Re-Enrollment Checklist

Re-Enrollment applications may be used if a participant leaves the assisted living setting due to hospitalization, transfer to SNF, or other medically related reason. The CCA will continue to advocate for the participant for up to 30 days for the purpose of coordinating the participant's return to the assisted living setting. If the participant is unable to return after 30 days, the participant will be disenrolled from the ALW. The participant retains the unduplicated slot for an additional 30 days for a total of 60 days to facilitate subsequent return to the ALW. After 60 days, the slot is available to another participant.

| The following | documents are required for an application to be considered complete: |
|---------------|---|
| | Completed Checklist |
| | Medi-Cal Eligibility Printout |
| | SNF Face Sheet (if applicable) |
| | Completed and updated Assessment Tool o Signed by a Registered Nurse |
| | Completed and updated Individual Service Plan (ISP) o Can be completed by a Registered Nurse or Social Worker |
| | Durable Power of Attorney (if change occurred) o Specific to health care decisions o Signed by the Applicant and Notarized |
| | Amenity Form (if new facility or other change occurred) |
| | Patient's Rights Form o Signed by the Applicant/Legal Representative o Signed by a Registered Nurse or Social Worker |

Integrated Systems of Care Division 1501 Capitol Avenue, MS 4502 P.O. Box 997437 Sacramento, CA 95899-7437 (916) 552-9105 Internet Address: www.dhcs.ca.gov