



## HealthPartners Inspire (SNBC) Care Coordination Assessment & Care Plan Checklist

*Use this checklist as a guide to complete HealthPartners Inspire (SNBC) requirements.*

<b>Member Name:</b>		<b>Date of Last Assessment:</b> <small>(last MMIS entry for HealthPartners SNBC)</small>	
<b>Member ID:</b>		<b>Assessment Due Date:</b>	
<b>CC Name:</b>		<b>Assessment Completed Date:</b>	

### Is this member new to HealthPartners Inspire (SNBC)?

<input type="checkbox"/> Yes		Continue to I. "Initial Outreach for New Members"
<input type="checkbox"/> No		Continue to II. "Annual Outreach"




### I. Initial Outreach for New Members N/A - Section does not apply

<input type="checkbox"/> Document date member case was sent to you by HealthPartners (if new member)	
<input type="checkbox"/> Mail HealthPartners SNBC CC Introduction Letter within 10 business days of date received from HealthPartners	
<input type="checkbox"/> Document all Outreach Attempts. – All attempts must be completed within 60 days of <b>Enrollment Date</b> . Phone Attempt #1 Phone Attempt #2 (If CC did not reach member on 1 <sup>st</sup> attempt) Phone Attempt #3 (If CC did not reach member on previous attempts) HealthPartners Unable to contact letter (If CC did not reach member on previous attempts)	

### II. Annual Outreach N/A - Section does not apply

<input type="checkbox"/> Document all Outreach Attempts – All attempts must be completed within 364 days of previous HRA date. - <input type="checkbox"/> Phone Attempt #1 - <input type="checkbox"/> Phone Attempt #2 (If CC did not reach member on 1 <sup>st</sup> attempt) - <input type="checkbox"/> Phone Attempt #3 (If CC did not reach member on previous attempts) - <input type="checkbox"/> HealthPartners Unable to contact letter (If CC did not reach member on previous attempts)	
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### Were you able to reach the member?

<input type="checkbox"/> Yes – HRA has been scheduled		Continue to III. Face-to-Face or Telephonic Assessments
<input type="checkbox"/> Yes – Member Declined HRA		Continue to IV. Decline or Unable to Reach
<input type="checkbox"/> No – Unable to reach member		Continue to IV. Decline or Unable to Reach

### III. Face-to-Face or Telephonic Assessments N/A - Section does not apply

<input type="checkbox"/> Complete all sections of Inspire (SNBC) Health Risk Assessment with member.	
<input type="checkbox"/> Save completed HRA to members chart.	

- Complete SNBC Care Plan *within 30 days of HRA date*
- Save completed Care Plan to member's chart.  
(Review HRA and make sure all areas that indicate a need are being address in the care plan)
- Complete "My Important Contacts and Phone Numbers" Form
- If this is a reassessment, complete "Goal Achieved/Not Achieved" column on previous Care Plan.  
(Make sure to carry over goals to new care plan if applicable)

- Mail the following to Member *within 30 days of HRA date*:
  - "SNBC Care Plan to Patient" Letter
  - Complete SNBC Care Plan with CC signature
  - SNBC Signature Page to be signed by member and mailed back to CC
  - Completed My Important Contacts Form
  - SNBC Appeal Rights
  - Release of Information (if applicable or if not obtained at a face-to-face meeting)

- Mail or Fax to Primary Care Provider:
  - "SNBC Care Plan to MD or Care Team" Letter
  - Completed SNBC Care Plan

Enter MMIS Screening *within 14 days of HRA date*. Enter into MMIS using H screen.

If on waiver, complete 5841 form, fax to waiver Case Manager, save to member chart



**IV. Decline or Unable to Reach**

N/A - Section does not apply

*Continue to follow on-going care coordination protocol and outreach member where appropriate.*

Enter MMIS Screening within 14 days of HRA completion.

**Were all applicable sections addressed and completed within timelines?**

- |                              |   |   |
|------------------------------|---|---|
| <input type="checkbox"/> Yes |  | Continue to V. On-Going Care Coordination   |
| <input type="checkbox"/> No  |  | - Discuss areas that were not completed with supervisor and document in chart.<br>- Continue to V. On-Going Care Coordination |

**V. On-Going Care Coordination**

- Review Goals Care Plan per target date (as documented on care plan) with member
- Document updates on care plan goals on the Care Plan or in chart notes
- Enter review date on Care Plan in the "Monitoring Progress/Goal Revision Date"

**If unable to reach member or member declines:**

- Document attempts at reaching member
- Review any medical records or other information that you may have access to
- Review claims if applicable
- If member is unable to reach *and* appears high risk, make additional attempts to reach member and consult with supervisor