CSI and Mental Health Services Registration Document User Guide

Version 2.0
2/20/2024

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Introduction

The Department of Health Care Services, Client and Service Information System (CSI) is a system of reporting data to California Department of Health Care Service (DHCS) for non-duplicative client-based information including all information necessary to meet federal Medicaid reporting requirements, as well as any other state requirements established by law. Streamline Healthcare Solutions (SHS) has designed Documents to support this effort for efficient reporting. This is a User Guide to help the customer know how to fill out the document and use the features of the Smartcare system (SC).

The document has the following tabs/sections and this guide will walk you through each area so that successful reporting to DHCS can take place.

Some California Counties require additional information during Registration. This will be handled as a DFA-inserted tab in this document, by county.

Mental Health Services Registration Document Tabs

This document has the following tabs in it. Tabs act like a separate page or sections in a document, typically containing different categories of information (ie: Program Enrollment, Demographics, Insurance, or Client Contacts). The CSI document contains the following Tabs:

1. Program
2. Episode
3. CSI Assessment
4. General
5. Demographic and Client Information
6. Diagnosis
7. Client Contacts
8. Authorization Requests
9. Insurance
10. Forms and Agreements

Program

This tab is used to enroll a client into a program. The client should be enrolled in a program identified to best serve them based on initial screening. The program selected here is designated as the primary program. The tabs, sections and fields that appear in this Registration Document will be dependent on which Program is selected and whether that program is required to report CSI data or not.

Enter applicable information and note that some fields are required in order to sign the Registration Document. Refer to Program Enrollment Tab Field Definitions for information about each field.

When finished entering the data into the fields, click on the blue "Add Program Details" button to insert the program into the listing below in the grid. There are multiple line items in the grid: this allows for multiple CSI documents to be done over a period of time/years and will show the history. The Program Details grid is Read Only. Duplicate programs are not allowed.

Program Enrollment Tab Field Definitions

Your system may have been customized to require additional fields.

Field	Description	Required	Global Code/ Category
Primary Program	This will display a list of programs which logged in user has permission to.	Yes	
Status	Indicates if the program is being requested or if you are enrolling the client into the program. If a client is enrolled in a CSI-reportable program, a TEDS episode will be triggered.	Yes if Primary Program is completed	PROGRAMSTATUS
Assigned Staff	This will display a list of all active Staffs.	No	

Requested Date	Date on which client requested the program. Enter the date in the mm/dd/yyyy format or click the calendar icon to navigate through the calendar and select the date. Clicking the double caret (<< or >>) in the calendar navigates you backward or forward by one year. Clicking the single caret (< or >) navigates you backward or forward by one month. For pre-set dates, click the applicable hyperlink in the Streamline Date/Time Language section at the bottom of the pop-up calendar.	Yes if Status = Requested
Enrolled Date	Date on which client has enrolled into the program. Enter the date in the mm/dd/yyyy format or click the calendar icon to navigate through the calendar and select the date	Yes if Status = Enrolled
Comment	Enter any comments relative to the program.	No

Current Programs grid

Client Program Assignment with response values will be entered to the grid for each Program added to the grid. This section allows edits to Program Assignments that have been created by the current document id using the edit feature (by clicking the radio button).For any Program Assignments created via the Program Assignments Details or created in a document where the document is <> the current document id then these programs would be read only.

Episode

The Episode tab is where a client can be registered to begin an episode of care with the organization. When Episodes close, End Users may need to complete a CSI/Update Discharge Document if required by their organization's process or policy.

Case Information

If there was previous information entered it will be pulled through into the Case Information area.

If an Open Episode exists then Case Information is read only otherwise we can edit the information. In the Case Information area, the client's time frame from contact to registration can be noted. Once the Registration Document is signed, it creates a new episode with a status of "Registered" in the Client Episodes tab of the Client Information screen for this client. Refer to Case Information Field Definitions for information about each field.

Episode Tab Field Definitions
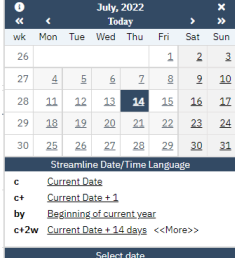
Your system may have been customized to require additional fields.

Field	Description	Required
Initial Referral/Screening Date	The date the client was referred and/or screened for services. Enter the date in the mm/dd/yyyy format or click the calendar icon to navigate through the calendar and select the date. Clicking the double caret (<< or >>) in the calendar navigates you backward or forward by one year. Clicking the single caret (< or >) navigates you backward or forward by one month. For pre-set dates, click the applicable hyperlink in the Streamline Date/Time Language section at the bottom of the pop-up calendar.	No

Registration Date	The date the client was registered for the current episode of care. This should be the same as the date of their first appointment, which is likely the same as the date they are completing this document. Enter the date in the mm/dd/yyyy format or click the calendar icon to navigate through the calendar and select the date	No
Information	Read only field that displays the previous episodes of care, if there are any.	No
Registration Comment	Text field to describe anything of note that occurred during the registration process. An unlimited number of characters is allowed. This information is ported to the Registration Comment field on the Client Episodes tab of the Client Information screen after the Registration Document is signed.	No

CSI Episode Information

In this section, California-specific CSI data is captured for reporting purposes. Refer to CSI Episode Field Definitions for information about each field.

CSI Episode Field Definitions

Field Name	Definition	Required	Global Code/ Category
Transaction Type	Indicates the status of the client as of the Through/Exit Date.	Yes	XFILETYPE
Admission Date	Date on which client got admitted	Yes	
First Date Of Service	Date on which client first service done	Yes	
Last Date of Service	Date on which client last service done	Required If Transaction Type = Admission and Discharge	
Discharge Date	Date on which client got discharged	Required If Transaction Type = Admission and Discharge	
Patient Status	Indicates the status of the client as of the Through/Exit Date.	Required If Transaction Type = Admission and Discharge	PatientStatus
Legal Class at Admission	Identifies the legal class under which the client is admitted to acute 24-Hour Mental Health Service (MHS)	Required If Transaction Type = Admission and Discharge	LegalClass
Legal Class at Discharge	Identifies the legal class of the client at the time of discharge from acute 24-Hour Mental Health Service (MHS)	Required If Transaction Type = Admission and Discharge	LegalClass

Admission Necessity	Identifies the type or reason for the client's admission into an acute care hospital.	Required If Transaction Type = Admission and Discharge	AdmissionNecessity

Referral Resource

The Referral Resource area contains data regarding how the client came to be known to your organization. These data points will initialize from the most recently signed Inquiry and will initialize to client information as part of the episode when the record is signed.

Enter applicable information and note that some fields are required in order to sign the Registration Document. Refer to Referral Resource Field Definitions for information about each field.

If an Inquiry was performed and/or Client Information was updated, some fields are already populated on this tab.

Referral Resource Field Definitions

Field	Description	Required	Global Code/ Category

Referral Date	Date that client was referred to your organization.	Yes	
Referral Type	How the client was informed about your organization's services.	Yes	REFERRALTYPE
Referral Subtype	Defined by your organization and based upon the selection of the value in the Referral Type field. This allows for a greater granularity in defining the client's referral source. Only available if subtypes have been defined for the specific Referral Type.	No	
Type of Provider	Select the type of provider. This field is defined by your organization. For example, Primary Care Physician.	No	PCPROVIDERTYPE
Provider Name	Select the name of the client's provider.	No	
Organization Name	Enter the name of the organization that referred the client.	Yes*	
Phone	Enter the phone number related to the referral source.	No	
First Name	Enter the first name of the individual referring a client or the contact at an organization.	Yes*	
Last Name	Enter the last name of the individual referring a client or the contact at an organization.		
Address Line 1 and Address Line 2	Enter the address of the individual referring a client or the contact at an organization.	Yes*	
City	Enter the city of residence for the individual referring a client or the contact at an organization.	No	
State	Select the state or territory of residence for an individual referring a client or the contact at an organization.	No	
Zip	Enter the zip code of the individual referring a client or the contact at an organization.	No	
Email	Enter the e-mail address for the individual referring a client or for the contact at an organization.	No	
Comments	Enter any additional comments relative to the client's referral resource.	No	

* Either the Organization Name or the First and Last Name is required.

Referral Reason

Enter the reason or reasons for referral and a comment, if applicable. Refer to Referral Reason Field Definitions for information about each field.

Referral Reason Field Definitions

Your system may have been customized to require additional fields.

Field	Description	Required	Global Code/ Category
Reason for Referral 1,2,3	Select the reason(s) for referral. The values in this Global Code are defined by the customer.	No	REFERRAL REASON
Comment	Enter any additional comments relative to the referral reason(s). An unlimited number of characters is allowed.	No	

CSI Assessment

This tab begins with a section describing the CSI Assessment Instructions for the end user. Additionally, this Tab can be turned on/off and become a stand-alone DFA document if needed.Refer to CSI Assessment Field Definitions for information about each field.

Initial CSI data is filled in, as appropriate. Refer to CSI Assessment Field Definitions for information about each field.

Effective 01/05/2023 | Status New | Author Reddy, Rajasekhara | Sign

Program | Episode | **CSI Assessment** | General | Demographic and Client Information | Diagnosis | Client Contacts | Authorization Request | Insurance | Forms and

Initial

CSI Assessment Data is required for all new clients and clients not seen in the past 12 months. This data is used to capture the timeliness of service provision from time of request for service to assessment and subsequent receipt of services. Dates must correspond to the appropriate date of contact, offered appointment or provided service as they relate to the client's CSI reportable services.

