



2025 Self-Direction Reimbursement Guide

Table of Contents

Getting Reimbursed for Services:	3
Reimbursement Processing:	3
Reimbursement Guidelines	4
Individual Directed Goods and Services (IDGS)	4
Camp:	5
Community Classes:	5
Coaching/Education for Parent/Spouse/Advocate:	6
Clinician – Direct Provision of Therapy:	6
Health Clubs and Organizational Memberships:	7
Household-Related Items and Services:	8
Paid Neighbor	8
Transportation:	9
Other Than Personal Services (OTPS)	10
Phone Service:	10
Internet:	11
Software related to the person’s disability:	11
Staff Advertising/Recruitment Costs:	12
Staff Training:	12
Personal Use Transportation:	12
Clothing:	13
Board Stipend (food subsidy):	13
Utilities	14
Other Goods and Services that Increase Independence/Related to Health and Safety	14
Family Reimbursed Respite (FRR)	14

Getting Reimbursed for Services:

Self-Direction is a program that is funded by OPWDD (New York State) and Medicaid (Federal). There are rules set forth by both of these agencies determining what is and is not payable through Self-Direction. The basic “rules” for Self-Direction are that services purchased through the budget enhance the Individual’s health, safety, and independence.

Self-Direction is primarily a reimbursement-based service, which means that services and items have to be purchased first and then submitted to the Fiscal Intermediary (FI) for reimbursement. Wildwood cannot pay for an item or service until it has been received, so proof of payment and attendance (if applicable) will be required for reimbursement.

The Self-Direction budget is the *payer of last resort*, meaning all other avenues of payment must be exhausted before the budget can be considered. This may include health insurance, grant funding, scholarships, HCBS waiver services, government services, etc.

All new reimbursement requests must go through the Reimbursement Committee for pre-approval. It is strongly encouraged this is done prior to purchasing the item. Wildwood also works with many businesses in the community to offer direct billing for services, which means they would bill the FI directly rather than the Participant paying and then being reimbursed. There is a *Provider List* (see attachment) which includes a list of businesses which offer direct billing (“Direct Providers” tab) and a list of services that are already approved as reimbursable (“All Providers” tab).

Reimbursement Processing:

- Reimbursements are processed biweekly and are paid out the following Friday. Reimbursements must be entered with all supporting documentation by Sunday night, as indicated (see *2025 Reimbursement Schedule* attachment) in order to be processed during that reimbursement period. Wildwood offers and encourages Direct Deposit, but will also send checks if that is preferred.
- All reimbursements must be submitted into Precision Care within 60-days of the date of service. The 60-day cut-off for each reimbursement period is listed on the 2025 Reimbursement Schedule. Reimbursements submitted outside of the 60-days will not be processed.
- Reimbursements are applied to the budget on the *date of processing*, not the date of service. Due to this, in the last month of the budget year all reimbursements must be received with all supporting documentation by the 15th of the month to ensure they are applied to the current budget. Anything received after the 15th of the month may come off of the next year’s budget. No reimbursements will be processed outside of the schedule indicated.
- Staff and Brokerage are paid directly by the FI, the Participant does not need to pay them and wait for reimbursement.
- Staff reimbursements for mileage and activity fees, if applicable, should be reviewed and approved by the Participant before they are processed. Staff will receive their reimbursements on the same schedule as Participants.

Reimbursement Guidelines

Individual Directed Goods and Services (IDGS)

IDGS is a budget category that is paid for by Medicaid. There is an IDGS Chart which lists criteria for reimbursement of each of the categories under this area of the budget; in addition any item or service paid for under IDGS must meet the following basic criteria:

1. Be related to a need or goal identified in the Life Plan.
2. Be for the purpose of increasing independence or substituting for human assistance, to the extent the expenditures would otherwise be made for human assistance.
3. Promote opportunities for community living and inclusion and/or increase the participant's safety and independence in their home environment.
4. Be able to be accommodated without compromising the participant's health or safety.
5. Be provided to, or directed exclusively toward, the benefit of the participant.

