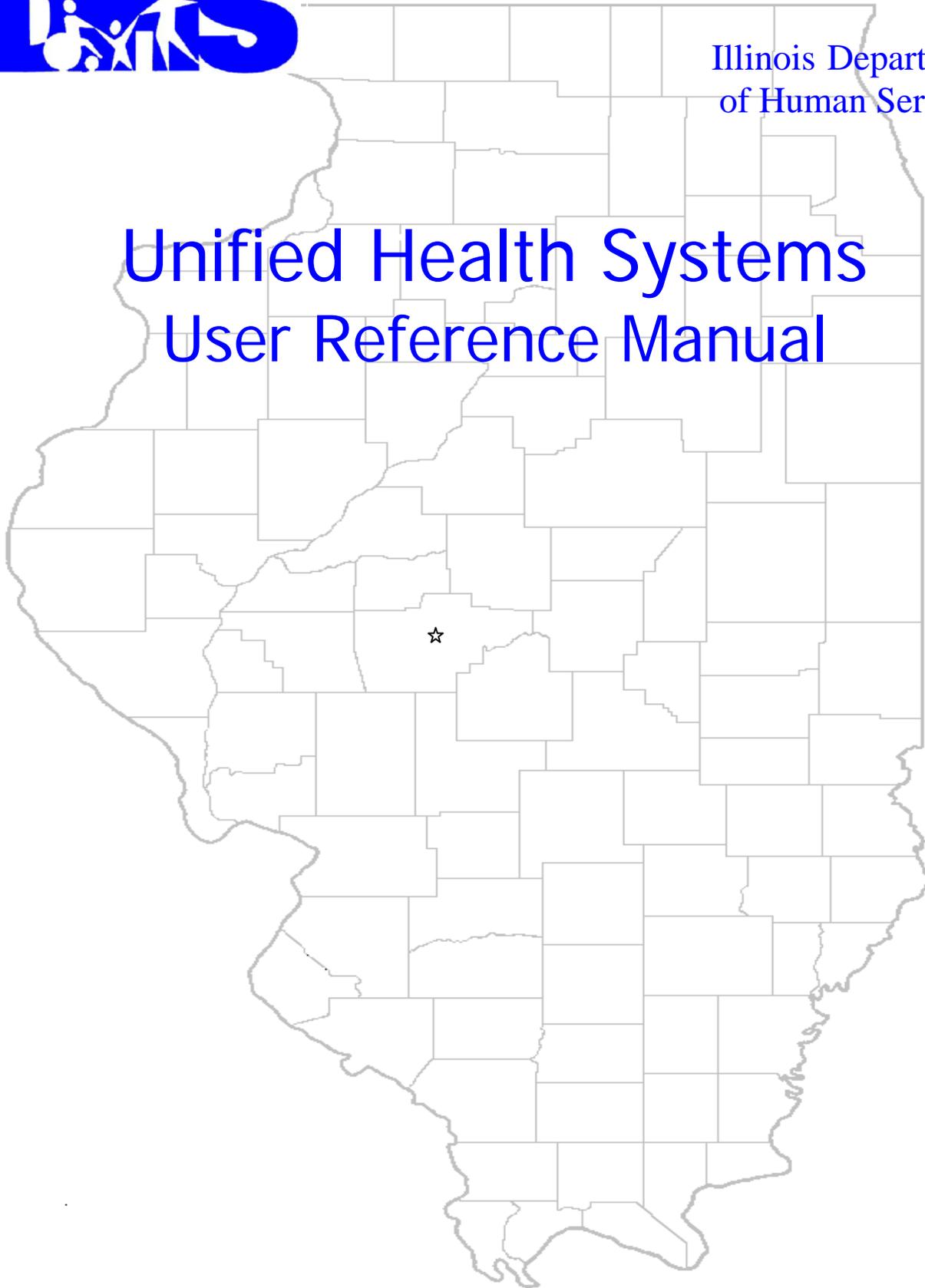




Illinois Department  
of Human Services

# Unified Health Systems User Reference Manual



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# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## INTRODUCTION

**DHS** Illinois  
Department of Human Services

### System Login

**Login**

**User ID:**

**Password:**

Illinois Statutes and DHS policy prohibit unauthorized access or disclosure of DHS client, employee or any other confidential information. Any unauthorized use of DHS computers or disclosure of confidential client or employee information may be cause for disciplinary action, including termination of employment and/or criminal prosecution.

**Do not attempt to login unless you are an authorized user.**

*By logging into any Illinois Department of Human Services System, using your assigned user ID, you acknowledge that you are an authorized user and agree to abide by all rules and regulations of the Illinois Department of Human Services System. It is your responsibility to ensure that your user ID and password are kept private. Do NOT share your login information with anyone. No representative of DHS will ever ask for your password.*

The Unified Health Systems application may be accessed by entering the URL [www.uhs.illinois.gov](http://www.uhs.illinois.gov) in the address line of your browser.

This is the first page that the user will see once they have accessed the Unified Health Systems application.

