

UCRM CHANGES

This grid is intended to be high level view of planned changes for the existing UCRM forms for the transition into SmartCare. Because SmartCare has existing forms available for both SUD and MH programs, a number of forms are planned to sunset.

| FY 23-24 | FY24-25 | | |
|---|-----------------|---|----------------------------------|
| Forms Names | STATUS/ PLAN | AVAILABLE IN SC | DOWNTIME FORM |
| 10 2018 PSC - Parent interactive (pdf) | Sunset | Yes- California Pediatric Symptom Checklist | SC Downtime Form |
| 10 2018 PSC - Youth Interactive (pdf) | Sunset | No | N/A |
| ACKNOWLEDGEMENT NPP.docx | Sunset | Yes – Consent to Treat | SC Downtime Form |
| Adult Clinical Record Chart Order (docx) | Sunset | N/A | N/A |
| ADVANCE DIRECTIVE ADVISEMENT EXPLANATION.docx | Sunset | N/A | N/A |
| ADVANCE DIRECTIVE ADVISEMENT.doc | Keep | Yes – Consent to Treat | SC Downtime Form |
| AIMS EXPLANATION.docx | Sunset | N/A | N/A |
| AIMS FORMFILL.doc | Sunset | N/A | N/A |
| ANCILLARY SMHS REQUEST - EXPLANATION (pdf) | Keep | No | No |
| ANCILLARY SMHS REQUEST - FORM FILL (docx) | Keep | No | No |
| AOA OUTPATIENT UM EXPLANATION FORM (docx) | Keep | No | No |
| AOA OUTPATIENT UM FORM FILL (docx) | Keep | No | No |
| AOA PATIENT MEDICATION AGREEMENT - SPANISH.DOCX | Sunset | N/A | N/A |
| AOA Patient Medication Agreement English (pdf) | Sunset | N/A | N/A |
| AUTHORIZATION TO USE OR DISCLOSE PHI (docx) (ALL THRESHOLD LANGUAGES) | Sunset | Yes – Coordinated Care consent | SC Downtime Form |
| AUTHORIZATION TO USE OR DISCLOSE PHI EXPLANATION.docx | Sunset | N/A | N/A |
| BHA – 0-5 FORMFILL (docx) | Sunset | No | No |
| BHA – ADULT FORM FILL (doc) | Sunset | Yes- CalAIM Assessment | SC Downtime Form |
| BHA – CHILDREN FORM FILL (docx) | Sunset | No | No |
| BHA – DEC FORM FILL (docx) | Sunset | No | No |

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|--|-----------------|--|----------------------------------|
| Forms Names | STATUS/ PLAN | AVAILABLE IN SC | DOWNTIME FORM |
| BHA - EXPLANATION (docx) | Sunset | N/A | N/A |
| CANS EXPLANATION (docx) | Sunset | N/A | N/A |
| CANS Family Letter (pdf) (ALL LANGUAGES) | Sunset | N/A | N/A |
| CARE PLAN EXPLANATION (docx) | Keep | N/A | N/A |
| Children's Uniform Chart Order (docx) | Sunset | N/A | N/A |
| CLIENT ASSIGNMENT FORM (doc) | Sunset | N/A | N/A |
| CLIENT INFORMATION FACE SHEET EXPLANATION.docx | Sunset | N/A | N/A |
| Client Plan Form Fill (docx) | Sunset | N/A | N/A |
| Client Plan Signature Page (docx) | Sunset | N/A | N/A |
| COLLATERAL PROGRESS NOTE FORM FILL (doc) | Sunset | N/A | N/A |
| CONSENT FOR SERVICES (docx) (ALL LANGUAGES) | Sunset | Yes – Consent to Treat | SC Downtime Form |
| CONSENT FOR SERVICES EXPLANATION.docx | Sunset | N/A | N/A |
| COORDINATION OF CARE FORM EXPLANATION.docx | Sunset | N/A | N/A |
| COORDINATION OF CARE FORM EXPLANATION.docx | Sunset | N/A | N/A |
| COORDINATION OF CARE FORM.docx (ALL LANGUAGES) | Sunset | Yes – Coordinated Care consent | SC Downtime Form |
| CRISIS STABILIZATION UNIT DAILY DOCUMENTATION PROGRESS NOTE (docx) | Sunset | Yes – Service Note | In process |
| CRISIS STABILIZATION UNIT DISCHARGE PROGRESS NOTE (docx) | Sunset | Yes – Service Note | In process |
| CRISIS STABILIZATION UNIT REASSESSMENT PROGRESS NOTE (docx) | Sunset | N/A | N/A |
| CSU EPISODE SUMMARY – EXPLANATION (docx) | Sunset | N/A | N/A |
| CSU EPISODE SUMMARY (docx) | Sunset | Yes- Crisis Assessment | SC Downtime Form |
| Daily Progress Note (docx) | Sunset | Yes – Service Note | In process |
| Daily Progress Note Explanation Sheet (docx) | Sunset | N/A | N/A |
| DAY TREATMENT CLIENT PLAN.doc | Sunset | N/A | N/A |
| DEMOGRAPHIC FORM EXPLANATION (docx) | Sunset | N/A | N/A |
| DEMOGRAPHIC FORM FILL (docx) | Sunset | Yes- Client Information, Client Face Sheet | In process |

