DESIGNATION READINESS PLAN

Each care manager reviews their caseload for the following items:

- ☐ **Face-to-face contact** at least within the last 3 months for all Enrolled members
- ☐ **Consent**
  - ☐ Open and review the completed consent
  - ☐ Wet/Electronic signature. NO VERBAL CONSENT
  - ☐ All current providers included (PCP, MH/Psychiatrist, Specialists, MCO). If a provider is mentioned by name in the progress note, ensure that the provider's name is listed on the up-to-date consent.
- ☐ **Documents** – Ensure that all documents are correctly labeled
  - ☐ DOH-5055
  - ☐ Other Consents- PSYCKES, HIPAA, HEALTHIX, etc.
  - ☐ Notice of Determination for Enrollment
  - ☐ Enrollment Packet
  - ☐ Verification of Eligibility
  - ☐ *If recently closed,* Closure Documents- 5235 Notice of Determination of Disenrollment
- ☐ **Appropriateness Criteria Assessment**
  - ☐ Completed for all members with RFG flag
- ☐ **Care Plan**
  - ☐ Strengths, Barriers, Risk Factors completed
  - ☐ Wet/Electronic signature of member
  - ☐ Evidence of collaborative care planning with member—e.g. encounter note, supporting documentation, link to encounter
- ☐ **HML (upload of supporting documentation if HML has clinical or functional adjustment)**
  - ☐ HIV Status-External Document: Lab results, medical records, documented conversation with consented provider or MCO
  - ☐ Homelessness- External Document: Letter from shelter or housing program, eviction notice, report from Homeless Services, PSYCKES, self-report
  - ☐ Incarceration- External Document: Release papers, documentation from probation/parole, webcrims or justice database, halfway house, self-report (up to 90 days)
  - ☐ Inpatient Stays (Physical Illness, Mental Illness, or SUD)- External Document: Inpatient admission that would require significant care coordination post-discharge, discharge summary, PSYCKES, RHIO, MCO report, self-report
  - ☐ SUD Active Use/Functional Impairment- External Document: Based on assessment, observation, and information gathered by the care manager from substance use providers, probation/parole, court ordered programs, domestic violence providers, local DSS, and other sources.
- ☐ **Gaps in Care**
  - ☐ Updates to Gaps in Care Status (default is 'Action Needed')
  - ☐ Link to Care Plan
- ☐ **Special Populations Requirements**, *if provisioned*
  - ☐ *For HARP enrolled-* evidence that services have been discussed with member – e.g. encounter note, assessment, in CAT/ Care Plan
  - ☐ HARP Tab updated, *as appropriated*
  - ☐ Supporting documentation for HH+
  - ☐ 4 core services, 2 must be face-to-face contact (note: FCM F2F billing validation will go live on Aug 1)