Revision: HCFA-PM-95-4 (HSQB) JUNE 1995 Attachment 4.35-D

JUL O

Effective Date:

- 1995

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: West Virginia

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Enforcement of Compliance for Nursing Facilities

Denial of Payment for New Admissions: Describe the criteria (as required at $\frac{1}{1}$ (1) (1) (2) (1) for applying the remedy.

Approval Date OCT 2 6 1995

x Specified Remedy

TN No.

Supersedes TN No.]

95-16

New

_____ Alternative Remedy

(Will use the criteria and notice requirements specified in the regulation.)