



SOCIALLY NECESSARY SERVICES TOOL Case Management (400)

Provider:		Provider's Consumer ID:	
Consumer FACTS #:		Consumer Medicaid #:	
Review Date:		Reviewer Name:	
Consumer Name:			

Purpose: The *Review Tool* is a part of an integrative review process that evaluates/assesses technical compliance and the administrative application of Socially Necessary Services (SNS) by contracted providers. The *Review Tool* is a resource utilized to further enhance the collaborative efforts of the Bureau for Children and Families (BCF), KEPRO, and the SNS provider community in the delivery of quality services. The *Review Process* is applicable to **all** SNS providers and all BCF case types.

1.	For the period under review does the service meet Admission Criteria? (NOTE: If zero, then all questions are scored zero)	3	0		
2.	For the period under review, does the service being provided meet the criteria of the services guideline definition? (NOTE: If zero, then all questions are scored zero) <ul style="list-style-type: none"> • During the period under review, did provider successfully link consumer to needed services in her/his area that would assist in maintaining safety of children? • During the period under review, is there documentation that the provider met face-to-face with the client? 	3	0		
3.	Is there a copy of the referral for services in the record?	1	0		
4.	During the period under review, are records of the service kept? (NOTE: If zero, then all questions are scored zero)	1	0		
5.	During the period under review is the documentation of each service provided specific to the consumer receiving the service?	6	2	0	
6.	During the period under review are all documents signed by appropriately licensed/credentialed staff?	6	0		
7.	During the period under review does the documentation support the duration and frequency of the service provided?	3	1	0	
8.	During the period under review is there ongoing documentation assessing the need for additional services not currently being provided (e.g. services not identified at initial referral)?	3	1.5	0	
9.	During period under review is service appropriate to meet identified need?	3	0		
10.	During the period under review, do all monthly summaries include the following: <ul style="list-style-type: none"> • identified need • service to address the need • how service is eliminating/reducing/controlling behaviors or conditions requiring intervention • barriers and/or progress towards goal achievement • unmet needs • level of participation as it relates to individual consumers? • is there documentation that monthly summaries were 	3	2	1	0

	completed and transmitted to the appropriate DHHR worker by the 10 th of the following month?				
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