CSI Assessment

Request Date | | Referral Source

First Offered Assessment Appointment Date | | Second Offered Assessment Appointment Date | | Third Offered Assessment Appointment Date

Accepted Assessment Appointment Date | | Assessment Start Date | | Assessment End Date

First Offered Treatment Appointment Date | | Second Offered Treatment Appointment Date | | Third Offered Treatment Appointment Date

Accepted Treatment Appointment Date | | Treatment Start Date | | Closure Reason

Closed Out Date | | Referred To

CSI Assessment Field Definitions

Field Name	Definition	Required
Request Date	Date of First Contact to Request Services	Field is required if client has not had an active CSI Episode with the author associated to the documents author within the last calendar year. Example: Author is associated to Provider A, Provider A opened a CSI episode 6 months ago then closed that episode 1 month later. The episode this document is associated to is not required to complete this field or the following fields (Seq ID's 2-19)
First Offered Assessment Appointment Date	Identifies the First Assessment Date offered to client.	Yes
Second Offered Assessment Appointment Date	Identifies the Second Assessment Date offered to the client	
Third Offered Assessment Appointment Date	Identifies the Third Assessment Date offered to the client	
Accepted Assessment Appointment	Identifies the Assessment Date accepted by the client	

Assessment Start Date	Identifies the Date of First Assessment Appointment	
Assessment End Date	Identifies the Date of Final Assessment Appointment	
First Offered Treatment Appointment Date	Identifies the First Specialty Mental Health Services Date offered to the client	Yes
Second Offered Treatment Appointment Date	Identifies the Second Specialty Mental Health Services Date offered to the client	
Third Offered Treatment Appointment Date	Identifies the Third Specialty Mental Health Services Date offered to the client	
Accepted Treatment Appointment Date		
Treatment Start Date	Identifies the Date of First Treatment Appointment attended by the client following the Assessment Start Date	
Closure Reason	Identifies the list of reasons the assessment treatment process was discontinued, other than successful completion of the process	
Closed Out Date	Identifies the Date the assessment and initial treatment process was closed out due to the client not showing up or being unreachable for scheduled appointment(s). It is not necessarily the final date that the client was seen	
Referred To	Identifies where the client was Referred To (if applicable)	
Other		

General

The General tab contains general information about the client such as name, e-mail address, phone number, address, etc. If an Inquiry was performed and/or Client Information was updated, some fields are already populated on this tab. Information from an Inquiry is stored in Client Information. When a Registration Document is created, information is pulled from Client Information into the General Information section.

If information is changed in the Registration Document and signed, those changes are saved back to Client Information. Client Information always has the latest information. Refer to Common Fields Across Screens at the end of this document for details about which fields are populated from other screens.
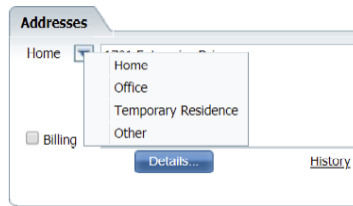
Phone Numbers

Any of the Phone Number fields can be redefined to the values shown in the pop-up window below. Click the down arrow next to the field whose title you wish to change and select the new title from the pop-up list.
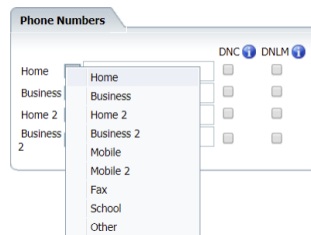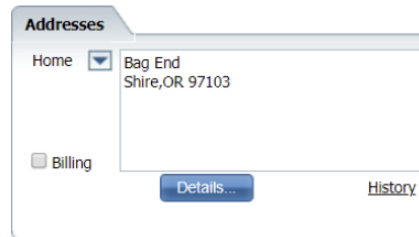
Addresses

Click the down arrow next to Home to add additional addresses.
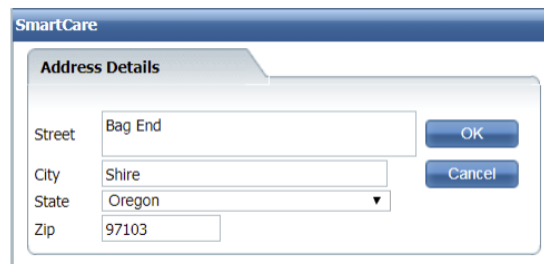
The address area allows for the entry of a contact address in one of two ways. In the first method, the address can be typed directly into the field as shown below.

Once you enter the address and either tab or click out of that field, a detailed screen displays in which to verify the formatting.

In the second method, click the Details button and a more structured data entry pop-up window displays that includes a list of state/territory values.

By clicking the OK button on the Address Details pop-up window, the address is inserted into the record and is displayed in the text box.

Comments

You may make any additional comments about client special needs or other items important to note in the textbox.

Comment

List any special needs or considerations important to note about the client

Demographic and Client Information

Identifying Information

Enter applicable information and note that some fields are required in order to sign the Registration Document. Refer to Identifying Information Field Definitions for information about each field.

Identifying Information Field Definitions

Field	Description	Required	Global Code/Category
Date of Birth	Client's date of birth	Yes	
Age	Client's age. This field is populated from the Inquiry and cannot be changed.	No	
Sex	Select the client's legal gender. This pertains to legal gender for billing insurance.	Yes	
Marital Status	Select the client's marital status.	Yes	MARITAL STATUS
Gender Identity	Select the client's gender identity.	No	GENDER IDENTITY
Sexual Orientation	Select the client's sexual orientation.	No	SEXUAL ORIENTATION
Deceased On	Client's date of death. Enter the date in the mm/dd/yyyy format or click the calendar icon to navigate through the calendar and select the date.	No	
Cause of Death	Select the client's cause of death.	No	CAUSE OF DEATH
Preferred Pronoun	Select the client's preferred pronoun.	No	PREFERRED PRONOUN
Ethnicity	Multi-select check boxes to note client's designation regarding Hispanic origin.	No	ETHNICITY
Race	Multi-select check boxes to note client's designation(s) regarding race.	Yes	RACE
Client declined to provide	Multi-select check boxes to note the information that the client chose not to provide.	No	ClientConsents

Additional Identifying Information

Add California-specific information as appropriate. Refer to Additional Identifying Information Field Definitions for information about each field.

Additional Identifying Information Field Definitions

Mental Health Services Registration

Effective 01/05/2023 | Status New | Author Admin, System | Sign

Program | Episode | CSI Assessment | General | **Demographic and Client Information** | Diagnosis | Client Contacts | Authorization Request | Insurance | Forms and Agreements

Additional Identifying Information

Place of Birth - Country [ ] Place of Birth - State [ ] Place of Birth - County [ ]

Special Population [Individualized Education Pla ∨] Conservatorship or Juvenile Court Status [ ] Has the client experienced a traumatic event? [ ]

District of Residence [ ]

General Medical Condition(s)

1. [ ] 2. [ ] 3. [ ]

Does the client have a Substance Abuse/Dependence issue? [Yes, the client has a substance abuse / ∨]

Substance Abuse/Dependence Diagnosis [ ]

What type of disability /disabilities does the client have, if any? [▼]

Field	Description	Required	Global Code/Category
Place of Birth - Country	This display the country of the client	No	XCABirthCountry
Place of Birth - State	This displays the state of the client. If Place of Birth - Country <> United States then default value to Not a US State and make the field read only.	Yes	XCADriverLicState
Place of Birth - County	This displays the county of the client. If Place of Birth - Country <> United States then default value to Not a US State and make the field read only.	Yes	XCABirthCounty
Special Population	Identifies any special population services for statistical purposes	No	PRIORITY POPULATION
District of Residence	Identifies the district of residence	If Special Population = "C = Individualized Education Plan (IEP) required service(s) (AB 3632)" then field is displayed and	

		becomes required. Else hide field.	
Conservatorship or Juvenile Court Status	Identifies whether or not the client has a conservatorship or juvenile court status.	Yes	Conservatorship
Has the client experienced a traumatic event?	Identifies whether or not the client has experienced a traumatic event	Yes	TraumaticEvent
General Medical Condition 1, 2, 3	Select the client's general medical condition	Yes	XCAMedicalCondition
Does the client have a Substance Abuse/Dependency issue?	Select if the client had a substance abuse/dependence issue.	Yes	XCASubstanceAbuse
Substance Abuse/Dependence Diagnosis	Select a diagnosis	Conditional	
What type of disability/disabilities does the client have, if any?	Indicate if the client has a disability/disabilities.	Yes	XClientDisabilities

Primary Care Physician

Select a primary care physician from the drop-down list or select the "Client does not have PCP" check box. If the client's primary care physician is not included in the drop-down list, you can add them by completing the steps in the Add a Primary Care Physician procedure, below.

Refer to Primary Care Physician Field Definitions for information about each field.

Add a Primary Care Physician

1. Select **<Create Primary Care Physician>** from the Primary Care Physician drop-down list and the window below is displayed.

1. Select the arrow in the Type drop-down list and choose either Primary Care Physician or one of the other values in this drop-down.

The other values are defined in the Global Code PCPROVIDERTYPE. The values defined by PCPROVIDERTYPE are only displayed from this window.

2. Fill out the rest of the fields in this window and click the **Save** button.

Required fields are: First Name, Last Name, Organization.

The physician you just added is now displayed in the field:

To change any information you just entered or to delete the physician from the list, click the "Edit Provider…" hyperlink. The window with the physician's information is re-displayed.

Primary Care Physician Field Definitions

Your system may have been customized to require additional fields. There are no Global Codes for this area.

Field	Description	Required	Global Code/Category
Primary Care Physician	Select the client's primary care physician or select <Create Primary Care Physician> to add a primary care physician.	No	
Organization	The organization that the primary care physician is part of.	No	
Client does not have PCP check box	Select this check box if the client does not have a primary care physician (PCP).	No	
Phone #	The primary care physician's phone number.	No	
PCP Email	The primary care physician's e-mail address.	No	

Financial Information

Enter applicable information. Refer to Financial Information Field Definitions for information about each field.

Financial Information Field Definitions

Field	Description	Required	Global Code/Category
Financially Responsible radio buttons	Indicates whether the client is the financially responsible party. Select the applicable radio button.	No	

Annual Household Income	Enter a numerical value.	No	
# of Dependents	Enter a numerical value.	No	

Family Information

Enter applicable information.

Family Information Field Definitions

Your system may have been customized to require additional fields.

Field	Description	Required	Global Code/Category
Pregnancy Status	Indicate if the client is pregnant at time of admission	If Sex = Femal	PregnantOnStartDate
Mother's First Name	Indicate the client's mother's name. If unknown, use UNKNOWN	Yes	
# of Dependents under the age of 18	Indicate the number of dependents.	Yes	
# of Dependents under the age of 18	Indicate the number of dependents.	Yes	

Living Arrangement

Enter applicable information and note that some fields are required in order to sign the Registration Document. Refer to Living Arrangement Field Definitions for information about each field.

Living Arrangement Field Definitions

Your system may have been customized to require additional fields.

Field	Description	Required	Global Code / Category
Living	Select the environment in which the client is living.	Yes	LIVINGARRANGEMENT
County of Residence	Start typing the **name of the county** and then select the desired county from the drop-down list.	Yes	----
County of Financial Responsibility	Start typing the **name of the county** and then select the desired county from the drop-down list. This is typically the client's county of residence	No	----

Educational/Employment

Enter applicable information and note that some fields are required in order to sign the Registration Document. Refer to Educational/Employment Field Definitions for information about each field.

Educational/Employment Field Definitions

Your system may have been customized to require additional fields.

Field	Description	Required	Global Code / Category
Educational Status	Select whether the client is currently enrolled in the educational system and if so, what type of educational program (for example, vocational, continuing, etc.).	Yes	EDUCATIONAL STATUS
Veteran Status	Select the client's Veteran's status	No	XCATEDSVETER ANSTATUS
Military Status	Select the client's military status.	No	MILITARY STATUS
Employment Status	Select the client's employment status.	Yes	EMPLOYMENT STATUS
Employment Information	Enter information in the text box to record information about the client's employment. For example, company name or job title.	No	----

Language

Enter applicable information and note that some fields are required in order to sign the Registration Document. Refer to Language Field Definitions for information about each field.

Language

Primary Language [ ]   Preferred Language [ ]   ☐ Client does not speak English   Hispanic Origin [ ]
☐ Interpreter Services Needed

Language Field Definitions

Your system may have been customized to require additional fields.

Field	Description	Required	Global Code / Category
Primary Language	Select the client's primary language in which to receive services.	Yes	LANGUAGE
Preferred Language	Select the client's preferred language in which to receive services.		LANGUAGE
Client does not speak English check box	Select this check box if applicable.	No	----

Hispanic Origin	Select details about client's Hispanic origin. *Refer to your agency's reporting requirements to determine whether this field is used for reporting or whether the Ethnicity field (refer to Identifying Information Field Definitions) is used instead.	No*	XCAHISPANICO RIGIN
Interpreter Services Needed	Select this check box if applicable.	No	

Transportation Information

Enter applicable information

Field	Description	Required	Global Code / Category
Transportation Service		No	
Note any special needs accommodations (e.g. wheelchair, service animal, high rise)		No	

Preferences

Enter applicable information and note that some fields are required in order to sign the Registration Document. Refer to Preferences Field Definitions for information about each field

Preferences Field Definitions

Your system may have been customized to require additional fields.

Field	Description	Required	Global Code / Category
Communication Preference	Select the client's preferred method of communication. For example, e-mail, text, or phone.	No	REMINDER COMMTYPE
Mobile Phone Provider	Select the client's phone provider. For example, Verizon, AT&T, etc. The values in this Global Code are defined by the customer.	No	MOBILE PHONE PROVIDER
Days	Multi-select check boxes to indicate the days of the week the client is available. This field is used for the Team Scheduling functionality. It defines the days the client is available and then only allow scheduling for the client on those days.	No	----
Geographic Location	Enter a general location that can be used for the Team Scheduling functionality in this text box. This field enables staff to group clients together in the same geographic location for scheduling purposes to minimize driving to all sides of their covered areas in the same day. For example, they can see clients in one area of a town today and in another area of the town tomorrow.	No	----

Comment	Enter any other client preference information in this text box.	No	----

Picture

Upload a picture of the client and save it with the Registration Document.
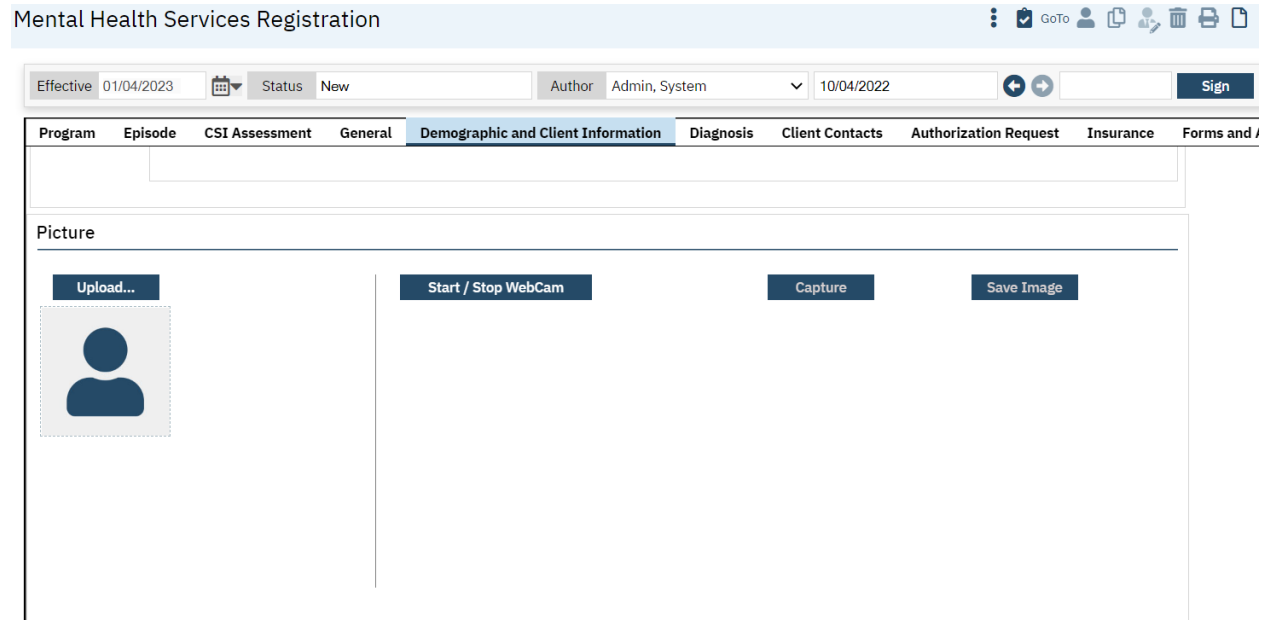
Upload a Picture

1. Click the **Upload** button.

The pop-up window is displayed.
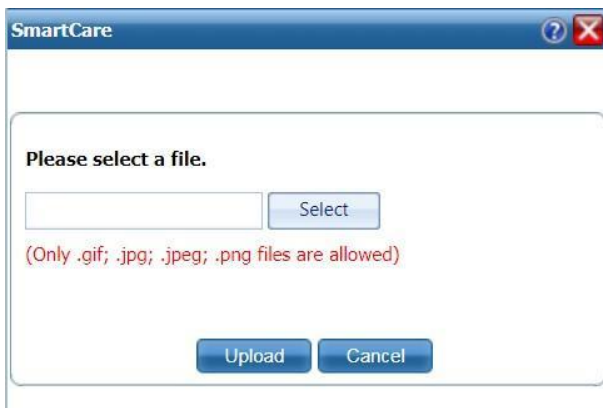
2. Click the **Select** button and navigate to the location of the picture file.

3. Click the **Open** button to attach the picture file. A green ball is displayed next to the name of the picture file if the file is in an acceptable format.

4. Click the **Upload** button. The picture file is uploaded to the Registration Document.
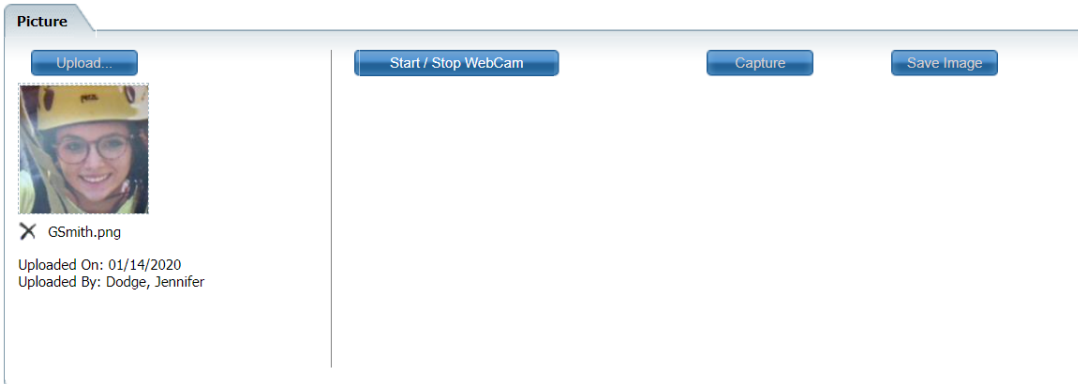
Use the WebCam

You must have an SSL certificate installed in order to use the webcam.

● Click the **Start/Stop WebCam** button to start the webcam.

● Click the **Capture** button to take a picture from the webcam. The picture is displayed under the Capture and Save Image buttons.

● To retake the picture, click the Capture button again. Once you have an acceptable picture, continue with step 3.

● Click the **Save Image** button and the picture from step 2 is automatically uploaded to the document (the picture is now displayed under the grayed out Upload button with the file name of the client in the format LastName_FirstName_ClientID) and the webcam is stopped.

Diagnosis

The Diagnosis tab contains the client's diagnosis. If there is already a signed diagnosis document for the client, that diagnosis will initiate when you open the Diagnosis section in the Registration Document.

The Add Diagnosis button will redirect the user to the DSM 5 Document Screen. The user may add or update diagnosis information. Click on the "Add Diagnosis" button. A pop-up will display that will allow you to search for a ICD-10 CM code or the description of the diagnosis (ie: depression). Once the list of diagnoses displays, select the appropriate one and "Insert" into the grid and sign the DSM 5 document. Only the new Registration Document will have the signed DSM 5 document listed in the below grid.

Client Contacts

This tab is used to add records indicating additional individuals that are important to the client's care. When you navigate to the tab the first time, the "List of Contacts" grid is empty if there are not already any contacts listed in the client's record. The Registration form must be saved before you are able to add a new contact. Note that saving the form is different from signing as saving does not require all validations to be fulfilled.

Add or Modify a Contact

Add a new contact or modify an existing contact by following the steps below.

1. Click the **Add/Edit Contacts** button. The Client Information screen opens to the Contacts tab.

2. Complete the areas on the tab and click the **Insert** button. Refer to Client Information Contacts Tab Field Definitions for information about each field.

Client Information Contacts Tab Field Definitions

Your system may have been customized to require additional fields.