1. The user should type in his/her Unified Health Systems User ID.
2. After entry of a valid User ID, the Unified Health Systems prompts the user for a "Password". The user should type in his/her unique password. When the password is entered, it will not be visible.
  - The user must not login to the Unified Health Systems again, unless the user has followed the logout procedures. The user should only have one active session of Unified Health Systems running at a time.
3. The user must select "**Login**". The Unified Health Systems Home Page will be displayed.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

The **UHS Worker Home Page** is displayed after logging into Unified Health Systems.

The lists shown on this page will be dependent upon the worker's security role.

The screenshot shows the UHS Worker Home Page interface. It features a navigation bar with 'Home', 'Search', 'Agency', 'Info View', 'Help', and 'Logout'. Below the navigation bar, the page is titled 'UHS Worker Home Page' and contains four main sections, each with a table of data:

Unfinished Screenings		
Consumer Name	Referral Received Date	Screening Type
Benny, Jack	09/07/2007	MH PAS Level II
Benny, Jack	09/13/2007	MH PAS Level II
Fender, Freddie	09/07/2007	MH PAS Level II
Scenario, Five	09/13/2007	MH PAS Level I
Scenario, Four	09/13/2007	MH PAS Level I
Scenario, Nine	09/13/2007	MH PAS Level I
Scenario, Seven	09/13/2007	MH PAS Level I

Screenings Ready for Billing Approval		
PAS Specialist Name	Completion Date	Screening Type
UhsRoseAll, Adam	09/19/2007	MH PAS Level II
UhsRoseAll, Adam	09/12/2007	MH PAS Level II
UhsRosePas, Cindy	09/13/2007	MH PAS Level II
UhsRoseAll, Adam	09/13/2007	MH PAS Level II
UhsRoseAll, Adam	09/13/2007	MH PAS Level II
UhsRosePas, Cindy	09/27/2007	MH PAS Level I
UhsRosePas, Cindy	09/14/2007	MH PAS Level II

Completed Screenings Within Last 60 Days			
Consumer Name	Date of Birth	RIN	Screening Type
Denver, John	04/12/1947		MH PAS Level II
Baker, Dusty	09/12/1948		MH PAS Level II
Smith, Veronica	06/25/1962		MH PAS Level II
Scenario, Three	04/12/1978		MH PAS Level II
Scenario, Three	04/12/1978		MH PAS Level I
Scenario, Five	07/15/1955		MH PAS Level I
Scenario, Six	08/25/1942		MH PAS Level I

Notifications			
Consumer Name	Facility Name	Message Type	Days Remaining
No notification.			

*Unfinished Screenings* will be displayed with *Consumer Name*, *Referral Received Date* and *Screening Type*. *Consumer Name* is a link that when clicked on will display the MH PAS Screening Level I, Level II or Resident Review depending on what is in progress. *Screenings Ready for Billing Approval* will display the *PAS Specialist Name*, *Completion Date* and *Screening Type*. *Completed Screenings Within Last 60 Days* will display the *Consumer Name*, *Date of Birth*, *RIN* and *Screening Type*. *Consumer Name* is a link that when clicked on will display the **Consumer Summary** page for the consumer. Notifications will display the *Consumer Name*, *Facility Name*, *Message Type* and the number of *Days Remaining*. *Consumer Name* is a link that when clicked on will display the **Resident Review Information** page.

Depending on the role of the Worker there will also be a section for *Notifications* when Resident Reviews are required. This section will contain *Consumer Name*, *Facility Name*, *Message Type* and the number of *Days Remaining*.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## SECTION 1 – UPDATE OR ADD A CONSUMER

### 1.1 CONSUMER SEARCH

The screenshot shows the 'UHS Consumer Search' interface. At the top, there is a navigation menu with 'Home', 'Search', 'Agency', 'Info View', 'Help', and 'Logout'. The main heading is 'UHS Consumer Search'. Below this, there are two main sections for search criteria. The first section, 'Basic Search Criteria', contains fields for 'Last Name', 'First Name', and 'Name Search Type' (set to 'Exact Match'). It also includes fields for 'SSN' and 'RIN'. Underneath, there are radio buttons for 'Search Scope', with 'Unified Health Systems' selected and 'Statewide' as an option. A 'Search' button is positioned at the bottom of this section. The second section, 'Additional Search Criteria', includes a 'Date of Birth' field with a 'Match By' dropdown set to 'Exact Match' and a 'Date of Birth' input field with the format 'mm/dd/yyyy'. It also has dropdown menus for 'Gender', 'State', 'Zip Code', and 'County'. A 'Search' button is located at the bottom of this section.

The **UHS Consumer Search** page is displayed after selecting **Search** from the **Unified Health Systems Home Page**. A search is to be implemented to determine if a consumer already exists or will need to be added to the system. A basic search must consist of either *Last Name*, *SSN* or *RIN*. If *Last Name/First Name* are entered a *Name Search Type* may be selected for *Sounds Like*, *Exact Match* or *Begins With* to limit the number of matches. There is also additional search criteria which may be entered to limit the number of matches. After the selected information has been entered click on **Search**.

