To: Secretary’s Office  
Martin Kennedy  
Traci Ward  
Carmen Sellens  
Barbara Conant  
Bill McDaniel  
Joyce Smith  
Tina Langley  
Dave Halferty  
Alice Knatt  
Bob Parker  
Brad Ridley  
Heidi Burris  
Greg Reser  
Vera VanBruggen  
Susan Fout

From: Patsy Samson  
Date: 3/1/10

RE: Home and Community-Based Services for the Frail Elderly (HCBS/FE)

Policy Issue: The HCBS/FE Crisis Exception Criteria Checklist form is being updated to reflect KDOA’s current policy on crisis exception criteria for Assistive Technology, Comprehensive Support, Oral Health, and Sleep Cycle Support services and to clarify form completion requirements.

Check Appropriate Process:  

Policy Implementation Through:  
☑ KDOA  ☐ KHPA  ☐ MMIS Fiscal Agent (HP Enterprise Services)

KDOA Contact Person(s): Laura Graham (785-296-7195) and Krista Engel (785-296-0385)

KHPA Contact Person(s): N/A

Related References/Processes:  
Related Policy Number(s): FS 2010-01  
Superseded Policy Number  Section 3.5 Form

K.A.R. Change Required?  
No

If yes: What Reference #(s)  
Date to initiate revision  
Proposed effective date  
No
State Plan Change Required? No
If yes: What section #(s) ___
Submission Date: ___

Transmittal Number (TN): ___
Supersedes Transmittal Number: ___

Waiver Amendment Required? No
Routing Information:
Internal Route Date: N/A
Field Route Date: N/A
KHPA Route Date: N/A
KHPA Approval Date: N/A
Internal Comments Due Date: N/A
Field Comments Due Date: N/A
KHPA Comments Due Date: N/A
KDOA Approval Date: N/A

Training Required?
KDOA Central Office: No
AAA Staff: No
Customer Education: No
KDOA Field Staff: No
Contracted Case Managers: No

Rationale for Change: This form is being revised based on KDOA staff’s experience in reviewing crisis exception requests submitted for approval and minor revisions to KDOA’s crisis exception policy.

Final Policy: This form is effective immediately.

Approved ☒ Disapproved ☐

/s/ ____________
Secretary of Aging

March 1, 2010
Date