The following documents are required for an application packet to be considered complete.

Tier Change Checklist:

☐ Completed Checklist

☐ Medi-Cal Eligibility Printout

☐ Completed Assessment Tool
- Signed by a Registered Nurse
- Submitted to DHCS within 60 days of the Registered Nurse signature

☐ Completed and updated Individual Service Plan (ISP)
- Signed by a Registered Nurse or Social Worker
- Signed by the Applicant/Legal Representative

☐ Durable Power of Attorney (if applicable)
- Specific to health care decisions
- Signed by the Applicant and Notarized

☐ Service Plan Agreement Form
- Signed by a Registered Nurse or Social Worker
- Signed by the Applicant/Legal Representative