s Autism eligibility will send a letter to your residence confirming the initiation of your application for a DDSN eligibility determination under the Autism Spectrum Disorder category. This letter will:

1. Describe the “Autism Eligibility” packet you received. The packet contains five (5) forms that must be completed and returned. The forms are:
   - Autism Questionnaire;
   - Service Agreement;
2. Identify the types of medical and/or educational records to be collected to assist in the Autism eligibility determination.

3. Explain that DDSN’s primary means to provide services is through Medicaid waivers. Using the sixth (6) form (Waiver Registration) included in the Autism Eligibility packet, you will be offered an opportunity to request Medicaid waiver services and have your name placed on the waiting list without delay.

4. Provide you with contact information (telephone number and email address) in the event you have any questions or concerns about the process.

B. Within 10 business days of receiving the Autism Eligibility packet, you will be contacted by telephone by an Autism Division eligibility worker. During this call, the following will occur:

1. The eligibility worker will explain the Autism eligibility process. The eligibility worker will assist you throughout the eligibility process.

2. Your point of contact will be confirmed. Throughout the entire intake process, your point of contact is the Autism Division. You can contact them at (803) 898-3201 or email at autismealigibility@ddsn.sc.gov. In an emergency pertaining to the Autism intake process, please call (803) 898-9609.

3. You will be provided an overview of Medicaid waivers. You will be asked if you have placed your name on a Medicaid waiver waiting list. You will be offered the opportunity during the call to have the Autism eligibility worker place your name on a Medicaid waiver waiting list, if you so choose. If you do, you will receive a letter in several weeks confirming you have been added to a Medicaid waiver waiting list.

4. You will be asked to return the five (5) signed standard forms (provided by letter in step “III-A-1” above) and to send records needed by DDSN to make an Autism eligibility determination. The types of records you will be asked to submit for an Autism Spectrum Disorder diagnosis include, but are not limited to: Evaluations Completed by the School, Psycho-Educational Reports, Psychological Evaluation, Developmental Pediatrician Reports, and Mental Health Records.

C. Completion of this record collection phase can range from several days to several months depending on your ability to provide records currently available to you, to include collecting records from your medical and/or educational providers. Even if you have incomplete medical and/or educational records or no records at all, you can still continue in the process to be evaluated if you have completed and returned the five (5) following standards forms:

- Autism Questionnaire;
- Service Agreement;
- Permission to Evaluate;
- Authorization to Release or Obtain Records; and
- Notice of Privacy Practices.
Completed forms and records may be returned by mail to: DDSN, Autism Eligibility, P.O. Box 4706, Columbia, SC 29240 or by FAX at (803) 545-4476.

D. When all required information identified in the Autism Eligibility packet (“III-A-1”) are returned to the Autism Division eligibility worker, you will receive a letter from the Autism Division indicating your application has been forwarded to the Autism Evaluators near your residence in one of four (4) Regional Autism Offices (Spartanburg, Columbia, Florence, and Summerville) for an eligibility determination.

1. If an applicant has sufficient pre-existing documentation for an Autism Spectrum Disorder eligibility determination, the applicant can expect an eligibility determination from the Regional Autism Office via by letter within 15 business days of the Regional Office receiving the applicant’s packet.

2. If an applicant has no records or if the pre-existing records are insufficient, the applicant will receive a call from the Regional Autism Office within 15 business days of the Regional Office receiving the applicant’s packet to schedule an appointment for an evaluation. Within five (5) business days of this call, the applicant will receive written notice from the Regional Autism Office confirming the scheduled evaluation. Due to a pattern of missed appointments, you will be required to be available to confirm your attendance at the Autism Evaluation during the two (2) weeks prior to the appointment.

E. You will be notified of your eligibility determination by letter. The letter will provide procedures for you to request a case manager to assess your current needs and assist you with navigating the DDSN services you are now eligible to receive, most particularly services from Medicaid waivers. If you are determined ineligible, the letter will say why you are ineligible and outline the appeal process.

F. If you are required to have an Autism Evaluation conducted at a Regional Autism Office, you will be provided a single name and phone number within the Regional Autism Office as your point of contact. However, if at any time during this Autism Eligibility intake process you have questions or concerns, please call the Autism Division’s Eligibility at (803) 898-3201 or by email at autismeligibility@ddsn.sc.gov. In an emergency pertaining to the Autism intake process, please call (803) 898-9609.

G. After completing the eligibility process, DDSN will send a satisfaction/feedback email survey, via Survey Monkey, to all applicants (family Point Of Contact).

H. Request DDSN Eligibility Category Change: If you are currently eligible for DDSN services under a category other than Autism (i.e., ID/RD, HASCI, High Risk/At-Risk Child, Autism) and want to apply for a new category, you may contact DDSN at (803) 898-2235 or at 1-800-289-7012.