Field	Description	Required	Global Code / Category
Relation	Select the relationship the contact has with the client.	Yes	RELATIONSHIP
Add to Frequent Contacts button	Click this button to add a value to the organization's frequent contacts, which, if approved by an administrator, can be used by other staff later in the frequent contact search. Refer to the *Frequent Contacts User Guide* for more information.	----	----
Frequent Contact Search button	Click this button to search for frequent contacts across the approved agency Frequent Contacts, and if selected, will populate with the phone and address information for that frequent contact.	----	----
Prefix	Select the contact's preferred prefix.	No	CLIENTNAME PREFIX
First Name	Enter the contact's first name.	Yes	----
Last Name	Enter the contact's last name.	Yes	----

| Field	Description	Required	Global Code / Category

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510 E. Butler Ct., Kalamazoo, MI 49007| Phone - (877) GO-SHS-41 | Fax - (877) GO- SHS42
www.streamlinehealthcare.com

Suffix	Select the contact's preferred suffix.	No	CLIENTNAME SUFFIX
Date of Birth	Contact's date of birth. *This information is needed for any contact that is considered the "Insured" on a client's coverage plan(s). Enter the date in the mm/dd/yyyy format or click the calendar icon to navigate through the calendar and select the date. Clicking the double caret (<< or >>) in the calendar navigates you backward or forward by one year. Clicking the single caret (< or >) navigates you backward or forward by one month. See areas outlined in red below. For pre-set dates, click the applicable hyperlink in the Streamline Date/Time Language section at the bottom of the pop-up calendar.	No*	----
Age	A read only field that calculates based on the contact's date of birth and the current date.	No	----
Sex	Select the contact's legal gender.	No	----
SSN	Last 4 digits of contact's social security number.	No	----
Insert button	Click this button to add or change the contact's SSN. A pop-up window is displayed. Enter or change the SSN and click the OK button.	----	----
List As	A read only field that displays how the contact will be presented in a list page in SmartCare. Populated from the First Name and Last Name fields and cannot be changed.	----	----
E-Mail	Enter the contact's e-mail address.	No	----
Assign Treatment Team Role button	Click this button to assign a Treatment Team Role to the contact and add the contact to the client's Treatment Team. Refer to the *Treatment Team User Guide* for more information.	----	----
Credentials	Select the contact's credentials. For example, Registered Nurse, Psychologist, etc.	No	LICENSETYPE
Department	Enter the department that the contact is part of.	No	----

| Professional Suffix | Enter the contact's professional suffix in the text field. | No | ---- |
| Organization | For contacts that are organizations (for example, Probation/Parole) this text field is used to note the organization's name. Note that the required fields of First/Last Name and Relation are still required. | No | ---- |

Field	Description	Required	Global Code / Category
Mailing Name	This text field can be used to designate a name or department for mailing that may differ from the First/Last Name fields.	No	----
Financially Responsible check box	Select this check box if the contact is financially responsible for the client.	----	----
Emergency Contact check box	Select this check box if the contact is the client's emergency contact. There must be one contact designated as the client's emergency contact in order to sign the Registration Document.	----	----
Guardian check box	Select this check box if the contact is the client's guardian.	----	----
Associated Client ID	If the contact being added is also a client with your organization, by clicking on the magnifying glass icon you will be presented with the Client Search screen. You can then search for the client record for the contact you are creating and click Select to relate the client ID to the contact record. If you complete this step in error, select the wrong client, or for any other reason wish to disassociate the client ID, click the X next to the magnifying glass.	----	----
Active check box	Select this check box if the contact is active.	----	----
Household Member check box	Select this check box if the contact is a member of the client's household.	----	----
Care Team Member check box	Select this check box if the contact is a member of the client's care team.	----	----
Phone Numbers area			

Home, Business, Home 2, Business 2, Mobile, Mobile 2, Fax, School, Other	Client's phone numbers. Click the down arrow next to any of these fields to redefine that field to another type of number. Numbers can be typed directly into the field with no dashes or parentheses and they will automatically format when you tab out of the field or navigate to another field.	No	----
Addresses area			
Address	Click the down arrow next to Home to enter an address for additional locations: Office, Temporary Residence, or Other.	No	----
Mailing check box	Select this check box if the address is also the mailing address.	No	----
Details button	Click this button to display the address by Street, City, State, and Zip in a pop-up window. Make changes if needed and then click the OK button.	No	----
History	Click this hyperlink to display a PDF of the contact's address history.	----	----
Field	**Description**	**Required**	**Global Code / Category**
Comments area			
	Enter any applicable comments about the contact. An unlimited number of characters is allowed.	No	----

List of Contacts

Once you have completed all required and applicable fields in the Contact Information, Phone Numbers, Addresses, and Comments areas, click the **Insert** button (outlined in red in the figure below) to create a contact record in the List of Contacts table.

1. Click the **Save** button to write this information to the client record.

2. Click the **Exit** icon ( ) in the tool bar to close the contact record and return to the Registration Document.

Mental Health Services Registration

Effective 11/13/2022 | Status In Progress | Author Admin, System | Sign

| Program | Episode | CSI Assessment | General | Demographic and Client Information | Diagnosis | **Client Contacts** | Authorization Request | Insurance | Forms and Agreement |

Add/Edit Contacts

List of Contacts

Contact	Relation	Phone	Organization	Guardian	Emergency	Financially Responsil	Household Membe	Care Team Membe	Active
contact, test	Brother			N	N	N	N		Y

Authorization Request

Mental Health Services Registration

Effective 11/13/2022 | Status In Progress | Author Admin, System | Sign

| Program | Episode | CSI Assessment | General | Demographic and Client Information | Diagnosis | Client Contacts | **Authorization Request** | Insurance | Forms and A |

Authorization Request

Insurer _____   Provider _____ ⓘ

Status _____ Active ☑ Appealed ☐ Urgent ☐

Site _____ **Show Rate**

Start Date _____ End Date _____ How Often _____ Req Units ____ Total Units ____

Code _____ ⓘ   Modifiers ____ ____ ____ ____

Comments _____

Authorization Request List

Insert   **Clear**

	SiteId	Start Date	End Date	Code	Total Units	Status	Comments

No data to display

Insurance

Enter applicable information

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The Insurance tab in the Registration Document is used for several purposes, including:

- electronically verifying eligibility,
- manually entering any insurance information that cannot be verified electronically (for example, grants),
- recording the client's financial status information, including household information, and
- providing any additional Financial Comments that may be helpful or necessary.

Electronic Eligibility Verification

Although more detail can be found in billing and/or interface documentation, the basics of electronic eligibility verification are described below.

If you entered information in the Insurance tab on the Inquiry Details screen, the Payer and Insurance ID information is already displayed.

In the Payer drop-down, **select the client's insurance payer**. In the Insurance ID field enter the **client's insurance ID** and then click the **Verify** button.

An Insurance ID is required for every client. If the client has a PASSR coverage plan, enter "PASSR" in the Insurance ID field and the requirement will not be applicable. Results are returned noting the client's eligibility status for the insurance information that was entered.

Coverage Information

Entering information in this area is optional.

You can manually add insurance information that was and/or was not able to be electronically verified. Any existing coverage for the client will initialize to Coverage Information from Client Plans And Time Spans.

Adding a plan to the Coverage Information adds the same plan to the List of Coverages on the Financial tab of the Client Information screen.

Each click of the **Add** button creates a line on which to enter insurance information. Once you add a row, you are minimally required to select the Plan name and enter the Insured Id.

Refer to Coverage Information Field Definitions for information about each field.

Coverage Information Field Definitions

Your system may have been customized to require additional fields.

There are no Global Codes for this area.

Field	Description	Required
Plan	Select the client's insurance plan based upon values entered by your organization.	Yes
Insured ID	Enter the client's insurance ID information.	Yes
Group ID	Enter the client's insurance group ID information.	No
Comment	Enter any additional information that may be pertinent to the client's insurance plan.	No
Coverage Information	Enter any additional information.	----

Forms and Agreements

The Forms and Agreements tab displays information about the documents that are part of a Packet that is associated with the Registration Document and/or the client's program. These documents may or may not be required to be signed before the client's Registration Document can be signed.

Mental Health Services Registration

Effective	11/13/2022	Status	In Progress	Author	Admin, System				Sign

Program Episode CSI Assessment General Demographic and Client Information Diagnosis Client Contacts Authorization Request Insurance **Forms and Agreements**

Refresh

Forms and Agreements

Document Name	Status	Effective Date	Author	Signed By Staff	Signed By Client	Required?
Release of Informa...						N
Consent And Author...						N
Consent And Author...						N
Consent To Treat						N

There are two types of Packets:

• Organization level Packet – This Packet is specified by the SetDefaultDocumentPacketIDInRegistration Configuration Key. Refer to Specify an Organization Level Packet for the Registration Document by Adding the DocumentAssignmentId to the Configuration Key for the procedure to set the value of this Configuration Key.

• Program level Packet – This Packet is specified in the Enrollment Packet field on the Program Details screen of the program that the client has requested or in which they are enrolled. Refer to the *Programs User Guide* for more information about this screen.

Program Details

General | Rules | Staff | Occupancy | Reporting | Claims | Custom Fields

General Information

Name	diana_program1
Display As	diana_program1
☑ Active	
☐ Cannot be Primary Assignment	
Type	NTP
National Provider ID	
Service Area	Mental Health
Facility Type	
Tax ID	
Taxonomy Code	Taxnomy code 2
Program Group	
☐ Vary Care Plan By Program	
Care Plan Document	

Intake

Intake Phone	( ) - /> Ext
Program Coordinator	
Capacity	
Currently Enrolled	6
Waiting	1
Enrollment Packet	

☐ Enrolled Packet Documents Require upon Program 'Requested' Status?

Comment

Address

Details...

Effective Periods

Effective From		Effective To		Insert

	Effective From	Effective To	
		No data to display	

Categories

☐ Inpatient Program   ☐ Residential Program
☐ After School Program   ☐ Show In White Board
☐ Bed Admission Requires Order   ☐ Bed Discharge Requires Order
☐ Automatic Attendance For Bed Assignment
☐ Primary Care Program
☐ Create Service for Same Day Admit and Discharge

Service Diagnosis

☑ Use Problem List For Diagnosis   ☐ Use Diagnosis Document

MAR Setup

☐ Client Order Meds   ☐ Prescribed Meds
☐ Non Prescribed Meds

Treatment Plan Catalog

Mobile

☐ Mobile

The Forms and Agreements tab can display documents from both an organization level Packet and a program level Packet. If there is a value specified in the

SetDefaultDocumentPacketIDInRegistration Configuration Key, the documents in that Packet are displayed on the client's Forms and Agreements tab. If there is a Packet specified in the Enrollment Packet field on the Program Details screen of the program in which the client is either "Requested" or "Enrolled", the documents in that Packet are also displayed on the Forms and Agreements tab. If there is no DocumentAssignmentId set in the SetDefaultDocumentPacketIDInRegistration Configuration Key and no Packet specified in the Enrollment Packet field, no documents are displayed on this tab.

To check the Packets that are defined in the system and determine if you can use one of these Packets for your client or if you need to create a new Packet, refer to Display the Defined Packets and the Documents Within a Packet.

