

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

24.2.1	GENERAL ELIGIBILITY CRITERIA.....	3
24.2.2	ELIGIBILITY/INTAKE ACRONYMS AND DEFINITIONS	3
24.2.3	REFERRALS.....	4
A.	PROCESSING REFERRALS	4
1.	Receiving Referrals.....	4
2.	Referral Pre-Screening	4
24.2.4	APPLICATION.....	5
A.	PROCESSING APPLICATIONS.....	5
1.	Received Application Packets	5
2.	Interview Process.....	6
3.	Incomplete Applications	6
4.	Complete Applications	6
B.	REQUIRED DOCUMENTS.....	7
1.	Identification.....	7
2.	Citizenship	7
3.	Residency in Nevada	7
4.	Eligibility Determination Supporting Documents	8
C.	ELIGIBILITY DETERMINATION CRITERIA.....	8
1.	Developmental Delay	8
2.	Intellectual Disability.....	8
3.	Qualifying Developmental Disability	9
D.	AREAS OF MAJOR LIFE ACTIVITY.....	10
1.	Capacity for Independent Living	10
2.	Learning.....	10
3.	Mobility.....	11
4.	Self-Care.....	11
5.	Self-Direction	11
6.	Understanding and Use of Language.....	11
E.	EXCEPTIONS	11
1.	Residency Exceptions.....	11
2.	Exclusionary Criteria	12
24.2.5	PROCESS FOR DETERMINING ELIGIBILITY.....	12

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

A.	ELIGIBILITY REVIEW COMMITTEE	12
B.	DETERMINATIONS	12
1.	Approved	13
2.	Provisional Eligibility for Children	13
3.	Insufficient Information	13
4.	Denied	13
C.	REDETERMINATION OF ELIGIBILITY	14
1.	Redetermination of Provisional Eligibility for Children Under Six	14
2.	Redetermination of Provisional Eligibility Ages Six through Seventeen	14
3.	Redetermination of Eligibility for Adults	14
24.2.6	URGENT APPLICATIONS	15
A.	PROCESSING URGENT APPLICATIONS	15
1.	Urgent Application Criteria	15
2.	Urgent Application Verification	15
3.	Urgent Application Processing	15
24.2.7	EXHIBITS	17
A.	DEVELOPMENTAL SERVICES APPLICATION	17
B.	DEVELOPMENTAL SERVICES INSUFFICIENT INFORMATION LETTER	17
C.	DEVELOPMENTAL SERVICES ELIGIBILITY DETERMINATION FORM	17
D.	DEVELOPMENTAL SERVICES LETTER OF ELIGIBILITY DETERMINATION - APPROVED	17
E.	DEVELOPMENTAL SERVICES LETTER OF ELIGIBILITY DETERMINATION – DENIED	17

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

24.2.1 GENERAL ELIGIBILITY CRITERIA

Aging and Disability Services Division (ADSD), Developmental Services Regional Centers (hereinafter referred to as DS) provides home and community-based services and supports to individuals having a diagnosis of an intellectual disability or qualifying developmental disability. ([NRS 435.007](#))

Applicants seeking services through DS must be United States citizens, United States nationals or have a legal immigration status and meet Nevada residency requirements. Eligibility criteria must be met and maintained as outlined within this policy.

24.2.2 ELIGIBILITY/INTAKE ACRONYMS AND DEFINITIONS

Acronym	Term	Definition
	Adaptive Behavior	Limitations demonstrated in areas of conceptual, practical, and social skills.
	Applicant	The person or their legal guardian intended to receive services from DS.
ASD	Autism Spectrum Disorder	Autism Spectrum Disorder (ASD) and Autism are both general terms of a group of complex disorders of brain development. These disorders are characterized in varying degrees, by difficult social interactions, verbal and nonverbal communication, and repetitive behavior and meeting the current American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders (DSM).
FASD	Fetal Alcohol Spectrum Disorder	A condition caused by prenatal exposure to alcohol that can result in a broad range of effects such as disabilities related to behavior, learning and thinking, and physical development. (American Academy of Pediatrics) (NRS 432B.0655)
	Guardian	Person who has qualified as the guardian of a person with an intellectual disability or a person with a developmental disability pursuant to testamentary or judicial appointment. (NAC 435.5058)
	Intellectual Functioning	General mental ability such as learning, problem solving and reasoning.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