When a match was not found using the Unified Health Systems data, conduct the search again using the Statewide search. It is important that the information be located if consumer is in either system.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 1.1 CONSUMER SEARCH – continued

The screenshot displays the UHS Consumer Search Results interface. At the top, the UHS logo and 'Unified Health Systems' text are visible. Below this is a navigation bar with links for Home, Search, Agency, Info View, Help, and Logout. The main heading is 'UHS Consumer Search Results'. The interface is divided into two main sections: 'Basic Search Criteria' and 'Additional Search Criteria'. The 'Basic Search Criteria' section includes fields for Last Name (Pooh) and First Name (Winnie), a Name Search Type dropdown (Exact Match), SSN and RIN fields, and Search Scope radio buttons (Unified Health Systems selected, Statewide). The 'Additional Search Criteria' section includes a Gender dropdown, Date of Birth fields (Match Birth Date By: Exact Match, Date of Birth: mm/dd/yyyy), State, Zip, and County dropdowns. A message box at the top right of the search results area states 'No Matches were Found for your Search'. At the bottom of each criteria section are 'Search' and 'Add' buttons.

When it has been determined that the consumer does not exist in the system the **UHS Consumer Search Results** will be displayed with the message *"No Matches were Found for your Search"*. Select **Add** to enter new consumer information or **Search** to search for another consumer.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 1.1 CONSUMER SEARCH – continued

**UHS Consumer Search Results** Page 1 of 1

**Basic Search Criteria**

**Name**  
 Last Name:  First Name:   
 Name Search Type:

**SSN:**  **RIN:**

**Search Scope:**  
 Unified Health Systems  
 Statewide

---

**Additional Search Criteria**

**Gender:**

**Date of Birth**  
 Match Birth Date By:   
 Date of Birth:   
mm/dd/yyyy

**State:**

**Zip:**  -

**County:**

Page 1 of 1

Search Results				
Name(s)	Date of Birth	Gender	RIN	Details
<a href="#">RABBIT, ROGER (Legal Name)</a> Rabbit, Rog (Alias)	01/29/1968	Male		<a href="#">Details</a>

Page 1 of 1

When search criteria was entered and a match found the above page will be displayed with a list of the *Name(s)* found for the match. *Name(s)* is a hyperlink which can be clicked on to add/edit Consumer Summary information. *Details* is also a hyperlink that will allow viewing only of details on the consumer.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## SECTION 2 - PREPARING CONSUMER FOR INTAKE

The screenshot shows a web browser window with the title 'Unified Health Systems'. The navigation bar includes 'Home', 'Search', 'Agency', 'Info View', 'Help', and 'Logout'. The main content area is titled 'Preparing Consumer for Intake' and contains a form with the following fields:

- Consumer Intake** (Section Header)
- Fields marked with an asterisk (\*) are required.
- \*Last Name:** Text input field containing 'Pooh'.
- \*First Name:** Text input field containing 'Winnie'.
- Middle Name:** Text input field.
- \*Gender:** Drop-down menu.
- \*Date of Birth:** Date picker.
- RIN:** Text input field.
- SSN:** Text input field with a placeholder '(123-45-6789 or 123456789)'. Note: The original image contains a typo '789' which has been corrected to '789'.
- Address** (Section Header)
- \*Address Type:** Drop-down menu.
- Street Address1:** Text input field.
- Street Address2:** Text input field.
- City:** Text input field.
- \*State:** Drop-down menu.
- Zip code:** Text input field with a hyphen separator.
- \*County:** Drop-down menu.
- \*Township:** Drop-down menu.
- Save** and **Cancel** buttons.

The **Preparing Consumer for Intake** page will be displayed when a new consumer is to be added to the system. Fields marked with an asterisk (\*) are required but it is recommended to fill in all information that is available. Enter the *Last Name* and *First Name* of the consumer. The *Date of Birth* may be entered or selected by clicking on the calendar and selecting the appropriate date. Select the *Gender*, *Address Type*, *State*, *County* and appropriate *Township* from the drop down lists. All other information should be entered if available on the consumer.

Select **Save** to create the Consumer Intake record or **Cancel** when information has been entered in error and is not to be saved. This will then return to the **UHS Consumer Search** page.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 2.1 CONSUMER SUMMARY

**Unified Health Systems**

Home | Search | Person (Pooh) | Agency | Info View | Help | Logout

**Consumer Summary for Winnie Pooh**

Demographics	
Gender:	Male
SSN:	Unknown
RIN:	Unknown

[Edit Demographics](#)

Names			
Last Name	First Name	Middle Name	Name Type
Pooh	Winnie		Legal Name
Pooh	Little	Bear	Alias

[Add Name](#)

Guardian Info	
Type:	Limited of Person
Last Name:	Doe
First Name:	John

[Edit Guardian Info](#)

Address			
Type of Address	Address	County	Township
<a href="#">Residential Address</a>	1 Hollow Tree Lane Springfield, IL 62526	Sangamon	Clear Lake
<a href="#">Mailing Address</a>	P.O. Box 101 Springfield, IL 62526	Sangamon	Clear Lake

Phone Numbers		
Type	Phone Number	Ext.
Home	(217) 555-1212	

[Add Phone](#)

The **Consumer Summary** page will be displayed after saving the **Preparing Consumer for Intake** page or when a consumer name was selected from the **UHS Consumer Search Results** page. Hyperlinks are below each section to allow addition of a *Name*, *Address* or *Phone Number* and editing of *Demographics* and *Guardian Info*. The *Last Name* and *Type of Address* can also be clicked on to update this information. The information can also be updated or added by clicking on *Person* and selecting the appropriate drop down list as shown on the page below.

