

Services

1. Revision Date

M	M	D	D	Y	Y	Y	Y

Social Security Number

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Name

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Service	Provider Code	Date Applied								Date Requested								Date Entered								Fnd Srce	Date Closed								Reason Closed
		M	M	D	D	Y	Y	Y	Y	M	M	D	D	Y	Y	Y	Y	M	M	D	D	Y	Y	Y	Y		M	M	D	D	Y	Y	Y	Y	
2. Case Management																																			
3. Day Services																																			
4. Residential Services																																			
5. Individual/family Support	<ul style="list-style-type: none"> • Supported Home Care • Respite • Night Support 																																		
6. Other Support	Equipment/Home Mod Wellness Monitoring Medical Alert																																		
7. Direct Financial Support																																			

Funding Sources	
HCBS Waiver	1
State Funds Only	2
Discretionary Funds	3
County Mill Levy	4
Certified Match	5
Vocational Rehabilitation	6
Other	7

Reasons Closed			
Decreased	1	Self Removal	9
Discharged	2	Transferred	10
Wrong SS #	4	Terminated	11
Moved	7	Other	12

Previous codes 3, 5, 6 & 8 are no longer valid