Acronym	Term	Definition
LPR	Lawful Permanent Resident	Are non-citizens who are lawfully authorized to live permanently in the United States and issued a permanent residency card (e.g., green card).
PASRR	Pre-Admission Screening and Resident Review	Comprehensive evaluation to ensure people who have been diagnosed with serious mental illness, intellectual, and/or developmental disabilities are offered the most appropriate setting for their needs to live their most independent life.

24.2.3 REFERRALS

Referrals are accepted from a variety of sources such as, but not limited to, community service providers, diagnosing provider, legal guardian, state agency, self-referrals, hospitals, and Pre-Admission Screening and Resident Review (PASRR). Referrals may be received via email, fax, telephone, or walk-in. All referrals submitted to DS are sent to the Intake Service Coordinator (or designee).

A. PROCESSING REFERRALS

1. Receiving Referrals

Upon receipt of a referral, the Intake Service Coordinator will:

- a. Search the designated electronic system of record(s) for a pre-existing participant record;
- b. If participant record exists, will review record information related to prior eligibility determinations.

2. Referral Pre-Screening

The Intake Service Coordinator will complete a pre-screening call within two (2) business days of receiving the referral. The pre-screening call with the applicant or their legal guardian is to gather information related to the individual's application for DS. The Intake Service Coordinator will gather the information during the initial screening call:

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

Pre-Screening Information	
<input checked="" type="checkbox"/>	Additional contact information.
<input checked="" type="checkbox"/>	For individuals under the age of six (6), has the child received a developmental delay diagnosis.
<input checked="" type="checkbox"/>	For individuals over the age of six (6), history of intellectual or qualifying developmental disability diagnosis.
<input checked="" type="checkbox"/>	If the individual has received the following supports or services (including but not limited to): <ol style="list-style-type: none"> 1. Early Intervention Services. 2. Special Education Supports.

Upon review that the applicant may meet DS eligibility criteria, the Intake Service Coordinator will:

- a. Inform the applicant of the DS program, application processing, eligibility criteria, and method of eligibility determination;
- b. Provide the applicant or legal guardian with the DS Application ([Exhibit A](#)) and instructions for completing the application; and
- c. Provide additional community resources and referrals based on information discovered from reviewing the service needs of the individual identified at initial referral.

DS inquiries or referrals that do not appear to meet DS eligibility criteria, will be referred to other appropriate ADSD agencies/programs, community partners and/or resources to meet the service needs of the individual.

24.2.4 APPLICATION

Applications will be accepted via email, fax, mail, and in person. Applications will be accepted and considered without discrimination on the grounds of race, color, gender, gender identity or expression, sexual orientation, religion, national origin, age, pregnancy, genetic information, domestic partnership, disability, or ability to pay for services, and without regard to the agency's ability to provide needed services.

If an individual needs help completing the DS Application ([Exhibit A](#)) or obtaining required substantiating documents for eligibility as explained in [24.2.4 B Eligibility Determination Supporting Documents](#), the Intake Service Coordinator will provide support to the applicant, designee, or legal guardian.

A. PROCESSING APPLICATIONS

1. Received Application Packets

When a DS application is received, the Intake Service Coordinator will:

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

- a. Review it within five (5) business days of receipt to verify the application is completed in its entirety, that it includes all the required documentation, and will screen for urgent application processing (refer to [24.2.6 Urgent Applications](#));
- b. Search the designated electronic system of record(s) for a pre-existing participant record and will re-open the record (if found);
- c. If no participant record is found, create a participant profile record in the designated electronic system of record on date of receipt but no later than within two (2) business days of application date.

