



# Avery's Mom

Built by a Mom. Powered by Experience. Driven by Love.

## FREE RESOURCE

# Self-Direction 101

*Everything you need to understand, access,  
and make the most of self-directed services in New York*

**Hi! I am Avery's Mom,**

This guide was written by me, an authorized OPWDD Support Broker who is also the mother of a child with a disability. Everything in here is the information I wish someone had handed me when we first entered the OPWDD system. This is a free resource. Share it with every family who needs it.

For guidance specific to your situation, always work with your Care Manager or a Support Broker.

With love,

**Shannon**

Avery's Mom

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## PART 1 — What Is OPWDD Self-Direction?

### The Simple Explanation

Self-direction is a way of receiving disability services that puts your family — not a provider agency — in control.

When most people think of OPWDD services, they think of a traditional model: you get assigned to an agency, the agency decides which staff come to your home, what schedule they follow, and which services are provided. You do not have much say.

Self-direction is different. In the self-direction model, OPWDD gives your loved one a budget — an actual dollar amount allocated for their care. Your family then decides how that budget is used: who you hire, what they do, when they come, and what supports are most important.

#### Traditional Services vs. Self-Direction

Traditional: Agency decides who, what, when, and how.

Self-Direction: YOU decide who, what, when, and how — within OPWDD guidelines.

### Why Self-Direction Matters

Families who use self-direction consistently report greater satisfaction, better outcomes for their loved ones, and more flexibility in day-to-day life. When you control who provides care, you can hire people your loved one actually knows and trusts — family members in some cases, neighbors, community members.

Self-direction also allows for individualization that traditional agency models simply cannot match. Your loved one's needs are unique. Self-direction allows:

- Greater control over who provides care
- More flexibility in scheduling and daily routine
- Ability to hire people your loved one trusts
- Services designed around your family's real life, not a standard template
- Family members can be hired as paid caregivers (In some cases)

## PART 2 — Who Qualifies for Self-Direction?

### Eligibility Requirements

To access self-direction in New York, your loved one must meet all of the following:

1	Have an OPWDD eligibility determination (formal diagnosis of a developmental disability including autism, intellectual disability, cerebral palsy, epilepsy, or neurological impairment originating before age 22)
2	Be enrolled in the HCBS (Home and Community Based Services) Medicaid waiver
3	Have an active Individualized Service Plan (ISP) developed with a OPWDD Care Manager
4	Be determined to need at least one waiver service included in the self-direction program
5	Have or designate a Paid Program Administrator (typically a parent or guardian for individuals who need support managing their budget)

**Already Receiving OPWDD Services?**

If your loved one already receives traditional OPWDD services and is enrolled in the Medicaid waiver, they may be eligible to switch to self-direction right now.

Ask your Care Manager: 'Is my loved one eligible for the self-direction program?'

## PART 3 — Applying for OPWDD Eligibility

### How to Apply for OPWDD Eligibility

If your loved one is not yet OPWDD-eligible, here is how to start:

**Step 1: Contact Your Regional DDRO** Reach out to your regional OPWDD Developmental Disabilities Regional Office (DDRO) to express interest in [self-direction services](#) and begin the intake process.

**Step 2: Attend a Front Door Session** OPWDD requires all new applicants to attend a [Front Door meeting](#) — an orientation session (available in person or virtually) where OPWDD walks your family through available services, what eligibility means, and what documentation you will need to gather. This is a required step before your application can move forward.

**Step 3: Submit Your Eligibility Documentation** You will need to provide:

- A formal diagnosis of a qualifying developmental disability (intellectual disability, autism spectrum disorder, cerebral palsy, epilepsy, or a closely related neurological condition originating before age 22)
- Psychological evaluation meeting OPWDD's specific criteria
- Medical and diagnostic records
- School records and evaluations (IEPs, neuropsych reports, etc.)
- Documentation of functional limitations in major life areas

**Step 4: OPWDD Reviews and Issues a Determination** OPWDD will review your submission and issue a formal eligibility determination. This process can take time — follow up with your DDRO regularly.

**Step 5: Get Connected to a Care Manager** Once eligible, your family will be connected to a **Care Manager** through a Care Coordination Organization (CCO). Your Care Manager will work with your family to develop a **Life Plan** — a person-centered document that identifies your loved one's goals, needs, and the supports and services that will help them thrive.

**Step 6: Explore Waiver Enrollment and Self-Direction** OPWDD eligibility is the foundation — but most funded services, including **Self-Direction**, require enrollment in the **HCBS Medicaid Waiver**. Your Care Manager will help you navigate waiver enrollment and determine which funding options are the right fit for your family.

**A note on timing:** The eligibility process can take several months from first contact to determination. Starting early — even before a crisis or transition point — gives your family more options and more time to plan.

