



### HCBS I/DD Waiver Funding Request Checklist

BASIS current within 365 days (schedule assessment after submitting request packet)

#### Crisis & Priority Situation Requests:

Crisis Request form with guardian signature

Statement from MCO of exhausted resources / recommendation (contacts below)

**Aetna:** Angie Heflin, Manager Clinical Health Services [HeflinA@aetna.com](mailto:HeflinA@aetna.com)

Brandon Pratt, Manager Clinical Health Services [PrattK1@aetna.com](mailto:PrattK1@aetna.com)

**Sunflower:** Kristine Meier, Transitions of Care [kslifeshare@sunflowerhealthplan.com](mailto:kslifeshare@sunflowerhealthplan.com)

Sherry Biddle, LTSS Member Advocate [Sherry.m.biddle@sunflowerhealthplan.com](mailto:Sherry.m.biddle@sunflowerhealthplan.com)

**United Healthcare:** Jonathan Herrera-Thomas, Manager [Jonathan\\_herrera-thomas@uhc.com](mailto:Jonathan_herrera-thomas@uhc.com)  
913-416-2125

Kristi Geihlsler, Associate Director [kristi\\_l\\_geihlsler@uhc.com](mailto:kristi_l_geihlsler@uhc.com) 913-333-4179

Documentation that community resources have been exhausted prior to applying for HCBS

Person Centered Support Plan with signature page

Individualized Education Plan (any requests for school age children)

Behavior Support Plan with signature page (if the person has a BSP)

Documentation of Law Enforcement involvement (if described in the request)

Documentation of medical treatment (if described in the request)

Documentation of abuse/neglect/exploitation incidents (if described in the request)

VR case closure letter with documented need for on-going support & job coach provider contact notes (SE exceptions)

Documentation (transition plan) of planned release from DCF custody (DCF release exception)

Documentation of KS residency, TriCare Echo, and DD 214 Form (Military Inclusion exception)

#### Transition Requests:

Documentation of impending transfer (PRTF discharge plan required for PRTF transitions back to HCBS)