The following are EXCLUDED from being reimbursed under IDGS (see last page of IDGS Chart):

- Academic tutoring (available through school or college)
- Automatic pill dispenser/medication system (grant funding may be available)
- Cell Phones/Telephones (SafeLink Wireless or Assurance Wireless available to NYS residents who receive SSI)
- Computer hardware
- Computer programs/software (grant funding may be available)
- Leased and purchased vehicles
- Health-related services, equipment, and supplies (OTPS funding may be an option)
 - Inclusive of food and beverage thickeners, trachea collars, disposable bed pads, wipes, incontinence products, and supplemental medications. Dependent on insurance denials.
- Items and services from a vendor that presents a conflict of interest
 - Defined as any item or service where a support person receives significant monetary gain, results in a support person having significant influence over the individual, or constitutes a conflict of interest.
 - Support person defined as the individual's spouse, children, parents, guardians, any person engaging in sexual activity with the individual, partners residing with the individual, and/or any person providing paid services authorized through OPWDD such as Support Brokers, Staff, etc.
- Parents' or Participants' activity fees, expenses, or meals
- Personal monitoring systems (OTPS funding may be an option)
- Staff activity fees or meals (mileage may be reimbursed under IDGS, activity fees and meals under OTPS)
- Therapies that may be covered by health insurance, Medicaid, or through the school district (physical therapy, occupational therapy, speech therapy, psychology).
- Any experimental therapies

Camp:

- The camp must have a Department of Health (DOH) certification. Wildwood cannot guarantee reimbursement of a camp until the DOH certification is received. DOH certification is only given to camps that run May-September.
- Most Camps have to be paid for months ahead of time, we cannot reimburse until after the Camp has been attended. If the Camp runs multiple weeks, we can reimburse by week with proof of attendance, or after all weeks have been completed.
- The IDGS Camp area of the budget cannot exceed \$4000 annually
- A camp may be focused solely on supporting people with intellectual and developmental disabilities, or open to the public.
- Have a verifiable published rate that is publicly available

Documentation Required for Camp Reimbursement:

- DOH certification
- Published rate that is available to the public with a description of the camp
- Proof of payment on an itemized receipt with the camp name, individual name, date of purchase, and camp dates
- Proof of attendance – We cannot reimburse camp for any dates not attended. Proof of attendance is preferred to be on the attached *Wildwood Attendance Verification Form*, but we can also accept verification of attended dates on the invoice/receipt, on business letterhead, or from the business email account. Proof of attendance must include the Individual's name.

Community Classes:

Community Classes requirements/guidelines

- Available to the public, not just people with intellectual/developmental disabilities. **Specialized classes that take special needs into consideration are appropriate as long as they are also open to the broader public.*
- Have a verifiable published rate that is publicly available via website, Facebook page, flyer, or posted within the business location.
- Teaching a subject with active engagement and participation in an integrated community setting
- Private classes and lessons are allowable as long as they relate to an integration goal and the lessons are not taking place privately for the purpose of segregating the participant.

Community Classes exclusions

Community classes may be excluded from Self-Direction if:

- They duplicate any service offered through Medicaid or the HCBS waiver, or are conducted by an entity that delivers such services.
- They are restricted solely to people with intellectual/developmental disabilities.
- There are no established published fees
- They are credit-bearing for matriculating students, or mirror a class that would be provided by school for school-aged children, even if they are home-schooled.
- They are available in a setting only accessed by people with intellectual/developmental disabilities
- They do not adhere to the broader guidelines for IDGS
- Any equipment rentals or other add-on fees are not reimbursable, only the cost of the lesson. If equipment rental is included in the cost and not itemized out, it may be coverable.

Documentation Required for Community Class Reimbursement

- Published rate that is available to the public with a description of the class
- Proof of payment on an itemized receipt with the business name, individual name, date of purchase, and exactly was purchased.
- Proof of attendance – We cannot reimburse for classes that were not attended. Proof of attendance is preferred to be on attached *Wildwood Attendance Verification Form*, but we can also accept verification of attended dates on the invoice/receipt, on business letterhead, or from the business email account. Proof of attendance must include the Individual's name.

