

Workflow

The CCS workflow will initially be a combination of paper documentation, and documentation done in the Dane County CCS Module. The workflow, start to finish, will be as follows (items in Bold are done in CCS Module):

- *Client reaches out to Dane County Intake worker who explains the necessary information to enroll client in CCS*
- *Client selects a Service Provider for service facilitation. DC Intake worker calls the Service Provider that the client selects and schedules an Intake Appointment with the client and, when possible, the Service Facilitator.*
- **DC Intake worker logs into CCS Module, creates the client (if necessary), and assigns the client to the provider selected**
- SF Assignment person at the provider assigns the client to a Service Facilitator (and optional Secondary Service Facilitator)**
- SF Service Facilitator creates 30-day Service Plan, and adds all necessary services.**
- SF Service Facilitator meets with client and begins paperwork*
- SF Assembles Recovery Team*
- SF Fills out Paper Assessment/Assessment Summary*
- SF Service Facilitator will Create and Complete a Recovery Plan in the CCS Module**
- SF Recovery Plan consists of Recovery Team, Narratives, Needs/Goals/Actions, Service Authorizations, Natural Supports, Medications List, and Discharge Criteria**
- SF Service Facilitator will submit Service Authorizations to the Mental Health Professional for Approval**
- SF Service Facilitator will submit Recovery Plan to Mental Health Professional for Approval**
- SF Once Recovery Plan approval is received, it is printed and all members of the Recovery Team will sign it.**
- SF Signed copy will be sent to DCHS to be filed.*
- SF Client meets with Providers to obtain services*
- **Providers use the CCS Module to document Progress Notes after client encounters**
- **Progress Notes are the primary method to bill for services.**
- **Provider Billing Person uses the Billing Module to Review and Submit Claims to DC by the 7th of the month following the month of service**
- **Between the 8th and the 14th, DC Submits Claims to State (from previous month of service) for Processing, then cuts checks to Agencies.**


Intake



The Intake process is how a client gets assigned to a particular provider. The Intake is done by the Dane County Intake worker.


Comprehensive Community Services **Inbox:(0)**

Desktop **Navigation** ▶ **Reports** **Module** ▶ **SiteMap** **LogOff**


Comprehensive Community Services » Navigation » Intake » **Intake**


Current Client: zznelson, two (914785) 

Application Date: * 

Provider: *

Start Date: * 

End Date: 

Notes:

The application date will be entered to reflect when the client applied to be a CCS client

The Provider will be the CCs provider that the client has selected to perform service facilitation.

The Start Date should reflect when the CCS program will begin for the client.

Once all of the required information has been filled out, the DC Intake worker will press save. By saving the Intake, this will trigger an email to the Provider, specifically, the user whom the provider has defined to receive Intake emails. In addition to the automatic email, the DC Intake worker will contact the Provider to notify them of the Client Assignment.

Assignment

The assignment process is done by the Provider whom the Intake worker assigned to the client. Providers will designate specific users who will perform the Assignment of the client to a Service Facilitator.


To create the Assignment, the consumer/case must be selected. To do this:

- 1) Module > Comprehensive Community Services
- 2) Navigation > Assignment
- 3) Select the binoculars icon at the top right. Then search for the client by name.


Comprehensive Community Services Inbox:(4)

Desktop Navigation ▶ Reports Module ▶ SiteMap LogOff

Comprehensive Community Services » Navigation » Assignment » Create Assignment

Current Client: zzNelson, two (914786) 

Create
Reassign
History



Current Assignments

Service Facilitator: None Assigned

Secondary Service Facilitator: None Assigned

Filter By

Degree





Specialty

License

Filter

Available Personnel

Role

Staff Name	<input type="checkbox"/>	Date Assigned	Date Closed	
Hatley, Jon(2230)	<input type="checkbox"/>			
Mhprof, Marty(8925)	<input type="checkbox"/>			
Web, HS(4311)	<input type="checkbox"/>			

Assign Staff
Refresh

Once the client is selected, the Assignment staff member will see a list of providers for their organization. They will have the Role of Service Facilitator selected by default. They can click the check-box next to the name that they would like to make the Service Facilitator for the Recovery Plan. Clicking the check-box will fill in the Date Assigned box with the current date. By clicking the 'Assign Staff' button at the bottom, the person selected will become the Service Facilitator for that client.

Additionally, if another person should have access to work with client's Recovery Plan, the Assignment Staff Member can assign a Secondary Service Facilitator. Just use the dropdown menu next to Role and select Secondary Service Facilitator. The same client can have one Primary Service Facilitator but many Secondary Service Facilitators. Only the staff members assigned as Service Facilitators have the ability to Create and update Recovery Plans.

Recovery Plan

To create the Recovery Plan, the consumer/case must be selected. To do this:

- 1) Module > Comprehensive Community Services
- 2) Navigation > Recovery Plan
- 3) Selecting the Dropdown list to the left of the binoculars will show you the Clients you are assigned to.

Comprehensive Community Services **Inbox:(25)**

Desktop **Navigation** ▶ **Reports** **Module** ▶ **SiteMap** **LogOff**

Plans **Service Auth Approvals**

Comprehensive Community Services ▶ Navigation ▶ **Recovery Plan**

Recovery Plan **Team** **Narratives** **Goals** **Services** **Discharge**

Active Date: *

Expiration Date: *

Co-Occurring Substance Abuse Condition Present?

Create Date:



Approval Date:

Service Facilitator:


Approved by:


Alternatively, the Binoculars icon to the right can be used to find clients.

