# Activating Access to the Oversight Referral Module

Providers must have the Oversight Referral feature enabled in their Shareable Super Role. Go into the Provider's Administrative account and Manage User Privileges to activate the Referral Module.

Module: S	earch	
Individual		
Health		General
nearch	Provider	Preferences   Password Policy
Agency		New   List   Import from Exce
Admin	User	Assign External System ID   Self Password Reset
Agency Reports	Title	New   List   Import from Excel Search Imported Excel
Terdicitation	Change Password	User List
Home Page	User Privileges	Manage   Archive



**Creating Referrals – Care Coordinators (The agency sending the referral to another agency)** This is for members that you are sending a referral to an agency that they are already not receiving services from. Care coordinators will be able to create referrals for supportive services – i.e. peer support, housing support, non-medical transportation, etc. They will also transfer care coordination services this way as well.

Go into the Referral Module in your Oversight account and click New

Referral	
New Worklist Accepted by Recipient Provider Waiting List Admission Completed Acknowledgement List	
Search Discontinue Referral	

## Select the member from the list

# Individual List

All	A	В	С	D	E	F	G	Н	I	J	К	L	М	N	0	Ρ	Q	R	S	Т	U	V	W	x	Y	Z				
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Last	t Na	me			٠	Fin	st Na	ame				I	ndiv	idua	ID				В	irth I	Date			Ov	ersig	jht l	D			
testt						tes	tt																	123	456	(SP)	4-ND)			
Show	ing '	1 to 1	of 1	entry	y (filt	ered	from	n 1,08	35 to	tal e	ntrie	s)																		

# Enter the following information:

### Referral New 0

testt testt 🕄
MM/DD/YYYY 🗖
⊖ High
⊖ Yes ⊛ No
Referral to specific Provider     Referral to a Region     All state Referral
All Recipient Providers -
- Please Select -
1915i State Plan Amendment Oversight Account

**Anticipated Admission Date**: Allow the provider two business days to accept/deny the referral per current 1915(i) policy.

**Notification Level**: Unless the need is emergent, we'd expect to see Medium on referrals.

Restricted: Select No

Recipient Type: Referral to Specific Provider

Region/Group: All Recipient Providers

**Recipient Provider**: Select a provider's Non-Care Coordination Agency (i.e. the one without CC in the name) for supportive services. If you are transferring care coordination you would select the agency name with CC in it.

Oversight Agency	
	- Please Select -
	A New Creation (CC1915ANC-ND)
ion	A New Creation (ANC1915-ND)
	Advocates for Change (AFC1915-ND)
	Advocates for Change (CC1915AFC-ND)
	Agape Community Support Services (CC1915AGAPE-ND)
	Agape Community Support Services (AGAPE1915-ND)
	All of Us in Recovery (CC1915AUR-ND)  Send to this one for Care Coordination
	All of Us in Recovery (AUR1915-ND) Send to this one for supportive service

In the **Service Description** box, describe what service you are sending the referral for. For example, if it was for peer support you would provide the following information.

- Service needed, i.e. Peer Support, etc.
- Units or Dollar Amount Requested
- Frequency Limit Requested
- Duration Limit Requested
- Indicate if these are New or Transferred Services

Sei	rvice Description
ſ	Service: Peer Support
	Unit/Dollar Amt:
	Frequency Limit requested: Duration Limit requested:
	Indicated whether these new or transferred services?

You will attach the member's plan of care, the ROI and any other document attachments you may want to add in the Referral Packet section by clicking Add File. You will need to upload the .pdf version of the member's plan of care after downloading it from Therap. There is currently no way to attach the POC through Therap. You can select Attach Other File to add things like the member's application, their WHODAS, and/or their Diagnosis information, if you choose to send them.

	Attachment	Description	Uploaded By	Upload Date	Action
Plan of Care					Add File Scan File
Release of Information					Add File Scan File
					Attach Other F
ld File				×	
	ata related to <b>'testt</b>	testt'			
Please only upload o					
Please only upload o The maximum file siz	e allowed is 10 MB				
Please only upload o	e allowed is 10 MB				
Please only upload c The maximum file siz	e allowed is 10 MB			Browse	

The added file will then appear in the 'Referral Packet' section of the Referral form.

