

HOME Choice Roles & Responsibilities “Condensed” Version – July 2014
Based on Provider Agreements/Contracts (HOME Choice & Waivers)

Transition Stage	Pre-Transition Case Manager (PTCM)	Transition Coordinator (TC)	HCBS Program (Waiver or non) Waiver Assessors, HC Case Managers (HCCM) Non-Waiver or Waiver Case Managers
Pre-Transition Activities	Make initial contact with applicant within 3-5 business days		
	Conduct F2F with applicant within 10 business days		
	Complete: - Community Readiness Tool - Informed Consent - Eligibility Checklist: Recommendation for HOME Choice		
	If recommending HC: Select whether recommending waiver or non-waiver support. If waiver is recommended, complete 2399, if needed.		
	Review Transition Coordinator List with applicant		
	Enter applicant’s preferred TC on the HC Service Plan		
	Educate on the HC process		
	If NOT recommending HC Enrollment: Share community Resources and indicate enrollment not recommended with explanation on Eligibility Checklist		
	Within 3 business days of the F2F, Submit to HC Operations: -Eligibility Checklist -Informed Consent -Community Readiness tool - HC Service Plan		
		Replies to referral from HC within 3 business days.	

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Pre-Transition Activities, cont.		Contact applicant within 3 – 5 business days of acceptance. Review documentation received.	
		Conduct F2F with individual within 7-10 business days of initial contact	
		Assist with formulating a transition plan	
	Obtain regular updates from the TC	Communicate updates regularly with the PTCM	
		<p>HOUSING TRANSITION ACTIVITIES: Use the Relocation Workbook to determine needs.</p> <ul style="list-style-type: none"> -Assist with finding safe and affordable housing -Assist with overcoming potential barriers -Assist with housing/modification subsidy -Complete housing applications & arrange for payment of application & housing fees -Visit residence -Complete the Qualified Residence statement -Obtain copy of lease/residence verification form 	
	Make necessary referrals to Behavioral Health agencies	Submit Qualified Residence Statement	
		<p>BENEFITS & FINANCIAL ACTIVITIES:</p> <ul style="list-style-type: none"> -Assess Financial Sustainability -Establish a budget -Assists with benefit coordination - assist with employment if applicable 	

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Pre-Transition Activities, cont.		Assist with purchase of goods and services needed for the transition	Report to PTCM, TC & HOME Choice Operations regarding outcome of Waiver Assessment
Pre-Transition Discharge Planning (attend in-person or via the phone)	Schedule, facilitate and participate in discharge planning meetings	Participate in discharge planning meetings	HCCM: Meet with individual within 5 business days of receipt of HC Service Plan
	Determine post discharge HC services, contact HC providers, update HC Service Plan & submit to HC Operations Unit	Determine post discharge HC services & community services	Determine post discharge HC services, waiver services, State Plan services
		Coordinate transition with behavioral health and substance abuse providers	Identify provider roles & responsibilities for the day of discharge
		Provide linkages to community resources and employment options	
	Ensure HC Services are in place if Waiver or State Plan services cannot start at discharge	Ensure HC Services are in place if Waiver or State Plan services cannot start at discharge	Ensure HC Services are in place if Waiver or State Plan services cannot start at discharge
	Schedule and facilitate final discharge planning meeting	Attend final Discharge Planning meeting	Attend final Discharge Planning meeting
	Have team sign off on assignment and coordinate final prep for moving day.	Sign off on assignments and coordinate final prep for moving.	Sign off on assignments and coordinate final prep for moving.
Transition Time – Day of discharge/ moving day.	Transfer all pertinent information about participant to the Waiver Case Manager/ HOME Choice Case Manager	Provide updates & relevant information to Case Managers	Provide 24 hour contact information and document a backup plan for participant.
	Be available for assistance and support on moving day	Assist the participant with moving	Be available for assistance and support on moving day
	Within 1 business day of discharge, complete and submit HC Enrollment Form		

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	Coordinate that all supports & services are in place: Individual has what they need to be safe & healthy	Share information with other HC providers & community service providers. Residence is “move-in” ready; food, medications, furniture....	Receive and review information from PTCM and TC re the individuals needs for services and supports (HC documents)
POST-Transition Activities		Within 10 business days post discharge, submit TC summary form (& lease/verification form if not previously submitted) to HC	Maintain contact with all service providers. Assess the need for additional services
		Contact Participant at least 5 times, including 2 F@F visits during the first 90 calendar days post discharge.	Schedule & facilitate at least one post-discharge meeting with TC, individual & other providers within the first 80 days of discharge
		Submit Post-Transition Activities form between the 90-100 th day in community	Contact the individual at least monthly
		Report any incidents to Case Manager	Be responsible for Incident Reporting
		Submit HC Change in Status forms as necessary	Submit HC Change in Status forms as necessary
			Assist with Housing re-certification; request emergency housing & rental assistance through the TC as may be necessary
			Organize & facilitate a meeting at least 30 days prior to the HC participant’s 365 day on the program

Updated 9/25/2014

Note: Please see Roles and Responsibilities for the non-condensed version of the listing of duties and expectations for HOME Choice TC’s, PTCM’s and case managers based upon the Provider Agreements for each of these positions.