## Quality of Documentation Individual & Group - Licensed Psychologist (PhD/PsyD)

Provider: Participant Name:	Reviewer:
1. Has the participant, or their legal guardian, consented to treatment?  COMAR 10.36.05.05 B  COMAR 10.36.05.07 E  COMAR 10.36.05.08  COMAR 10.21.25.03-1 H (1) (a)  YES / NO	Comments:
2. Does the medical record contain a completed MDH Documentation for Uninsured Eligibility Registration and verification of uninsured eligibility status, or documentation of approval by MDH? MDH Guidelines  YES / NO / NA	Comments:
3. Does the medical record contain a completed Maryland Medicaid/Maryland Department of Health/Optum Maryland Authorization To Disclose Substance Use Treatment Information For Coordination of Care form; or documentation that the participant was offered the form and refused to sign? MDH Guidelines 42 CFR, Part 2 Optum Behavioral Health Provider Alert Release of Information (ROI) For MCO's, November 7, 2019  YES / NO / NA	Comments:

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4. Does the medical record contain a comprehensive assessment?  COMAR 10.36.05.08 C (1-2)  COMAR 10.21.25.03-1 H (1) (b)  YES / NO / NA	Comments:
5. Does the medical record contain a treatment plan?  COMAR 10.21.25.03-1 H (1) (c)	Comments:
YES / NO / NA	
6. Does the medical record contain contact notes that include a detailed description of the service?  COMAR 10.36.05.08 C (2)  COMAR 10.21.25.03-1 H (2)  COMAR 10.09.59.03 D	Comments:
YES / NO	

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7. Does the participant meet admissions and continuing stay medical necessity criteria for outpatient mental health services?  Maryland Medical Necessity Criteria ICD-10 Crosswalk  YES / NO	Comments:
8. Does the participant record document the participant's original test data with results and other evaluative material, and the results of any formal consultations with other professionals?  COMAR 10.36.05.08 C (2)  YES / NO / NA	Comments: