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**CHAPTER 9: ADULT DAY HEALTH CARE WAIVER**

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**APPENDIX B – FORMS****PAGE(S) 1**

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**FORMS**

The following forms and procedural policies are available on the Office of Aging and Adult Services' (OAAS) website:

<b>Form/Document Name</b>	<b>Web Address</b>
Rights and Responsibilities for Applicants/Participants of Home and Community-Based Services (HCBS) Waivers	<a href="http://new.dhh.louisiana.gov/assets/docs/OAAS/publications/RightsRespon_Waivers.pdf">http://new.dhh.louisiana.gov/assets/docs/OAAS/publications/RightsRespon_Waivers.pdf</a>
OAAS Transition Services Form (TSF)	<a href="http://new.dhh.louisiana.gov/assets/docs/OAAS/CCWForms/Transition-Services-Form.pdf">http://new.dhh.louisiana.gov/assets/docs/OAAS/CCWForms/Transition-Services-Form.pdf</a>
OAAS Critical Incident Reporting Policies and Procedures	<a href="http://dhh.louisiana.gov/assets/docs/OAAS/CIR/CIR-Policy.pdf">http://dhh.louisiana.gov/assets/docs/OAAS/CIR/CIR-Policy.pdf</a>
Request for Payment/Override Form	<a href="http://new.dhh.louisiana.gov/assets/docs/OAAS/publications/Forms/Request-for-Payment-Override-Form.pdf">http://new.dhh.louisiana.gov/assets/docs/OAAS/publications/Forms/Request-for-Payment-Override-Form.pdf</a>