

Community Support Services						Rev:
Service Definition Fidelity Payment Review						Date of Review:
						Reviewer:
Provider Agency:			Date of Enrollment:			
Consumer Record Number:			Date of Admission:			
Date of Admission Note:			Date of IRP review:			
Date of Preliminary Rehabilitation Plan:			Date of IRP update:			
Date of Preliminary Needs Assessment:			Date of CRNA updates:			
Date of Comp Rehab Needs Assess:						
Date of Individualized Rehab Plan:						
Item	Reg. Sec.	Topic/Documentation Requirement	Yes	No	NA	Comments
Eligible Consumer/Medical Necessity						
1	10:37B-1.2	Present condition of consumer reflects an Eligible Consumer including medical necessity per Rule				
2		<i>Enrollment/admission form with identifying criteria (name, date of birth, social security number, medicaid number, provider medicaid number)</i>				
Preliminary Documentation						
3	10:37B-2.3(a)	PA and consumer develop preliminary needs assessment (may include information regarding prior treatment and service providers)				
4	10:37B-2.4(a)	PA and consumer develop preliminary rehabilitation plan based on medical necessity.				
5	10:37B-2.4(a)	Preliminary rehabilitation plan is effective for no more than 60 calendar days				
Comprehensive Rehabilitation Needs Assessment (CRNA)						
6	10:37B-2.3(b)	CRNA completed by 14th day of admission.				
7	10:37B-2.3(b)	CRNA updated every 6 months after the admission.				
8	10:37B-2.3(b)	CRNA updated annually after the first full year of admission.				
9	10:37B-2.3(c)	CRNA documents face to face evaluation and discussion with the consumer.				

Item	Reg. Sec.	Topic/Documentation Requirement	Yes	No	NA	Comments
10	10:37B-2.3(d)(1)	Identifying information (name, gender, DOB, religion, race, and SSN), referral date and source				
11	10:37B-2.3(d)(2)	Psychiatric history, current medical status, and diagnosis or diagnoses				
12	10:37B-2.3(d)(2)	If the diagnosis is from secondary source, cite the source				
13	10:37B-2.3(d)(3) and (5)	Current health status and medical history; Current and prior involvement with other agencies/mental health and health care services;				
14	10:37B-2.3(d)(4)	Medication history, including current medication/dose/frequency and name of prescribing physician(s)				
15	10:37B-2.3(d)(6)	Legal information relevant to treatment				
16	10:37B-2.3(d)(7)	Name and phone number of emergency contact person, notation of existence of Advance Directives for Mental Health Care or Living Will.				
17	10:37B-2.3(d)(8)	The valued life role the consumer wants to achieve, as well as the consumer's aspirations, strengths, and goals related to that valued life role, improving his or her life and achieving wellness and pursuing recovery				
18	10:37B-2.3(d)(9)	Precursors to recent crises or increased distress, ways the consumer has deescalated crisis.				
19	10:37B-2.3(d)(10)	Social and leisure functioning including but not limited to ability to make friendships, communication skills, and hobbies				

Item	Reg. Sec.	Topic/Documentation Requirement	Yes	No	NA	Comments
20	10:37B-2.3(d)(11)	Social supports including but not limited to family, friends, social, and religious organizations				
21	10:37B-2.3(d)(12)	Trauma and abuse history or lack thereof				
22	10:37B-2.3(d)(13)	Consumer's understanding of their mental health and health conditions and coping mechanisms				
23	10:37B-2.3(d)(14)	Vocational and educational factors including but not limited to employment and education history, learning disabilities/needs, task concentration, potential for self employment, and motivation for work				
24	10:37B-2.3(d)(15)	Activities of daily living including but not limited to self preservation skills, fire safety (including fire prevention during activities such as cooking and smoking) and evacuation skills, transportation, self-care, and hygiene				
25	10:37B-2.3(d)(16)	Previous, current and desired living arrangements				
26	10:37B-2.3(d)(17)	Financial status; current entitlements; amount, type, and date of eligibility for subsidies; skills in and knowledge of budgeting, including any history of managing entitlements and paying rent				