2. Interview Process

The Intake Service Coordinator may conduct an interview (face-to-face or by telephone) at initial application to gather information about the individual seeking services, assist with filling out the application and forms, signing releases of information to obtain records, and for the applicant to provide proof of required documentation.

If an interview is scheduled, and the applicant does not attend or fails to reschedule within five (5) business days of the missed appointment, the application will be denied. Notification will be provided to the applicant of the denial decision following the guidance in [24.2.5 B \(4\) Denied](#).

3. Incomplete Applications

The Intake Service Coordinator will notify the applicant when required application information for eligibility (e.g., additional records, new testing, etc.) are missing. The Intake Service Coordinator will:

- a. Issue an Insufficient Information Letter ([Exhibit B](#)), pending the applicant to submit any missing eligibility information within 30 calendar days from the issue date of the Insufficient Information Letter. (If the due date falls on a weekend or a holiday, the due date is the next business day);
- b. Inform the applicant of their responsibility to obtain the missing information;
- c. Upon the applicant's request, assist with obtaining any missing records/documents that might be pertinent to the eligibility determination.

4. Complete Applications

When the application and substantiating documents (verification of identity, verification of residency, and qualifying condition), herein after referred to as the application packet, is received, the Intake Service Coordinator will submit the application packet to the DS Eligibility Review Committee (ERC) to review and determine eligibility. (refer to [24.2.5 Process for Determining Eligibility](#))

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

B. REQUIRED DOCUMENTS

Individuals must provide the following required documents and meet the eligibility criteria to receive services. Information required to verify an eligible condition may vary depending on the developmental disability condition under which an applicant is applying.

1. Identification

Applicants must provide verification of identity. Proof of verification of identity are as follows (not all-inclusive):

- a. Birth Certificate;
- b. Driver's License;
- c. Military Identification (ID) (active, retired, reserve, dependent, etc.);
- d. United States Passport or Certificate of Naturalization;
- e. Social Security Card or number; or
- f. State ID card.

2. Citizenship

Applicants must provide proof of United States citizenship, have a legal immigration status, or United States Lawful Permanent Resident (LPR) status at initial application. Proof of citizenship are as follows (not all-inclusive):

- a. Items from [24.2.4 B \(1\) Identification](#);
- b. Hospital or public health birth record;
- c. Tribal census papers; or
- d. United States Citizenship and Immigration Services documents (e.g., Naturalization Papers, I-551 Permanent Resident Card, I-94 Arrival/Departure Record).

3. Residency in Nevada

Applicants must provide documentation to confirm their Nevada residency at initial application and anytime there is a change in residency. Proof of Nevada residency (applicant/parent/guardian) are as follows (not all-inclusive):

- a. Current employer's statement or records listing the applicant's name and current physical address;
- b. Current utility bill listing the name and current physical address;
- c. Rent/mortgage bill listing the name and current physical address;
- d. Valid Nevada Driver's License reflecting current physical address; or
- e. Valid Nevada Identification (ID) Card reflecting current physical address.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

4. Eligibility Determination Supporting Documents

Applicants to DS must provide supporting documentation demonstrating Developmental Delay (for children under six [6] years of age), Intellectual Disability, or qualifying Developmental Disability. Records (current and/or occurring prior to the applicant's 22nd birthday) used to support eligibility include (not all-inclusive): ([NRS.435.007](#))

- a. Genetic reports (if available);
- b. Educational records;
- c. Medical records;
- d. Neurological assessments;
- e. Psychiatric reports; or
- f. Psychological evaluations.

C. ELIGIBILITY DETERMINATION CRITERIA

1. Developmental Delay

A child under six (6) years of age may qualify for services if the child demonstrates substantial functional limitations in at least two (2) of five (5) areas of major life activity (see [24.2.4 D](#)).

