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|  | | | Aging and Long-Term Support Administration (ALTSA)  Home and Community Services (HCS) New Freedom  **Notice of Exception to Rule Decision  (Goods and Services Only)** | | | |
| **Date (MM/DD/YYYY)**  Name and Address Client ACES ID: | | | | | | |
| **Address** | | | | **Worker's First and Last Name**  **Worker's Office**  **Worker's Telephone (include area code)**  **Worker's Email** | | |
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| The New Freedom (NF) Exception to Rule (ETR) decision has been approved.  The NF ETR is approved for: | | | | | | |
|  | **Goods and Service(s)** | | | | **Amount** | **Enter the begin and end dates** |
|  |  | | | | **$** | Start date:    End date: |
|  |  | | | | **$** |
|  |  | | | | **$** |
|  |  | | | | **$** |
| The NF ETR has not been initiated or has been denied. The reason for not initiating or denying the ETR:  WAC 388-440-0001(1)(b). Your situation does not differ from the majority.  WAC 388-440-0001(1)(a). Your request contradicts a specific provision of federal law or state statute. If checked, site specific WAC language that supports the denial:  WAC 388-106-1405. Services are not covered under the NF program. | | | | | | |
| You do not have a right to an administrative hearing over this decision.  Per WAC 388-426-0005:   1. If you do not agree with the decision, you have the right to complain in writing to the supervisor of your Care Consultant (CC), who will review and respond in writing within ten (10) days of receipt of the complaint. 2. If you do not agree with the decision of the supervisor, you have the right to complain in writing to the Home and Community Services (HCS) Regional Administrator or Area Agency on Aging (AAA) Director or designee, who will review and respond within ten (10) days of receipt of the complaint. 3. If administrative or judicial review is pending on the same issue, the Department may choose to respond to the complaint by informing you that the matter may be resolved through the administrative or judicial review process. 4. You may always speak with your CC's supervisor or have them review your CC's decision, even if you do not file a formal complaint. | | | | | | |
| **Instructions to Care Consultant (CC)**  Use this form only for initial additional rate Exceptions to Rule (ETR) for New Freedom (NF) goods and services. This form is not for personal care ETRs.   1. Enter the date. 2. Enter the client’s ACES ID number. 3. Enter the client’s mailing information. 4. Enter the worker’s contact information. 5. If the New Freedom (NF) Exception to Rule (ETR) decision has been approved, check the box “The NF ETR is approved for” and list the goods or service that it was approved for along with the amount and date range.    * Enter the approved Goods or Services, and the dollar amount.    * Enter the date range approved (note this may be different than the dates requested).  * If this is for a Waiver Exceed Limit, enter the Care Plan period as the date range.   + Verify the correct dates and amounts in the NF ETR Decision in CARE. * The start date must not be before the HQ NF ETR Committee Decision Date.  1. Select “The NF ETR has not been initiated or has been denied” when a request has been submitted and denied by the field office or HQ NF ETR Committee.    * Or when a request has been made by the client or provider and the CC / SSS (Social Worker) / field office has determined the request does not meet WAC criteria. 2. Send a copy of this document to the client / representative. 3. Submit a copy to Document Management System (i.e., Barcode). | | | | | | |