



## Request for Outreach/Eligibility Assistance

Person Needing Services Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Signature of individual or parent/guardian: \_\_\_\_\_ if available/needed

Address: \_\_\_\_\_

City: \_\_\_\_\_

Contact person phone numbers: \_\_\_\_\_ / \_\_\_\_\_ Okay to text? \_\_\_\_\_

Contact person e-mail: \_\_\_\_\_ (if used/checked)

School district: \_\_\_\_\_

Social Security Number (needed by, and will be given to, the NYS Office for People With Developmental Disabilities (OPWDD) when paperwork is sent in): \_\_\_\_\_

Does the child have Medicaid? \_\_\_\_\_

If so, what is the number (starts with letters): \_\_\_\_\_  
(this will also be sent to NYS OPWDD)

Does the child get Social Security benefits? \_\_\_\_\_

Referred by:

Self

Other: \_\_\_\_\_

Comments (optional):



We are happy to help you!

Please send to:  
The Arc of Livingston-Wyoming  
Attn: Outreach  
18 Main Street  
Mt. Morris, NY 14510  
Fax: 585-658-4249  
Email: outreach@lwarc.org  
**If you are an agency MSC  
requesting Arc services,  
please note that here:**



## Thinking of Making a Referral for Eligibility for Services?

### Who might be eligible for assistance? For Individuals 7 and Up:

Section 1.03(22) of the New York State Mental Hygiene Law is the legal base for eligibility determination and defines Developmental Disability as:

A disability of a person that:

- (a)(1) Is attributable to mental retardation, cerebral palsy, epilepsy, neurological impairment or autism;
- (2) Is attributable to any other condition of a person found to be closely related to mental retardation because such condition results in similar impairment of general intellectual functioning or adaptive behavior to that of mentally retarded persons or requires treatment and services similar to those required for such persons; or
- (3) Is attributable to dyslexia resulting from a disability described in (1) or (2);
- (b) Originates before such person attains age twenty-two;
- (c) Has continued or can be expected to continue indefinitely; and
- (d) Constitutes a substantial handicap to such person's ability to function normally in society

(from NYS Office for People With Developmental Disabilities Advisory Guidelines)

### **Not based on income**

### Who might be eligible for assistance? For Individuals 3\* and Up:

In general, a child will have delay/s and limitation/s in one or more functional areas

- Adaptive (scores from ABAS or Vineland, not BASC)
- Cognitive
- Language & Communicative
- Motor Development
- Social Function

to be considered provisionally eligible, so the diagnosis is not as important as the delay. Before the child turns 8, we will need to meet the criteria from Section 1.03(22) of the New York State Mental Hygiene Law.

The specific guidelines for children 3\* and up, are consistent with [Part 200.1\(mm\)\(1\)](#) of the NYS Education Law.

Testing used must be standardized, using approved assessments **completed within the last 12 months for OPWDD.**

(from NYS Office for People With Developmental Disabilities Advisory Guidelines)

\* Early Intervention (EI) typically serves children from birth to age 3. In some cases of extra need agency services can be added to EI.

**How will we help you?** By working with you to complete the eligibility process, through the many steps that need to be taken from start to finish. This can include helping to access evaluations, making sure you get through The Front Door, and more.

**How would being eligible help someone?** By providing a variety of services and supports, as determined by the New York State Office for People with Developmental Disabilities, which could include: service coordination, family support, respite, recreation, and more.

**Not sure if someone will qualify? We won't know until we try.**

*Achieve with us.®*