

# Acknowledgement of Services

APPLICANT'S NAME

ACES CLIENT ID NUMBER

Home and Community Based Service programs offer the opportunity for eligible individuals to receive Medicaid services in the community instead of institutional services.

The Home and Community Based Service programs are:

- Community First Choice (CFC)
- COPES Waiver
- Residential Support Waiver (RSW)
- New Freedom Waiver
- Medicaid Alternative Care (MAC)

**I choose to receive services under a Home and Community Based program instead of nursing home care.**

CLIENT'S SIGNATURE

DATE

REPRESENTATIVE'S SIGNATURE	DATE
<input type="checkbox"/> Guardian <input type="checkbox"/> Representative	
SOCIAL WORKER / CASE MANAGER'S SIGNATURE	DATE
AGENCY	
TELEPHONE NUMBER (INCLUDE AREA CODE)	

**ACKNOWLEDGEMENT OF SERVICES  
DSHS 14-225 (REV. 02/2021)**

Below are your rights to a fair hearing:

If you are denied Home and Community Based services, you have the right to request a Fair Hearing. You have 90 days from the date services are denied to request a hearing. You may request a Fair Hearing by writing to your local Home and Community Services Division office, local Area Agency on Aging, or by writing to:

**OFFICE OF ADMINISTRATIVE  
HEARINGS, MAIL STOP: 42489,  
DEPARTMENT OF SOCIAL AND  
HEALTH SERVICES,  
PO BOX 42489,  
OLYMPIA WA 98504-2489.**

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