	Referral Packet					
	CheckList	Attachment	Description	Uploaded By	Upload Date	Action
	1. Attachment 1	Isabella Johnson Lab Result.pdf (182.26 KB)	Lab Result for Isabella	Mia Cole, Program Manager	03/28/2024 10:15 AM	PDF View   Remove
/	2. Attachment 2					Add File   Scan File

Enter relevant comments in the 'Add Comments' section and then send the form by clicking on the Send Referral button.

Add Comments			
This is an urgent referral request. Please review as soon as possible.			
About 2930 characters left			ĥ
Cancel Back	Save	Send Referral	Send Referral and Continue

Comments you may include include time-sensitivity issues or anything else you might want to draw to the attention of the other agency.

You can "Save" the Referral to come back to it later, this will create a draft of the referral and not send it to the other agency.

Once you click "Send Referral" the referral will be sent to your selected provider. You will see this message.

A confirmation message will be displayed stating that the Referral has been sent to the selected providers.

The Referral form REF-DEMO-M344MUVZ27GAZ has been Successfully Sent to Provider

Your agency contact who handles referrals will monitor the Referral Module for Referrals Marked "Accepted by Recipient Provider". More on that in a later section.

# For providers who already provide supportive services to a member

Some members may already be doing other services with a member. For example, the member may be working with the supportive service provider for peer support and wants them to also do housing support. In this case you will not be able to send a full referral through Therap. The purpose of a Therap referral is to link the provider with the member and if the provider is already serving as the member's peer support provider, they already will be linked in Therap.

# How to handle referrals in these cases

For referrals in this case, they will already have access to the member, their plan of care, etc. so you do not need to send a "Referral Packet." The easiest option is to use a Cross-Provider SComm message in Therap titled "(whatever Supportive Service you are referring for – i.e. Housing) Referral" and then use the body of the message to give the anticipated start date and any other helpful referral details the referred provider needs to decide as to whether they want to accept or deny the referral. The referred provider will reply with an Accept to accept the referral and respond Deny if they are denying the referral, along with a short reason for denial.

The expectation is that referrals done via SComm will also be subject to a 2-business day response time or be deemed a denial. Using SComm in Therap you can see whether a provider has read and acknowledged the message. If it is un-acknowledged after two business days with no response you can determine that is a denial and documentation of that is easy to access in Therap.

# Viewing and Accepting/Denying Referrals – Agency Administrators in charge of referrals at the agency accepting the referral.

Log in to Therap to accept referrals as the admin of the supportive service provider, or the admin of care coordination for care coordination transfers. **NOTE:** Agencies need to have someone with this access checking for referrals in Therap. You will see Referral items in the "To Do" tab in Therap



Select referrals sent to your agency marked as Pending Provider Response

Filte																15	v Reo
Form ID		Individual Name ©	Oversight (D =	Notif Level :	Status	Anticipated Admission Date 0	Recipient Provider :	Sent Date	Last Update Date 0	RP Accept Date 0	RP Denial Date 0	OS Accept Date ÷	OS Denial Date 0	Admission Date 0	Closed Date 0	Discontinued Date 3	Time Zone
REF-SPAND-	•	Doe, John	(SPA-ND)	Medium	Pending Provider Response	12/18/2024	-	12/11/2024									US/Centr

c	Oversight Agency	1915i State Plan Amendment Ove	ersight Account			
	Denial Reason	- Please Select -		•		
Service Descriptio	n					
test						
Referral Packet						
CheckList	Attachment		Description	Uploaded By	Upload Date	Action
Plan of Care	1915(I) Plan of	Care 11.1.2024 (1).pdf (26.87 KB)		Mandy Dendy, Therap Admin	12/10/2024 1:31 PM	PDF View
Release of Informatio	n					
Add Comments						
About 3000 characte	ers left					
Cancel Back					Update Refer	al Accept Deny