## PART 4 — Key People and Roles in Self-Direction

Self-direction involves several key people and roles. Understanding who does what will save you significant confusion.

Role	What They Do
The Individual / Family	The person with the disability and/or their family. In self-direction, YOU are the employer. You make the decisions about staff, services, and how the budget is used.
Care Manager	Assigned by OPWDD. Develops the Individualized Service Plan (ISP), submits Service Amendment Requests (SARTs), and serves as your main OPWDD contact.
Support Broker	Your guide and strategist. Helps you understand your budget, navigate NODs and SARTs, develop your plan, and problem-solve when issues arise. Paid through your self-direction budget. Credentialed by OPWDD.
Fiscal Intermediary (FI)	Handles payroll and employer-of-record functions. When you hire staff, the FI pays them, handles taxes, workers' comp, and compliance. Paid through your budget.
Direct Support Professional (DSP)	The staff you hire to provide support to your loved one — personal care, community habilitation, respite, and more.
Paid Program Administrator (PPA)	Often a parent or guardian. Manages the budget and employer responsibilities on behalf of an individual who needs support doing so.

### The Support Broker vs. Care Manager — What's the Difference?

**Care Manager:** Works for OPWDD or a Care Management agency. Manages the ISP and submits SARTs. Required for all OPWDD participants.

**Support Broker:** Works for YOU. Helps you understand and navigate self-direction specifically. Optional but strongly recommended — especially for new families.

Think of it this way: the Care Manager manages the system side. The Support Broker is in your corner.

## PART 5 — Understanding Your Self-Direction Budget

### How Budgets Are Determined

Your loved one's self-direction budget is not a fixed number that every family receives.

It is calculated based on:

1. Your loved one's assessed level of need through the **Coordinated Assessment System (CAS)**, a standardized tool OPWDD uses to evaluate the support needs of individuals with developmental disabilities.

The CAS produces three scores are:

1. **Intensity of Support Needs** — measures how much support a person requires across daily life activities
2. **Behavioral and Emotional Support Needs** — measures the level of behavioral and emotional supports required
3. **Medical Support Needs** — measures the complexity and intensity of medical supports needed

These three scores together inform the individual's **Resource Allocation Level**, which determines the amount of funding available in a self-direction budget.

**Important Note:** The CAS is not a one-time event. It is reassessed periodically, and scores can change — sometimes significantly. A lower score at reassessment can result in reduced funding, even if your loved one's actual needs have not decreased.

2. The types of services included in their Life Plan
3. OPWDD budget methodology and waiver funding availability

Your Care Manager and Support Broker can help you understand how your budget is calculated and whether you may be eligible for a higher budget based on your loved one's needs.

## Budget Categories

Goods and Services Budget	Staff Budget
<p>Used to purchase items and non-staff services that support your loved one's goals.</p> <ul style="list-style-type: none"> <li>• Adaptive equipment</li> <li>• Technology and communication devices</li> <li>• Transportation</li> <li>• Home modifications for safety</li> </ul>	<p>Used to pay the people you hire to support your loved one.</p> <ul style="list-style-type: none"> <li>• Community habilitation staff</li> <li>• Respite workers</li> <li>• Supported employment staff</li> <li>• Day habilitation workers</li> </ul>

Depending on the Self-Direction model and waiver your loved one is enrolled in, the following budget categories may also be available:

- Other than Personal Services
- Housing
- Respite (as a standalone category)
- Environmental modifications (E-mods)
- Unpaid caregiver training and education
- Self-Directed Community Supports and Employment (SDCSE)
- Supported employment (standalone)
- Community transition services

Your Care Manager and Support Broker can help you understand which categories are available in your specific plan.

## Important Budget Rules

- You cannot spend more than your approved budget — track spending carefully with your FI
- Unused budget funds do not roll over year to year in most cases
- Budget changes require a SART submission and OPWDD approval — plan ahead
- Your Support Broker can help you make the most of every dollar in your budget

## PART 5 — Key Documents Explained

The OPWDD system involves a lot of paperwork and acronyms. Here are the most important documents you will encounter in self-direction:

### Life Plan

The Life Plan is the master plan for your loved one's OPWDD services. It is developed collaboratively with your Care Manager and covers your loved one's goals, the services they will receive, and the outcomes you are working toward. The Life Plan is reviewed and updated at least annually.

### SART — Service Amendment Request Tool

The SART is the electronic form your Care Manager submits when you want to add, change, or modify services within the OPWDD system. As of January 2024, SARTs are submitted electronically through the CHOICES platform.

