OR BWS Developmental Disabilities		Name (Last,	First, MI,)		Social Security No. Date of Birth				unty		Living an	d Care Arrai	Proposed Budget					
2020-10-23 Waiver Budget						000-00-0000			(9	select co	unty)	(select Li	ving and Ca		Lvl (select)				
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OR BWS Developmental Disabilities		Name (Last, First, MI) Social Security No. Date of							County		Livina an	d Care Arra	Proposed Budget							
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OR BWS Developmental Disabilities			Name (Last,	First, M	1)		Social Security No. Date of Birti			h C	County			Living and Care Arrangement (LCA)							Proposed Budget		
2020-10						000-00-0000			(select county)			(select L		L	ıl (se	lect)							
	Client's	Full ISP Year		This Prior Au	PA) Budget Period (full or part of ISP Year)						TPA ente	ers this code		int									
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				OTH	IER SERVICES						"			_	_	•		D					
				this PA's start Svc-provider dates to the maximum liv												PA's start date 1/0/00. The budget value is <u>for comparison</u> ximum limit. Unit-rates are subject to change.							
										other tha		to the h	llaxiiiiuiii iiii	First unit Paid rate depends on date			ange.	K					
		Servic	e	Svc.	Modifier	Prov	der Prov ID			00 - 1/0/00			rate for	service rendered.									
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OR BWS Developmental Disabilities		Name (Last, First, MI)	Social Security No.	Date of Birth	County		Living and Co	Proposed	Budget				
2020-10-	Waiver Budget			(selec	county)	(select Living	and Care Arrangem	ent)	LvI (se	elect)			
	Client's Full ISP Year	This Prior Authorization	n (PA) Budget Period (full	or part of ISP Yea	r)		TPA enters th	is code	into Omn	icaid			
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		PA Effective Date based on	PA End Date based on		submittal			Other		\$0.00			
	Type of ISP	Start of client's ISP year	End of client's ISP year	Rev	ision date	Rev#		Total:		\$0.00			
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	Signature in Individual:	dicates agreement to the provision of units, and effective dates	the services, service	Total Co \$0.00 Date:		Third P	arty Assessor A	Assigns Prior Autho	rization ID				
	iliuividuai.			Date.			nicaid Tracking	~	I IZation ib				
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_	ar a fay friandly printage coa	instructions on next worksheet tab.		Revisions subr	mittad 1								
				Revisions subi						This PA is part of t	he audit trai		
C	lick worksheet tab "Steps for I	BW Printing" (bottom of your screen).			2					documentation to			
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