



Department of Developmental Disabilities  
Division of Policy and Strategic Direction

Mike DeWine, Governor  
Jeff Davis, Director

1. Is the Individual in a Competitive Job?
  - a. Name of employer
  - b. Average wages per hour
  - c. Average hours per week
  - d. How does the person typically get to this job? (Walks/Rides bike, Public Transportation (bus/train), Agency/Independent Provider provides transportation, Driven by family/friend/co-worker), Cab/Taxi, Drives self, Other (must indicate what other is)
  - e. Eligible for fringe benefits?
  - f. Receiving fringe benefits?
    - i. If yes, choose one or more fringe benefits (Employee Discounts, Paid Time Off, Employer Subsidized Health Insurance, Retirement Benefits)
  - g. Select an Occupation:
    - i. Management
    - ii. Business and Financial Operations
    - iii. Computer and Mathematical
    - iv. Architecture and Engineering
    - v. Life, Physical, and Social Science
    - vi. Legal
    - vii. Education Instruction and Library
    - viii. Arts, Design, Entertainment, Sports, and Media
    - ix. Healthcare Practitioners and Technical
    - x. Healthcare Support
    - xi. Protective Service
    - xii. Food Preparation and Servicing Related
    - xiii. Building and Grounds Cleaning and Maintenance
    - xiv. Personal Care and Service
    - xv. Sales and Related
    - xvi. Office and Administrative Support
    - xvii. Farming, Fishing, and Forestry
    - xviii. Construction and Extraction
    - xix. Installation, Maintenance, and Repair
    - xx. Production
    - xxi. Transportation and Material Moving
    - xxii. Military Specific
2. Are you supporting this Individual in a Group Integrated Job?
  - a. Select type of Group Integrated Job (Enclave, Mobile Work Crew, or Provider Owned Business)
  - b. Name of Employer
  - c. Is the Employer a Medicaid Provider? (Yes or No)

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- d. Average wages per hour
- e. Average hours per week
- f. Eligible for fringe benefits?
- g. Receiving fringe benefits?
  - i. If yes, choose one or more fringe benefits (Employee Discounts, Paid Time Off, Employer Subsidized Health Insurance, Retirement Benefits)
3. Is the Individual in Facility-Based Work?
  - a. Name of Employer
  - b. Average wages per hour
  - c. Average hours per week
4. Is the Individual in Self-Employment?
  - a. Average wages per hour
  - b. Average hours per week
  - c. Select an Occupation:
    - i. Management
    - ii. Business and Financial Operations
    - iii. Computer and Mathematical
    - iv. Architecture and Engineering
    - v. Life, Physical, and Social Science
    - vi. Legal
    - vii. Education Instruction and Library
    - viii. Arts, Design, Entertainment, Sports, and Media
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    - xx. Production
    - xxi. Transportation and Material Moving
    - xxii. Military Specific
5. Are you providing the Individual Facility-Based Non-Work Services?
  - a. Average hours per week
6. Are you providing the Individual Community-Based Non-Work Services?
  - a. Average hours per week