**Consumer Summary - Microsoft Internet Explorer provided by IDHS**

File Edit View Favorites Tools Help

Address: http://j04057:9081/uhsapp/client/PersonSummary.do

**Unified Health Systems**

Home | Search | Person (Pooh) | Agency | Address

Consumer Summary

- Demographic Information
- Name
- Phone
- Additional Demographics Information
- Guardian

Demographic Information	
Gender:	Male
SSN:	Unknown
RIN:	Unknown

[Edit Demographics](#)

Names			
Last Name	First Name	Middle Name	Name Type
Pooh	Winnie		Legal Name
Pooh	Little	Bear	Alias

[Add Name](#)

Guardian Info	
Type:	Limited of Person
Last Name:	Doe
First Name:	John

[Edit Guardian Info](#)

Address			
Type of Address	Address	County	Township
<a href="#">Residential Address</a>	1 Hollow Tree Lane Springfield, IL 62526	Sangamon	Clear Lake
<a href="#">Mailing Address</a>	P.O. Box 101 Springfield, IL 62526	Sangamon	Clear Lake

Phone Numbers		
Type	Phone Number	Ext.
Home	(217) 555-1212	

[Add Phone](#)

Done Local intranet

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 2.2 DEMOGRAPHIC INFORMATION

The screenshot shows the 'Additional Demographic Information' page in the Unified Health Systems application. The page has a blue header with the DHS logo and the text 'Unified Health Systems'. Below the header is a navigation bar with links: Home, Search, Person (Pooh) (selected), Agency, Info View, Help, and Logout. The main content area is titled 'Additional Demographic Information' and includes a note: 'Note: Fields marked with an asterisk (\*) are required.' Below this note, it says 'Recipient Identification Number: unknown'. The form contains several sections:

- \*Date of Birth:** (mm/dd/yyyy) with a text input field containing '07/06/1954' and a calendar icon.
- SSN:** (123-45-6789 or 123456789) with an empty text input field.
- \*Gender:** with radio buttons for 'Male' (selected) and 'Female'.
- \*Race:** with checkboxes for 'American Indian/Alaskan Native', 'Asian', 'Black or African American', 'Native Hawaiian or Other Pacific Islander', and 'White'.
- \*Hispanic Origin:** with a dropdown menu set to 'Not Hispanic'.
- \*Current Living Arrangement:** with an empty dropdown menu.
- Education Level:** with a dropdown menu set to 'No formal schooling'.
- Employment Status:** with an empty dropdown menu.

A 'Save' button is located at the bottom right of the form area.

The **Additional Demographic Information** page will be displayed after clicking on *Edit Demographics* on the **Consumer Summary** page. Fields marked with an asterisk (\*) are required fields but it is recommended to fill in all information that is available. The *Date of Birth* may be entered or selected by clicking on the calendar and selecting the appropriate date. Select the appropriate *Gender* and *Race*. Select *Hispanic Origin*, *Residential Status*, *Education Level* and *Employment Status* from the drop down lists.

Select **Save** to create Additional Demographic Information. After the information has been saved the page will be displayed with the message "Demographic Information Saved" at the top of the page. To return to the **Consumer Summary** page double click on *Person* from the Menu Bar or select the specific area to be added or edited from the drop down list.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 2.2.1 ADD NAME

The screenshot shows the 'Add Name' form within the Unified Health Systems application. The header includes the DHS logo and the text 'Unified Health Systems'. Below the header is a navigation bar with buttons for 'Home', 'Search', 'Person (Pooh)', 'Agency', 'Info View', 'Help', and 'Logout'. The main content area is titled 'Add Name' and contains a message: 'Fields marked with an asterisk (\*) are required.' Below this message are three required fields: '\*Name Type:' with a dropdown menu showing 'Alias', '\*First Name:', and '\*Last Name:'. There is also an optional field for 'Middle Name:'. At the bottom right of the form are 'Save' and 'Cancel' buttons.

The **Add Name** page will be displayed when *Add Name* was selected on the previous page. Fields marked with an asterisk (\*) are required fields. Select a *Name Type* of Alias, Birth Name or Known By from the drop down list.

Enter the appropriate information and click on **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 2.2.2 ADD ADDRESS

The screenshot shows the 'Add Address' form within the Unified Health Systems application. The header includes the DHS logo and the text 'Unified Health Systems'. Below the header is a navigation menu with options: Home, Search, Person (Pooh) (selected), Agency, Info View, Help, and Logout. The main content area is titled 'Add Address' and contains the following fields:

- Address Type:** A dropdown menu with 'Mailing Address' selected.
- Street Address 1:** A text input field.
- Street Address 2:** A text input field.
- City:** A text input field.
- \*State:** A dropdown menu (required field).
- Zip:** Two text input fields separated by a hyphen.
- \*County:** A dropdown menu (required field).
- \*Township:** A dropdown menu (required field).