Refer to Add a Document to a Packet for information about adding a document to a Packet and specifying if the document is required to be signed.

To assign the DocumentAssignmentId for the organization level Packet in the SetDefaultDocumentPacketIDInRegistration Configuration Key, refer to Specify an Organization
Level Packet for the Registration Document by Adding the DocumentAssignmentId to the Configuration Key. All documents that are part of the DocumentAssignmentId that is specified in the SetDefaultDocumentPacketIDInRegistration Configuration Key are displayed on the Forms and Agreements tab. If this Configuration Key is not set to a DocumentAssignmentId, then there is no organization level Packet specified in the system.

Refer to Forms and Agreements Tab Field Definitions for information about each field on this tab.

Forms and Agreements Tab Field Definitions

Your system may have been customized to require additional fields.

There are no Global Codes for this tab.

Field	Description	Required
Refresh button	Click this button to refresh the entries in the Forms and Agreements tab.	----
Document Name hyperlink	Click the hyperlinked name to open the document.	----
Upload New Images icon	Click this icon to upload a non-SmartCare document from this Registration screen instead of having to navigate to the My Office tab etc. to complete the upload. Clicking this icon displays the Upload File Detail screen. Use this screen to upload a file to the client's record. Refer to the *Scan and Upload Documents User Guide* for more information about uploading a document.	----
Scan New Images icon	Click this icon to scan a non-SmartCare document from this Registration screen instead of having to navigate to the My Office tab etc. to complete the scan. Clicking this icon displays the Scanned Medical Record Detail screen. Use this screen to scan a file to the client's record.-Refer to the *Scan and Upload Documents User Guide* for more information about scanning a document.	----
Status	Status of the document. Click the hyperlinked name to open the document.	----
Effective Date	Date the document is effective.	----
Author	Author of the document.	----
Signed by Staff	Name of staff member that signed the document.	----
Field	**Description**	**Required**
Signed By Client	Name of client that signed the document. All documents which are Required must be signed by the client before the author (staff) can sign the Registration Document.	----
Required?	Whether the document is required to be signed in order to complete the Registration Document. If a document has "Y" in this column, its Status must be "Signed" before the author (staff) can sign the Registration Document.	----

Display the Defined Packets and the Documents Within a Packet

Follow the steps below to display all of the Packets that have been defined in the system and to display which documents are part of each Packet.

1. Follow this path: **Administration** tab > **Document Assignment** banner.

The Document Assignments list page is displayed.

<u>Why Can't I Access This Screen?</u>
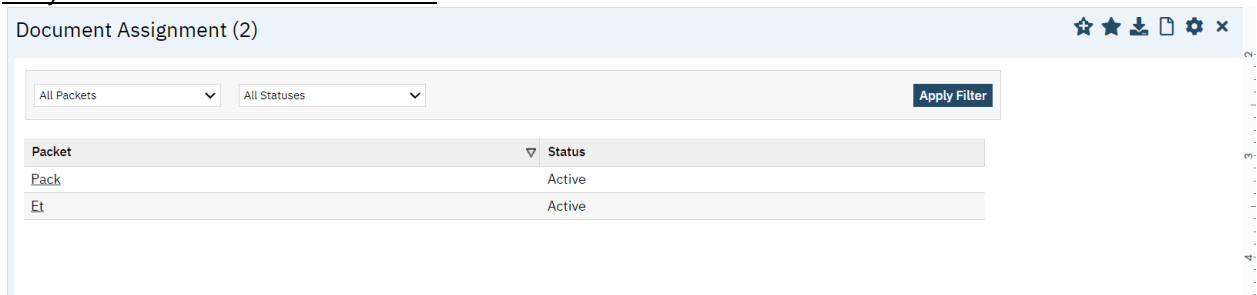
2. Apply the filter settings to display the desired Packets.

Refer to <u>Document Assignments List Page Field Definitions</u> for information about each field.

<u>Document Assignments List Page Field Definitions</u>
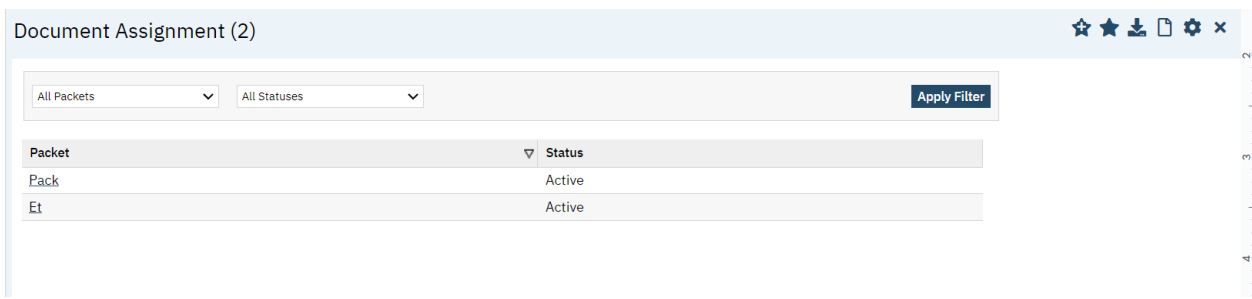
Your system may have been customized to require additional fields.

There are no Global Codes for this page.

Field	Description	Required
Filter area		
All Packets	Select the applicable Packet from the drop-down list to filter records to display in the list area of the page.	----
All Status	Select the status from the drop-down list to filter records to display in the list area of the page.	----
Apply Filter button	Click this button to apply the filter settings and display the results.	----
List area		
Packet	Packet name.	----
Status	Status of the Packet.	----

3. Click the hyperlinked **Packet name** and the Document Assignment Details (Admin) screen is displayed.

The documents that are part of this Packet are listed in the Documents area .
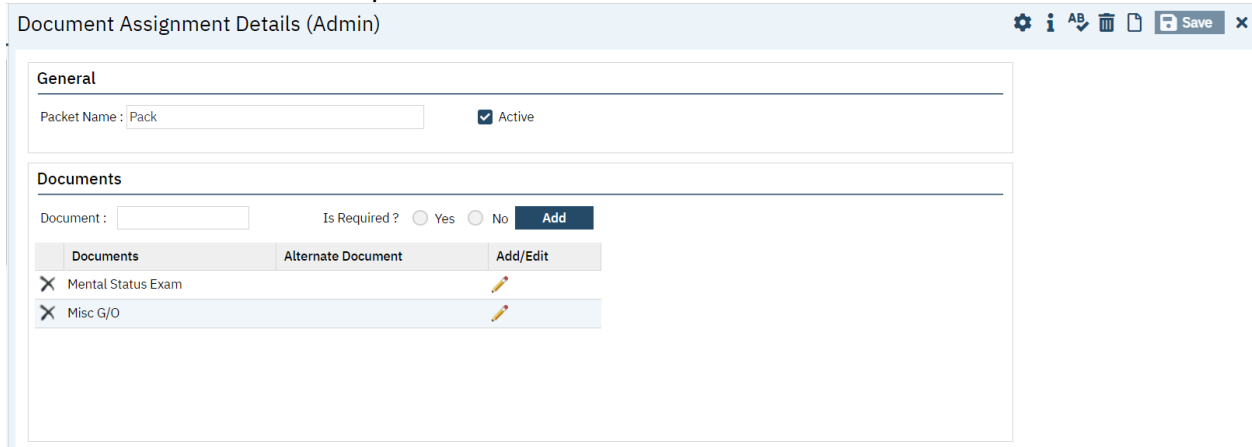
Create a New Packet

1. Follow this path: **Administration** tab > **Document Assignment** banner.

The Document Assignments list page is displayed.

<u>Why Can't I Access This Screen?</u>
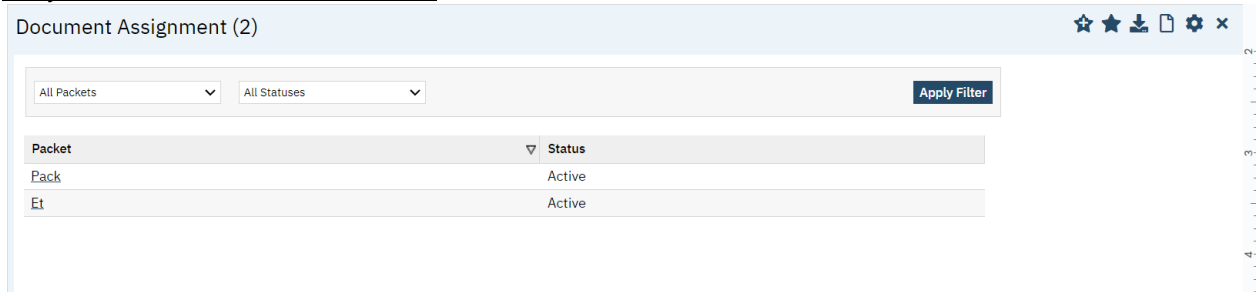
2. Click the **New Item** icon ( ) in the tool bar.

The Document Assignment Details (Admin) screen is displayed.

<u>Why Can't I Access This Screen?</u>

3. Enter a **name** in the Packet Name field.

Refer to <u>Document Assignment Details (Admin) Screen Field Definitions</u> for information about each field.

Continue with step 4 to add documents to this Packet.

If you do not want to add documents to the Packet at this time, click the **Save** button in the tool bar and go to step 9.

<u>Document Assignment Details (Admin) Screen Field Definitions</u>

Your system may have been customized to require additional fields.

There are no Global Codes for this screen.

Field	Description	Required
General area		
Packet Name	Enter the **name** of the Packet.	----

Field	Description	Required
Active check box	The Packet is active if this check box is selected. A Packet is active by default.	----
Documents area		
Document	Start typing the **name of the document** you want to add to the Packet and then select the desired document from the drop-down list.	
Is Required?	Select the **applicable button**: Y if the document must be signed in order to complete the Registration Document; N if the document does not need to be signed in order to complete the Registration Document.	----
Add button	Click the **Add** button to add the document to the list of documents.	----
✕ <delete icon>	Click this icon to delete the document from the Packet.	----
Documents	Document name.	----
Alternate Document	Name of a document that is an alternate for the document listed in the "Documents" column.	----
Field	**Description**	**Required**
Add/Edit	Click the pencil icon in this column to add or change an Alternate Document.	----

4. In the Document field, start typing the **name of a document** that you want to add to the Packet and then select the applicable document from the drop-down list.

5. If you want this document to be signed before the Registration Document can be signed, click the **Yes** radio button next to "Is Required?".

   If it is not required, click the **No** radio button or just continue with step 6. "No" is the default.