You can **Accept** or **Deny** the referral. For denials, you can choose one of the pre-populated drop-down reasons for denying a referral or select "other" for something different and explain in the comments section to the referring care coordination agency.

seneral Information		
Individual	testt testt (SPA-ND) 3	
Anticipated Admission Date	12/13/2024	
Notification Level	Medium	
Recipient Provider		
Oversight Agency	1915i State Plan Amendm	ent Oversight Account
,		
Denial Reason	- Please Select -	•
Denial Reason	- Please Select -	•
Denial Reason	- Please Select -	·
Denial Reason	Please Select -      Please Select -      Caseloads currently fu     Not accepting referrals	II, no available provider : at this time

If you choose **Update Referral**, you will be able to send comments back to the referring provider such as suggesting a different admission date or giving/getting additional information before accepting or denying.

Select **Deny** to deny the referral. Referring provider will get notice of your denial. You will select your denial reason BEFORE submitting the denial.

If you choose Accept, you will see this message for your referral.

The Referral form REF-SPAND-NEC4XEYZJ4QQ7 has been Successfully Accepted

If you are accepting a care coordination transfer from another agency,once you have accepted that referral for care coordination, it is at this point that you will go to the 1915i webpage and fill out a CCRR form. Make sure to check that it is a transfer on the CCRR form.

Referral Accepted by receiving agency are sent back to Oversight Care Coordination Agency (the agency that sent the referral) for approval. This step is required.

Referral Accepted by Linked Provider and Sent Back to Oversight Agency

#### [Back to Top]

. Users with the Oversight Referral caseload-based role can accept or deny referrals in the 'Accepted by Recipient Provider' status by clicking on the Accepted By Recipient Provider link in the 'Referral' section of the Oversight Dashboard.

Provider: 1915i State Plan / Account Profile: External	Amendment Oversight Switch Provider
Individual Demographics Workist Search Custom Fields Insurance Contact List	Individual Home Page Individual List
Document Storage	Referral
Individual Now Search	New Worklist Accepted by Recipient Provider (1) Waiting List Admission Completed Actinucielogement List Search Discontinue Referral

On the 'Accepted By Recipient Provider List' page, the Referrals which have been accepted and sent back to the Oversight Agency will be displayed. Click on the required Referral from the list.

Filter											15	∽ Red	ords
Form ID 👻	Individual Name 🗘	Oversight ID ‡	Notif Level \$	Status ‡	Entered By ‡	Anticipated Admission Date ‡	Recipient Provider \$	Sent Date	Last Update Date \$	RP Accept Date \$	RP Denial Date ≑	OS Accept Date ≑	OS Dei Dat
REF-DEMO- N5W3LTASVWVV4	Johnson, Isabella	23456789 (DEMO- OS)	Medium	Accepted By Recipient Provider	Cole, Mia / Program Manager	03/31/2024	Demonstration Linked Provider One	03/28/2024	03/28/2024	03/28/2024			

Oversight users may accept, deny, update, or revert the Referral as necessary using the respective buttons at the bottom. Click on the Accept button to accept the Referral. Clicking on the Revert button will return the Referral form to its previous state. For example, if the status of the Referral form is 'Accepted By Recipient Provider', clicking on the Revert button will return it to 'Pending Provider Response' status. If something comes up at this step, you can also Deny the referral.