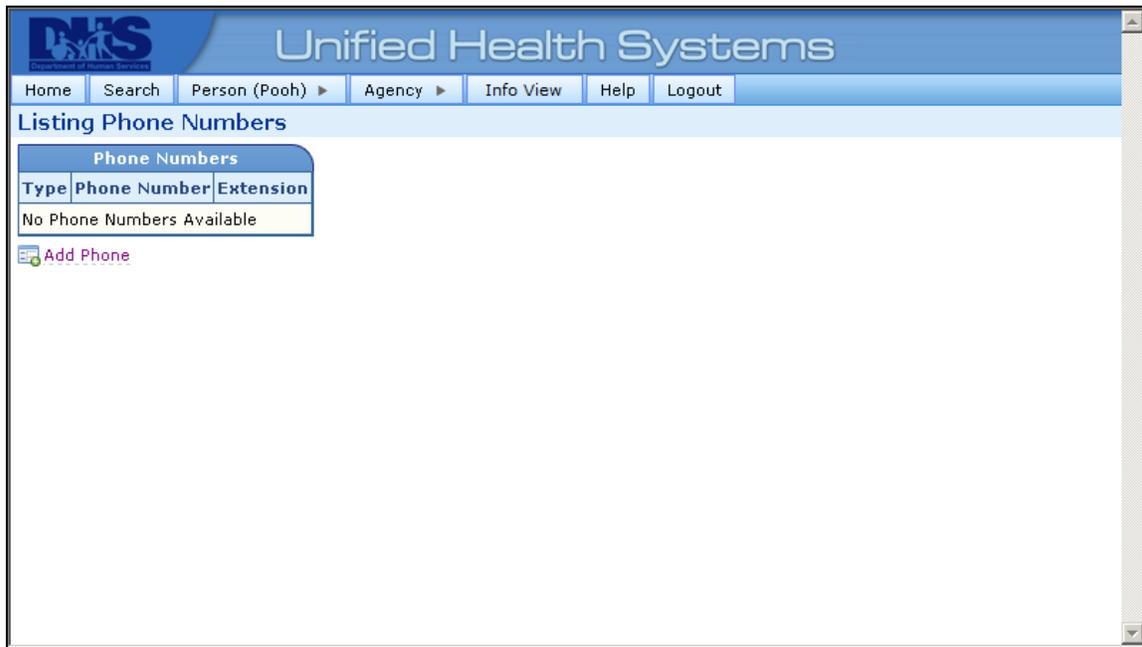
At the bottom of the form are two buttons: 'Save' and 'Cancel'.

The **Add Address** page will be displayed when *Add Address* was selected on the **Consumer Summary** page or by clicking on *Person* from the Menu Bar and selecting *Address* from the drop down list. Fields marked with an asterisk (\*) are required fields.

Enter the appropriate information and click on **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 2.2.3 ADD PHONE NUMBER



The **Add Phone Number** page will be displayed when *Add Phone* was selected on the **Consumer Summary** page or by clicking on *Person* from the Menu Bar and selecting *Phone* from the drop down list. When *Person* was selected from the Menu Bar the above page will be displayed with a link to *Add Phone*. Fields marked with an asterisk (\*) are required fields. When the *Add Phone* is selected the *Add Phone Number* page (below) will then be displayed.

Enter the appropriate information and click on **Save** to save the information or **Cancel** when information has been entered in error.

The screenshot shows the 'Add Phone Number' page in the Unified Health Systems application. The navigation bar includes 'Home', 'Search', 'Person (Pooh)', 'Agency', 'Info View', 'Help', and 'Logout'. The main content area displays a form with the following fields: '\*Phone Type:' (a dropdown menu), '\*Phone Number:' (a field with a format of ( ) - ), and 'Extension:' (a text input field). Below the form are 'Save' and 'Cancel' buttons.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 2.2.4 GUARDIAN INFORMATION

The screenshot shows the 'Guardian Information' page in the Unified Health Systems application. The page has a blue header with the DHS logo and the text 'Unified Health Systems'. Below the header is a navigation bar with buttons for 'Home', 'Search', 'Person (Pooh)', 'Agency', 'Info View', 'Help', and 'Logout'. The main content area is titled 'Guardian Information' and contains a form with the following fields:

- First Name:**
- Last Name:**
- Guardian Type:**
- Phone Number:** (  )  -
- Extension:**
- Address:**
  - Street 1:**
  - Street 2:**
  - City:**
  - State:**
  - Zip:**  -

