ADMINISTRATIVE OVERVIEW
SERVICE SPECIFIC ATTACHMENT

Medical-Competency Evaluation

I. GENERAL POLICIES AND PROCEDURES

A. What is the average time period from the date of referral to the date of an assessment?

B. After an assessment is complete, what is the average time it will take for the ASAP to receive the assessment information?

C. Describe your policy for contacting the ASAP agency when service is altered from that which was authorized

D. Describe your policy for notifying the ASAP agency when evaluation is scheduled:

E. Describe your policy for notifying ASAP agency of problems encountered that affect completion of the service authorized

F. Describe your policy for documentation and notification to the ASAP agency of the outcome of your intervention

G. Describe your procedure/capacity to respond to emergencies

H. What is your proposed rate?
$
Describe any additional charges.

II. PERSONNEL PROCEDURES

A. Describe your policy for ensuring that those providing services for ASAP clients are properly credentialed

B. Describe your procedure for ensuring staff sensitivity to elder

Provider employee who completed this form

Name: Date: