



Carbon-Monroe-Pike Mental Health and Developmental Services

Sheila Theodorou, Administrator

Participant Responsibilities for Maintenance of Waiver Services

I understand that eligibility for waiver services is dependent on meeting the following requirements. If I am unable to comply with these standards, it is at the discretion of the Administrative Entity to recommend the discontinuance of services to the Office of Developmental Programs.

Name of Participant

Name of Parent

Name of Advocate

Name of Supports Coordinator

Initials/Date

I/We will ensure waiver-monitoring visit requirements will be met.

Initials/Date

Initials/Date

Initials/Date

I/We will ensure a yearly physical will be completed.

Initials/Date

Initials/Date

Initials/Date

I/We will ensure Medical Assistance Eligibility will be maintained.

Initials/Date

Initials/Date

Initials/Date

I/We will ensure participation in a yearly Individual Support Plan meeting.

Initials/Date

Initials/Date

Initials/Date

I/We will ensure notification of any demographic changes, e.g., address, insurance and contact information

Initials/Date

Initials/Date

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Fax 610-377-5003

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Stroudsburg, PA 18360-1799
570-421-2901
Fax 570-421-7753 (MH)
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Early Intervention
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10 Buist Road
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Milford, PA 18337-9311
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