



MENTAL RETARDATION BULLETIN
COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF PUBLIC WELFARE

DATE OF ISSUE
January 3, 2006

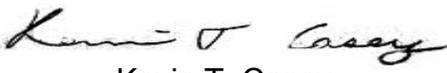
EFFECTIVE DATE
January 3, 2006

NUMBER
00-06-01

SUBJECT:

Home & Community Based Service
Eligibility/Ineligibility/Change Form

BY:


Kevin T. Casey
Deputy Secretary for Mental Retardation

SCOPE:

County MH/MR Program Administrators

PURPOSE:

The purpose of this bulletin is to disseminate and explain the use of the "*Home & Community Based Services (HCBS) Eligibility/Ineligibility/Change Form*" (PA 1768). The PA 1768 is a new form that will be used by HCBS agencies statewide to inform the County Assistance Offices (CAOs) of applicants' and recipients' eligibility, ineligibility or other changes for HCBS programs.

BACKGROUND:

The PA 1768 form was developed to standardize the process of exchanging information between agencies administering HCBS programs and CAOs. All county programs and administrative entities must begin to use the PA 1768 effective January 3, 2006.

DISCUSSION:

To qualify for HCBS programs, individuals must be evaluated to determine whether they meet medical eligibility criteria and which HCBS program meets those needs. The PA 1768 is the only form that CAOs will receive to document medical eligibility for HCBS programs.

The PA 1768 form does not eliminate the requirement for program offices to document program eligibility for their HCBS programs on their customary forms, but it eliminates the need for program offices to submit multiple forms to CAOs. The Office of Mental Retardation will continue to use the "*Waiver Eligibility Application Cover Sheet*" (MR 54), the "*Financial Application Release Form*" (MR 55), the "*Eligibility Determination Form*" (MR 250) and the "*Annual Recertification of Need for ICF/MR Level of Care*

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO: The Appropriate Regional Program Office

Form" (MR 251). The PA 1768 will be sent to CAOs for the processing of HCBS eligibility applications or other changes.

The County MH/MR program has 45 days to complete the assessment and forward it to the CAO. The CAO is responsible for determining an applicant's financial eligibility and must provide the individual with an eligibility notice or a denial notice if found ineligible for an HCBS Program or Medicaid. The County MH/MR Program will notify the individual or family of services that will be received under the HCBS program and the date that those services will begin.

If an individual transfers to another waiver program, or if waiver program enrollment is being terminated, the County MH/MR program must issue the PA 1768 to the CAO within seven (7) days of the decision.

Attachments: "*HCBS Eligibility/Ineligibility/Change Form*" (PA 1768)
"*Instructions for Completion of the PA 1768*"