6. Click the **Add** button. The document is added to this Packet.

   In the example below, a Packet named Basic Registration was created and the Assessment document has been added to it.

7. Repeat steps 4 - 6 for every document to be added to this Packet.

8. When all relevant documents have been added to the Packet, click the **Save** button in the tool bar.

9. Click the **Exit** icon (✖) in the tool bar to return to the Document Assignments list page.

Add a Document to a Packet

1. Follow this path: **Administration** tab > **Document Assignment** banner.

The Document Assignments list page is displayed.

Why Can't I Access This Screen?
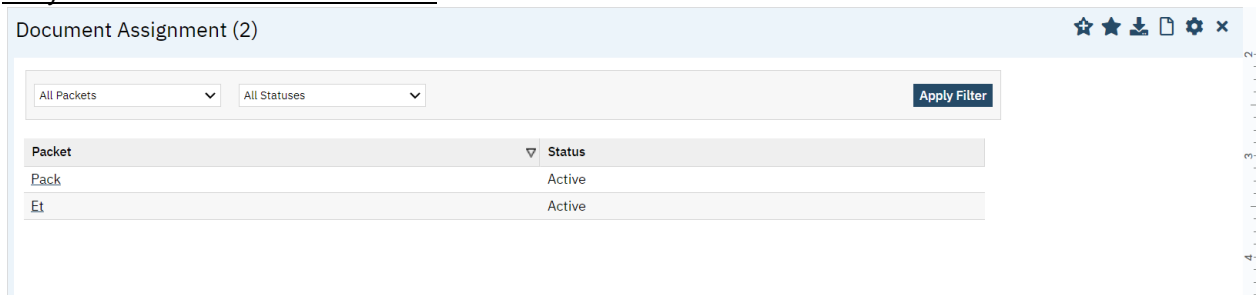
2. Apply the filter settings to display the desired Packets.

Refer to Document Assignments List Page Field Definitions for information about each field.

3. Click the hyperlinked **Packet name**.

The Document Assignment Details (Admin) screen is displayed.

Refer to Document Assignment Details (Admin) Screen Field Definitions for information about each field.
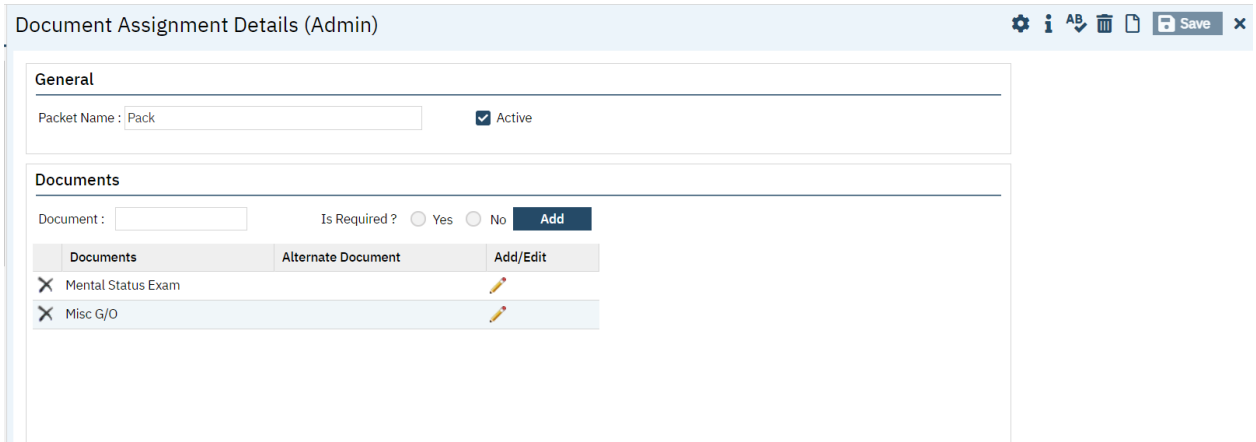
4. In the Document field, start typing the **name of the document** and then select the applicable document from the drop-down list.
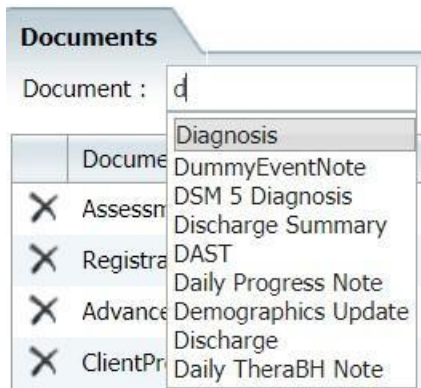
5. If you want this document to be signed before the Registration Document can be signed, click the **Yes** radio button next to "Is Required?".

    If it is not required, click the **No** radio button or just continue with step 6. "No" is the default.

6. Click the **Add** button to add the desired document to the Packet.

7. Repeat steps 4 - 6 for every document to be added to this Packet.

8. When all relevant documents have been added to the Packet, click the **Save** button in the tool bar.

    Note that the DocumentAssignmentId that is assigned to this Packet can be used in the Configuration Key to define which documents are required to be signed before the Registration Document can be signed. Refer to Specify an Organization Level Packet for the Registration Document by Adding the DocumentAssignmentId to the Configuration Key for more information.

    Click the **Exit** icon (❌) in the tool bar to return to the Document Assignments list page.

Alternate Documents

An Alternate Document can be completed/signed instead of the main document in the Packet.

Typical applications for an Alternate Document are:

- You can reference a scanned/uploaded document name and if that document is scanned in or uploaded, then the "required" and "signed" conditions are met.
  For example, if your organization has a Consent form that you want to use, you can add Streamline's Consent form as the main document, and then either scan in or upload your signed Consent form as the Alternate Document. Once your form is uploaded/scanned in, this satisfies the requirement for a signed Consent form for that Packet.

- Another application is if there are two similar documents defined in the system: one of these documents is set as the main document and the other is set as the alternate document. Then, if one document is signed but the other one is not, the system uses the one that is signed to fulfill the requirement for a signed document.

You can:

- <u>Add an Alternate Document</u>
- <u>Change Which Document is an Alternate Document</u>
- <u>Delete an Alternate Document</u>

Add an Alternate Document

1. Follow this path: **Administration** tab > **Document Assignment** banner.

   The Document Assignments list page is displayed.

   <u>Why Can't I Access This Screen?</u>

2. Apply the filter settings to display the desired Packets.

   Refer to <u>Document Assignments List Page Field Definitions</u> for information about each field.

3. Click the hyperlinked **Packet name**.

   The Document Assignment Details (Admin) screen is displayed.

   <u>Why Can't I Access This Screen?</u>

5. Start typing the **name of the alternate document** in the Document field and then select the applicable document from the drop-down list.

Document : am	Is Required ? ○ Yes ○ No	Add
Amendment Requests		

Documents	Alternate Document	Add/Edit
✕ Assessment		🖉

6. Click the **Add** button. The Alternate Document column is populated with the alternate document.

Document :	Is Required ? ○ Yes ○ No	Add

Documents	Alternate Document	Add/Edit
✕ Assessment	Amendment Requests	🖉

7. Click the **Save** button in the tool bar.

8. Click the **Exit** icon (✖) in the tool bar to return to the Document Assignments list page.

Change Which Document is an Alternate Document

1. Follow this path: **Administration** tab > **Document Assignment** banner.

   The Document Assignments list page is displayed.

   Why Can't I Access This Screen?

Document Assignment (2)		☆ ★ ⬇ 🗋 ⚙ ✕

All Packets ▾	All Statuses ▾		Apply Filter

Packet ▽	Status
Pack	Active
Et	Active

2. Apply the filter settings to display the desired Packets.

   Refer to Document Assignments List Page Field Definitions for information about each field.

3. Click the hyperlinked

Packet name.

The Document Assignment Details (Admin) screen is displayed.

Why Can't I Access This Screen?

change.

The Alternate Document pop-up window is displayed:

5. Start typing the **name of the new Alternate Document** and then select the **new document** from the drop-down list.

6. Click the **Modify** button and the new Alternate Document is listed.

7. Click the **Save** button in the tool bar.
8. Click the **Exit** icon (×) in the tool bar to return to the Document Assignments list page.

Delete an Alternate Document

To delete an Alternate Document you must delete the document that it is associated with and then re-add that document without associating it to an Alternate Document.

1. Follow this path: **Administration** tab > **Document Assignment** banner.

   The Document Assignments list page is displayed.

   Why Can't I Access This Screen?

2. Apply the filter settings to display the desired Packets.

   Refer to <u>Document Assignments List Page Field Definitions</u> for information about each field.

3. Click the hyperlinked

   Packet name.

   The Document Assignment Details (Admin) screen is displayed.

   <u>Why Can't I Access This Screen?</u>

Document Assignment Details (Admin)   ⚙ ⓘ ᴬᴮ 🗑 🗋 💾 Save ✕

General

Packet Name : Pack   ☑ Active

Documents

Document : [   ]   Is Required ? ○ Yes ○ No   [Add]

Documents	Alternate Document	Add/Edit
✕ Mental Status Exam		✏
✕ Misc G/O		✏

remove .

5. A Confirmation Message window displays asking if you want to delete the record. Click the **OK** button.

   The document is deleted.

6. Add the document back in to the Packet by starting to type the name of the document. Select the document from the drop-down list and click the **Add** button.

   The document is added back in to the Packet and is no longer associated with an alternate document.

Specify an Organization Level Packet for the Registration Document by Adding the DocumentAssignmentId to the Configuration Key

To specify an organization level Packet for the Registration Document, set the Value in the SetDefaultDocumentPacketIDInRegistration Configuration Key to the DocumentAssignmentId of the desired Packet by following the steps below.

If you do not want to define an organization level Packet for the Registration Document, make sure that the Value field in the SetDefaultDocumentPacketIDInRegistration Configuration Key is blank or set to "None".

1. Follow this path: **Administration** tab > **Document Assignment** banner.

   The Document Assignments list page is displayed.

   <u>Why Can't I Access This Screen?</u>

Document Assignment (2)	☆ ★ ↓ ⬜ ⚙ ✕

All Packets ⌄	All Statuses ⌄		Apply Filter

Packet ▽	Status
Pack	Active
Et	Active

2. Apply the filter settings to display the desired Packets.

   Refer to <u>Document Assignments List Page Field Definitions</u> for information about each field.
   packet name of the Packet that contains the documents that you want to have signed in order to complete the Registration Document for a client.

   The Document Assignment Details (Admin) screen is displayed. This screen lists all of the documents that are part of this Packet.