Recovery Plan Team Narratives Goals Services Discharge

zzNelson, Two  

Display voided plans


Active Date: * 

Expiration Date: * 

Co-Occurring Substance Abuse Condition Present?

Initial 30-day Recovery Plan

Assessment of Immediate Needs
Identify and describe immediate needs of client for which services will be provided as documented in this Initial 30-day Recovery Plan

Copy Previous Approved Recovery Plan: 

Recovery Plan > Recovery Plan

When a client has been selected on the Recovery Plan tab, select the 'Add New' button along the bottom to create a new Recovery Plan.

Add an 'Active Date'. The Expiration Date should fill in automatically 6 months after the Active Date. The 'Co-Occurring Substance Abuse Condition Present' checkbox should be checked if the client has a condition that requires a Substance Abuse Professional.

If this is the first plan for a client, that is, this will be a 30 day Service Plan in which the client's Immediate Needs will be addressed (this includes the need to complete assessment, service planning, and service facilitation); you should select the Initial 30-day Service Plan checkbox. This will change the Expiration Date to be 30 days from the Active Date. You should also enter a narrative explaining what the client's Immediate Needs are that require the initial plan.


If you are able to copy a previous approved Recovery Plan, you will be presented with a checkbox that will allow you to do this. See page 16 for more information on copying Recovery Plans forward.

Select the 'Save' button along the bottom to save the Recovery Plan.


Recovery Plan > Team

Comprehensive Community Services Inbox:(17)

Desktop Navigation ▶ Reports Module ▶ SiteMap LogOff

Current Client: zzNelson, two (914786) 



Recovery Plan **Team** Narratives Goals Services Discharge

Filters 

Member Information



Last Name: * First Name: *
Middle Name: Name Ext:
Relationship to Client:

Support Details

Support Type:
Start Date: *  End Date: 

Plan Details

Include in Plan
 Substance Abuse Professional
 Mental Health Professional

Start Date * 6/1/2016  End Date 

Contact Information

Home Phone: - Alt Contact Nbr: -
Work Phone: - Pager Number: -
Cell Phone: - Fax Number: -
Email Address:

Address

The Team tab is where you will identify members of the Recovery Team. These are the people who will be participating in the recovery planning process and will participate in recovery planning meetings. The Recovery Team can be composed of Family Members, Providers, or any other Natural Support.

Any existing members of the Recovery Team will be listed at the top. If there is no list, then you will need to enter people by clicking the 'Add Member' button at the bottom. This will bring up a menu where you will select the type of team member you wish to add.

Family Members and Provider Support members will need to be searched for in the system. If they are not found, you can request they be added to the system, and a Dane County staff member will add that person to the system. Natural Supports can be added on the fly, as they will not be permanently stored in the system, other than in the current client's Recovery Plan.

All members of the Recovery Team will be required to Sign the Recovery Plan when it is completed, stating they were involved in the Recovery Planning process.

The client's current Service Facilitator will, by default, be included in the client's CCS Recovery Team. You will need to add the Mental Health Professional and, if applicable, Substance Abuse Professional as Provider Supports, as well as anyone else the client wants as a part of their CCS Recovery Team.

Within the Member Information for each member of the client's CCS Recovery Team, there is a section called 'Plan Details'. Any member of the client's CCS Recovery Team should have the 'Include in Plan' checkbox checked and a Start Date filled in. This is the way to denote an individual as part of the Client's CCS Recovery Team.

By default, the Team Tab will show ONLY members of the client's CCS Recovery Team. By clicking on the 'Filters' purple bar right below the tabs, you are able to see all people who are associated with the client. This includes historic relationships that the client may already have, as well and former members of the client's CCS Recovery Team.

Recovery Plan **Team** Narratives Goals Services Discharge

Filters

Member Type: All

In Plan Only

All Members Active Members Inactive Members

Hopes and Dreams *

Strengths *

Resources & Natural Supports

Update Cancel

Recovery Plan > Narratives

This is a space for free-text narratives. Fill out the required fields and select the 'Update' button to save your narratives. The Narratives should be the client's own words. Much of this information should come from the Assessment. In the future, when the Assessment is entered into the system, these fields will be filled out for you.

Comprehensive Community Services **Inbox:(25)**

Desktop Navigation ▶ **Reports Module** ▶ **SiteMap** **LogOff**

Plans **Service Auth Approvals**

Navigation ▶ Recovery Plan ▶ Plans ▶ **Needs**

Current Client: zzNelson, Two (917714)

Recovery Plan Dates : 8/28/2015 - 2/28/2016 (Created) [Printer Friendly Version](#)

Recovery Plan **Team** **Narratives** **Goals** **Services** **Discharge**

▶ **DOMAIN - Basic Needs**

Filter Options

Domain :

Show : All Active

■ At least one Goal is required to submit a Recovery Plan.

Strength Narrative *

▼ **NEEDS -**

▼ **GOAL -**

▼ **ACTION STEPS -**

Recovery Plan > Goals

The Goals page is used to document the Needs, Goals, and Action Steps for this particular Recovery Plan. You will create one or many Needs. Then, for each Need, you will create one or many Goals. Finally, for each Goal, you will create one or many Action Steps.

Domain

The Domain dropdown will provide a list of Life Areas, identical to the Assessment. You should select the Domains/Life Areas that the client wishes to address. Select one Domain at a time.

