

DEVELOPMENTAL DISABILITIES ADMINISTRATION (DDA)
Request For ICF / IID or SONF Admission

CLIENT NAME	DATE OF REQUEST
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You have requested to receive services in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) or a State Operated Nursing Facility (SONF) at a Residential Habilitation Center (RHC) operated by the Department of Social and Health Services, Developmental Disabilities Administration (DDA), or at a private ICF/IID in the community. Please read and sign this request form.

What happens now?

A team of professionals appointed by the Assistant Secretary will review your request, including current assessment information, and determine if you meet federal criteria for ICF/IID or SONF admission.

- After review, the team provides its recommendation to the Assistant Secretary.
- The Assistant Secretary makes the final decision regarding admission and determines the actual placement location.
- You will receive written notification of the decision within 90 days of the date of receipt of this signed request.

What are the eligibility criteria for admission to an ICF/IID?

You must be eligible to receive Medicaid services and also meet the following criteria:

- Federal regulations state that “clients admitted to the facility must be in need of and receiving active treatment services” (42 CFR 483.440(b) (1)) and “Admission decisions must be based on a preliminary evaluation of the client that is conducted or updated by the facility or by outside sources” (42 CFR 483.440(b) (2)).
- **What is active treatment?**
Active treatment is continuous and “includes aggressive, consistent implementation of a program of specialized and generic training, treatment, health services and related services. Active treatment does not include services to maintain generally independent clients who are able to function with little supervision or in the absence of a continuous treatment program” (42 CFR 483.440(a)).

What are the eligibility criteria for admission to a nursing facility (NF)?

- Federal regulations state that the “determinations of whether an individual requires the level of services provided by a NF and whether specialized services are needed...must be made by the State intellectual disability or developmental disabilities authority” (42 CFR 483.106(d) (2)).
- Except in the case of an exempted hospital discharge, designated PASRR staff in the referring region must make the PASRR determinations prior to NF admission.
- An exempted hospital discharge applies to an individual “who is admitted to any NF directly from a hospital after receiving acute inpatient care at the hospital; who requires NF services for the condition for which he or she received care in the hospital; and whose attending physician has certified before admission to the facility that the individual is likely to require less than 30 days nursing facility services” (42 CFR 483.106(b) (2) (i)).

Is my admission to the ICF/IID permanent?

CFR ICF/IID Interpretive Guideline W199 states: “No admission should be regarded as permanent.”

Can I be discharged from the ICF/IID?

CFR ICF/IID Interpretive Guideline W201 states: “Transfer or discharge occurs only if one of the following reasons exists:

- The facility cannot meet the individual’s needs;
- The individual no longer requires active treatment program in an ICF/IID setting;
- The individual chooses to reside elsewhere; or
- When a determination is made that another level of service or living would be more beneficial and in the best interest of the client.”

Who decides what services I will receive in the ICF/IID or SONF?

You, your legal representative and/or family will be involved in developing your habilitation plan. These services are called “habilitative services” and may include personal care assistance and training, employment/day program services, counseling, nursing, and other therapies.

If you have been referred to the SONF, the PASRR Assessor will work with you, your legal representative and/or family to determine the most appropriate setting to meet your needs. If you are admitted to the SONF, the PASRR Assessor will determine if you need “specialized services”. Specialized services are in addition to nursing facility care and are needed because of your intellectual disability or related condition.

What are my legal rights as a resident of the ICF/IID?

Your admission to the ICF/IID or SONF is voluntary and you retain all of the legal rights you had in the community, including the right to appeal any action of the department that denies, reduces, or terminates your service. If you wish to leave the facility after admission, the facility staff will assist you to leave the facility and identify available services in the community.

What happens next if I am approved for ICF/IID or SONF placement?

If you are determined eligible for admission, your DDA Case Resource Manager will notify you and assist you in compiling information needed for admission. Your PASRR Assessor will notify you of the determinations made as part of the PASRR process. The DDA Assistant Secretary will determine the exact placement location.

What are my appeal rights if I am denied ICF/IID or SONF placement or PASRR specialized services?

You have 90 days from receipt of the Planned Action Notice to file a request for an administrative hearing to appeal this decision. You will receive a Right to Appeal form with the notice.

I understand this information and choose to receive services in an ICF/IID or SONF instead of in the community. I further understand that all Developmental Disabilities Administration services are voluntary, including placement in an RHC ICF/IID or SONF, and I have the right to decline or terminate services at any time. I have been informed that discharge planning is required on an ongoing basis for all residents of RHC ICF/IIDs and must be reviewed at least annually. I agree to participate actively in required discharge planning.

SIGNATURE OF ADULT CLIENT	DATE
The client's signature is required even if there is a legal representative or other decision maker.	
SIGNATURE OF OTHER DECISION MAKER	DATE
LEGAL RELATIONSHIP OF OTHER DECISION MAKER	DATE