- Submitted by your Care Manager — not by you directly
- Required any time you want to add a new service or change an existing one
- OPWDD reviews and approves or denies each SART
- Once approved, you will receive a Notice of Decision (NOD)

**Tip**  
Do not wait until you desperately need a service to submit a SART. Processing takes time. Work with your Support Broker to plan ahead and submit SARTs before you are in crisis.

### NOD — Notice of Decision

The NOD is the official document OPWDD sends after reviewing a SART. It tells you what was approved, what was denied, and at what level (hours/units per year).

NOD Type	What It Means
<b>NOD.01</b>	Initial Notice of Decision — issued when a person first enters the OPWDD waiver. Establishes eligibility and initial services.
<b>NOD.09</b>	Service Authorization NOD — issued when a SART is approved. Authorizes newly requested services AND reauthorizes all existing services with annual unit amounts. This is the document you will see most often.

Always review your NOD carefully when you receive one. Errors happen. If you believe a NOD is incorrect — wrong units, missing services, or an unexpected denial — you have the right to request a review or appeal.

## PART 6 — What Self-Direction Funds Can Pay For

One of the most common surprises for families new to self-direction is how much their budget can actually cover. Here is a guide to approved uses of self-direction funds:

### Services That Can Be Self-Directed

Service	Description
Community Habilitation	Building life skills in real community settings — cooking, shopping, using public transportation, social skills
Day Habilitation	Structured daytime support focused on skill-building, community participation, and meaningful activity
Respite	Temporary relief care for families — someone comes so caregivers can rest, work, or take a break
Supported Employment	Job coaching, employment preparation, and on-the-job support for individuals pursuing work
Residential Habilitation	Support with daily living tasks in the person's home
Adaptive Equipment	Devices and tools that support independence — communication devices, mobility aids, sensory tools
Transportation	Getting to and from community activities, appointments, and programs
Environmental Modifications	Home modifications for safety and accessibility — grab bars, ramps, visual supports
Crisis Intervention	Supports during a behavioral or mental health crisis

#### Can Family Members Be Paid as Caregivers?

In some circumstances, yes — family members can be hired as Direct Support Professionals through self-direction.

Rules apply: the family member must meet DSP requirements, be hired through the Fiscal Intermediary, and the arrangement must be approved in the Life Plan.

Spouses and legally responsible parents of minor children are typically excluded from being paid caregivers.

Ask your Support Broker about the specific rules for your situation.

## PART 7 — Common Mistakes and How to Avoid Them

After working with many families navigating self-direction, here are the most common pitfalls — and how to avoid them:

### 1 **Not applying for OPWDD eligibility early enough**

OPWDD eligibility takes time. Apply as soon as your child receives a qualifying diagnosis — even if they are young. Early eligibility means earlier access to services.

### 2 **Not asking about self-direction**

Many families receive traditional services for years without knowing self-direction exists. If you are in the OPWDD system and haven't heard about self-direction, ask your Care Manager today.

### 3 **Not reading your NOD carefully**

NODs can contain errors — wrong service amounts, missing items, or unexpected denials. Always review every NOD when you receive it and contact your Support Broker if something looks wrong.

### 4 **Waiting until crisis to reach out for help**

The SART and approval process takes time. If you anticipate needing a new service, plan ahead and submit early. Don't wait until you are in a crisis situation.

### 5 **Thinking a denial is final**

SARTs can be resubmitted with additional documentation. NOD decisions can be appealed. A denial is a step in the process, not the end of it.

### 6 **Not using a Support Broker**

Especially for new families, a Support Broker is invaluable. They are paid through your budget and exist specifically to help you navigate the system. Use them.

### 7 **Underspending the budget**

Many families leave money in their budget at year-end because they do not realize what it can cover. Work with your Support Broker to review your budget quarterly and ensure you are accessing everything you are entitled to.

## PART 8 — Glossary of Key Terms

Term	Definition
OPWDD	Office for People With Developmental Disabilities — the NY State agency that administers services for people with developmental disabilities
HCBS Waiver	Home and Community Based Services Waiver — the Medicaid waiver that funds most OPWDD self-direction services
Life Plan	Life Plan — the master plan for your loved one's OPWDD services, developed with your Care Manager
SART	Service Amendment Request Tool — the electronic form submitted by your Care Manager to request new or changed services
NOD	Notice of Decision — the official document from OPWDD confirming what services are approved, at what amounts
NOD.01	Initial Notice of Decision — issued when someone first enters the OPWDD waiver
NOD.09	Service Authorization NOD — issued each time a SART is approved; reauthorizes all current services plus any new ones
Support Broker	A professional who guides families through self-direction — helps with budgets, NODs, SARTs, and planning. Paid through your budget.
Fiscal Intermediary (FI)	The agency that acts as employer-of-record and handles payroll for your self-directed staff. Paid through your budget.
DSP	Direct Support Professional — the staff member you hire to provide support to your loved one
PPA	Paid Program Administrator — typically a parent or guardian who manages budget and employer responsibilities
CHOICES	The electronic platform used by OPWDD and Care Management to manage ISPs, SARTs, and service authorizations
DDRO	Developmental Disabilities Regional Office — your regional OPWDD office, your point of contact for eligibility and services
Respite	Temporary relief care — a service that provides a break for family caregivers
Community Habilitation	A service that builds life skills in real community settings — shopping, cooking, socializing, and more

