

**DIVISION OF DEVELOPMENTAL DISABILITIES  
REQUEST FOR ICF/MR ADMISSION**

Re: \_\_\_\_\_

You have requested to receive services in an Intermediate Care Facility for the Mentally Retarded (ICF/MR) at a Residential Habilitation Center (RHC) operated by the Division of Developmental Disabilities (DDD). Please read and sign this request form.

**What happens now?**

A team of professionals appointed by the Division Director will review your request, including current assessment information, and determine if you meet federal criteria for ICF/MR admission.

- The team provides its recommendation to the Director.
- The Director makes the decision regarding admission.
- 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/MR?**

You must be eligible to receive Medicaid services and also meet the following criteria for an ICF/MR:

- 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” [42CFR 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)].

**Is my admission to the ICF/MR permanent?**

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

**Can I be discharged from the ICF/MR?**

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

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- The facility cannot meet the individual’s needs;
- The individual no longer requires active treatment program in an ICF/MR 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/MR?**

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

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

Your admission to the ICF/MR 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/MR placement?**

If you are determined eligible for admission, your Case Resource Manager will provide you additional information about RHC services and assist you in compiling needed information for admission.

**What are my appeal rights if I am denied ICF/MR placement?**

You have 28-days from receipt of the denial notification letter to file a request for a Fair Hearing to appeal this decision. You will receive a Right to Appeal form with your denial letter.

**I understand this information and choose to receive services in an RHC ICF/MR instead of in the community.**

\_\_\_\_\_  
Signature of adult client

\_\_\_\_\_  
Date

*This 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