   3. Click the hyperlinked

Document Assignment Details (Admin)	⚙ ⓘ ᴬᴮ 🗑 ⬜ 💾 Save ✕

   General

   Packet Name : Pack   ☑ Active

   Documents

   Document : [   ]   Is Required ? ○ Yes ○ No   **Add**

Documents	Alternate Document	Add/Edit
✕ Mental Status Exam		✏
✕ Misc G/O		✏

4. Hover your cursor over the blue circle with the "i" in the center (outlined in red in the figure above).

5. Make note of the "DocumentAssignmentId" number in the pop-up box (outlined in red in the figure below).

   This number will be inserted into the Configuration Key and determines which documents display on the Forms and Agreements tab. Each Packet has a different DocumentAssignmentId.
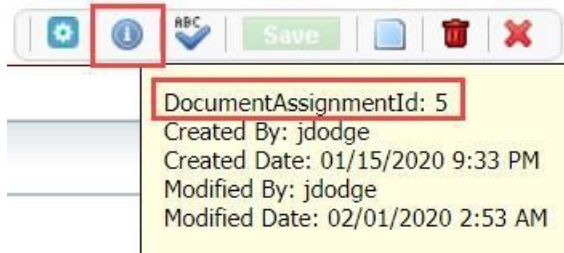
6. Enter this **number** in the Value field of the SetDefaultDocumentPacketIDInRegistration Configuration Key.

7. Click the **Save** button in the tool bar.

8. Click the **Exit** icon (❌) in the tool bar to return to the Configuration Keys list page.

Delete a Document From a Packet

1. Follow this path: **Administration** tab > **Document Assignment** banner.

   The Document Assignments list page is displayed.

   Why Can't I Access This Screen?

2. Apply the filter settings to display the desired Packets.

   Refer to Document Assignments List Page Field Definitions for information about each field.

3. Click the hyperlinked **Packet name**.

   The Document Assignment Details (Admin) screen is displayed.

   Why Can't I Access This Screen?

Document Assignment Details (Admin)

General

Packet Name : Pack   ☑ Active

Documents

Document : [   ]   Is Required ? ○ Yes ○ No **Add**

	Documents	Alternate Document	Add/Edit
✕	Mental Status Exam		🖉
✕	Misc G/O		🖉

) next to the document to remove that document from this Packet.

5. Click the **OK** button in the pop-up Confirmation window and the document is deleted from the list of Documents.

6. Click the **Save** button in the tool bar.

7. Click the **Exit** icon (✖) in the tool bar to return to the Document Assignments list page.

![Streamline Healthcare Solutions logo]
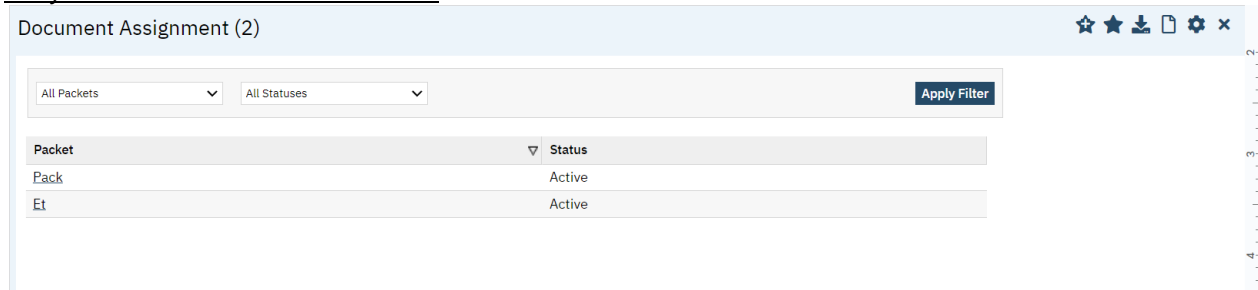
Deactivate a Packet

1. Follow this path: **Administration** tab > **Document Assignment** banner.

    The Document Assignments list page is displayed.

    <u>Why Can't I Access This Screen?</u>

2. Apply the filter settings to display the desired Packets.

    Refer to <u>Document Assignments List Page Field Definitions</u> for information about each field.

3. Click the hyperlinked **Packet name**.

    The Document Assignment Details (Admin) screen is displayed.

    <u>Why Can't I Access This Screen?</u>

5. Click the **Save** button in the tool bar.

Delete a Packet

While the system will let you delete a Packet, do not delete a Packet that has been used throughout the system as this may cause problems. Instead, deactivate the Packet.

1. Follow this path: **Administration** tab > **Document Assignment** banner.

   The Document Assignments list page is displayed.

   Why Can't I Access This Screen?

2. Apply the filter settings to display the desired Packets.

   Refer to Document Assignments List Page Field Definitions for information about each field.

3. Click the hyperlinked **Packet name**.

   The Document Assignment Details (Admin) screen is displayed.

   Why Can't I Access This Screen?

4. Click the **trash can** icon (🗑) in the tool bar.

5. Click the **Yes** button in the Confirmation pop-up window.

The Document Assignments list page is displayed and the specified Packet has been deleted.

6. Click the **Exit** icon (✖) in the tool bar to return to the Document Assignments list page.

Sign a Document in the Packet
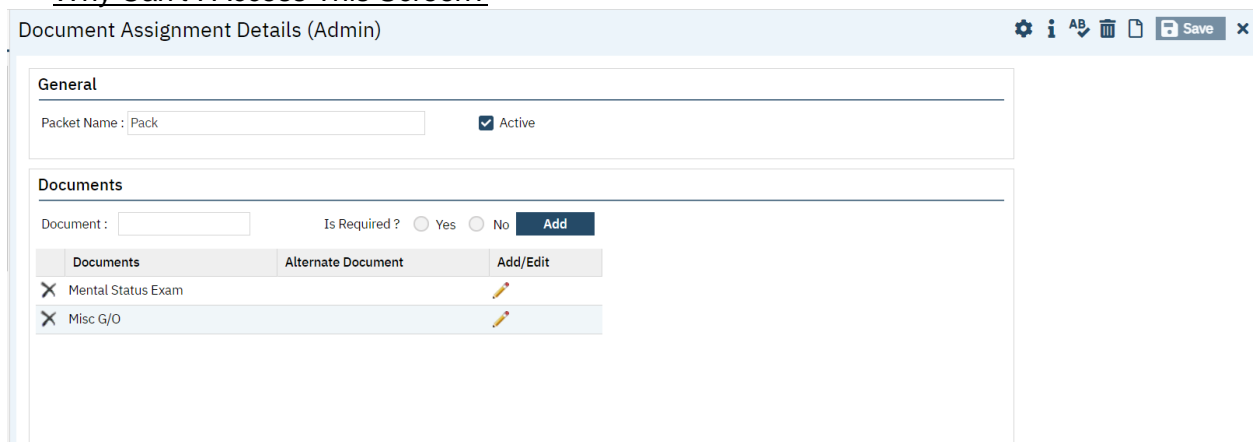
The Registration Document cannot be signed until all of the required forms and agreements in the Packet are signed.

1. Open the Registration Document for the client: path **Client** tab > **Documents** banner > **Registration** sub-banner

2. Click the **Forms and Agreements** tab.

3. Click the hyperlinked **Document Name** of a document whose Status is not Signed.

   The document is displayed.

4. Complete the document and click the **Complete** button in the Document area (outlined in red in the figure below).
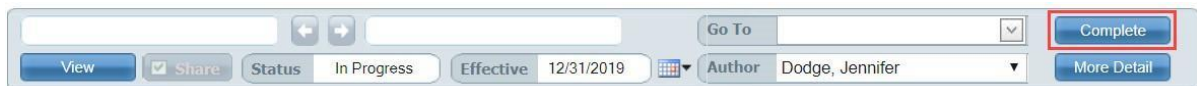
   A Confirmation pop-up window is displayed.

5. Click the **OK** button to complete the document.

6. Click the **Exit** icon (✖) in the tool bar.

   The Status in the Document area changes to Signed and a PDF of the completed document is displayed.

7. Navigate back to the Forms and Agreements tab.

Completing the Registration Document

If the client has provided all of the information they are willing and able to, and if all of the required documents in the Packet are signed, there are two options:

- save the Registration Document
- sign the Registration Document

Save the Registration Document

If you do not wish to complete and sign the Registration Document at this time, it can be saved and returned to at a later time by clicking the **Save** button in the tool bar. However, if the Registration Document is not signed, information will not initialize into the client record.

Sign the Registration Document

To sign the Registration Document, it is not required that you save it first. Signing will both save and sign the document.

1. Ensure that the document has an Effective date and then click the blue **Sign** button .

Registration Document						
Effective 02/19/2024	Status In Progress	Author Moore-Hill, Hope				Sign
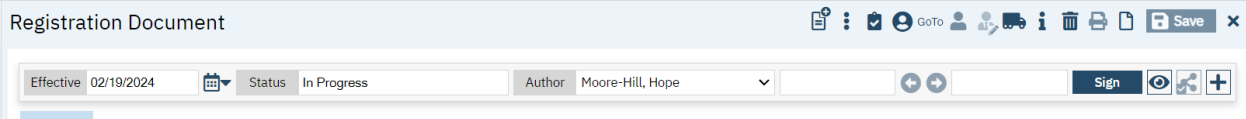
If there are required fields that were not completed, you will see a pop-up window as shown below notifying you of what fields must be completed in order to sign the document.

Validations

Episode - Case information – Registration Date is required

Episode - Referral Resource – Referral Date is required

Episode - Referral Resource – Referral Type is required

Program Enrollment - Primary program is required

Program Enrollment - Status is required
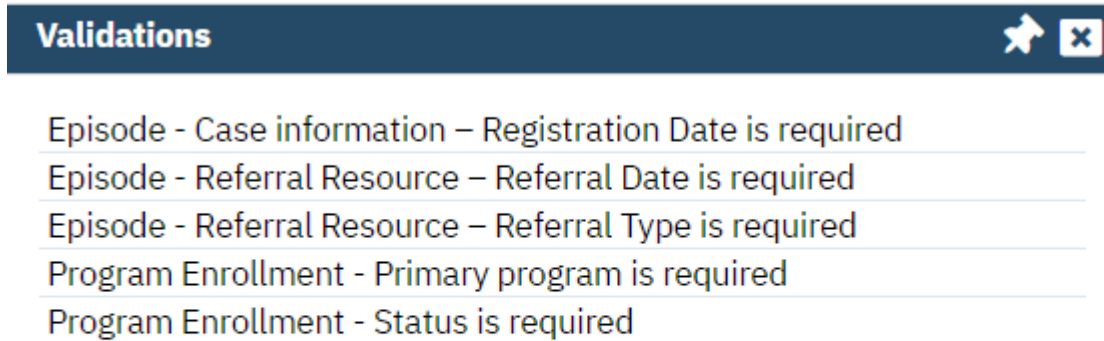
The validation message tells you exactly where you need to go to complete the required information. The first part of the message (for example, "Episode") tells you on what tab you will find the required area. The second part of the message (for example, "Referral Resource") tells you in which area of the tab to find the required information/field. The third part of the message (for example, "Referral Date is required") specifies the required information/field.