Item	Reg. Sec.	Topic/Documentation Requirement	Yes	No	NA	Comments
27	10:37B-2.3(d)(18)	Substance use, including any substances used currently and in the past, triggers for use of each substance, efforts made to stop or reduce using, consequences of use, substance abuse services received in the past and currently, the effectiveness of those services, community supports used to stop or reduce using, the effectiveness of those supports, and activities engaged in to avoid using				
28	10:37B-2.3(d)(19)	Other important characteristics of the individual such as special skills, talents and abilities				
29	10:37B-2.3(d)(20)	Characteristics and behaviors resulting in barriers to successful community integration				
30	10:37B-2.3(d)(21)	Recommendations regarding rehabilitation services to be provided				
31	10:37B-2.3(d)(22)	Recommendations regarding housing arrangements				
Individualized Rehabilitation Plan (IRP)						
32	10:37B-2.4(b)	IRP completed no later than 60 days after the consumer was admitted				
33	10:37B-2.4(b)	PA staff and consumer develop and implement IRP				
34	10:37B-2.4(b)(1)	Within confidentiality provisions, the PA shall consult with identified providers and significant others in developing the IRP				
35	10:37B-2.4(c)	Based on preliminary and CRNA, and any other existing assessment, WRAP, and Advance Directive for Mental Health Care.				
36	10:37B-2.4(d)(1)	Consumer's rehabilitation and recovery goals, time-				

Item	Reg. Sec.	Topic/Documentation Requirement	Yes	No	NA	Comments
37	10:37B-2.4(d)(3)(i)	Criteria for measuring change including desired behavioral change or skill attainment				
38	10:37B-2.4(d)(2)	The strategies and interventions to be employed				
39	10:37B-2.4(d)(2)	Anticipated outcomes				
40	10:37B-2.4(d)(2)(i)	The expected frequency and duration of CSS to be implemented				
41	10:37B-2.4(d)(2)(ii)	The location where the CSS is to be delivered				
42	10:37B-2.4(d)(2)(iii)	The type of practitioner to provide the intervention including the name(s), titles and credential of staff				
43	10:37B-2.4(e)(1-3)	Original and revisions shall be signed and dated by all of the following: Physician or LPHA, assigned CSS coordinator, other appropriate team members including those assigned interventions, staff supervisor, consumer				
44	10:37B-2.4(e)(3)(i)	If consumer declines to sign the IRP, there is documentation of reasons for the consumer refusal including in their own words				
45	10:37B-2.4 (4)(f)(1)	IRP reviewed and revised if requested by the consumer				
46	10:37B-2.4(f)(2)	IRP shall be reviewed and revised every three months				
47	10:37B-2.4(f)(4)	All IRP reviews include date of review and signatures of all of the following: consumer, the PA staff member who conducted the review and is assigned to coordinate CSS for consumer, and that staff member's supervisor				
Consumer Service Agreement (CSA)						

Item	Reg. Sec.	Topic/Documentation Requirement	Yes	No	NA	Comments
48	10:37B-3.1 (a)	A Division approved written CSA lhas been provided to and signed by consumer and PA upon consumer's admission. PA shall obtain written approval from the Department before deleting, adding, or revising in any way the requirements of the consumer service agreement				
49	10:37B-3.1(b)	All consumers enrolled in a community support services program shall have a written consumer service agreement that is reviewed by the consumer prior to acceptance and signed by both the consumer and PA upon the consumer's admission				
50	10:37B-3.1(c)	The consumer service agreement shall be written in a language sufficiently understood by the consumer to assure comprehension				
51	10:37B-3.3(a)	Updated as indicated but at least annually				
52	10:37B-3.3(b)	Copy of the consumer's DMHAS Rental Subsidy Agreement attached				
53	10:37B-3.3(c)	A copy of the signed agreement shall be provided to consumer and the original maintained in the consumers record				
Services/Documentation						
56	10:37B-4.1-4.6	Service provided was documented consistent with allowable activity per Rule.				