After selecting the Domain, fill out the Strength Narrative. This should be what the client's strengths are in the selected Domain/Life Area. This strength will carry forward to any additional Recovery Plans that contains the same Domain/Life Area. When the Strength narrative is complete, press the 'Update Strength' button. You will see the Domain name update and display "(S)" to indicate that there is a Strength associated with this Domain. There will be One Strength Narrative per Domain.

Navigation ▶ Recovery Plan ▶ Plans ▶ Needs

Current Client: zzNelson, Two (917714) 🗺

Recovery Plan Dates : 8/28/2015 - 2/28/2016 (Created)

Printer Friendly Version

Recovery Plan Team Narratives **Goals** Services Discharge

▼ DOMAIN - Basic Needs

▶ NEEDS - Basic Needs Domain > Need #1

Results 1 - 1 of 1 Page 1 of 1

Narrative ▲	Date Identified	Status
Basic Needs Domain > Need #1	8/28/2015	Ongoing

Narrative: *

Basic Needs Domain > Need #1

Date Identified: * 8/28/2015 End Date: Status: * Ongoing ▼

▼ GOAL -

▼ ACTION STEPS -

Save Need Cancel

Needs

The next step, after choosing a Domain, is to add a Need.

Click the Needs bar to expand the Needs section. Select the 'Add New Need' button at the bottom to create a new Need Narrative. Each Domain can have one or many Needs associated. Fill out the Needs/Barriers Narrative, the Date Identified, and update the Status (if necessary) then select the 'Save Need' button to save the Need. You can add a new need if necessary or desired.

Navigation ▶ Recovery Plan ▶ Plans ▶ Needs

Current Client: zzNelson, Two (917714) 🗺

Recovery Plan Dates : 8/28/2015 - 2/28/2016 (Created)

Printer Friendly Version

Recovery Plan Team Narratives **Goals** Services Discharge

▼ DOMAIN - Basic Needs (N, S)

▼ NEEDS - Basic Needs Domain > Need #1

▶ GOAL -

Show Needs Details

Goal No: * #1 ▼

Narrative *

Basic Needs Domain > Need #1 > Goal #1

Start Date: * 8/28/2015 End Date: Status: [Select a Status] ▼

How Progress is Measured *

▼ ACTION STEPS -

Save Goal Cancel

Goals

Before beginning your Goals, you will need to select which Need you want to add Goals to. Select the appropriate Need from the list of Needs. The Needs bar header will display the Narrative from the Need selected. Then you can expand the Goals section of the page by clicking on the bar that says Goals. You can add one or many Goals per Need.

Select the 'Add Goal' button to create a new Goal Narrative. The Goal Number will auto fill with the next available Goal for the selected Need. You can update the Narrative to describe the Goal further. Provide a Start Date for the Goal. You also need to fill out the 'How Progress in Measured' narrative. This is the metric used to gauge how the client is progressing toward their Goal. Once you have filled out all the required sections, you can click the 'Save Goal' button at the bottom. At this point, you can add a new Goal, or update existing Goals if you would like to.

If you'd like to create/update Goals that are associated with other Needs, you need to click on the Needs bar, select the appropriate Need, then click back to the Goals bar.

Recovery Plan Team Narratives **Goals** Services Discharge

▼ DOMAIN - Basic Needs (N, S)

▼ NEEDS - Basic Needs Domain > Need #1

▼ GOAL - Basic Needs Domain > Need #1 > Goal #1

▶ **ACTION STEPS -**

Show Goals Details


Select Action:

Narrative: *

Basic Needs > Need #1 > Goal #1 > Action Step #1

Persons Responsible:

Client

Due Date: 

Save Action Cancel

Action Steps

Before outlining your Action Steps, you will need to select which Goal you want to add Action Steps to. Select the appropriate Goal from the list of Goals. Then you can expand the Action Steps section of the page by clicking on the bar that says Action Steps. You can add one or many Action Steps per Goal.


Select the 'Add New Action' button to create a new Action Step Narrative. You must fill in the Action Step Narrative in order to continue. You can optionally fill in the Persons Responsible field as well as a Due Date field. Once you have completed your work in the Action Step, you can click the 'Save Action' button at the bottom. At this point, you can add a new Action Step, or update existing Actions if you would like.

If you'd like to create/update Action Steps that are associated with other Goals, you need to click on the Goals bar, select the appropriate Goal, then click back to the Action Steps bar.

Action Steps can be edited/added on an Approved Recovery Plan.

Plans Service Auth Approvals

Recovery Plan » Plans » Authorizations » Authorizations

Current Client: zzNelson, Two (917714) 

Recovery Plan Dates : 4/22/2016 - 10/22/2016 (Created)

 [Printer Friendly Version](#)



Recovery Plan |
 Team |
 Narratives |
 Goals |
 Services |
 Discharge
Authorizations |
 Natural Supports |
 Other Funded |
 Placements

Auth. Approval

Submit to: * ▼

Service Facilitator Comments

Auth. Details

Auth Start Date *  Auth End Date * 

Provider *

Program *

Service Category * ▼

How often will they receive this service? * hour(s) per ▼

Total Hours

Goals *

Results 1 - 2 of 2 Page ▼ of 1

	Goal	
<input type="checkbox"/>	Basic Needs Domain > Need #1 > Goal #1	
<input type="checkbox"/>	Basic Needs Domain > Need #1 > Goal #2	

Recovery Plan > Services > Authorizations

The Service Auths page is used to show, review, and create services that the client is authorized for. To create a Service Authorization, select the type of Service Authorization that you would like to create for the client.