Coaching/Education for Parent/Spouse/Advocate:

Coaching requirements/guidelines

- IDGS funding is for Parent/Spouse/Advocate to attend/participate in educational opportunities (not covered by other public programs) that assist participants and those close to them to achieve goals established in the individual's service plan.
- Self-directing individuals are over age 18.
- May include registration and conference fees, but does not cover travel or lodging
- Annual cap is \$500.

Documentation Required for Coaching/Education

- A flyer, brochure, or website explaining the training with published rate
- Proof of payment

Clinician – Direct Provision of Therapy:

Clinician – Direct *requirements/guidelines*

There are limited therapies which can be paid for under the Clinician – Direct Provision area of the budget, as follows:

- Hippotherapy
 - Medical treatment for individuals with cerebral palsy or other neurological disorders that permanently affect body movement and muscle condition.
 - Instructor must be a NYS licensed Occupational Therapist (OT), Speech Therapist, or Physical Therapist (PT). An Assisting (OTA or PTA) providing the service must be working under an OT or PT.
- Therapeutic Riding
 - Equine-assisted activities that address and contribute positively to the cognitive, emotional, and social wellbeing of individuals with special needs.
 - Instructors must be PATH certified and up-to-date on annual recertifications.
 - Horseback riding may be covered under IDGS Community Classes rather than Clinician if all criteria for Classes are met.
- Aquatic Therapy
 - Therapist must be a licensed professional under the NYSED Office of Professions
- Art Therapy
 - Therapist must be a licensed professional under the NYSED Office of Professions
- Massage Therapy
 - Therapist must be a licensed professional under the NYSED Office of Professions
- Music Therapy
 - Therapist must be a licensed professional under the NYSED Office of Professions
 - There must be a specific communication or audiological requirement for the service stated

in the treatment plan and justified by the Individual's medical doctor.

- Play Therapy
 - Therapist must be a licensed professional under the NYSED Office of Professions

Excluded therapies include: Speech, Physical Therapy, and Occupational Therapy. These types of therapies can be accessed through the school district for school-aged children, Medicaid, or most other insurance carriers.

The Clinician must be licensed and up-to-date on their licensing requirements through the Office of Professions in New York State. Hourly rate cannot exceed the 90th percentile hourly wage for the consultant's professional discipline, as published by the Bureau of Labor Statistics for NYS.

The following requirements must be met for all services paid for by this area of the budget:

- There must be a prescription written and signed off on by the participant's **medical** doctor with the goal of treating a specific medical diagnosis and supporting a specific valued outcome, renewed every 6 months.
- The licensed and approved therapist needs to:
 - Conduct an initial assessment
 - Write a summarization of the findings from the assessment
 - Write up a treatment plan (must be signed off on by the participant's medical doctor that signed off on the prescription). The treatment plan shall acknowledge the participant's personal goals and therapeutic activities, along with frequency and duration.
 - The treatment plan must also support a specific valued outcome in the Individual's Life Plan.
 - Ongoing services must be supported by the treatment plan
 - Write up progress reports reviewed by the medical doctor for approval of continued service at least semi-annually. Physicians must sign off on the treatment plan and renew prescription if warranted every 6 months.

Documentation Required for Clinician – Direct Provision Reimbursement

- PRIOR TO SERVICE DELIVERY All above requirements must be met and on file with FI • Invoice detailing dates of service with brief service summary from provider
- Proof of payment, unless billing Wildwood directly.

Health Clubs and Organizational Memberships:

Health Clubs and Memberships requirements/guidelines

- Funding for a gym, health club, or other community membership organization for reasons of health and fitness or community integration.
- Membership must be for the individual only and in their name (*please note, the individual's portion of a family membership may be reimbursable under OTPS*). The membership must be the basic membership with no add-ons. If the membership allows for any additional people to accompany the individual at no charge, the membership would be considered a family membership and would need to go under OTPS.
- The club/organization must offer open enrollment to the public and cannot be a private club with closed or invitation-only membership.
- Have a verifiable published rate that is publicly available
- Annual memberships are reimbursable, season passes or individual tickets are not • Shopping clubs

are not reimbursable (i.e. Sam's Club, Costco, BJ's)

- This category is capped at \$1500 per budget year
- Membership fees/dues can be reimbursed, activity fees/expenses cannot be (i.e. ski club membership can be reimbursed, life tickets and equipment rental cannot be; sports league fees are reimbursable, equipment or uniforms are not).

