



Provider Change Checklist

The checklist should be completed anytime a person changes or adds a service provider. All the relevant documentation/information listed below needs to be provided to the new service provider and case manager. As a general rule, information should be sent to the new agency within a week of date of notification. If unable to do so, the previous case manager should tell the new agency when the information can be expected.

Client: _____

Services	Previous Provider	New Provider	Date of Change
Day Service	_____	_____	_____
Residential Service	_____	_____	_____
Individual Family Support (PAS/SHC)	_____	_____	_____
Wellness Monitoring	_____	_____	_____
Case Management	_____	_____	_____

Items to be provided to new provider	Date Provided
BASIS	_____
All BASIS data collected since the last assessment	_____
Integrated Service Plan	_____
Person Centered Plan	_____
Needs Assessment	_____
Medical Information (medication, physical, Medicaid, Medicare)	_____
Eligibility Information	_____
Behavior Plan, Risk Assessment, Individual Justice Plan	_____
Guardianship/Conservatorship Papers/Durable Power of Attorney	_____
Social Security Card	_____
Birth Certificate	_____
3161 form	_____
Kansas ID	_____
MR-1 Form	_____

Approved: 2/25/08, 9/15/08, 4/11/11, 4/1/15

MR-5 or MR-4

Extraordinary Funding information

Number of TCM units billed prior to the transfer for calendar year

Physical or Health Profile

CDDO Application

Trust, burial, insurance information

Other:

Case Manager Signature

Date