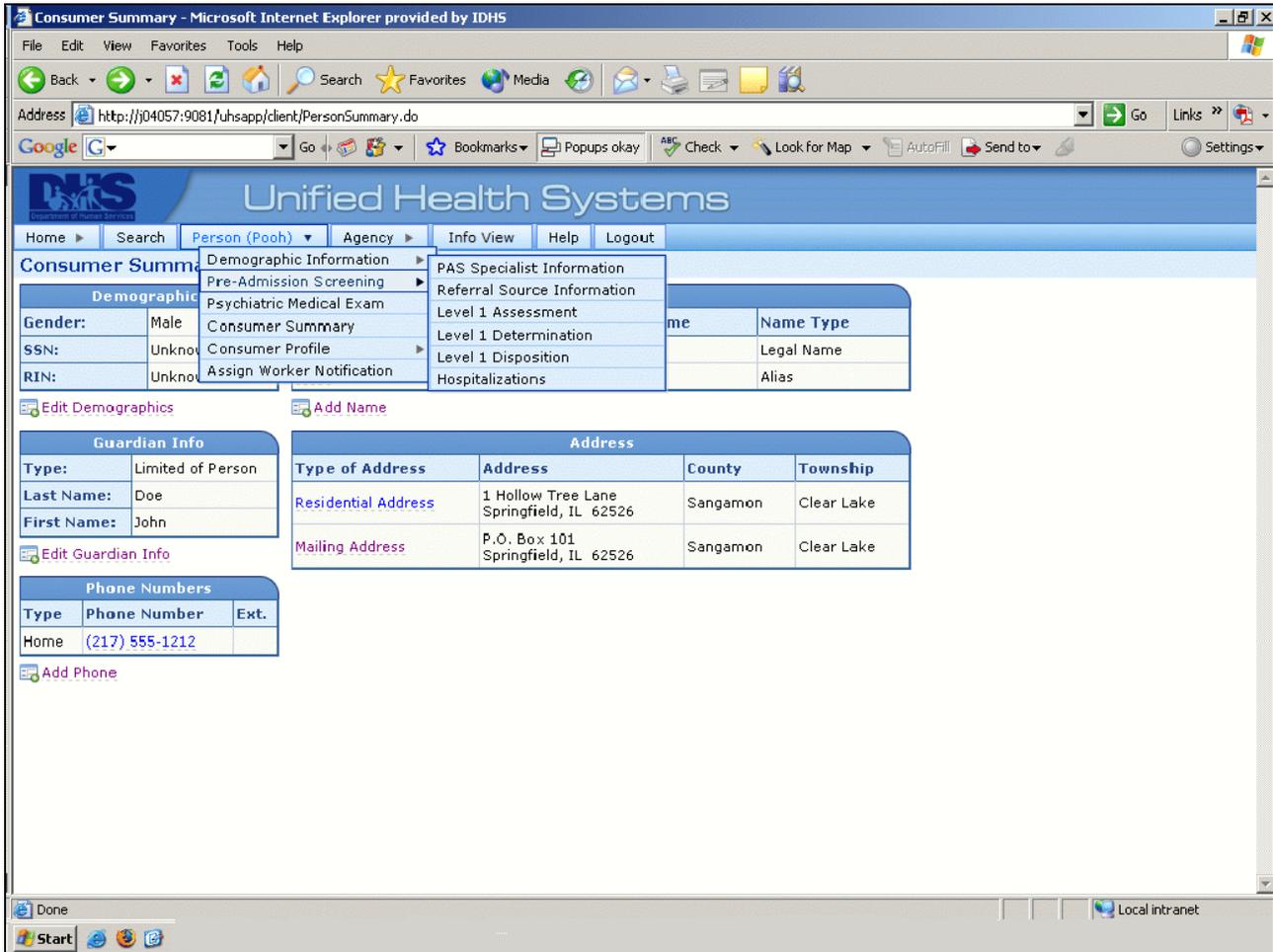
At the bottom of the form are two buttons: 'Save' and 'Delete'.

The **Guardian Information** page will be displayed when *Edit Guardian Info* was selected on the **Consumer Summary** page or by clicking on Person from the Menu Bar and selecting *Guardian* from the drop down list.

Enter the Guardian Information for the consumer and click on **Save** to save the information or **Cancel** to clear the page. To remove the Guardian click on **Delete**. Fields marked with an asterisk (\*) are required fields.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## SECTION 3 - PRE-ADMISSION SCREENING



If there are no active screenings in progress, select *Person* from the Menu Bar, *Pre-Admission Screening* and *PAS Specialist Information* from the drop down list. This will display the **PAS Specialist Information** page. If a screening is already in progress select *Pre-Admission Screening* and the particular information to be accessed from the drop down menu.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 3.1 PAS SPECIALIST INFORMATION

The screenshot displays the 'PAS Specialist Information' form within the Unified Health Systems web application. The application header includes the DHS logo and the text 'Unified Health Systems'. A navigation menu at the top contains links for Home, Search, Person (Pooh), Agency, Info View, Help, and Logout. The form itself is titled 'PAS Specialist Information' and contains several fields:

- PAS Organization Name:** A text field containing 'agency 1'.
- \*PAS Received Referral Date:** A date picker field.
- \*Referral Received Method:** A dropdown menu.
- PAS Specialist Name:** A dropdown menu with 'TestPAS, Uhs-Harold' selected.
- \*Referral Form Completed By:** A dropdown menu.

At the bottom of the form, there are two buttons: 'Save' and 'Cancel'.

The **PAS Specialist Information** page is displayed after selecting *Person* from the Menu Bar and *Pre-Admission Screening* and *PAS Specialist Information* from the drop down lists on the **Consumer Summary** page. Fields marked with an asterisk (\*) are required fields.

Enter the appropriate information and click on **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## SECTION 4 - LEVEL I INFORMATION

The screenshot shows the 'Level I Checklist' page in the Unified Health Systems application. The page has a blue header with the 'UHS' logo and the text 'Unified Health Systems'. Below the header is a navigation bar with links: Home, Search, Person (Doe), Agency, Info View, Help, and Logout. The main content area is titled 'Level I Checklist' and contains a list of items with checkboxes:

- [PAS Specialist Information](#)
- [Referral Source Information](#)
- [Level I Assessment](#)
- [Signed Release of Info for PAS Assessment IL 462-0752 \(PDF\)](#)
- [Signed Release of Info for PAS Results to Nusing Facility IL 462-0753 \(PDF\)](#)
- [Level I Determination](#)
- [Level I Disposition](#)

At the bottom of the checklist area are two buttons: 'Save' and 'Complete'.