Documentation Required for Health Clubs and Memberships Reimbursement

- Published rate that is available to the public
- Proof of payment on an itemized receipt with the business name, individual name, and date of purchase.
- If you have purchased a membership that is more than monthly, we will divide the cost by the number of months and reimburse the monthly portion as we cannot reimburse for a service that has yet to occur (ex: If you pay \$120 for an annual membership to a museum, we will reimburse \$10/month for 12 months).

Household-Related Items and Services:

Household-Related Items and Services Requirements

- May cover appliances or other household items that assist a person to live more independently, if they cannot be funded by another program (i.e. a microwave or crock pot for someone who wants to learn to cook but is not able to safely use the stove/oven). *If the individual lives in the family home, the cost of the appliance will be divided by the number of people living in the home.*
- For individuals who live independently (i.e. not with caregivers), some household services may be covered such as cleaning, minor maintenance, snow removal, lawn mowing if these services are not provided by the individual's landlord and the individual is unable to do them on their own.
- Must be related to a valued outcome in the Life Plan and must be specifically justified in Section 1 of the Life Plan with details on what the funds will be used for.
- This category is capped at \$1500 per budget year

Documentation required for Household-Related Items and Services reimbursement

- Itemized receipt for any items or services purchased
- Published rate for any services delivered

Paid Neighbor

Paid Neighbor requirements/guidelines

- Stipend paid to neighbor to be "on-call" to assist a person who lives independently.
- The Paid Neighbor must also be hired and trained as a Community Habilitation staff. If they have to respond in-person, they will clock in under Community Habilitation and be paid the budgeted hourly rate for this service and complete shift documentation.
- Must sign a Paid Neighbor Agreement outlining their responsibilities, monthly stipend, prorated daily amount for any days they are unavailable, and other pertinent information.
- Cannot be a family member of the individual
- Must live within 30 minutes of the individual
- Must meet all OPWDD background check requirements and keep up on all required training for Community Habilitation staff.
- Monthly cap is \$800, this should reflect the amount of work that may be expected of the Paid Neighbor.

Documentation Required for Paid Neighbor

- Monthly Paid Neighbor invoice must be submitted to the FI by the Paid Neighbor. Invoice will be signed by the Individual and the Paid Neighbor, list any dates the Paid Neighbor was unavailable that month, and list the total amount of monthly stipend being paid for that month. The monthly documentation may not be signed prior to the last day of the month, and should be submitted within the following month.
- The Paid Neighbor must have a W-9 on file with the FI, as the Paid Neighbor payment is not taxed. The FI will distribute a 1099 tax form to the Paid Neighbor after the end of the year.

Transition Programs for Individuals with Intellectual/Developmental Disabilities:

Transition Program requirements/guidelines

- Must be non-credit bearing for individuals with I/DD who have completed their educational program (i.e. graduated or “aged out” of high school)
- The coursework must address the valued outcomes in the Life Plan, skill building, and employment outcomes. May also include training on personal care skills and social skills, as they relate to vocational outcomes for the person.
- Can be provided on college campuses, or non-site based, but cannot occur in a location that is certified by OPWDD
- Cannot be otherwise funded by ACCESS-VR, IDEA, or any other funding sources.
- Cannot exceed a 2-year timeframe
- Room and board costs are not included in this funding stream
- Per class limit for tuition is \$350; if tuition is monthly rather than per class, it cannot exceed \$800/month.

Documentation Required for Transition Program Reimbursement

- Published rate and description of the Transition Program
- Invoice from the Transitions Program and proof of payment if the Individual is being reimbursed (the Transitions Program may choose to bill the FI directly)
- Proof of attendance to confirm participation in the Transition Program.

