

## Checklist for Preparing Referrals to MED

Please **scan** the following documentation and email to:

[ORMED@maximus.com](mailto:ORMED@maximus.com) and cc Med SPD (in Outlook) or

[Med.SPD@state.or.us](mailto:Med.SPD@state.or.us).

**Note: Section 1 below must be fully completed in order for the referral to be accepted.** To best support the consumer and assessment process, please submit all documents requested in sections 2 and 3 that are in your possession.

**Please keep the same agency's records together and put each agency's materials in chronological order and all in the same direction.**

**Section 1: The following MUST be included:**

**Basic demographic information** including:

- Name of individual
- DOB and Age of individual
- Prime Number
- Name of case manager or person making referral
- Local office ID number
- Please explain if the consumer is currently receiving services through APD, DD or MH and how long. If they aren't currently have they in the past and if so when
- Have there been previous MED referrals or decisions, yes/no.

**Summary of the presenting issues.** Summaries should be **signed by the case manager and the supervisor or manager.** Also, include any current coordination with Mental Health.

**Office Contact Information:**

Names, titles, phone numbers and email addresses

**Include 002N from Assessment which needs to be:**

- from complete and current assessment (within the last 3 months)

## Section 2

**Include any of the following records that are in your possession:**

**Medical records** that are addressing current health issues.

- Hospital records or summaries. Records should include admission and discharge summaries, consultation reports, medication records, laboratory results and MED checklist 11/2017 summaries of CT or MRI scans all within the last year
- Lists of medications (please do not scan the copies of the prescription forms just a list of the medications if not current on OACCESS)
- Records from visits with their PCP
- Test results

**Mental Health records** that include:

- Psychiatric history or mental health outpatient treatment records. Psychiatrist or mental health nurse practitioner notes and therapist notes with in the last year and/or address the issue related to the need for services

**Cognitive testing that includes any of the following:**

- Montreal Cognitive Assessment (MOCA)
- Saint Louis University Mental Status (SLUMS) Examination
- Standardized Mini-Mental State Examination (SMMSE)
- Or other standardized cognitive assessments.

**Section 3: The following is extremely helpful:**

- Evidence of a TBI should be documented if possible. Allegation or anecdotes without documentation can be confusing. **\*\*If TBI is an indicator for eligibility then this is a must\*\***
- Neuro-psychological exam or other evaluations that describe cognitive findings

**You do not need to submit fax cover sheets or release of information. Also, please be careful not to send multiple copies of the same materials.**