## Choice Of Service (COS) Requests



**Did you know?** You can now find **pending requests** to complete the DS2200 form to enroll a client into Medicaid Waiver via **three** different methods in SANDIS:

ervice loord.	UCI#	First Name	Last Name	Report Type	Due Date	
CA	8619024			RPTCOS	05/01/2024	
CA	8194850			RPTANN	05/06/2024	
CA	8618353			RPTANN	05/09/2024	
CA	8262943			RPTANN	12/17/2023	
CA	8248189			RPTANN	05/05/2024	
CA	8621432			RPTANN	05/02/2024	
CA	8228851			RPTANN	12/20/2023	

View pending client requests in the Reports/Contacts tab on your Welcome Screen. Entries will be labeled as **RPTCOS**.

<pre>/ COS entries when you</pre>	CDER Over Du	e Reports				
ort your Reports and						
, ,	Reports/Cont	acts Due				
acts in Excel by going under			- 1			
ting/Tracking, then Report	SIRs Requirin	a Follow Up	$\sim 1$			
		grouor op	N			
king, and selecting						
	7	Consumer Birthdate		Mw Resource Resource Type	Due_date Comp_date Cont_t	
orts/Contacts due.		AVERY 6/23/2006 CARLOS 6/11/2007	A I A T	N PARENTS/ MONTE VI CHOICE OF SERVICE (DS2200 N PARENTS/ MOUNT M CHOICE OF SERVICE (DS2200		
		DANIEL 6/25/2004		Y PARENTS/ GROSSMC ANNUAL REVIEW	6/25/2024	
			A T	N PARENTS/MONTE VI ANNUAL REVIEW	6/23/2024	
		GENEVE 6/18/2007	A T	Y PARENTS/ EL CAPITA IPP	6/18/2024	
Printing/Tracking 🗾		ELIZABETF 6/12/2008	A B	N PARENTS/ HELIX CHA ANNUAL REVIEW	6/12/2024	
Clinet From			A T	N PARENTS/ MOUNT M IPP	6/11/2024	
Client Forms			A T A T	N PARENTS/GUARDIAN ANNUAL REVIEW	6/8/2024	
T19s and SIRs by Date		NOAH 5/31/2009 IRYANNA 5/19/2004		N ANNUAL REVIEW	5/28/2024 5/19/2024	
		NELEBEL 5/12/2006		N PARENTS/ MOUNT MANNUAL REVIEW	5/12/2024	
Caseload Summaries			A T	N PARENTS/ LA PRESA ANNUAL REVIEW	5/9/2024	
Chatiatian Communica			A T	N PARENTS/ GROSSMC ANNUAL REVIEW	5/7/2024	
Statistical Summaries		GERARDO 5/6/2009	A T	N PARENTS/VISTA LA I ANNUAL REVIEW	5/6/2024	
Report Tracking		12201111 0/0/2000	A B	N PARENTS/GUARDIAN ANNUAL REVIEW	5/5/2024	
		SAMANTH 5/5/2004	A T	N PARENTS/MOUNT MANNUAL REVIEW	5/5/2024	
Service Summaries		NAJALI 5/4/2008 DASHAWI 4/26/2009	A T	Y PARENTS/ MONTE VI ANNUAL REVIEW N PARENTS/GUARDIAN IPP	5/4/2024 4/26/2024	
Client # TESTL JOEY NADO Reviewed by Contact Date 05/14/2024 # Recorded by A Units Contact Type DoCUMENTATION Template T19029 COS REQUEST CHOICE OF SERVICES	on	$\leftarrow$	N	T19 By Others lew 7		
This individual is Medicaid Waiver eligible. Choice of Services (DS2200) form req signature on COS indicating date and choice of living arrangement.		You can find	a <b>T</b>	<b>19</b> note from Federal		
Choice of Services due within 30 days, please see client's Reports & Contacts Hi [DS2200] form completion due date. COS is available via Seamless Docs.	Programs in the client's record. Use					
Please contact Federal Programs with any questions.		the <b>T19 by Others</b> option in your				
Talking points regarding the HCBS-DD Waiver: "Signing the choice of Services form highlights individual choice and the ability to	welcome screen (under the Attention					
people we serve have a choice of where they live and receive services, this form "Participating in the Medicaid Waiver brings federal funds to SDRC. This increase	tab) to view notes written by other					
services budget!		•		•		
*It benefits California and Regional Center to get more federal money	i Cenenis Canonia and Regional Cenerio ger nore redera norrey.					
<sup>1</sup> It benefits California and Regional Center to get more federal money.		staff in your	cus			