

Provider name and address

Date: _____

LIMITED EXCEPTION NOTICE FOR PERSONS APPLYING FOR OTHER SERVICES

(To be given by Provider of Other Requested Services)

Individual asking for services: _____

You got this notice because you are the individual named above (or you are assisting the individual), you have to pay for the services for the individual, or you are responsible for the individual's money. If you are the individual named above, anything in this notice about "the individual" or "you," means you.

We are giving you this notice because the individual now has a limited exception to the New York State Office for People With Developmental Disabilities (OPWDD) liability for services rules, but someone asked us to give the individual the services checked below. The limited exception will end if we give the individual these services.

- | | |
|---|--|
| <input type="checkbox"/> residential habilitation in an individualized residential alternative, community residence or family care home | <input type="checkbox"/> MSC (Medicaid Service Coordination) |
| <input type="checkbox"/> intermediate care facility services for persons with developmental disabilities | <input type="checkbox"/> community habilitation |
| <input type="checkbox"/> day habilitation | <input type="checkbox"/> day treatment |
| | <input type="checkbox"/> prevocational services |
| | <input type="checkbox"/> supported employment services |

When will the limited exception end?

The limited exception will end on the date we start the services.

If the limited exception ends, the individual will need Medicaid coverage or someone will have to pay for the requested services. Also, you will have to give us information, we can bill you for the services and we may deny or stop the services. (Fee waivers or reductions are available in unusual circumstances.)

We are giving you a Liability Notice for Individuals Applying for Services, Form OPWDD LIAB 05. This notice has details about the information you will have to give us, getting Medicaid to pay for the services or paying for the services yourself, and what can happen if you do not have Medicaid or pay for the services.