Revised: 1/15/2019

**CDDO Area Transfer Form / Courtesy Share Form**

**Instructions: Current / Home CDDO sends completed form and case file packet to the New / Residing CDDO when a person moves to a new CDDO area or is requesting courtesy services in a new CDDO area due to foster care. Once the transfer is complete the new CDDO should electronically sign and return to the current CDDO.**

**Consumer Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Consumer Name: | Date of Birth: | | Social Security #: |
| Medicaid #: | KAMIS ID: | | Tier: |
| Current CDDO: | New CDDO: | | Transfer / Share Date: |
| Current Address: | | Current Phone #: | |
| New Address: | | New Phone #: | |
| Current TCM Agency: | | Current TCM Contact: | |
| MCO: | MCO Care Coordinator Contact : | | |

**Responsible Party Contact Information**

|  |  |
| --- | --- |
| Guardian  DPOA  Other - | Child in DCF Custody |
| Name: | Child in Voluntary Foster Care (Children’s Residential) |
| Phone #: | Child Placement Agency: |
| Email: | Case Worker Contact: |
| Current Address: | Foster Family Contact: |
| New Address: |  |

**Current Service Information**

|  |  |  |  |
| --- | --- | --- | --- |
| ICF / IID | Supported Employment | Agency Directed PCS | Specialized Medical RN |
| WH WORK program | Residential Supports | Overnight Respite | Specialized Medical LPN |
| TCM | Wellness Monitoring | Enhanced Care Services |  |
| Day Supports | Self Directed PCS | Medical Alert Rental |  |

**Funding Information**

|  |
| --- |
| On HCBS I/DD Waiver Waiting List KAMIS Wait List Date: |
| On HCBS I/DD Waiver Next Assessment Due Date: |
| Receives Extraordinary Funding  Home CDDO Requesting Courtesy Services |
| Approved new access to I/DD Waiver within past 6 months & documentation attached Date Approved: |
| Waiting List Funds  Crisis  DCF Custody  Supported Employment  Institutional Setting  PRTF  TA Waiver  Autism Waiver  TBI Waiver |

**Case File Documents for Transfer / Share**

**Required Documents:**

|  |  |  |
| --- | --- | --- |
| Guardianship documents | MR 1 Recipients Choice | Integrated Service Plan |
| Eligibility and supporting documents such as Psych Eval, EDI, Med exam, etc… | | |
| Explanation of why required documents were not attached and where they can be obtained: | | |

**Recommended Documents:**

|  |  |  |
| --- | --- | --- |
| Birth Certificate or Citizenship documents | PCSP | Medicaid and other insurance cards |
| Functional Assessment | Needs Assessment | Medical Exam within past 2 years |
| Most recent Notice of Action (MR-4, MR 5) | Social Security Card | 3161 submitted |
| Behavior Support Plan | IEP | Other Info: |

**Transfer / Share Completion Information**

|  |  |
| --- | --- |
| Current CDDO Contact: |  |
| Date packet sent to receiving CDDO: | Date KAMIS transfer / share offered: |
| New CDDO representative signature: | Date signed: |
| Comments: |  |