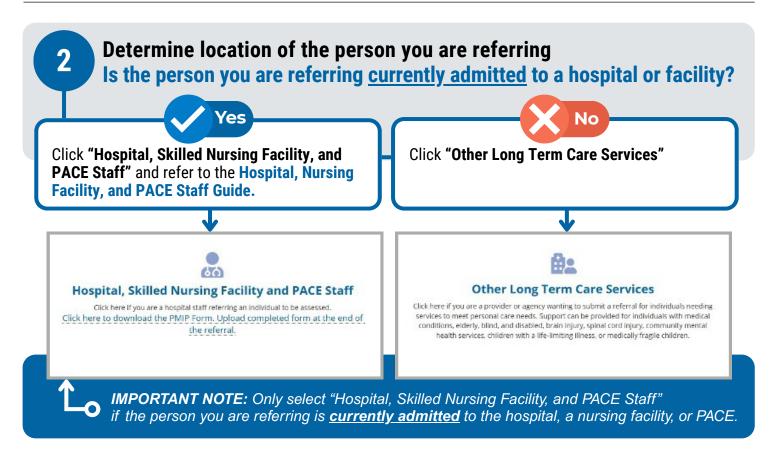
Making a Referral to the RMHS Case Management Agency for Non-I/DD Clients



OTHER PROVIDERS GUIDE Refer someone who is <u>not</u> admitted to a hospital, nursing facility, or PACE.





Identify the county where the person you are referring lives

Does the person you are referring live in Denver or Adams County?



If the person you are referring lives in Denver or Adams County right now, select "Yes"



If **not**, access the <u>CMA map</u> to identify the correct Case Management Agency for the person you are referring.

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Select referral source

Select the option that best describes your relationship to the person you are referring (this will likely be one of the options highlighted <u>in orange</u> below.)

-Select-

Behavioral/Substance Use Agency

Homeless/Housing Services

Institutional Setting

Medicaid Agency

Medical Facility/Doctor

Non-RMHS Case Management Agency

RAE (Regional Accountable Entity)

School

Self/Guardian/Family/Friend

Service Provider

Social Services

Veteran Agency

Other

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Enter details about the person you are referring

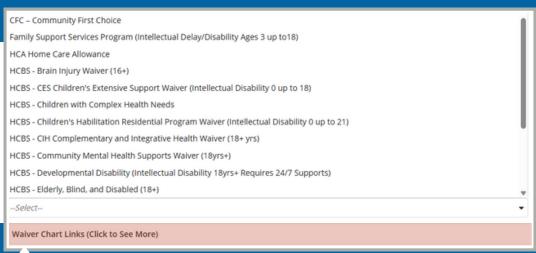
- Complete all required demographic and contact fields.
- ✓ Answer the prompts regarding areas of concern.

Choose the program of interest for the person you are referring

The program of interest is based on the goals and required supports for the person you're referring.

What types of home-based supports does the person you're referring require? Select the waiver that best fits their needs.

WAIVER CHART EXAMPLES



 $oldsymbol{\mathcal{L}_{o}}$ To read more about the waiver options, click 'Waiver Chart Links.'



Second choice for program of interest (optional)

✓ Some referrals allow for a secondary option. Fill out if applicable.

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Finalize and submit

- **✓** Enter additional information requested.
- Click SUBMIT.
- ✓ A pop-up screen will appear with a confirmation number. Please save this.
- You have completed the CMA Intake Referral Submission.

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After submission

- ✓ An Intake Case Manager will review shortly in accordance with HCPF compliance regulations.
- ✓ The Intake Case Manager will reach out to the person you are referring first. You may be contacted if needed.
- ✓ Please answer/return calls to avoid delays.