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

Attachment 4.35-C

· OUNE IDDI			
STATE PLAN UNDER TITLE XIX O	OF THE SOCIAL SECURITY ACT		
State/Territory: <u>Indiana</u> ELIGIBILITY CONDITIONS AND REQUIREMENTS Enforcement of Compliance for Nursing Facilities			
		Temporary Management: Describe the crite applying the remedy.	ria (as required at §1919(h)(2)(A)) for
		_x Specified Remedy	Alternative Remedy
(Will use the criteria and notice requirements specified in the regulation.)	(Describe the criteria and demonstrate that the alternative remedy is as effective in deterring non-compliance. Notice requirements are as specified in the regulations.)		