

Patricia Baxter
Authorized Signature

Number: APD-AR-14-036
Issue Date: 6/27/2014

Topic: Developmental Disabilities

Due Date: July 1 2014

Subject: Request for ReBAR assessments

Applies to (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Aging and People with Disabilities | <input checked="" type="checkbox"/> Office of Developmental Disabilities Services(ODDS) |
| <input type="checkbox"/> Children, Adults and Families | <input checked="" type="checkbox"/> Other (<i>please specify</i>): Brokerage Directors and Personal Agents, Service Coordinators, Regional Diversion Offices |
| <input checked="" type="checkbox"/> County DD Program Managers | |

Action Required:

Requests for Reassessment: Reassessment requests may be made directly to ReBAR by the CDDP or Brokerage. Per Federal regulations, 42 CFR 441.535 needs assessments must be conducted face-to-face annually, when the individual's support needs or circumstances significantly change, or when the individual requests a re-assessment.

Reassessments will be conducted for the following reasons: increased medical supports, increased behavioral supports, significant increase in type of support, frequency and/or time, lack of valid respondent group, or at the request of the individual.

Requests for reassessments due to dissatisfaction with the state rate structure does not meet the criteria for reassessment set forth in 42 CFR 441.535(3)(c).

Requests for reassessments must be submitted in the following manner:

- Brokerage or CDDP representative goes to DHS Forms webpage <http://www.oregon.gov/DHS/> and clicks on **Forms** in left column of choices:

1. The **OR DHS Find a Form** screen appears;
 2. Enter **744** in **Form Number** text box and clicks **Search**
 3. Click on **Request for ReBAR Assessment**. Click to “View” the highlighted document;
 4. Click on DE0744.doc. Click **SAVE** to download DHS 0744 form.
- Complete the **Request for ReBAR Assessment DHS Form Number - DHS0744**
 - Request secure email from ReBAR by sending an email to

Email: ReBAR.Request@state.or.us

- Use standard subject line in email.

Subject: Send Secure Email

Important - must use this exact subject line!

- ReBAR sends secure email by auto-reply. **Subject: #secure# ReBAR Request;**
- CDDP or Brokerage Representative receives secure email from ReBAR (**Subject: #secure# ReBAR Request**) and clicks **‘Reply’** to secure email from ReBAR;
- Attach **Request for ReBAR Assessment** to the secure email and sends the email with the attachment back to ReBAR. This secure email is sent back to:

ReBAR email: ReBAR Request @ state.or.us

- CDDP or Brokerage will receive an email back from ReBAR notifying them that the request has been “received.”

Reason for Action:

Streamlining the reassessment request process will allow for more timely assignments and completion of reassessments.

Field/Stakeholder review: Yes No

If yes, reviewed by:

If you have any questions about this action request, contact:

Contact(s):	Kelley Simonson		
Phone:	503-373-0759	Fax:	503-373-7902
E-mail:	Kelley.Simonson@state.or.us		