Recovery Plan > Service Authorizations (continued)

When you add a new Service Authorization, you will be required to select a Substance Abuse Professional/ Mental Health Professional in the "Submit Work To:" box(es). This is the person that will approve the service(s) for the client.

The next required fields are Start and End date of the contract. This represents the date range the authorization spans. The dates will default to match the dates of the Recovery Plan.

The Provider and Program will need to be selected to reflect who is authorized to provide the service for the client. Next, select the Service Category the authorization is for. The Service Category represents the Service Array Element. Refer to your documentation to determine which Service Category to select based on the service to be provided.

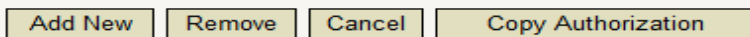
You will then need to select the frequency of the service and the overall Total Units will automatically calculate.

Goals are the final values that you will need to fill in. These address what type of service will be provided and which Goal, from the Goals tab, will be addressed by this service. The Initial 30day Recovery Plan does not require selecting Goals.

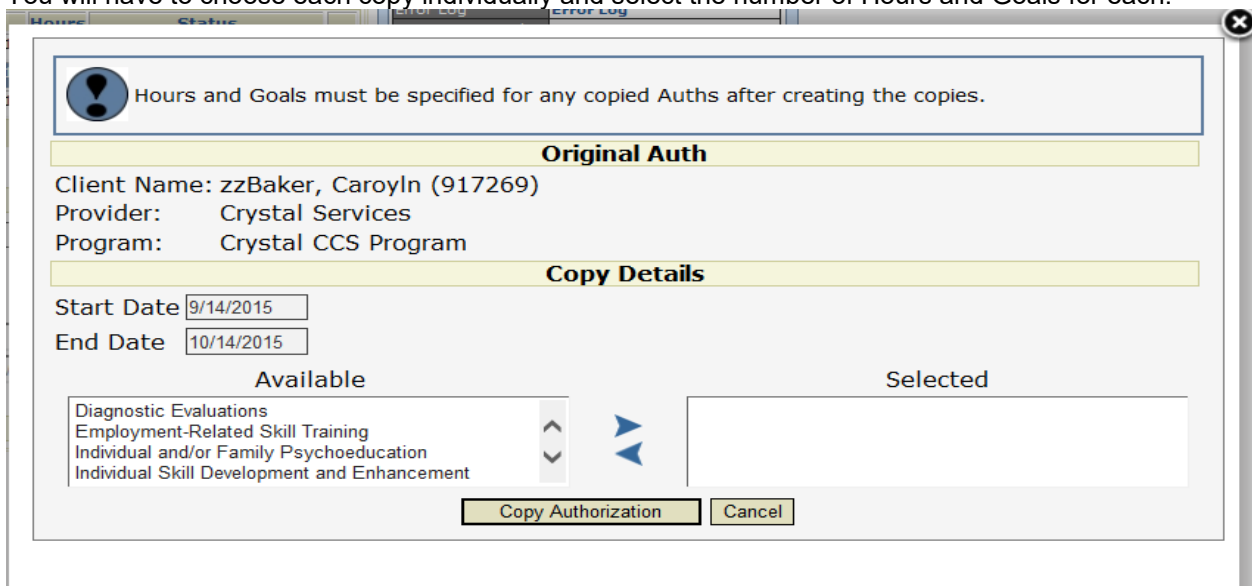
Once you have filled in all required fields, you have the option to 'Save and Submit', which submits the Service Auth to the Substance Abuse Professional/Mental Health Professional, or to 'Save', which allows you to come back and make changes.

Copy Authorization

Once you have a Service Auth created, if the Provider and Program will be the same for additional authorizations, it is easy to make copies by using the 'copy authorization' button at the bottom of the screen.



Once you choose to Copy an Authorization, there will be a popup on the screen. Within the popup, you can select the additional Service Categories that you'd like to make Authorizations for. In your copied Authorizations, the Dates, Provider, and Program will all be copied, while the Hours and Goals will not. You will have to choose each copy individually and select the number of Hours and Goals for each.



Recovery Plan > Services > Natural Supports

Recovery Plan | Team | Narratives | Goals | **Services** | Discharge

Authorizations | **Natural Supports** | Other Funded | Placements



- The Client's **Natural Supports** must be specified, or the plan must indicate that the Client has "No Natural Supports" before the Recovery Plan can be submitted.

Natural Supports

The Client does not have any Natural Supports.

The Natural Supports screen needs to be addressed before submitting the Recovery Plan for approval. If the client has Natural Supports, use the Add New button at the bottom and fill in the details of this Natural Support. If the client does not have any Natural Supports, indicate that by checking the box on the screen and pressing 'Update'.

Recovery Plan > Discharge

Comprehensive Community Services Inbox:(17)

Desktop Navigation ▶ Reports Module ▶ SiteMap LogOff

Plans Service Auth Approvals

Navigation » Recovery Plan » Plans » Discharge

Current Client: zzNelson, two (914786) 

Recovery Plan | Team | Narratives | Goals | Services | **Discharge**

Discharge Criteria *

Update Cancel

The Discharge page is where you will enter the Client's requirements to be discharged from the Recovery Plan.

Fill out the Discharge Criteria and click the 'Update' button to save.

(Subsequent) Recovery Plans

Every 6 months, clients will need a new Recovery Plan. Within 60 days of the current plan's expiration date, you may begin a new Recovery Plan, but there is some work required on the current Recovery Plan before you can add a new Plan.

