## JB Pritzker, Governor Theresa A. Eagleson, Director

201 South Grand Avenue East Springfield, Illinois 62763-0002 **Telephone:** (217) 782-1200 **TTY:** (800) 526-5812

The Department allows the provision of in-home shift nursing services that are determined to be medically necessary and appropriate to meet the child's medical needs. 89 III. Admin. Code 140.473(e).

Please refer to the Child's "NOTICE OF DECISION- PRIOR AUTHORIZATION FOR IN-HOME SHIFT NURSING SERVICES" letter provided from the participant's current evaluation. The Notice of Decision Letter outlines the number of nursing hours medically necessary to care for the child being served under the medically Fragile, Technology Dependent (MFTD) Waiver or through the Nursing and Personal Care Services (NPCS) Program. A portion of nursing hours may have previously been utilized and paid for by the Participant's school district, and now may be utilized at home at the cost of Illinois Department of Healthcare and Family Services. The nursing hours- whether provided at home or in the school setting, will continue to follow the total number of hours outlined in the Notice of Decision Letter.

If there has been a significant change in medical status, and an evaluation needs to be completed earlier than the yearly re-determination, a change in status evaluation will need to take place. Care coordinators will initiate this process, if needed.

Signature of Approving Authority