

Audit

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AUDIT NAME	PASSING %
2024 Standard V Coordination and Continuity of Care	100
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Staff Audit

SECTIONS

Section

NUMBERTITLE 1 V. Coordination and Continuity of Care

		SECTION QUESTIONS	
Questions			
1	5.1 CMHSP has developed service coordination agreements with each of the pertinent public and private community-based organizations and providers to address issues that relate to a shared consumer base. Agreements will describe the coordination arrangements agreed to and how disputes between agencies will be resolved.	Met/Partially Met/Not Met	N/A
2	 5.2 The CMHSP has procedures to ensure that coordination occurs between primary care physicians and the CMHSP and/ or its network. Procedures ensure that the services the CMHSP furnishes to the beneficiary are coordinated with the services the beneficiary receives from other MCOs and PIHPs. 	Met/Partially Met/Not Met	N/A
3	5.3 CMHSP assures appropriate Follow-up After Hospitalization for Mental Illness (FUH) The percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental illness diagnoses and who had an outpatient visit, an intensive outpatient encounter or partial hospitalization with mental health practitioner within 30 days.	Met/Partially Met/Not Met	N/A
4	5.4 For enrollees with special health care needs determined through an assessment to need a course of treatment or regular care monitoring, each CMHSP must have a mechanism in place to allow enrollees to directly access a specialist (for example, through a standing referral or an approved number of visits) as appropriate for the enrollee's condition and identified needs.	Met/Partially Met/Not Met	N/A

5 5.5a Coordination Procedures / Prinary Care Providers: a. The CMHSP will initiate affirmative efforts to ensure the integration of primary and specially behavioral health services for Medicaid members. Met/Partially Met/Not Met N/A 6 5.5b b. The CMHSP will share with other providers servicing the enrollee with special health care needs the results of its identification and assessment of that enrollee's medics to prevent duplication of hose activities Met/Partially Met/Not Met N/A 7 5.6 The CMHSP must so the effort to conduct an initial health screening of each member's needs, within 90 days of the effort to conduct an initial attempt to contact the members Met/Partially Met/Not Met N/A 8 5.7a The CMHSP must ensure each member has engoing source of care appropriate to his or here needs Met/Partially Met/Not Met N/A 9 5.7a The CMHSP must ensure each member has engoing source of care appropriate to his or here needs Met/Partially Met/Not Met N/A 10 7b A person or entity formality member setigible for specialty memtal health services to: Met/Partially Met/Not Met N/A 11 5.8b As authorized by the memtal health are end referrals for appropriate services. Met/Partially Met/Not Met N/A 12 5.8b As authorized by the memtal health are end referrals for appropriate services. Met/Partially Met/Not Met N/A 12 5.8b As authorized by the memtal health are end referrals for appropriate services. Met/Partially Met/Not Met N/A				
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			SECTION QUESTIONS	

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