Prior to creating the new Recovery Plan, the current plan's Goals must be reviewed. To review a Goal, you must 'Update Progress' on each Goal. In order to Add a New Recovery Plan, each Goals' Progress must be updated within 60 days of the current Plan's Expiration Date.

▶ GOAL (1) - Basic Needs Need #1 Goal #1

Show Needs Details

Results 1 - 1 of 1 Page 1 of 1

Goal No ▲	Dates	Narrative	Status
1	12/1/2015 - Present	Basic Needs Need #1 Goal #1	N/A

Goal No: *

Narrative *

Basic Needs Need #1 Goal #1

Start Date: * End Date: Status:

How Progress is Measured *

Basic Needs Need #1 Goal #1 Progress Metric

Progress [Update Progress](#)

Progress Date: *

Narrative *

In addition to 'Updating Progress', you must do one of two things:

1. If the Goal will no longer be a part of the next Recovery Plan, you can set an End Date for the Goal, and update the Status of that Goal. This will prevent the Goal from being copied onto the next Recovery Plan.
2. If the Goal will be continued in the next plan, you can simply 'Add Progress' to that Goal. This Goal and Progress will be carried forward onto the next Recovery Plan


If you have added Progress to all the Goals, you will be able to add a new Recovery Plan.


On the Recovery Plan tab, select the Add New button. This will present you with information about the new plan.

Recovery Plan Team Narratives Goals Services D


Results 1 - 1 of 1

Active Date	Expiration Date	Approval Date
5/2/2016	6/1/2016	6/1/2016

Active Date: * 6/2/2016 

Expiration Date: * 12/2/2016 

Co-Occurring Substance Abuse Condition Present?

Copy Previous Approved Recovery Plan: 

The Active Date will automatically fill with the day after the current plan's expiration date, and the Expiration Date will be 6 months after the Active Date. You can change the Co-Occurring Substance Abuse Condition Present checkbox (which will default based on the previous plan), if a change in status has happened in the previous 6 month period. You are also presented with the option of Copying the Previous Plan details forward onto your new plan.

If you do not Copy the Previous Plan, you will start from a blank Plan, and will need to populate all of the required fields before submitting the plan for Approval.

If you choose to Copy the previous Plan forward, the following information will copy forward onto the New Plan...

- All Members of the Client's Recovery Team will copy, unless the member has an End Date prior to the Active Date of the New Plan. Members of the Recovery Team can be Added or Removed after the plan is copied.
- All fields on the Narratives Tab will copy. These fields can be modified after the copy.
- Goals Tab information will copy forward as documented below:
 - All Domain Strengths will be copied forward.
 - All Needs that do not have an End Date prior to the start of the New Plan will be copied forward.
 - All Goals associated with copied Needs, that do not have an End Date prior to the start of the New Plan will be copied forward. Goal Progress on copied Goals will be copied forward.
 - All Action Steps, associated with copied Goals, will be copied forward, so there is a complete trail of the steps taken.
- Services will copy forward as documented below:
 - If the Authorization End Date matches the End Date of the current Plan, it will copy forward with start and end dates that match the new Recovery Plan.
 - If the Authorization End Date is prior to the End Date of the current Plan, it will not copy forward.
 - On all copied Service Authorizations, the Hours and Frequency will copy forward.
 - On all copied Service Authorizations, the Goals must be reselected prior to submitting for Approval.
 - All Natural Supports will be copied forward onto the New Plan.
- The Discharge Tab will not be copied forward. This Tab must be addressed with the client with each Plan.

After creating the new Recovery Plan, it will be modified per the client's requests and sent through the approval process prior to becoming active.

General Client Info

General Client Info will be where the Service Facilitator can document any client information that is part of the overall client's medical record. This is also where other providers can review that same client information.


To review or document General Client Information, the consumer/case must be selected. To do this:

- 1) Module > Comprehensive Community Services
- 2) Navigation > General Client Info
- 3) Select the binoculars icon at the top right. Then search for the client by name. The Service Facilitator, alternatively, can find the client in the dropdown list to the left of the binoculars.


Comprehensive Community Services **Inbox:(252)**

Desktop | **Navigation** ▶ | **Reports** | **Module** ▶ | **SiteMap** | **LogOff**

Client Demographics | **Medical** | **Support Members**

Comprehensive Community Services » Navigation » General Client Information » **Client Demogra**
Current Client: zzNelson, Two (917714) 

Client Demographics | **Medical** | **Support Members**


Address | **Phone** | **Placements** | **Insurance** zzNelson, Two 

Show History


Comprehensive Community Services **Inbox:(252)**

Desktop | **Navigation** ▶ | **Reports** | **Module** ▶ | **SiteMap** | **LogOff**

Client Demographics | **Medical** | **Support Members**

Navigation » General Client Information » Client Demographics » **Phone**
Current Client: zzNelson, Two (917714) 

Client Demographics | **Medical** | **Support Members**

Address | **Phone** | **Placements** | **Insurance** zzNelson, Two 

Contact Information

Home Phone:	<input type="text"/> - <input type="text"/>	Alt Contact Nbr:	<input type="text"/> - <input type="text"/>
Work Phone:	<input type="text"/> - <input type="text"/>	Pager Number:	<input type="text"/> - <input type="text"/>
Cell Phone:	<input type="text"/> - <input type="text"/>	Fax Number:	<input type="text"/> - <input type="text"/>
Email Address:	<input type="text"/>		

General Client Info is comprised of three tabs. The Client Demographics tab will show basic client information. The Support Members tab is where you can document and review people the client has ever had relationships with. And the Medical tab is where you can document and review the client's medical

history to give a complete medical record of the client. The Medical tab is where you can document past and current client diagnoses, medications, and hospitalizations.

