

Stabilization Services Documentation
To be completed every 24 hours for Per Diem Billing
County:

Date:	Service Start Time:	Service Note End Time:
Service Time for this documentation period:		Consumer MA Number:
Consumer Name:		Consumer DOB/Age:

Documentation of Factors That Support Continued Crisis Stabilization services

These are factors that support continued Crisis Stabilization and/or the need for CSP services:

- Continued risk of self- harm
- Continued risk of harm to others
- Impaired functioning due to symptoms of mood and / or thought disorder
- Recent failure of less restrictive options (independent living, community support program, group living)
- Lack of available /effective supports (including family) to maintain functioning and safety (e.g. “If supports are withdrawn, the person would be at high risk for relapse which would lead to more restrictive placement”)
- Need for intensive monitoring of symptoms and/or response to recent medication change
- Recent history of the above that supports the belief that if supports are withdrawn risk for more restrictive setting would be imminent

Note: The provider’s documentation should support the above. If the consumer does not meet one of the above, then interventions should be coded as “non-billable”.

Ongoing Crisis Stabilization services provided:

- Independent living services
 - Help with transportation
 - Referral services / accessing services
 - AODA assessment or treatment
 - Mental Health assessment or treatment
 - Psychiatric assessment or medication management
 - Psychological assessment or treatment
- Other supports:

- Nursing service (Med packing and administering medications/ assessing for side effects)
- Doctor visit – Physical Health
- Symptom management
- Home visit
- Phone support
- Office visit
- Crisis bed / Shelter bed

Details of service provided and/or additional notes:

Worker Signature and credentials,

Date