Transportation:

Transportation requirements/guidelines

- Service-related mileage reimbursement. This means:
 - Reimbursement for Self-Hired Staff’s transportation costs incurred while working with the Individual on service-related activities, either in Staff’s personal vehicle or public transportation.
 - Reimbursement for the Participant, friend, or family member to and from activities paid for through the IDGS area of the budget (i.e. Camp, Classes, Memberships, Transition Programs) either in their personal vehicle or via public transportation.
- The mileage reimbursement for Participant/friend/family is based on the federal mileage reimbursement rate.
- The mileage reimbursement rate for Staff is determined by the agency.
- Mileage to and from medical appointments is not reimbursable as medical transportation is available through Medicaid.
- Cannot be used for transportation to and from school, day programs, or other services that include transportation in their cost.

Documentation required for Transportation reimbursement

- For Staff, it must be related to a goal worked on that day, and the shift documentation must specifically state where they went and how it pertained to the goal.
- For the Participant, it must be a service that has been paid for under IDGS. If the service has not yet been submitted for reimbursement, the mileage cannot be reimbursed until it has.
- Specific start and end location addresses must be listed in the reimbursement note with exact miles between all locations visited.
- For Uber, Lyft, taxi or any other ride sharing service a payment receipt is needed and the expense entry must list the purpose of the trip.
- For bus transportation a trip record is needed. Please note that we cannot reimburse bus passes in full, we must reimburse per trip. CDTA will allow you to print a trip record from the website detailing all trips and we will reimburse for the number of trips in a time period multiplied by the per trip rate. This record must list start and end locations.

Other Than Personal Services (OTPS)

OTPS is a category that is fully NYS funded. OTPS caps at \$3000 annually, in total. There are 4 criteria for OTPS funding, all of which must be met:

1. Be related to a valued out come in the person's Life Plan
2. Increase the person's independence and/or health and safety
3. Not be an OTPS excluded item (see below)
4. Not be funded through any other source. All other possible resources must be pursued and exhausted prior to utilizing OTPS funds.

OTPS Excluded Items:

- Medical visit copays
- Any expense related to hospitalization or nursing home stays
- Any illegal item or activity
- Cable television
- Common household supplies (cleaning products, paper towels, wipes, etc.)
- Treatments that are experimental in nature
- Home repairs, as they should be covered under the lease or are the responsibility of the home owner
- A Self-Direction Participant's activity fees or related supplies for an activity or community class
- Rental cars
- Vehicle purchases or payments toward a purchased vehicle
- Legal fees
- Housing costs in excess of housing subsidies

Please note – In general, phone, internet, clothing, utilities, and board stipend (food subsidy) expenses are not reimbursable for children under 18 where parents are responsible for these costs.

Phone Service:

This may include a cell phone or a landline. If the individual lives with others, only their portion of a landline bill may be reimbursed (for example, if there are 3 people living in the home, the reimbursed portion would be 1/3 of the amount of the bill).

For cell phones, only the cost of the plan may be reimbursed, devices cannot be reimbursed, nor can protection plans. If there are phone installment payments, protection plan charges, or other add-ons included in the bill, this amount will be excluded from reimbursement.

If the individual is on a family plan, the bill must list the separate lines with the individual's name listed for their number and only their phone line may be reimbursed. *If the carrier will not add the individual's name, their phone number must be listed in their Life Plan for verification purposes.*

Services for other devices, such as tablets or smartwatches, are not reimbursable as Phone Services.

Please note that Assurance Wireless provides a free smartphone and service with unlimited data to individuals who qualify for SSI and are over the age of 18; you can apply or check for eligibility online.

Documentation required for Phone Service reimbursement

- Itemized phone bill (all pages) with the individual's name on it. If the individual's name is not on the bill, their number must be listed and the Life Plan must clearly state the individual's phone number.
- Proof of payment - The 60-day window will start at the *due date* of the bill.

