

Transfer Process Checklist

Note: The transfer process must begin within three days after the service coordinator (SC) is notified that the individual wants to transfer and be completed (including data entry) within 10 days following the transfer effective date. SCs are not required to complete this form as part of the transfer process. This form is provided as a tool to assist in the transfer process.

Individual Name:		
Medicaid Number:		
CARE ID:		

Action

Action	Date Action Completed
SC receives notification that an individual/legally authorized representative (LAR) desires a transfer.	
SC reviews the legal guardianship information in the HHSC data system to determine who should sign forms (if no guardian is listed, the individual must sign).	
SC contacts the individual/LAR to discuss the option to transfer, timeline for completing the transfer and the selection of a new provider and/or Financial Management Services Agency (FMSA).	
SC meets with the individual/LAR and confirms that the individual/LAR understands that the individual may transfer to the program provider and/or Financial Management Services Agency (FMSA) of their choice.	

Action	Date Action Completed
If no provider and/or FMSA has been selected, the SC supplies a list of available program providers/ FMSAs within the individual/LAR's desired service area.	
SC completes the top portion of Form 3617, Request for Transfer of Waiver Program Services, and obtains a signature and signature date of the individual/LAR.	
SC discusses a proposed transfer effective date with the individual/LAR. * SC continues to facilitate communications until an agreement on the transfer effective date is reached	
SC and individual/LAR agree on a proposed transfer effective date:	

After the individual/LAR has selected a receiving program provider/FMSA:

Action	Date Action Completed
SC discusses the proposed transfer effective date with the receiving program provider/FMSA. *SC continues to facilitate communications until an agreement on the transfer effective date is reached	
Receiving program provider agrees on the proposed transfer effective date or proposes a different effective date. If a new date is proposed, the SC must repeat the discussion/agreement with the individual/LAR.	
Receiving provider's/FMSA's proposed transfer effective date:	
Date receiving provider agreed to a transfer effective date:	
SC discusses the proposed transfer effective date with the transferring program provider/FMSA.	
*Transferring program provider agrees on the proposed transfer effective date or proposes a different effective date. If a new date is proposed, the SC must repeat the discussion/agreement with the individual/LAR and receiving provider.	
Transferring provider's/FMSA's proposed transfer effective date:	
Date transferring provider agreed to a transfer effective date:	

After the transfer effective date has been agreed upon by all parties:

Action	Date Action Completed
SE enters the agreed upon transfer effective date into all appropriate fields of Form 3617 and completes the top section and Column 1 of the transfer worksheet.	
SC sends Form 3617 (with appropriate sections completed) to the transferring provider/FMSA for completion (provider/FMSA has three business days to complete and return to the SC).	
SC receives the completed Form 3617 from the transferring provider/FMSA and ensures that the transferring provider/FMSA has completed, signed, and dated the appropriate field(s) of Form 3617, including the transfer worksheet.	
SC meets with the individual/LAR and receiving program provider/FMSA to review the current individual plan of care (IPC) and to develop a transfer IPC. The transfer IPC must be signed and dated on or before the transfer effective date by the individual/LAR, receiving provider/FMSA and SC.	
SC informs the individual or LAR that HHSC will deny residential support, supervised living, or host home/companion care, if the individual was evicted by a program provider or service provider of host home/companion care on the individual's IPC until the individual pays the delinquent room or board.	
SC obtains necessary information, signature, and signature date on Form 3617 from the receiving program provider/ FMSA.	
SC signs Form 3617.	
Local Intellectual and Developmental Disability Authority (LIDDA) completes data entry within 10 business days after the transfer effective date in the HHSC data system except for an emergency transfer, which must be entered by Program Eligibility and Support (PES).	
LIDDA submits Form 3617 and the transfer IPC to PES for authorization. (Documentation supporting the emergency must be included if requesting an emergency transfer.)	