

NAME OF THE ASSESSMENT	WHO NEEDS THIS ASSESSMENT?	FREQUENCY OF ASSESSMENT	REASON FOR ASSESSMENT	WHO COMPLETES THE ASSESSMENT?	ADDITIONAL INFORMATION
Developmental Disabilities Profile, Version 2 (DDP-2)	All STC members	<ul style="list-style-type: none"> • Within 30 days of enrollment • At least every 2 years • When needs change 	Used to identify challenges and service needs	Care Manager with member/family member/advocate	<p>This assessment is being phased out and replaced by the CAS/CANS</p> <p>A copy of the DDP2 can be found here: DDP-2</p>
Child & Adolescent Needs and Strengths (CANS)	Members 17 years and younger	Once per year	Functional needs assessment designed to give a profile of the specific current needs and strengths of a child/adolescent and their caregiver(s).	<p>OPWDD staff or staff from OPWDD contracted agency, Maximus, with member/family member/advocate</p> <p>The Care Manager reviews the results with you within a month of the assessment date</p>	
Coordinated Assessment System (CAS)	Members 18 years and older	Every 2 years	Comprehensive assessment tool used to identify strengths, needs and interests.	<p>OPWDD staff or staff from OPWDD contracted agency, Maximus, with member/family member/advocate</p> <p>The Care Manager reviews the results with you within a month of the assessment date</p>	
Health Related Social Needs (HRSN)	All STC members	Once per year	Screening tool to help your Care Manager identify needs related to social determinants of health including Housing instability, Food Insecurity, Transportation problems, Utility Help needs, Interpersonal safety, and more.	Care Manager with member/family member/advocate	<p>This assessment is often completed at the same time as the IAM Assessment</p>
I Am Me (IAM)	All STC members	<ul style="list-style-type: none"> • Within 60 days of CCO enrollment and • Once per year (generally the month before the annual Life Plan meeting) 	Comprehensive assessment that identifies the disability, medical, mental health, behavioral health, chemical dependency, social and emotional needs of an individual	Care Manager with member/family member/advocate. Additional information is also sought from members of the individual's team (service providers, medical/mental health providers, residential staff, etc.)	
Level of Care Eligibility Determination (LCED)	All STC members	Once per year	Used for initial determination and annual redetermination of an individual's eligibility to receive Home and Community Based Services (HCBS) and/or Care Coordination Care Manager	Care Manager	<p>A copy of the LCED can be found here: LCED</p>