	Individual	0				
Antic	cipated Admission Date	03/31/2024				
	Notification Level	🔾 High 🖲 Medium 🔾	Low			
	Restricted	🔾 Yes 💌 No				
	Recipient Provider	Demonstration Linked Pr	rovider One			
	Oversight Agency	Demonstration Oversigh	t Provider			
ervice Desc	ription					
Person Cen	tered Support Plan and Se	rvices.				
About 2958 d	haracters left					6,
ferral Pack	ket					
hacki ist	Attachment		Description	Unloaded By	Unload Date	Action
Attachment	Austiment	pdf (182.20 KB)	Lab Result fer Isabella	Mia Cole, Program Manager	03/28/2024 10:15 AM	PDF View   Remove
Attachment	(102-10 KB)	ographic Information.pdf	Isabella's Demographic Information	Mia Cole, Program Manager	03/28/2024 10:25 AM	PDF View   Remove
. Attachment	(182.11 KB)	unization Information.pdf	Isabella's Immunization History	Mia Cole, Program Manager	03/28/2024 10:32 AM	PDF View   Remov
						Attach Other Fi
omments						
omments						
omments Oversight Provider	r] 📗 Recipient Provider					
omments Oversight Provider Mia Cole Proverson Mi	e) Received Provider	arainht Denoidar				03/28/2024 10:45 AI
Oversight Provider Mila Cole Program Ma This is an u	r) Receiven Previder anager/ Demonstration Over rgent referral request. Plea	ersight Provider Ise review as soon as possi	ble.			03/28/2024 10:45 AJ
Oversight Provider Mila Cole Program Ma This is an u	r) Racpiert Pevider anager/ Demonstration Ov rgent referral request. Plea	ersight Provider se review as soon as possi	ble.			03/28/2024 10:45 AI
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Oversight Provider Mila Cole Program Ma This is an u Jacob And Administrati The referral	Regise Poster     anager/ Demonstration Ove     regent referral request. Plea     erson     of Demonstration Linked P     request has been reviewee	ersight Provider se review as soon as possi Provider One d and accepted.	ble.			03/28/2024 10:45 AJ 03/28/2024 11:00 AJ
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omments Oversight Peede Program Mo This is an u Jacob And Administrati The referral	Respect Peoder     anager/ Demonstration Ove     regent referral request. Plea     erson     or/ Demonstration Linked P     request has been reviewee  nts	ersight Provider ise review as soon as possi Provider One d and accepted.	ble.			03/28/2024 10:45 AJ
omments Oversign Peedes Mia Cole Program Mi This is an u Jacob And Administrat The referral dd Commen	Respect Peoder     anager/ Demonstration Ove     regent referral request. Plea     erson     or/ Demonstration Linked P     request has been reviewee     nts	ersight Provider ise review as soon as possi Provider One d and accepted.	ble.			03/28/2024 10:45 AI
Contrast Parkets Oversignt Parkets Mia Cole Program Ma This is an u Jacob And Administrati The referral dd Comment About 3000 c		ersight Provider ise review as soon as possi Provider One d and accepted.	ble.			03/28/2024 10:45 AJ

A confirmation message will be shown stating that the individual has been successfully admitted in Pending Approval status by sending referral.

	The individual Isabella Johnson has been successfully admitted in Pending Approval status by sending Referral.
ctions	
Back to For	m
Back to List	

Once the care coordination agency (the agency that sent you the referral) has accepted your acceptance of the referral, you (the agency receiving the referral) will need to admit the individual. To do so, click on Selected by Oversight in your To Do tab.

			Logour
Program: Profile: Module:	No Program Selected Initial Search		Choose Program
To Do	Modules	High Medium Low	Issue Tracking
Individual	Referral - Search		My Issues
Health	Selected By Oversight Acknowledgement List	1	SComm '
Agency			Sent Items
Billing			Compose Drafts Custom User Group
Admin			Message Audit Delete Message Content
Agency Reports			Letter ''i
Verdisident			New

Clicking on Selected by Oversight will bring up a list of all referrals that have been accepted by the other agency's oversight account. Select the referral that you want to finish up by admitting. This will bring you to that member's referral. Scroll down to the bottom of the referral and select Admit Individual.

dd Comments				
About 3000 characters left				li.
Cancel Back	Update Referral	Keep In Waiting List	Admit Individual	Acknowledge

Once a Referral gets accepted by a recipient provider, users with the *Oversight Restricted Referral* caseload-based role will be able to copy, update, and acknowledge the Referral form.