Client Demographics | Support Members | **Medical**

Diagnosis | Medications | Hospitalizations | Narratives

Therapist

Diagnosis Date: * 

Therapist Making Diagnosis: * Title: *

Organization:

The Diagnosis section of the Medical tab requires you to click the 'Add New' button to create a new diagnosis. You must document the date of diagnosis, as well as the Physician making the diagnosis before you can save and select the official diagnosis.

You can, then, specify a Code Set, as well as search the database for the diagnosis. Finally, you would Save your documentation.

Client Demographics | Support Members | **Medical**

Diagnosis | **Medications** | Hospitalizations | Narratives



zzNelson, two

MEDICATION INFORMATION ON THIS LIST HAS NOT BEEN VERIFIED AND SHOULD NOT BE USED FOR MEDICAL PURPOSES. FOR CURRENT AND COMPLETE MEDICATION INFORMATION, CONTACT THE CLIENT'S PHARMACY OR PRESCRIBING PHYSICIAN.

Medication: * ^{Rx}

Dosage:

Frequency:

Start Date:  End Date: 

Reason Meds Discontinued:

Doctor: Currently Taking: Yes No

Diagnosis:

Order Diagnosis By: Diagnosis Diagnosis Code

Helpful

Reason for Taking

Not to be given

Not to be given reason

The Medications section of the Medical tab requires you to click the Add New button to document a new medication for the client. Please complete as much information as you can to create a complete medical record for the client. Medications must be addressed for each Recovery Plan. On the Recovery Plan Tab, there is a box to indicate that you have reviewed the Client's Medication List and a box to indicate that a Client has no Active Medications. You MUST review your client's medication list before you can Submit the Recovery Plan for approval.

- Co-Occurring Substance Abuse Condition Present?
- I have reviewed the client's medications *
- The client is currently not taking medications

Client Demographics | Support Members | **Medical**

Diagnosis | Medications | **Hospitalizations** | Narratives

Results 0-0 of 0 hospitalizations Page 0 of 0

Event	Diagnosis	Start Date	End Date
Primary Precipitating Event: *	*		
Start Date:			
End Date:			
Facility:			
City:			
State:			
Diagnosis:			

Order Diagnosis By: Diagnosis Diagnosis Code

The Hospitalizations section of the Medical tab is where you will document any past hospitalizations for the client. Please document as much information as you can to create a complete medical record for the client.

Client Demographics | Support Members | **Medical**

Diagnosis | Medications | **Hospitalizations** | **Narratives**

Medications the client has adverse reactions to

Other Medication Comments

The Narratives section of the Medical tab is where you can document any unique medication comments that are relevant to the client. These fields are optional as much of what you can document here is available on the Medications section.

Approval Process

The Substance Abuse Professional and Mental Health Professional will need to approve the Recovery Plan and each Service before the client can receive services and providers can sign Billable Progress Notes.

Service Authorization Approval

When the Service Facilitator submits Service Authorizations to the Substance Abuse or Mental Health Professional, the approver will receive an email indicating they have something to review in the system. When the Professional logs in, they will have an Inbox message notifying them that there is a Service Auth that requires their review. The message will also have a link to the client's Service Auth tab on their Recovery Plan.

The Professional can review Service Auths one by one on the Recovery Plan, and choose to Approve or Rework each one individually. This would be a cumbersome process. Rather, the Professional should review all Service Auths at once, and Approve or Deny them in bulk. This is done via the 'Service Auth Approvals' page.

Comprehensive Community Services **Inbox:(26)**

Desktop **Navigation** ▶ **Reports** **Module** ▶ **SiteMap** **LogOff**

Plans **Service Auth Approvals**

Clicking this button will take the user to the Service Auth Approvals page...

Comprehensive Community Services **Inbox:(11)**

Desktop **Navigation** ▶ **Reports** **Module** ▶ **SiteMap** **LogOff**

Plans **Service Auth Approvals**

Comprehensive Community Services » Navigation » Recovery Plan » **Service Auth Approvals**

Select a Client: ▼

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Provider ▲	Program	Client	Service Category	Frequency	Service Facil.	Dates	Hours	
Crystal Services	Crystal CCS Program	zzBaker, Aleida (917219)	Employment-Related Skill Training	4.00 hours per Day	ServiceFacilitator, Sarah	9/1/2015 - 9/2/2015	8.00	
Crystal Services	Crystal CCS Program	zzBaker, Aleida (917219)	Diagnostic Evaluations	3.00 hours per Week	ServiceFacilitator, Sarah	9/1/2015 - 10/1/2015	14.00	
Crystal Services	Crystal CCS Program	zzClemens, Rascal (917715)	Diagnostic Evaluations	1.00 hours per Day	ServiceFacilitator, Sarah	9/9/2015 - 10/9/2015	31.00	
SOAR CASE MANAGEMENT SERVICES, INC	Comprehensive Community Services	zzBaker, Aleida (917219)	Non-Traditional or Other Approved Services	1.00 hours per Day	ServiceFacilitator, Sarah	9/8/2015 - 10/1/2015	24.00	

Approval Status * Approve Rework

Comments

On the Service Auth Approvals page, users will see any Service Authorizations that require their review. They will see all Authorizations for all clients, but will not be able to take action on any of them until they select a client from the dropdown list. Once a client is selected, the Professional will review the Service Authorizations, check those Authorizations they would like to act on, then select the Approve or Rework checkbox at the bottom. This is a very efficient way to review and approve (or deny) multiple Service Authorizations at once.