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| Forms Names | STATUS/ PLAN | AVAILABLE IN SC | DOWNTIME FORM |
| DIAGNOSIS FORM EXPLANATION (docx) | Sunset | N/A | N/A |
| DIAGNOSIS FORM.docx | Sunset | Yes- Diagnosis Document | In process |
| DISCHARGE SUMMARY EXPLANATION (docx) | Sunset | N/A | N/A |
| DISCHARGE SUMMARY FORMFILL (docx) | Sunset | Yes – Discharge Summary | In process |
| DISCHARGE SUMMARY PAPER FORM INSTRUCTIONS (docx) | Sunset | N/A | N/A |
| ECBI EXPLANATION.docx | Keep | No | No |
| ESU NURSING NOTE FORM FILL.docx | Sunset | Yes- Service Note | In process |
| Explanation for Eligibility form-10-25-17.pdf | Sunset | N/A | N/A |
| General Progress Note (docx) | Sunset | Yes – Service Note | In process |
| General Progress Note Explanation Sheet (docx) | Sunset | N/A | N/A |
| Group Progress Note (docx) | Sunset | Yes – Service Note | In process |
| Group Progress Note Explanation Sheet (docx) | Sunset | N/A | N/A |
| HIGH RISK ASSESSMENT EXPLANATION (docx) | Sunset | N/A | N/A |
| HIGH RISK ASSESSMENT FORM FILL.docx | Sunset | Yes – Risk Assessment | In process |
| HIGH RISK INDEX FORM FILL.docx | Sunset | N/A | N/A |
| IHBS AUTHORIZATION REQUEST – EXPLANATION (docx) | Keep | No | N/A |
| IHBS PRIOR AUTHORIZATION REQUEST FORM FILL (pdf) | Keep | No | N/A |
| IHBS PRIOR AUTHORIZATION WEB BASED SUBMISSION FORM - INSTRUCTIONS (docx) | Keep | No | N/A |
| IMR ADULT OUTCOMES EXPLANATION.docx | Sunset | N/A | N/A |
| IMR ASSESSMENT (pdf) | Sunset | N/A | N/A |
| IMR CLINICIAN ASSESSMENT FORM (pdf) | Sunset | N/A | N/A |
| INFORMED CONSENT PSYCHOTROPIC MEDICATION (docx) (ALL LANGUAGES) | Keep | N/A | N/A |
| INFORMED CONSENT PSYCHOTROPIC MEDS EXPLANATION (docx) | Sunset | N/A | N/A |
| LOCUS ADULT OUTCOMES EXPLANATION.docx | Sunset | N/A | N/A |
| Locus Instrument Version 20 (pdf) | Sunset | N/A | N/A |

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| Forms Names | STATUS/ PLAN | AVAILABLE IN SC | DOWNTIME FORM |
| MCRT ASSESSMENT (docx) | Sunset | Yes- Mobile Crisis Assessment (MTAC Tool) | SC Downtime Form |
| MEDICAL CONDITION REVIEW EXPLANATION.docx | Sunset | N/A | N/A |
| MEDICAL CONDITION REVIEW FORM EHR.docx | Sunset | N/A | N/A |
| MEDICATION PROGRESS NOTE (docx) | Sunset | Yes – Service Note | In process |
| MOBILE CRISIS ASSESSMENT (docx) | Sunset | Yes- Mobile Crisis Assessment (MTAC Tool), Crisis Assessment | SC Downtime Form |
| MORS ADULT OUTCOME EXPLANATION.docx | Sunset | N/A | N/A |
| MORS ADULT OUTCOME MEASURE.docx | Sunset | N/A | N/A |
| MY SAFETY PLAN EXPLANATION (docx) | Sunset | N/A | N/A |
| MY SAFETY PLAN FORM FILL (docx) (ALL LANGUAGES) | Sunset | Yes - Safety Plan | In process |
| NEVER BILLABLE PROGRESS NOTE FORM FILL (doc) | Sunset | Yes – Service Note | In process |
| INITIAL SCREENING ESU PAPER FORM INSTRUCTIONS.doc | Sunset | N/A | N/A |
| NURSING NOTE FORM FILL (docx) | Sunset | Yes – Service Note | In process |
| PRIOR AUTHORIZATION DAY SERVICES REQUEST - EXPLANATION (docx) | Keep | N/A | N/A |
| PRIOR AUTHORIZATION DAY SERVICES REQUEST (docx) | Keep | No | No |
| Problem List - FormFill (docx) | Sunset | Yes – Problem List | In process |
| Problem List Explanation (docx) | Sunset | N/A | N/A |
| PROSPECTIVE RISK ANALYSIS (PRA) (docx) | Sunset | Yes- Risk Assessment (Client)/Suicide Risk Assessment | In process |
| Prospective Risk Analysis (PRA) Explanation (docx) | Sunset | N/A | N/A |
| PSC- Parent Spanish 6 2018 Interactive (pdf) | Sunset | N/A | No |
| PSC- Youth Spanish 6 2018 Interactive (pdf) | Sunset | N/A | No |
| PSC-35 Explanation (docx) | Sunset | N/A | N/A |
| Psychiatric Assessment EHR Explanation (docx) | Sunset | N/A | N/A |
| PSYCHIATRIC ASSESSMENT FORMFILL.doc | Keep | N/A | N/A |