2. Intellectual Disability

Intellectual disability requires a diagnosis by a licensed psychologist or a finding by a certified school/educational psychologist that is supported by standardized test results including intellectual assessment scores and assessment of adaptive behavior. An intellectual disability is considered to be a lifelong condition beginning prior to the age of 22 and is characterized by significant limitations in both adaptive behavior and intellectual functioning.

The diagnosis of Intellectual Disability is based on the criteria per [NRS 435.007](#) and current and accepted diagnostic and classification systems including International Classification of Diseases, Diagnostic and Statistical Manual of Mental Disorders, and American Association on Intellectual and Developmental Disabilities: Intellectual Disability: Definition, Classification and Systems of Supports.

Significant limitations in intellectual functioning refers to impairments in general mental capacity such as learning, reasoning, and problem solving and is typically demonstrated by scores on measures of intelligence. Generally, a score two (2) or more deviations below the mean on an individually administered, psychometrically valid measure of intelligence indicates a significant limitation in intellectual functioning. Other measures of general mental capacity can be used to inform intellectual functioning (e.g., measures of memory, learning, etc.)

Significant adaptive behavior limitations must be demonstrated in areas of conceptual, social and practical skills. Generally, significant adaptive behavior limitations are indicated by standardized test scores that are two (2) or more standard deviations below the mean (e.g., standard score of approximately 70 or below using measurements having a mean of 100 and

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

standard deviation of 15; scaled score of approximately four (4) or below using measurement having mean of 10 and standard deviation of three (3)).

Adults without a formal diagnosis of intellectual disability before age 22 may be considered for eligibility based on available historic and current information, including statements by family or others with personal knowledge of the applicant during the developmental period.

In determining if an individual has a diagnosis of intellectual disability, additional factors are taken into consideration including history of assessment/testing results as well as, biologic, psychological, social and cultural factors that may influence the measurement or results of cognitive testing and adaptive skill assessment.

3. Qualifying Developmental Disability

Developmental disabilities are severe, chronic disabilities attributed to neurologically or genetically based disorders found to be closely related to intellectual disability because the condition results in impairment of general intellectual functioning and/or adaptive behavior similar to persons with intellectual disability. Developmental disabilities are manifested before the person reaches age 22, are likely to continue indefinitely, and result in substantial limitations in three (3) or more areas of major life activity (see [24.2.4 D](#)). ([42 CFR 435.1010, NRS 435.007](#)).

Developmental disabilities that are based on neurological or genetically based disorders are as follows (not all inclusive):

- a. Autism Spectrum Disorders (ASD) are diagnosed by a licensed neurologist, pediatrician, psychiatrist or psychologist. Educational assessments completed by a certified school/educational psychologist working under the scope of their licensure may be used to inform the confirmation of an ASD diagnosis. The diagnosis of ASD is supported by documentation including, but not limited to description of developmental history, detailed observations, and results of accepted normed instruments indicating a high probability of and ASD.
- b. Neurological disorders include, but not limited to epilepsy, cerebral palsy, traumatic brain injury/acquired brain injury are diagnosed by a neurologist or other qualified physician and substantiated by medical records (e.g., electroencephalogram, neuroimaging).
- c. Disorders attributed to in utero exposure to substances and/or toxins include, but not limited to Fetal Alcohol Spectrum Disorders (FASD) are diagnosed by a neurologist, geneticist, or other qualified physician and substantiated by medical records (neurological evaluation, neuroimaging, physical examination, etc.) that identify a neurological condition diagnosis.
- d. Genetic/Chromosome Disorders include, but not limited to Fragile X, Prader-Willi Syndrome, Down Syndrome are diagnosed by a physician based on results of genetic/chromosome testing.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

- e. Descriptive information labels (e.g., Fetal Alcohol Effects, FASD Types, Drug Effect) are not sufficient without other diagnostic identifiers. Medical documentation must include a diagnostic code for the condition(s) thought to be associated with in utero exposure to substances and/or toxins.

D. AREAS OF MAJOR LIFE ACTIVITY

For developmental disability and developmental delay ([24.2.4 C Eligibility Determination Criteria](#)), an individual must evidence substantial functional limitations in the areas of major life activity attributed to the developmental disability condition. Determination of substantial functional limitations is based on the result of assessments of adaptive behavior (including the administration of one [1] or more standardized adaptive behavior instruments) and additional evaluative information as deemed necessary. Generally, scores of approximately two (2) or more standard deviations below the mean indicate substantial functional limitations. The major life areas are as follows:

1. Capacity for Independent Living

The ability to utilize advanced, age-appropriate skills required to live independently without specialized support from others. This item weighs the overall capacity for independent living across the individual's typical environments.

- a. For an adult, these skills include the ability to tell time, use money, initiate, and maintain relationships, hold a job, and engage in leisure and recreation activities. Areas of competence include clothing care, housekeeping, property maintenance, food preparation and cooking, planning, and budgeting for shopping, home safety and daily scheduling.
- b. For a child (six [6] and over), the related skills include the ability to understand the function of a clock, to understand the function of money, demonstrate friendship-seeking behaviors, attend school, and play a simple game (e.g., Go Fish). Areas of competence include dressing, helping with simple household chores, feeding self, and showing basic safety skills in the community and the home (e.g., staying away from hot objects, stranger danger).
- c. For children under the age of six (6) the capacity for independent living is not applicable.

2. Learning

Age-appropriate functional academic skills related to learning at school that also have direct application in one's life. It involves the ability to acquire new behaviors, perceptions, information and to apply experiences to new situations.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

3. Mobility

The demonstration of age-appropriate skills to ambulate and orient within the home and community. Related skills include orienting and moving about in the home and nearby neighborhood to complete activities of daily living, and the ability to travel in unfamiliar places or use public transportation.

4. Self-Care

The demonstration of age-appropriate skills in areas such as toileting, eating, dressing, personal hygiene, and grooming.

5. Self-Direction

The age-appropriate ability to set realistic goals or make plans independently of others and accomplish such goals in a timely manner. Related skills include orientation to home and place and to other persons, persistence, maintaining attention and concentration, initiating, and completing activities, and maintaining behavior/emotional stability.

6. Understanding and Use of Language

The demonstration of age-appropriate skills in comprehending and expressing information through symbolic behaviors including writing, speaking, sign language, graphic symbols and non-symbolic behaviors including facial expression, body movement, touch, or gestures.

E. EXCEPTIONS

There may be exceptions to the eligibility requirements when one or more of the following criteria are not met or require further information.

1. Residency Exceptions

Applicants for DS may apply prior to moving to Nevada. The applicant's eligibility for services will be reviewed as described in [24.2.4 A Processing Applications](#).

If the applicant is determined eligible, the applicant's case will be opened when the individual has physically moved to Nevada and established proof of Nevada residency. The residency of a legally competent adult will be determined by where they live, or by the state providing support services to the person.

Persons placed out of Nevada by an agency and supported by a Nevada agency, are considered residents of Nevada. The residence of a minor child is where the child's parents or other legal guardian reside. For legally incompetent adults, their residence will be the state in which their guardian or an agency having legal custody is located.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

2. Exclusionary Criteria

Qualifying impairments for DS must not be primarily related to:

- a. Limitations in intellectual or adaptive functioning that are a manifestation of a mental illness, mental disorder, severe behavior disorder, severe emotional disturbance, psychiatric condition, or treatment of that condition. (e.g., mental health disorders such as psychosis, dementia, mood disorder, personality disorders, substance abuse or disturbances related to psychosocial deprivation are not qualifying conditions even though they may cause impaired social, adaptive, or cognitive functioning).
- b. Learning disabilities which are neurodevelopmental disorders characterized by impairment in academic learning (e.g., reading, written expression, math, etc.).
- c. Attention-Deficit/Hyperactivity Disorder or sensory impairments such as a sensory integration disorder. May include lack of motivation, poor memory function, time-management and organizational skills, impulsiveness and/or lack of problem-solving skills.
- d. Physical impairments that do not originate in the brain or result in neurological impact.
- e. Neurodevelopmental disorders such as communication disorders, motor disorders, disorders of learning, and/or attention are not qualifying conditions even though they may cause impaired social, adaptive, or cognitive functioning.

24.2.5 PROCESS FOR DETERMINING ELIGIBILITY

A. ELIGIBILITY REVIEW COMMITTEE

Each DS Intake Department maintains an ERC that reviews the application packet to determine the applicant's eligibility as described in [24.2.4 B Required Documents](#) and [24.2.4 C Eligibility Determination Criteria](#). ERC is comprised of intake supervisors, intake coordinators, psychologists, nurses and other designees as assigned.

ERC will review and make an eligibility determination within 90 calendar days of application packet received date. The ERC will document the eligibility determination on the Eligibility Determination Form (EDF) ([Exhibit C](#)).

B. DETERMINATIONS

Eligibility determinations made in one DS Regional Center will be accepted at any other DS Regional Center. Each DS Regional Center may re-determine eligibility as described in [24.2.5 C Redetermination of Eligibility](#).

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

1. Approved

When an applicant is found eligible and approved for services by the ERC, the Intake Service Coordinator will mail the DS Letter of Eligibility Determination - Approved ([Exhibit D](#)) within five (5) business days of the eligibility determination review. ([NAC 435.415](#))

The applicant will be assigned to a Service Coordinator (SC) who will contact them within 10 business days of notification to begin the case management and supports process.

2. Provisional Eligibility for Children

Children under the age of 18 receiving services through DS are considered to have provisional eligibility. On-going eligibility is redetermined based on new information, a request for review, and/or recommendation from prior assessment (see [24.2.5 C \(1\) Redetermination for Provisional Eligibility for Children](#)).

3. Insufficient Information

If the ERC is unable to make a determination based on the documentation received, they may recommend further assessments.

- a. If additional psychological evaluation/testing/assessment is needed to confirm the applicant's developmental disability condition/diagnosis and/or inform the eligibility decision, the applicant will be referred to the DS Psychological Services Department
- b. If documentation is insufficient from the developmental period (i.e., prior to age 22), individuals may be considered eligible based on available historic and current information, including statements by family or others with personal knowledge of the applicant during the developmental period.

Failure to cooperate with completing the additional evaluation/testing/assessments, will result in the application being denied.

4. Denied

Within five (5) business days of the denied determination, the Intake Service Coordinator will document the decision in the designated electronic system of record and will send the DS Letter of Eligibility Determination – Denied ([Exhibit E](#)) with the explanation of the denial and the appeal process to the applicant. ([See policy 1.19 Participant Rights and Complaints](#)) ([NAC 435.415](#))

Applicants can re-apply for services at any time. Reapplications will be reviewed and processed according to [24.2.4 A Processing Applications](#).

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

C. REDETERMINATION OF ELIGIBILITY

Redetermination of eligibility for DS may be completed at any time based on certain provisional eligibility criteria or by the SC recommendation. Such reviews can occur in response to new information that suggests the individual is no longer eligible for services and/or as a result of recommendation from the initial eligibility determination and/or assessment.

The SC or Supervisor will inform the DS Intake Department if questions about the continued eligibility of a person served occurs. The Intake Department will follow the requirements of an application for services (see [24.2.4 Application](#)) and may request further documentation and/or assessment.

Failure to cooperate with completing the additional evaluation/testing/assessments, will result in the case being closed.

1. Redetermination of Provisional Eligibility for Children Under Six

Children under age six (6) are provisionally eligible and must be reviewed by the ERC for continued eligibility within 90 calendar days following their sixth (6th) birthday.