Recovery Plan Approval

The Recovery Plan approval process has many steps, and, at present, requires 1-2 levels of approval: Substance Abuse Professional (when applicable), and Mental Health Professional.

Once the Recovery Plan has been built completely, and all required fields have been filled in, the Service Facilitator will return to the Recovery Plan tab, select the Approver (Substance Abuse or Mental Health Professional), check the 'Submit for Approval' checkbox, and press the 'Update' button. This will submit the Recovery Plan to the Approver, and the Approver will receive an email indicating they have something to review in the system. The Plan Status will be 'Pending Approval - SA Prof' or 'Pending Approval - MH Prof'.

The Approver will login to the system and will have an Inbox message notifying them that there is a Recovery Plan that requires their review. The message will have the client information, as well as a link to the client's Recovery Plan. Clicking the link will open the client record, and take the Approver to their Recovery Plan. The Approver will review the Recovery Plan.

If there are changes required, the Approver will return to the Recovery Plan tab, click the 'Rework' checkbox, add comments regarding what changes need to be made, then click 'Update'. This will send the Recovery Plan back to the Service Facilitator to make changes to the Recovery Plan and resubmit to the Approver.

If there are no required changes to the Recovery Plan, the Approver will return to the Recovery Plan, click the 'Approve' checkbox, and click 'Update'. This will send the Recovery Plan back to the Service Facilitator who will pass it along to the next Approver. They will receive an email indicating that they have something to review in the system. The Plan Status will be 'Approved SA Prof' or 'Approved'.

The Service Facilitator will have an Inbox message in the system that will link them to their client's Recovery Plan where they can select the Mental Health Professional, click the 'Submit for Approval' checkbox, then click 'Update'. The Mental Health Professional will review the Recovery Plan, and make the decision to Approve or Rework the Recovery Plan. When the Mental Health Provider approves the plan, the plan status will read 'Approved'. This is the only status that indicates the plan has been fully approved and the client is ready to receive services.

The back page of the Service Facilitator Checklist has a diagram that defines this workflow.

Progress Note

The Progress Note will be the primary method for billing. A Progress Note should be filled out when any services related to CCS are provided. This includes any services that fit into the Service Array.

To create a Progress Note, the consumer/case must be selected. To do this:

- 1) Module > Comprehensive Community Services
- 2) Navigation > Progress Note
- 3) Select the binoculars icon at the top right. Then search for the client by name. The Service Facilitator, alternatively, can find the client in the dropdown list to the left of the binoculars.

There are 2 types of Progress Notes: Billable and Non-Billable. Examples of Billable Progress Notes include: Psychosocial Rehabilitation services that are written into the Recovery Plan, Assessment and Service Planning, Service Facilitation, Time spent at Recovery Plan meetings for all CCS staff on the team, and Travel Time to meet with the client. Examples of non-Billable Progress Notes include: When the client is not home for a scheduled meeting, transporting the client, unless Psychosocial Rehabilitation services are provided during that time, and any services beyond what is authorized in the Recovery Plan.

All Progress Notes will require one or more Note Types. The Note Types that are available will be values from the Service Array that your CCS Program are contracted to provide. You can select any Note Types that apply to the service you provided that you are documenting from the list of 'Available' Note Types, and move the necessary Note Types to the 'Selected' field by pressing the right arrow. You can select multiple Note Types by holding the Ctrl key down while clicking, and send them all over to the 'Selected' side using the right arrow.

Is this a Billable or Non-Billable Service? * Billable Non-Billable

Service Provider * ▼

Program * ▼

Degree Level * ▼

Date Occurred: * : AM PM

Type of Contact: * ▼

Documentation Time: * Hr Min

Service Time: * Hr Min

Travel Time: Hr Min Miles Traveled: Miles

Total Time: * Hr Min

Place of Service * ▼

Diagnosis * ▼

Please choose the Mental Health or AODA diagnosis most relevant to this contact. Do not select Autism, Intellectual Disability, or medical conditions.

Service Type * Individual Service Group Service

Note Type *

Available

Selected

Screening and Assessment
Service Facilitation
Service Planning
Substance Abuse Treatment



Participants

Available

Selected

ServiceFacilitator, Sarah (CS)
zzBaker, Antoinette (CC)



[Add Participant](#)

Goals *

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<input type="checkbox"/>	Goal	
<input type="checkbox"/>	Basic Needs Goal #1	
<input type="checkbox"/>	Basic Needs Goal #2	
<input type="checkbox"/>	Substance Use Goal #1	
<input type="checkbox"/>	Substance Use Goal #2	

Narrative *

Designate Signer

Date: 10/13/2016 9:15:02 AM

Name of Signer: * ▼

Sign this note when I save it.

Billable Progress Notes

Billable Progress Notes require you to document specific pieces of information in order to properly Bill for the services provided. Those required fields will appear when you select the Billable button at the top of the note...

Is this a Billable or Non-Billable Service? * Billable Non-Billable

Service Provider * ▼

Program * ▼

Degree Level * ▼

Date Occurred: * : AM PM

Type of Contact: * ▼

Documentation Time: * Hr Min

Service Time: * Hr Min

Travel Time: Hr Min Miles Traveled: Miles

Total Time: * Hr Min

Place of Service * ▼

Diagnosis * ▼

Please choose the Mental Health or AODA diagnosis most relevant to this contact. Do not select Autism, Intellectual Disability, or medical conditions.

