

How to Access Funding

If connected to DP and living in DP's catchment area:

1. Contact Case Manager

Contact your assigned Case manager or Service Coordinator; this is the person who connects with you about services through Early Intervention or one of the I/DD Medicaid Waivers or state-funded I/DD Programming. If you are enrolled in the Community Outreach Waitlist program, this will be your CO Coordinator.

Note: Our preference is to have supports prior authorized; because funding is limited and not guaranteed, we recommend individuals and families seek approval prior to incurring out-of-pocket costs.

2. Share un-met need or under-met need

When speaking with your Coordinator or Case Manager, share that you have an un-met or under-met need (related to the I/DD/delay) for which they need funding support; they will need to share details and possibly supporting documentation (example: a letter of recommendation)

3. Case Manager will review

Your Coordinator or Case Manager will look at all available benefits through existing programming (such as EI services or waiver services and state plan benefits) to help ensure available benefits are being utilized before accessing this funding.

One of our goals is to help individuals and families access all available supports [private insurance, Health First Colorado (Medicaid), State I/DD programming, HCBS waiver supports, and other community resources, etc.] before accessing un-met needs; we believe this will help curate longer-term options to meet needs and ensure good stewardship of local funds

4. Case Manager will help with documentation

Your Coordinator or Case manager will help you get all the right supporting documentation in place and then coordinate the submission of a funding request.

5. Request gets submitted

Your request gets submitted to the department who oversees direct local spend in the community; that team will review and ensure DP has all the relevant questions answered to provide funding if possible; the team will approve, partially approve, or—when appropriate, deny and inform the Case Manager or Coordinator.

6. Manager will get back with individual or family

Your Case Manager or Coordinator will circle back with you and, if appropriate, the designated provider about the outcome of the request.

7. If approved, funding goes to provider or sent directly

If approved, funding normally goes directly to the supporting provider, but in some instances individuals and families receive the funding directly.

If connected to another case management agency and living in DP's catchment area:

We need to connect with your current Case Manager to get the information needed to complete these funding requests.

Please use [this form](#) to start the process

If not connected to DP or any agency yet but in DP's catchment area:

1. Go through the intake process first for un-met needs

If you have not had an I/DD or delay determination, you will need to go through the intake process first for un-met needs, with the singular exception being those expenses that will help them with accessing the system (such as adaptive or IQ testing).

2. If approved, funding goes to provider or sent directly

Once connected/going through intake, the process is largely the same as above.