

CHOICES FOR CARE Home-Based, AFC & ERC Change Form

This form is completed by the Choices for Care case manager/consultant AFC and ERC provider to report changes for active or Medicaid pending Home-Based, AFC or ERC Choices for Care participants.

Individual Name: _____

SSN: _____ Date of Birth: _____

Address (only if changed): _____

New Phone Number: _____

Current Setting: Traditional Home-Based Enhanced Residential Care Adult Family Care Home

A. Nursing Facility (or Hospital Swing Bed) Admission

Effective date of admission: _____

Permanent **or** Temporary - Estimated length of stay: _____

Nursing Facility (or Hospital Swing Bed): _____

B. Termination /Withdrawal from Choices for Care Program

NOTE: For home-based consumer or surrogate-directed services or cash & counseling (Flexible Choices) services the case manager or consultant must forward a copy to ARIS.

Effective date: _____

Died

Permanent move out of state

*Voluntary Withdrawal – No longer require Choices for Care services

Other: _____

*For voluntary withdrawals, the individual or legal representative must sign below. Individuals who are involuntarily terminated from Choices for Care will receive a written notice with appeal rights.

I agree that I am voluntarily withdrawing from Choices for Care program. I understand that I may reapply at any time.

Individual or Legal Representative Signature

Date

Comments if needed:

Provider Name (print): _____

Agency: _____ Phone number: _____

Signature: _____ Date: _____

***DO NOT SEND THIS FORM TO: Department of Vermont Health Access (DVHA)
PLEASE SEND COPY to LOCAL DAIL LTCCC and DCF ADPC office. Fax 802-241-0514***

Directions

This form is completed by the Choices for Care case manager, consultant for cash & counseling (Flexible Choices), ERC provider or AFC Home provider to report changes for **active or Medicaid pending** participants in the Home-Based, Enhanced Residential Care or AFC Home setting. When completing the Change Report Form, complete all sections that apply.