Service Type * Individual Service Group Service

The Service Provider field will be the specific person who performed the service. This should be the person logged in and writing the note, but there may be instances where another user will be documenting the note for the person who provided the service(s). The Program field should be populated with the specific CCS Program for which this service was provided.

The Degree Level is the degree level of the Service Provider. In the future, this field will default based on the active degree level that the Service Provider has in the system.

The Date Occurred field is to document when this particular service took place. This Date NEEDS to fall within the timeframe of an Approved Service Authorization for this Progress Note to be Billable.

The Type of Contact dropdown box is where you will document how the contact with the client took place. Did you meet with the client, was it a phone call, etc.

The time fields are where you will document how much time was spent performing various billable tasks related to this specific service performed. Document how much time was spent doing Documentation, both on paper and in the CCS Module, how much time was spent performing the service(s), and how much time was spent travelling. If you document any Travel Time, then you will be required to document how many miles you travelled.

Place of Service is where you will document the location that this service happened. The dropdown list will have options for Home, indicating the client's home, Office, indicating the provider's office, and many other options.





The Diagnosis field is where you will document the Client's diagnosis that is related to the service provided. Select from a list of available Client Diagnoses

The Service Type field is a way to document if the service provided was part of a therapy group. If you select 'Group' for this field, then you will be required to document the number of clients that were a part of this group. That will be documented by indicating how many clients in the group were receiving services related to CCS vs how many clients were not in the CCS program.

Next, you will select your Note Type. As discussed above, the Note Type MUST match an Approved Service Category on an Approved Recovery Plan. If it does not match, you will not be able to sign a billable Progress Note.

Participants is **NOT** a required field.

Immediately prior to the Narrative, you have a section of Goals. The list of Goals comes from the specific Goals that are associated with the Services you are authorized to provide. You should select the specific Goals that you worked with the client on during your Service.

Goals *		
		Page 1 ▾
<input type="checkbox"/>	Goal	
<input type="checkbox"/>	Basic Needs Goal #1	
<input type="checkbox"/>	Basic Needs Goal #2	
<input type="checkbox"/>	Substance Use Goal #1	
<input type="checkbox"/>	Substance Use Goal #2	

Narrative *

The Narrative is the body of your Note. There are no 'formatting' restrictions on the Narrative EXCEPT that your Note Narrative should reflect back to the specific client Goals that you worked on with the client during your Service time.

The final field you will need to document is the person who will sign the note. You can select yourself if you have the necessary credentials, or you can select the person who provided the service from your organization to sign the note.

Non-Billable Progress Note

Many of the fields required for a non-Billable Progress Note are similar to a Billable Progress Note. The biggest difference is that you only need to document the Total Time that the non-Billable Service took place.

Progress Notes Search

When you first access Progress Notes with a client selected, there is a section at the top that searches for client notes, automatically. The default search that runs goes from the first of the previous month through the current date.

The screenshot shows a search interface for Progress Notes. At the top, there is a header "Progress Notes" with a link "Click to expand/collapse search" and a search icon. Below this are several input fields: "Signer Last Name:", "Signer First Name:", "Contact Type:" (with a dropdown arrow), and "Date Range:" with "From" and "To" sub-fields, each with a calendar icon. To the right of these fields are two dropdown menus: "Type of Note:" and "Signature:". The "Signature:" dropdown is open, showing four options: "Signed and UnSigned Notes" (highlighted in blue), "Only Signed Notes", "Only UnSigned Notes", and "My Unsigned Notes". At the bottom of the form are two buttons: "Search" and "Clear".

You can refine the search to filter the list down further.

Most of the search fields are self-explanatory, "Who" signed or needs to sign a note, the Type of Contact, the Note Type, and the Date Range. The Signature field needs a bit more explanation. In the Signature drop-down list, there are four options. The top three choices will search for notes on the 'Current Client' that you are working with. So it will find Signed Notes, Unsigned Notes, or Both Signed and Unsigned Notes for that Client, independent of signer. If you are note the Service Facilitator, you will see notes written by anyone from your agency. The Service facilitator will see all notes written for their client, independent of agency.

The fourth choice, 'My Unsigned Notes' will find any note that YOU, the user, needs to sign. You can use the 'My Unsigned Notes' search as, kind of, a to-do list to make sure you have signed all notes that you have started but have not completed.

Lastly, at the top of the notes page there is an additional view called 'My Unsigned Notes'.

[Progress Notes](#) | [My Unsigned Notes](#)

This view will present you with a list of all notes that require your signature. You can go through this list one-by-one and sign off on notes, or select the 'Remove' button to delete the Unsigned Note.

Correcting a Signed Note

If you have signed a note and need to make a correction to that note, there are options available.

- To correct minor errors in the narrative of a signed note, you can add and Addendum to the narrative that clarifies the original content of the note narrative.
- To correct any of the other fields on a signed note (Date, Times, Degree Level, etc), you have the option to 'Request Billing Correction'. This will send a message to your Supervisor, or the CCS Administrator, who has the ability to Unlock the note for you, or can Deny the Unlock request. All fields, except the Note Narrative, will be unlocked and editable.
- To correct a note that was entered under the wrong client, please contact the CCS Administrator who can Void the note and remove it from the client's chart.