2. Redetermination of Provisional Eligibility Ages Six through Seventeen

Children ages six (6) through 17 are provisionally eligible and must be reviewed by the assigned SC every three (3) years or anytime there is new information that may affect continued eligibility. The SC will:

- a. Review documentation (e.g., psychological assessments, school Multidisciplinary Team/Individualized Education Program, psychoeducational assessments, medical information, or other information deemed necessary) that has occurred within the prior three (3) years. Copies of reviewed documentation will be added to the participant's record within the designated electronic system of record.
- b. Submit the case record to the ERC for redetermination on cases where the documentation or other information reviewed does not support continued eligibility for DS (e.g., child is no longer receiving special education, documents support development within the average range, etc.). The ERC will review the case at the earliest available meeting from date of receipt, no later than 30 calendar days. If needed, ERC may request additional assessment(s). ERC will complete a new EDF ([Exhibit C](#)), to document the redetermination, if applicable.

3. Redetermination of Eligibility for Adults

Adults receiving services through DS may be redetermined for eligibility at any time based on new information, recommendation from a prior assessment, or a requested review.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

- a. The SC or Supervisor must inform the DS Intake Department if questions about the continued eligibility of a participant occurs. The Intake Department will follow the requirements of an application for services (see [24.2.4 B Required Documents](#) and [24.2.4 C Eligibility Determination Criteria](#)) and may request further documentation and/or assessment.

The Intake Department will schedule the case for ERC review, and ERC will complete a new EDF, if applicable ([Exhibit C](#)).

24.2.6 URGENT APPLICATIONS

A. PROCESSING URGENT APPLICATIONS

All applications will be screened by the Intake Service Coordinator for urgent application processing at time of receipt.

1. Urgent Application Criteria

Applications will be considered urgent based on the following criteria:

- a. Applicant is an adult 18 years of age or over and is dependent on others for their health and/or safety, and
- b. Experienced an unexpected, sudden loss of support (e.g., loss of parent/care provider due to death, incarceration, terminal illness, adult protective services involvement, hospital admission without possibility of return to prior living environment, etc.), and as a result
- c. Will require an immediate need for care and/or support to maintain their health and/or safety.

2. Urgent Application Verification

For applications to meet the Urgent Application criteria, legal residency status (Nevada residency, citizenship), and determination of intellectual or developmental disability must be confirmed. Other verification requirements will be postponed (refer to [24.2.4 A \(3\) Incomplete Applications](#))

3. Urgent Application Processing

When the Intake Service Coordinator has identified an application is urgent per [24.2.6 A \(1\) Urgent Application Criteria](#) and Urgent Application Verification is received per [24.2.6 A \(2\)](#), they will:

- a. Notify via email the Intake Supervisor, Community Services Manager, and ERC Members (community nurse, psychologist, etc.), and
- b. Maintain communication with the referral source and ERC members regarding the status of the application and individual.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

The ERC will review the application packet within 10 business days from the application date and will determine eligibility and complete and sign the EDF.

The supervisor/SC for case management will be assigned within three (3) business day of the EDF date. The SC will make contact within (1) business day.

Draft

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

CHAPTER #	CHAPTER TITLE	POLICY#	POLICY TITLE
24	Developmental Services (DS)	24.2	Eligibility/Intake

24.2.7 EXHIBITS

- A. [DEVELOPMENTAL SERVICES APPLICATION](#)
- B. [DEVELOPMENTAL SERVICES INSUFFICIENT INFORMATION LETTER](#)
- C. [DEVELOPMENTAL SERVICES ELIGIBILITY DETERMINATION FORM](#)
- D. [DEVELOPMENTAL SERVICES LETTER OF ELIGIBILITY DETERMINATION - APPROVED](#)
- E. [DEVELOPMENTAL SERVICES LETTER OF ELIGIBILITY DETERMINATION – DENIED](#)

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