Internet:

If the individual lives with others, only their portion of an internet bill may be reimbursed (for example, if there are 3 people living in the home, the reimbursed portion would be 1/3 of the amount of the bill).

If there is a Wi-Fi router rental on the bill, this cannot be reimbursed and will be omitted from the total reimbursed amount. It is usually listed on the bill as "Wi-Fi service".

Documentation required for Phone Service reimbursement

- Internet bill (all pages) with the individual's name on it. If the individual's name is not on the bill due to it being in someone else's name, the address must match the individual's address.
- Proof of payment - The 60-day window will start at the *due date* of the bill.

Software related to the person's disability:

Any software program that a person utilizes to maximize their health, safety, or independence based on their disability needs. This does not include devices, which there may be grant funding available for.

Documentation required for Software reimbursement:

- Description of software
- Justification in Life Plan for specific software
- Proof of payment

Staff Activity Fees:

Covers costs incurred by staff while working with the individual on service-based activities. This may cover meals, admission, or fees for activities, but must be related to a goal and reflected specifically in

the Staff's shift documentation for that day. *Staff will enter this reimbursement themselves, the Participant should review and approve all staff reimbursement as it is entered.*

If the Participant pays for an event for Staff they may enter the reimbursement themselves as the person to be reimbursed, only for Staff's portion and Staff must ensure the activity is reflected in their shift documentation.

The Self-Direction Participant's portion of any activity fees/meals is not reimbursable.

Documentation required for Staff Activity Fee reimbursement

- Itemized receipt
 - Credit card slips cannot be accepted on their own, they must be accompanied by an itemized receipt that lists what was purchased. If the bill is for multiple people, staff must indicate which items are theirs.
 - Staff must be mindful of how much is being purchased for meals and limit purchases to one item + drink, without add-ons or upgrades. If there are add-ons or included appetizers and/or desserts, Wildwood may only reimburse partially.
 - Tips can be reimbursed up to 20%. If the tip is over 20% the reimbursement will be adjusted to reflect a 20% tip.
- Shift documentation must reflect the specific activities that are being reimbursed and they must be goal-related.

Staff Advertising/Recruitment Costs:

This is for any costs spend advertising to find staff. This may include memberships for Care.com or Indeed, individual costs to post an ad, etc.

If an annual membership to a recruitment site is purchased, the cost will be reimbursed monthly at 1/12 of the cost until the full amount has been reimbursed.

Documentation required for Staff Advertising reimbursement

- Invoice for services
- Proof of payment

Staff Training:

This is for Staff to participate in any training that is related to the person's disability and is not a required OPWDD training. This may also be used for Staff planning or training meetings which may be deemed appropriate by the Participant.

This may cover the costs of a course/seminar admission fees, materials, mileage, etc. for the Self-Hired employee who is attending the training.

Documentation required for Staff Training:

- Detailed description of the training
- Invoice for services
- Proof of payment
- If this is for a planning or training meeting, meeting notes will be required in addition to the above documentation requirements.

Personal Use Transportation:

These transportation funds are to reimburse costs for travel that reflects a valued outcome in the Life Plan, and is to/from a service not paid for through IDGS. For children under 18, it is generally expected that caregivers are responsible for providing transportation. *Wildwood will not reimburse Personal Use Transportation for anyone under the age of 15 unless it is for use of a family membership paid for under OTPS, or is pre-approved through the Reimbursement Committee as an extenuating circumstance.*

- Mileage to and from medical appointments is not reimbursable as medical transportation is available through Medicaid.

- Cannot be used for transportation to and from school, day programs, or other services that include transportation in their cost.
- Mileage reimbursement is for the Participant’s portion of mileage only. For trips, or activities where multiple family members/friends are traveling together, the total mileage amount will be divided by the number of adults in the vehicle. Mileage for family trips/vacations for anyone under the age of 18 will not be reimbursed, as this is the responsibility of the caregivers.
- For reimbursement of mileage to/from family memberships, mileage will be divided by the number of people attending who are part of the membership.