Referral Accepted By Recipient Prov	vider 1
General Information	
Individual	Isabella Johnson 3
Anticipated Admission Date	03/31/2024
Notification Level	Medium
Restricted	No
Recipient Provider	Demonstration Linked Provider One
Oversight Agency	Demonstration Oversight Provider
Cancel Back	Copy Form Update Referral Acknowledge

# Closing the Referral

# Individual Admitted by Linked Provider

The agency sending the referral now needs to Close the Referral to finish it. To do so, in the Oversight account, you will go to the Referral section and click on Admission Completed. This will be an option, once the receiving agency has Admitted the individual.

Referral		
New Worklist Accepted by Recipient I Waiting List Admission Completed Acknowledgement List Search Discontinue Referral	Provider (1)	-

. On the 'Admission Completed List' page, the Referrals of the individuals admitted into the Linked Provider account will be displayed. Click on the required Referral from the list.

Admission Completed List												
Filter											15	~ Record
Form ID 🗸	Individual Name 🗘	Oversight ID ≑	Notif Level ‡	Status 🗘	Entered By ‡	Anticipated Admission Date \$	Recipient Provider 🗘	Sent Date	Last Update Date \$	RP Accept Date \$	RP Denial Date ≑	OS Accept Date     ≑
REF-DEMO- N5W3PKKYNWVVE	Johnson, Isabella	23456789 (DEMO- OS)	Medium	Admission Completed	Cole, Mia / Program Manager	03/31/2024	Demonstration Linked Provider One	03/28/2024	03/28/2024	03/28/2024		03/28/2024

The Referral is now in Admission Completed status from the other provider. You now need to scoll down and click the Close button.

General Information	
Individual Anticipated Admission Date Notification Level Restricted Recipient Provider Oversight Agency	Isabella Johnson
Service Description	
Person Centered Support Plan and Se About 2958 characters left	rices.
Cancel Back	Copy Form Close Update Referral

A confirmation message will be displayed once the Referral has been successfully closed.

	The Referral form REF-DEMO-M344MUVZ27GAZ has been Successfully Closed
Actions	
Back to Form	
Link Individuals with Ove	ersight ID
Back to List	

Users with the Oversight Restricted Referral caseload-based role can copy and update Referrals in the 'Admission Completed' status.

General Information			
Individual	Isabella Johnson 3		
Anticipated Admission Date			
Notification Level			
Restricted	No		
Recipient Provider	Demonstration Linked Provider One		
Oversight Agency	Demonstration Oversight Provider		
Cancel Back		Copy Form	Update Referral

## Acknowledgement List – Need to Acknowledge Referrals

	Modules	High	Medium	Low
÷	Referral - Search			
	Worklist		1	
	Acknowledgement List		1	

In the Provider's **To-Do tab for Referrals**, you will see an **acknowledgement list**. You will need to work that list and acknowledge actions taken.

For example, if a referring provider discontinues a referral, the recipient provider should acknowledge that. If a recipient provider denies or accepts a referral the referring provider needs to acknowledge that.

# Searching Referrals

1. Click on the Search link in the 'Referral' section on the Oversight Dashboard.

Referral	
New	
W011<11st Acooptod by Hoapmnt wa,hngUst Admission Completed Acknowlodgomont 11st S e a r c h + Discontinue Referral	Prm/ldor

2. On the 'Referral Search' page, enter search parameters as appropriate and click on the Search button. You may also perform a blank search without entering any parameters which would show you Referrals of all status.

Form to			
Individual First Name			
Individuat Last Name			
oversight to			
Notification Level	Please Select	•	
Status	Closed		
	Closed	)(	
Entered By	Seareh		
Clear			
olean			

On the search results page, click on the Referral form you wish to view.