Item	Reg. Sec.	Topic/Documentation Requirement	Yes	No	NA	Comments																				
57	10:37B-5.2	Documented service: rehabilitation needs assessment; contribution to the development, implementation, monitoring and updating of IRP; therapeutic rehabilitation skill development; illness management and recovery training and support including co-occurring substance abuse disorders); face-to-face crisis intervention; coordinating and managing services, was provided by an appropriately credentialed staff within their scope of practice (please refer to the State Plan Amendment)																								
58	10:37B-10.2(a)	Documentation is provided in the consumer's record for each encounter and in times of crisis and transition																								
59	10:37B-10.2(b)	Progress notes shall include: the level of goal attainment for goals in the IRP; services provided; significant events; and contacts with other providers.																								
60	10:37B-10.2(c)	PA staff shall sign, date, and indicate the time of entry for every progress note and shall include their staff titles and credentials.																								
<table border="1"> <thead> <tr> <th colspan="4">RESULTS</th> </tr> <tr> <th>Responses</th> <th>Yes</th> <th>No</th> <th>NA</th> </tr> </thead> <tbody> <tr> <td># of Responses</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Total Scorable Items = Combined Yes + No</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Percentage Yes of Total Scorable Items</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>							RESULTS				Responses	Yes	No	NA	# of Responses				Total Scorable Items = Combined Yes + No				Percentage Yes of Total Scorable Items			
RESULTS																										
Responses	Yes	No	NA																							
# of Responses																										
Total Scorable Items = Combined Yes + No																										
Percentage Yes of Total Scorable Items																										

Community Support Services
Claim(s) Review

Rev: _____
 Date of Review _____
 Reviewer: _____

Provider Agency:		Date of Admission:	
Consumer Record Number:		Claim ID #s:	
Date of Admission Note:		Date of IRP review:	
Date of Preliminary Rehabilitation Plan:		Date of IRP update:	
Date of Preliminary Needs Assessment:		Date of CRNA updates:	
Date of Comp Rehab Needs Assess:			
Date of Individualized Rehab Plan:			

Item	Reg. Sec.	Topic/Documentation Requirement	Yes	No	NA	Comments
------	-----------	---------------------------------	-----	----	----	----------

Preliminary documentation

1	10:37B-2.3(a)	PA and consumer develop preliminary needs assessment (may include information regarding prior treatment and service providers)				
2	10:37B-2.4(a)	PA and consumer develop preliminary rehabilitation plan based on medical necessity				
3	10:37B-2.4(a)	Preliminary rehabilitation plan is effective for no more than 60 calendar days.				

Comprehensive Rehabilitation Needs Assessment (CRNA)

4	10:37B-2.3(b)	CRNA completed by 14th day of admission.				
5	10:37B-2.3(b)	CRNA updated every 6 months after the admission.				
6	10:37B-2.3(b)	CRNA updated annually after the first full year of admission.				
7	10:37B-2.3(c)	CRNA documents face to face evaluation and discussion with the consumer.				

Item	Reg. Sec.	Topic/Documentation Requirement	Yes	No	NA	Comments
8	10:37B-5.2(a)(1)	The CRNA was completed and signed by an LPHA within the required time.				
Individualized Rehabilitation Plan (IRP)						
9	10:37B-2.4(b);	No later than 60 days after admission, IRP developed and implemented.				
10	10:37B-2.4(e)(2);	The IRP was reviewed and revised if needed, within 3 months of development and every 3 months thereafter.				
11	10:37B-2.4 e(3)	The IRP was signed by the consumer and required staff.				
Service Documentation Records						
12	10:37B-10.1	PA shall create a record for each consumer who receives CSS that shall document all assessments, individualized rehabilitation plans, and other services required				
13	10:37B-10.2(a)	The PA shall document and maintain progress notes for each consumer for each encounter and in times of crisis and transition.				
14	10:37B-10.2(b)	Progress notes shall indicate the level of goal attainment, services provided, significant events, and contacts with other service providers.				
15	10:37B-10.2(c)	PA staff shall sign, date, and indicate the time of entry for every progress note they write and shall include their staff titles and credentials				
16		<i>The service provided was an allowable intervention under the definition of CSS.</i>				

Item	Reg. Sec.	Topic/Documentation Requirement	Yes	No	NA	Comments
RESULTS						
Responses			Yes	No	NA	
# of Responses						
Total Scorable Items = Combined Yes + No						
Percentage Yes of Total Scorable Items						