Complete the missing information/fields, remembering to click the **Save** button in the tool bar after each tab is updated.

Once all requirements have been completed and saved, click the **Sign** button again and continue with step 2.

2. The signature pop-up window is displayed.
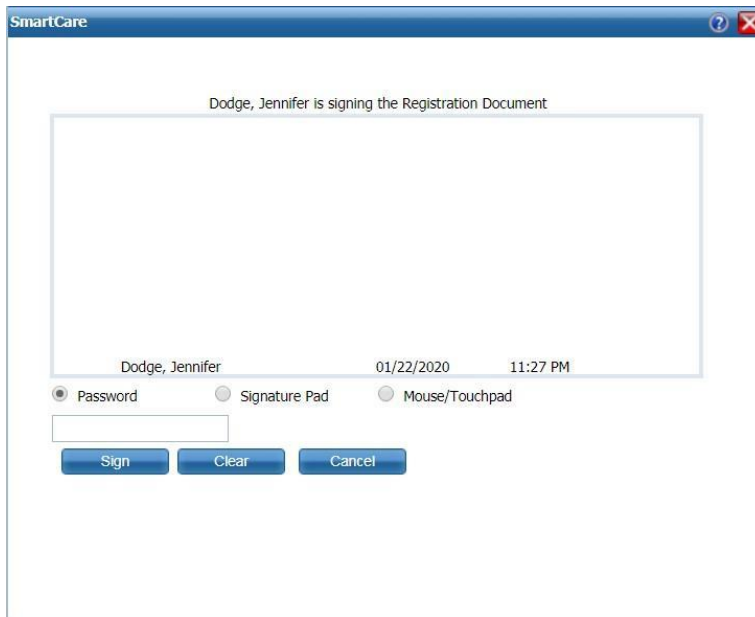
3. Choose the method you want to use to sign the document:

- Password – Enter your **password** and then click the **Sign** button.
- Signature Pad – Sign the document using the **stylus** on the external signature pad. The signature is displayed in the pop-up window. Click the **Sign** button.
- Mouse/Touchpad – Sign the document using the computer's **mouse** or **touchpad**. The signature is displayed in the pop-up window. Click the **Sign** button.

4. Once the document is signed, the applicable information is initialized to the client record, a PDF of the document is displayed, and the Status changes to Signed.

Common Fields Across Screens

Information from an Inquiry is stored in Client Information. When a Registration Document is created, information is pulled from Client Information into the Registration Document. If information is changed in the Registration Document, those changes are saved back to Client Information. Client Information always has the latest information about the client.

Entered in Inquiry Details screen	Populated in Client Information screen	Pulled into Registration Document from Client Information
Initial tab > Client Information (Potential) area	General tab > General Information area	General tab > General Information area
First Name	First Name	First Name
Last Name	Last Name	Last Name
Middle Name	Middle Name	Middle Name

Client ID (created after Save)	Client ID	Client ID
Sex	Demographics tab > Identifying Information area Sex	Demographics tab > Identifying Information area Sex
SSN	General tab > General Information area SSN – last 4 digits	General tab > General Information area SSN – last 4 digits
DOB	Demographics tab > Identifying Information area Date of Birth	Demographics tab > Identifying Information area Date of Birth
Home Phone	General tab > General Information area Home	General tab > General Information area Home
Cell	General tab > General Information area Mobile	General tab > General Information area Mobile
Email	General tab > General Information area E-Mail	General tab > General Information area E-Mail
Address 1, Address 2, City, State, Zip	General tab > General Information area Addresses	General tab > General Information area Addresses
County of Residence	Demographics tab > Living Arrangement area County of Residence	Demographics tab > Living Arrangement area County of Residence
Initial tab > Referral Resource area	----	Episode tab > Referral Resource area
Referral Date	----	Referral Date
Referral Type	----	Referral Type
Referral Subtype	----	Referral Subtype
Organization Name	----	Organization Name
Phone	----	Phone
Entered in Inquiry Details screen	**Populated in Client Information screen**	**Pulled into Registration Document from Client Information**
First Name	----	First Name
Last Name	----	Last Name

Address Line 1	----	Address Line 1
Address Line 2	----	Address Line 2
City	----	City
State	----	State
Zip	----	Zip
Email	----	Email
Comments	----	Comments
Demographics tab > General Information area	General tab > General Information area	General tab > General Information area
Primary Care Coordinator	Primary Clinician	Primary Clinician
Medical Provider	Primary Physician	Primary Physician
Professional Suffix	Professional Suffix	Professional Suffix
Prefix	Prefix	Prefix
Suffix	Suffix	Suffix
Demographics tab > Identifying Information area	Demographics tab > Identifying Information area	Demographics tab > Identifying Information area
Marital Status	Marital Status	Marital Status
Gender Identity	Gender Identity	Gender Identity
Sexual Orientation	Sexual Orientation	Sexual Orientation
Deceased On	Deceased On	Deceased On
Cause of Death	Cause of Death	Cause of Death
Preferred Pronoun	Preferred Pronoun	Preferred Pronoun
Ethnicity	Ethnicity	Ethnicity
Race	Race	Race
Client Declined to Provide	Client Declined to Provide	Client Declined to Provide
Demographics tab > Financial Information area	Demographics tab > Financial Information area	Demographics tab > Financial Information area
Financially Responsible	Financially Responsible	Financially Responsible
Annual Household Income	Annual Household Income	Annual Household Income
# of Dependents	# of Dependents	# of Dependents

Demographics tab > Living Arrangement area	Demographics tab > Living Arrangement area	Demographics tab > Living Arrangement area
Living	Living	Living
County of Financial Responsibility	County of Financial Responsibility	County of Financial Responsibility

Entered in Inquiry Details screen	Populated in Client Information screen	Pulled into Registration Document from Client Information
Demographics tab > Educational/Employment area	Demographics tab > Educational/Employment area	Demographics tab > Educational/Employment area
Educational Status	Educational Status	Educational Status
Military Status	Military Status	Military Status
Employment Status	Employment Status	Employment Status
Employment Information	Employment Information	Employment Information
Demographics tab > Language area	Demographics tab > Language area	Demographics tab > Language area
Primary/Preferred Language	Primary/Preferred Language	Primary/Preferred Language
Client does not speak English	Client does not speak English	Client does not speak English
Hispanic Origin	Hispanic Origin	Hispanic Origin
Demographics tab > Preferences area	Demographics tab > Preferences area	Demographics tab > Preferences area
Communication Preference	Communication Preference	Communication Preference
Mobile Phone Provider	Mobile Phone Provider	Mobile Phone Provider
Days	Days	Days
Geographic Location	Geographic Location	Geographic Location
Comment	Comment	Comment

Set-Up Considerations (Administrative Purpose)

This section outlines all items needed for setting up this document for use with your organization, including any necessary configurations/details around how to set up other areas of your system that work directly with this document.

Procedure Codes

Procedure Code Category 1

All assessment services that are reportable to CSI must be marked as Reportable CSI Assessment in this field to count in the CSI Assessment initialization logic.

- Go to Procedure/Rates

- Open each procedure code considered to be a Reportable CSI Assessment code and do the following for each:
    - Update Procedure Code Category 1 field to indicate 'Reportable CSI Assessment'

All Treatment Services that are reportable to CSI must be marked as Reportable CSI Service in this field to county as a Treatment Service. Please follow instructions to update all procedure codes where this field should be designated.

Configuration Keys

Go to Configuration Keys screen and find the configuration key name you are looking to modify.

County Mapping

Field Name	Configuration Key Category Name
County of Submission	XSetCountyCodeForCaliforniaStateReporting

If your organization only provides services to clients within ONE county, then you should enter the County Code as defined by your state here. If nothing is entered, then on the form, user will be required to select the County every time. If something is entered here, then user will not see the field and it will prepopulate in the table for this document to be sent for reporting to the accurate county.

If your organization provides services to clients in more than one county and you report to each of those counties, then you should indicate 'None' in this key or leave it blank and users will be required to select the county each time they do the document.

If there are counties you do not provide services to, you can go to the DACSManagingEntity Global Code category in the Global Codes screen and deactivate any counties you do not want staff to see in the drop down. You should only do this for counties that NONE of your programs are serving. You should keep all counties that at least one program serves as active.

CSI Assessment Tab Show/Hide

Field Name	Configuration Key Category Name
CSI Assessment Tab (show or hide)	XShowCSIAssessmentTabOnCSIStandaloneDoc

If user selects 'N' as the value for this configuration key, it will hide this tab and force user to complete the standalone CSI Assessment Document that only contains these fields. Otherwise, when 'Y' is entered, user can capture whatever fields are available at time of signing this document and then complete a standalone CSI Assessment document to capture remaining fields required for reporting, at a later date.

Setting Up CSI Assessment Instructional Text

Field Name	Configuration Key Category Name
CSI Assessment Instructional Text	XSetCSIAssessmentInstructionalText

Administrators can define instructional text that makes the most sense for their organization's workflows by going to this Configuration Key and updating the Value field to the text they want to see appear here. It will be Read Only on the document for the user.

Recodes

Map Medi-Cal to Coverage Plans

1. XCAMedical
   a. This is used to tie a coverage plan to Medi-Cal in reference to initializing the CIN.
      i. Find the list of Medi-Cal coverage plans and their CoveragePlanId from either the UI in the information icon or the CoveragePlans table. You will need this ID for the steps below
      ii. Open Recodes screen
      iii. Select Recode Category Name from Category dropdown (you can type search)
         1. Select a value and select 'Clear'
         2. Repeat the following steps for each coverage plan that is considered a Medi-Cal coverage plan
            a. Enter name of recode (usually same as Coverage Plan name for this scenario)
            b. Enter Start Date
               i. Must be equal to or prior to today's date
            c. Enter Integer ID

        i.   This is the Coverage Plan ID from the list you obtained above.

    d.   Select Insert

3.   Save once you have finished inserting all coverage plans.