											15	~ Record
form ID 👻	Individual Name ‡	Oversight ID ‡	Notif Level \$	Status ‡	Entered By ‡	Anticipated Admission Date ‡	Recipient Provider ‡	Sent Date	Last Update Date \$	RP Accept Date \$	RP Denial Date ≎	OS Accep Date
REF-DEMO- 15W2PUYTFWXTS	Johnson, Isabella	23456789 (DEMO- OS)	Medium	Closed	Cole, Mia / Program Manager	03/312024	Demonstration Linked Provider One	03/28/2024	03/28/2024	03/28/2024		03/28/202
owing 1 to 1 of 1 entr	ies									P	revious	1 Nex
				_				_			1011000	1.00
New Search												

# **Discontinuing Referrals**

1. Click on the Discontinue Referral link in the 'Referral' section of the Oversight Dashboard.



Referring providers may discontinue referrals once 2 full business days have passed since sending the referral. This is consistent with 1915(i) policies and a lack of response to the referral prior to the end of 2 business days is considered a denial.

2. On the 'Referral Search' page, enter necessary search parameters and click on the **Search** button.

Referral Search		
Form ID		
Individual First Name		
Individual Last Name		
Oversight ID		
Notification Level	- Please Select -	
Status	- Please Select -	
Entered By	Search	
Selection ▲ Clear Selection		
Cancel		Search

3. On the search results page, click on the **Discontinue** link in the <u>Action</u> column for the Referral forms you wish to discontinue.

Filter											15 <b>~</b> R	ecord
Action	Form ID 👻	Individual Name ≎	Oversight ID \$	Notif Level ‡	Status ≑	Entered By	Anticipated Admission Date \$	Recipient Provider \$	Sent Date	Last Update Date ≎	RP Accept Date ‡	RF De Da
Discontinue	REF-DEMO- N5W3LTASVWVV4	White, Joshua	56789012 (DEMO- OS)	Medium	Pending Provider Response	Cole, Mia / Program Manager	03/31/2024	Demonstration Linked Provider One	03/28/2024			
Discontinue	REF-DEMO- N5W3KQSJ6WVVS	Phillips, Chloe	45678901 (DEMO- OS)	Medium	Waiting	Hill, Matthew / Administrator	03/31/2024	Demonstration Linked Provider One	03/28/2024	03/28/2024	03/28/2024	1
Discontinue	REF-DEMO- N5W3KLEFLWVVH	Miller, Alexander	34567890 (DEMO- OS)	Medium	Pending Provider Response	Sanders, John / Program Manager	03/31/2024	Demonstration Linked Provider One	03/28/2024			
nowing 1 to 3	of 3 entries									Previo	ous 1	Nex
New Search	ch											
Export to E	ixcel											

4. A confirmation message will be displayed if the Referral has been successfully discontinued.

The form REF-DEMO-L8W4PVWZY4SNA has been successfully Discontinued	
	L

5. If a Referral for an individual is discontinued after having been 'Selected by the Oversight', then the individual's Individual Demographic Form (IDF) in the Linked Provider's account turns to 'Deleted' status. If a new Referral for the same individual is sent to the Linked Provider again, then users will receive a validation message stating that a deleted IDF exists for the individual in the Linked Provider, and that the deleted IDF will turn to 'Pending Admission' status once the new Referral is accepted by the Oversight agency.

Deleted IDF exists in the Provid	er account for this Individual. Once Oversight/State accepts th reverted to 'Pending Admission' status.	he Referral, the IOF in Provider account will be
Referral New 0		
General Infonnation		
Individual	Chloe Phillips 0	
Oversight Agency	Demonstration Oversight Provider	
Provider Individual Details		
Provider Name		Referred Individual Status
rll Demonstration Linked	Provider One (LINK1-NM)	Deleted
Cancel Back		Continue

6. Users with the *Oversight Restricted Referral* caseload-based role can discontinue Referrals in the 'Pending Provider Response' and 'Denied By Recipient Provider' status.

Documenting Referral Denials (actual and no-response) for Conflict-of-Interest Purposes

### Scomm referrals

You can easily download a SComm message and attach this to a POC as documentation of being the only willing and qualified provider to serve a member as both care coordinator and supportive service provider.



#### Referral Module referrals

1915(i) staff will be able to see the referrals in Therap. Please identify the date you sent a referral and whether the response was denied or whether you discontinued the referral for lack of a response within the 2-business day timeframe.