17.48

INTERMEDIATE CARE FACILITY/MENTALLY RETARDED (ICF/MR)

17.48 CASE MAINTENANCE

A. COUNTY TRANSFER

When an ICF/MR client moves from one facility to another, the Worker must change the address and vendor number in the data system. When the new facility is in another county, the cas record must be transferred as well. See Section 17.3,A.

B. CHANGES IN INCOME

When the client's income increases to more than 300% of the SSI payment level, he is ineligible and must be reevaluated for all other Medicaid coverage groups. Appropriate client notification, including advance notice requirements, and dat system action apply.

C. CLOSURE/DENIALS

When an applicant who was presumptively approved for 30 days is later denied, the Worker must notify the LTC/AC Unit usin form ES-NH-3.

9/95