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|--|-----------------|--------------------------------|----------------------------------|
| Forms Names | STATUS/ PLAN | AVAILABLE IN SC | DOWNTIME FORM |
| PSYCHIATRIC ASSESSMENT PAPER FORM INSTRUCTIONS.doc | Sunset | N/A | N/A |
| RELEASE OF INFORMATION CHILD 04-24A-P.dot | Sunset | Yes – Coordinated Care Consent | SC Downtime Form |
| REQUEST FOR ACCESS COPY OF PHI.doc | Keep | No | No |
| RMQ QUESTIONNAIRE FORM (pdf) | Sunset | N/A | N/A |
| SAFETY ALERT PAPER FORM INSTRUCTIONS.doc | Sunset | N/A | N/A |
| SAFETY ALERTS EXPLANATION.docx | Sunset | N/A | N/A |
| SAFETY ALERTS FORMFILL.doc | Sunset | N/A | N/A |
| SATS-R ADULT OUTCOME EXPLANATION.docx | Sunset | N/A | N/A |
| SATS-R FORM 2.doc | Sunset | N/A | N/A |
| SD-CANS Explanation (docx) | Sunset | N/A | N/A |
| Service Indicator Outside Facility ID Listing (xlsx) | Sunset | N/A | N/A |
| Service Indicator Table Key (docx) | Sunset | N/A | N/A |
| STRENGTHS TABLE.docx | Sunset | N/A | N/A |
| TIERS ABUSE ADDICTION.docx | Sunset | N/A | N/A |
| TIERS BASIC NEEDS.docx | Sunset | N/A | N/A |
| TIERS EDUCATION.docx | Sunset | N/A | N/A |
| TIERS EMOTIONAL BEHAVIORAL PSYCHIATRIC.docx | Sunset | N/A | N/A |
| TIERS FAMILY STRESS.docx | Sunset | N/A | N/A |
| TIERS FINANCIAL.docx | Sunset | N/A | N/A |
| TIERS IDENTITY ISSUES.docx | Sunset | N/A | N/A |
| TIERS INTIMATE RELATIONSHIPS.docx | Sunset | N/A | N/A |
| TIERS LACK OF PHYSICAL HEALTH CARE.docx | Sunset | N/A | N/A |
| TIERS LEGAL.docx | Sunset | N/A | N/A |
| TIERS MEANINGFUL ROLE.docx | Sunset | N/A | N/A |
| TIERS NEGLECT ABUSE.docx | Sunset | N/A | N/A |
| TIERS NEUROLOGICAL BRAIN IMPAIRMENT.docx | Sunset | N/A | N/A |

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|---|-----------------|-----------------|------------------|
| Forms Names | STATUS/ PLAN | AVAILABLE IN SC | DOWNTIME FORM |
| TIERS PHYSICAL HEALTH PROBLEMS.docx | Sunset | N/A | N/A |
| TIERS POTENTIAL FOR HARM.docx | Sunset | N/A | N/A |
| TIERS SOCIAL FUNCTIONING.docx | Sunset | N/A | N/A |
| TIERS SPIRITUAL.docx | Sunset | N/A | N/A |
| TIERS STRESS.docx | Sunset | N/A | N/A |
| TIERS TABLE EXPLANATION.docx | Sunset | N/A | N/A |
| TIERS TRAUMA.docx | Sunset | N/A | N/A |
| TIERS VOCATIONAL EMPLOYMENT.docx | Sunset | N/A | N/A |
| TRANSITIONAL YOUTH REFERRAL PLAN EXPLANATION.docx | Sunset | N/A | N/A |
| TRANSITIONAL YOUTH REFERRAL PLAN FORM FILL.doc | Sunset | N/A | N/A |
| UM Request Explanation Sheet (docx) | Keep | No | N/A |
| UM Request Form (pdf) | Keep | No | N/A |
| VITALS FORMFILL.doc | Sunset | N/A | N/A |
| WRAPAROUND PROGRESS NOTE FORM FILL.doc | Sunset | N/A | N/A |
| YOUTH TRANSITION SELF EVALUATION EXPLANATION (docx) | Keep | N/A | N/A |