### Need personalized help?

Book a free 15-minute Self-Direction Consultation at [Averysmom.com](https://www.averysmom.com)



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## FREE PRINTABLE CHECKLIST

### OPWDD Self-Direction Starter Checklist

**How to Use This Checklist**

- Work through these steps in order — each one builds on the last.
- Print this page and keep it somewhere accessible.
- Check each box as you complete it. This process takes time — be patient with yourself.
- Your Support Broker can help you with any step that feels confusing or overwhelming.

**STEP 1 — Establish OPWDD Eligibility**

- Contact your regional OPWDD DDRO to request an eligibility application — *If not yet eligible*
- Gather required documentation: diagnostic records, psychological evaluation, records of functional limitations
- Submit the eligibility application with all supporting documentation
- Receive OPWDD eligibility determination letter
- Follow up if you have not heard back within 60 days

**DDRO Contact / Notes:**

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**STEP 2 — Get Enrolled in the Medicaid Waiver**

- Confirm your loved one is enrolled in New York Medicaid — *Required for all OPWDD waiver services*
- Ask your Care Manager about HCBS waiver enrollment — *Self-direction requires waiver enrollment*
- If there is a waitlist, get your name on it immediately — *Waitlists can be long*
- Receive confirmation of waiver enrollment

**Waiver / Medicaid Notes:**

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**STEP 3 — Work With Your Care Manager**

- Identify and connect with your assigned OPWDD Care Manager
- Schedule your Individualized Service Plan (ISP) meeting
- Prepare for the ISP meeting: write down your loved one's goals, needs, and the services you want
- Attend the ISP meeting and advocate for the services your loved one needs
- Review and sign the completed ISP — keep a copy for your records
- Ask your Care Manager to submit a SART for self-direction services

**Care Manager Name / Contact:**

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**STEP 4 — Choose a Support Broker**

- Research Support Brokers in your area or who work remotely
- Ask your Care Manager or other families for recommendations
- Interview at least 2-3 Support Brokers before choosing
- Confirm the Support Broker is registered with OPWDD
- Add your Support Broker to your ISP and SART — *Paid through your budget — no out-of-pocket cost*
- Schedule an initial meeting to review your budget and plan

**Support Broker Name / Contact:**

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**STEP 5 — Choose a Fiscal Intermediary (FI)**

- Research OPWDD-approved Fiscal Intermediaries — *OPWDD maintains an FI list*
- Ask your Support Broker for FI recommendations
- Contact at least 2 FIs to compare services and responsiveness
- Choose your FI and complete the enrollment paperwork
- Add your FI to your ISP
- Confirm your FI has received your self-direction authorization

**Fiscal Intermediary Name / Contact:**

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**STEP 6 — Understand and Review Your NODs**

- Receive your NOD.01 (initial service authorization) — file it in a safe place
- Review every NOD.09 carefully when you receive it — *Check service types & unit amounts*
- Compare your NOD to your approved SART — confirm everything matches
- Contact your Support Broker immediately if something looks wrong
- Know your appeal rights — if a service is denied, you can appeal — *Ask your Care Manager for the appeals process*

**NOD Notes / Issues to Follow Up:**

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**STEP 7 — Hire Your Team**

- Work with your Support Broker to identify what staff you need
- Post job listings or reach out to people you know and trust
- Interview candidates — you are the employer
- Complete required hiring paperwork through your Fiscal Intermediary
- Ensure all staff complete required background checks and OPWDD training
- Set up a schedule and begin services
- Keep records of hours worked and services provided — *Required by OPWDD and your FI*

**Staff Notes:**

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**STEP 8 — Ongoing Management**

- Review your budget quarterly with your Support Broker — *Make sure you are using it fully*
- Submit SARTs in advance when services need to change — *Allow time for processing*
- Attend your annual ISP review meeting and update goals
- Keep all documents organized: ISPs, SARTs, NODs, staff records
- Stay in regular contact with your Support Broker and Care Manager
- Reach out for help when something changes — do not wait for a crisis

**Book a free 15-minute Self-Direction Consultation at [Averysmom.com](http://Averysmom.com)**