Documentation required for Personal Use Transportation reimbursement

- Specific start and end location addresses must be listed in the reimbursement note with exact miles between all locations visited.
- Purpose of trip must be listed and must reflect a Valued Outcome in the Life Plan.
- For Uber, Lyft, taxi or any other ride sharing service a payment receipt is needed
- For bus transportation a trip record is needed. Please note that we cannot reimburse bus passes in full, we must reimburse per trip. CDTA will allow you to print a trip record from the website detailing all trips and we will reimburse for the number of trips in a time period multiplied by the per trip rate.

Clothing:

Clothing is capped at \$250 per budget year. Reimbursement for clothing of people under the age of 18 requires specific justification in the Life Plan and approval from OPWDD.

Documentation required for Clothing reimbursement

- Itemized receipt showing store, date, what was purchased, and total

Board Stipend (food subsidy):

In order to access the Board Stipend the individual must:

- Be 18 or older
- Have applied for SNAP benefits and been either denied or approved but not in an amount that is sufficient for their monthly needs

Items excluded from the Board Stipend

- Bottle deposits
- Beer, wine, liquor, cigarettes, or tobacco
- Vitamins, medicines, and supplements.
- Live animals (except shellfish, fish removed from water, and animals slaughtered prior to pick-up from the store).
- Fast food (i.e. drive-thru) or restaurant food
- Any nonfood items such as:
 - Pet foods
 - Cleaning supplies, paper products, and other household supplies.
 - Hygiene items, cosmetics
- Bag fees
- Any items that have been paid for by SNAP are not reimbursable

Documentation required for Board Stipend reimbursement:

- Clearly legible itemized receipt that shows store, date of purchase, cost of items, total cost, and payment method
- Proof of SNAP approval or denial on file with the FI. Must apply annually.
- Any non-reimbursable items will be excluded

Utilities

If the individual lives with others, only their portion of the utility bill may be reimbursed (for example, if there are 3 people living in the home, the reimbursed portion would be 1/3 of the amount of the bill).

Wildwood will not reimburse any more than the amount that is actually paid. If there is a budget plan amount, Wildwood will not reimburse more than the budget plan amount, even if payment exceeds this amount as past-due charges and late fees cannot be reimbursed. Similarly, if there is not a budget plan, Wildwood will not reimburse more than the “total current charges” per month.

Documentation required for Utility reimbursement

- Utility bill (all pages). If it is not in the individual’s name, then the address must match.
- Proof of payment - The 60-day window will start at the due date of the bill.
- Proof of HEAP approval or denial must be on file with the FI. Must apply annually.

Other Goods and Services that Increase Independence/Related to Health and Safety

This area of the budget covers items which:

- Are not reimbursable under any other area of the budget
- Are not exclusionary items
- Are directly related to the individual’s health, safety, and/or independence and cannot be paid for under any other funding stream including health insurance. Some examples may include sensory items that are recommended by PT/OT/Speech, adaptive equipment ordered by a physician that cannot be covered by insurance, and family memberships of which we would reimburse only the Individual’s portion.

Documentation required for Other Goods and Services reimbursement

This will be dependent on the situation, but generally speaking:

- Proof of payment
- Description of item or service
- Justification in the Life Plan
- Denials from insurance, scholarships, or grant foundations

Family Reimbursed Respite (FRR)

- Can be used to pay anyone over the age of 18 who does not live in the Individual’s home for providing Respite services. They do not need to be cleared through Wildwood.
- This is a reimbursement, which means we cannot pay the person providing the service directly.
- Cannot be used during the same hours that a Self-Hired Staff is working.
- We need to know the following for reimbursement:
 - Date worked

- Hours worked
- Hourly rate paid – Must be at least minimum wage (\$15.50/hour), and no more than the maximum reimbursement rate from OPWDD (\$29.86). These rates are current as of the last update of this guide, January 2025.
- If the Participant is school-aged, FRR cannot be used during hours when they should be in school, even if they are home sick. It may be used on documented snow days, or other days that school is closed. If they are homeschooled or utilize remote learning, please provide your Self-Direction Coordinator with the homeschool or remote learning schedule.