

Living Choice

Medically Fragile

## COMMUNITY SERVICE PLAN AUTHORIZATION REQUEST CHECKLIST

Participant Name				SoonerCare ID	
	<i>Last</i>	<i>First</i>	<i>Middle</i>		

### A. INITIAL ASSESSMENT

#### Pre-assessment

- Participant Consents and Rights
- Release of Information
- UCAT I & III
- Quality of Life Survey (QOL)

#### Post-assessment

- Release of Information
- Community Service Plan
- Community Service Plan Goals
- Community Service Back Up Plan

**STOP**

This Section only pertains to  
The Living Choice  
Demonstration Program

### B. INITIAL COMMUNITY SERVICE PLAN

- Participant Consents & Rights
- Release of Information
- Community Service Plan
- Community Service Plan Goals
- Community Service Back Up Plan
- UCAT (Parts I & III)
- Other, only if necessary for this plan (i.e. Nutritional Supplement, Environmental Mods)

### C. REASSESSMENT

- Participant Consents & Rights
- Release of Information
- Community Service Plan
- Community Service Plan Goals
- Community Service Back Up Plan
- UCAT (Parts I & III)
- Other, only if necessary for this plan (i.e. Nutritional Supplement, Environmental Mods)

### D. ADDENDUM

- Community Service Plan Addendum
- Revised Goal(s)
- Other, only if necessary for this plan

### SIGNATURES

Documentation marked above was sent:

TC/CM Agency	TC/CM Signature	Date