The **Level I Checklist** page is displayed after the *PAS Specialist Information* has been entered and saved. A (T) next to *PAS Specialist Information* indicates the information is complete and passed validation; no further information to be entered. Worker can save partial information (to be completed at a later date) without completing all checklist items. All fields are hyper links and can be clicked on to access the information on the following pages. A PDF document can be printed for the "Authorization of Release" forms.

When all information has been entered, select **Save** to save the information or **Cancel** when information has been entered in error. If information has been saved, select **Complete** to "complete" the Level I Screening and submit for billing.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 4.1 REFERRAL SOURCE INFORMATION

The screenshot displays the 'Unified Health Systems' web application interface. At the top, there is a navigation bar with the following items: Home, Search, Person (Pooh), Agency, Info View, Help, and Logout. Below the navigation bar, the page title is 'Referral Source Information'. The form contains several input fields:

- \*Referring Organization Type:** A dropdown menu.
- \*Referring Person Name:** A text input field.
- Referring Organization Name:** A text input field.
- Referring Organization FEIN:** A text input field.
- Referring Organization NPI:** A text input field.

At the bottom right of the form, there are two buttons: 'Save' and 'Cancel'.

This page is displayed after selecting **Referral Source Information** from the **Level I Checklist** page or by selecting *Person* from the Menu Bar, *Pre-Admission Screening* and *Referral Source Information* from the drop down lists on the **Consumer Summary** page. Fields marked with an asterisk (\*) are required fields. Select the appropriate *Referring Organization Type* from the drop down list, enter the *Referring Person Name* and enter other information if available.

Select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 4.2 LEVEL I ASSESSMENT

The screenshot shows the 'Level I Assessment' form within the Unified Health Systems interface. The form is titled 'Level I Assessment' and contains the following sections:

- Introduction:** 'In order to determine whether there is a reasonable basis to suspect a severe mental illness. Complete all of the following items.'
- \*Severe Mental Illness Evaluation Criteria:** 'There is evidence that the individual may have one of these conditions.' This section includes a dropdown menu.
- Axis I Diagnosis:** 'A formal diagnosis, following the DSM-IV criteria, of a licensed physician.' This section includes a dropdown menu.
- \*The individual has a history of psychiatric hospitalization:** Radio buttons for 'Yes' and 'No', with a link for 'Add Hospitalization(s)'.
- \*The individual has a history of outpatient mental health services:** Radio buttons for 'Yes' and 'No'.
- List psychotropic medications prescribed to the individual:** A text area with a character count of '250 characters left'.
- Explain any other symptoms/role functioning impairments believed to be related to a suspected mental illness, e.g., suicidal, bizarre behavior, homelessness, incarceration, not meeting basic needs:** A text area with a character count of '250 characters left'.
- Exemptions To PAS Mental Health:** A list of six conditions with checkboxes:
  - Primary Diagnosis of senile or pre-senile dementia. (Includes Alzheimer's or related disorders). This also applies to persons with a traumatic brain injury. This should be based on current medical records and confirmed by a physician's diagnosis.
  - Transitory or situational depression or anxiety or adjustment disorders related to a debilitating physical illness e.g., someone on psychotropic medications secondary to a serious physical condition. This applies to persons who suffer a primary health problem that may manifest some behavioral symptoms which require mental health attention.
  - The individual is returning to an NF after an acute hospital stay or returning to an NF after an absence of less than 60 days. This includes transfers from one NF to another.
  - Severe physical illnesses, such as coma, ventilator dependent, Parkinson's disease, Huntington's disease, ALS, renal failure, advanced cancers.
  - A discharge from a non-psychiatric acute hospital inpatient stay for a medically prescribed period of recovery. The convalescent period should not exceed 120 days and should be provided specifically for medical recuperation. If a longer stay is required the NF should refer for additional PAS/MH assessments.
  - Terminal illness with life expectancy of six months or less referred to nursing facility for hospice care. This condition should be verified by a physician's statement.

At the bottom right of the form, there are 'Save' and 'Cancel' buttons.

Information for Level I Assessment on following page.

## UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

### 4.2 LEVEL I ASSESSMENT - continued

The **Level I Assessment** page is displayed after having been selected from the **Level I Checklist** page or by selecting *Person* from the Menu Bar and *Pre-Admission Screening* and *Level I Assessment* from the drop down lists on the **Consumer Summary** page. Fields marked with an asterisk (\*) are required fields. Select the appropriate *Severe Mental Illness Evaluation Criteria* and *Axis I Diagnosis* from the drop down lists. If the individual has a history of psychiatric hospitalization the hospitalizations will need to be added. If the individual has previously entered hospitalization, select *Show Hospitalizations* to display a list. If there is a history of outpatient mental health services requiring psychotropic medications, enter the medications. Indicate any exemptions to PAS Mental Health.

Select ***Save*** to save the information or ***Cancel*** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 4.2.1 PAS HOSPITALIZATIONS

The screenshot shows the 'Level I Assessment' page in the Unified Health Systems interface. The page title is 'Level I Assessment' and it includes a navigation bar with 'Home', 'Search', 'Person (Pooh)', 'Agency', 'Info View', 'Help', and 'Logout'. The main content area contains instructions for determining a severe mental illness and lists several criteria, including 'Axis I Diagnosis' and 'The individual has a history of psychiatric hospitalization'. An inset form titled '\*Hospitalization Type:' is overlaid on the page, containing three required fields: '\*Hospitalization Type:' (a dropdown menu), '\*When:' (a text input field), and '\*Where:' (a text input field). Below these fields are 'Add' and 'Cancel' buttons. The background page also shows a list of hospitalizations and a character count of '250 characters left'.

The **Add Hospitalizations** page is displayed after selecting to add a hospitalization on the **Level I Assessment** page. Click on the *Add Hospitalization* link to display the inset on the above page. Fields marked with an asterisk (\*) are required fields.

Select **Add** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 4.3 LEVEL I DETERMINATION

The screenshot shows a web browser window titled "Unified Health Systems". The navigation bar includes "Home", "Search", "Person (Pooh)", "Agency", "Info View", "Help", and "Logout". The main content area is titled "Level 1 Determination". It contains a form with the following fields and options:

- \*Determination**: A required dropdown menu.
- Non-Eligibility Reason**: A dropdown menu.
- \*Source Of Information (check all that apply):** A group of checkboxes:
  - Community Mental Health record(s)
  - Medical record(s)
  - Private Hospital records
  - State Operated Hospital record(s)
  - Previous Pre-Admission Screening(s)
  - Referring Organization
  - Self or Family reported

At the bottom of the form are "Save" and "Cancel" buttons.

The **Level I Determination** page is displayed after selecting *Level I Determination* from the **Level I Checklist** page or by selecting *Person* from the Menu Bar and *Pre-Admission Screening* and *Level I Determination* from the drop down lists on the **Consumer Summary** page. Fields marked with an asterisk (\*) are required fields. If a "Determination" should not have been entered, select *Entered in error*.

Select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 4.4 LEVEL I DISPOSITION

The screenshot shows a web browser window with the title "Unified Health Systems". The browser's address bar shows the URL "http://www.unifiedhealth.com/". The page has a blue header with the "UHS" logo and the text "Unified Health Systems". Below the header is a navigation menu with the following items: Home, Search, Person (Pooh) ▾, Agency ▾, Info View, Help, and Logout. The main content area is titled "Level 1 Disposition". Below the title, there is a note: "Fields marked with an asterisk (\*) are required." The form contains the following fields and controls:

- Disposition:** MH PAS Level II
- Disposition/PAS Referral Type:** A dropdown menu.
- Receiving Agency (include Contact Person):** A text input field.
- \*Level 1 Narrative Summary:** A text area with a vertical scrollbar. Below the text area, it says "500 characters left".
- Buttons:** "Save" and "Cancel" buttons are located at the bottom right of the form.

The **Level I Disposition** page is displayed after selecting *Level I Disposition* from the **Level I Checklist** page or by selecting *Person* from the Menu Bar and *Pre-Admission Screening* and *Level I Disposition* from the drop down lists on the **Consumer Summary** page. Fields marked with an asterisk (\*) are required fields.

Select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

The screenshot shows the 'Level I Checklist' page in the Unified Health Systems application. The page has a blue header with the 'DHS' logo and the text 'Unified Health Systems'. Below the header is a navigation bar with links: Home, Search, Person (RABBIT), Agency, Info View, Help, and Logout. The main content area is titled 'Level I Checklist' and contains a list of items, each with a checked checkbox:

- PAS Specialist Information
- Referral Source Information
- Level I Assessment
- Signed Release of Info for PAS Assessment IL 462-0752 (PDF)
- Signed Release of Info for PAS Results to Nusing Facility IL 462-0753 (PDF)
- Level I Determination
- Level I Disposition

At the bottom of the list is a link: [Print Level I Determination](#).

After all pertinent information has been entered on a screening, select **Save** to save the information or **Cancel** when information has been entered in error.

After **Save** has been selected, select **Complete**, to complete Level I. If the Level I Determination selected was for 'Suspect Severe Mental Illness (SMI)' the system will continue on with a Level II otherwise a Level I Determination report can now be printed by clicking on *Print Level I Determination*. The page below will then be displayed. Select the date for data to be displayed and click on **Run**. A Level I Summary report can now be printed or the Level I Checklist information may be viewed.

The screenshot shows the 'Report Selection' page in the Unified Health Systems application. The page has a blue header with the 'DHS' logo and the text 'Unified Health Systems'. Below the header is a navigation bar with links: Home, Search, Person (Pooh), Agency, Info View, Help, and Logout. The main content area is titled 'Report Selection' and contains a form with the following elements:

- A text input field labeled 'Select date you wish to display data: (mm/dd/yyyy)' with a calendar icon.
- A section labeled 'Display the Report in this Format -' with two radio buttons:  **Html** and  **PDF**.
- A section labeled 'Level I Determination Report' with a **Run** button.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## SECTION 5 - LEVEL II INFORMATION

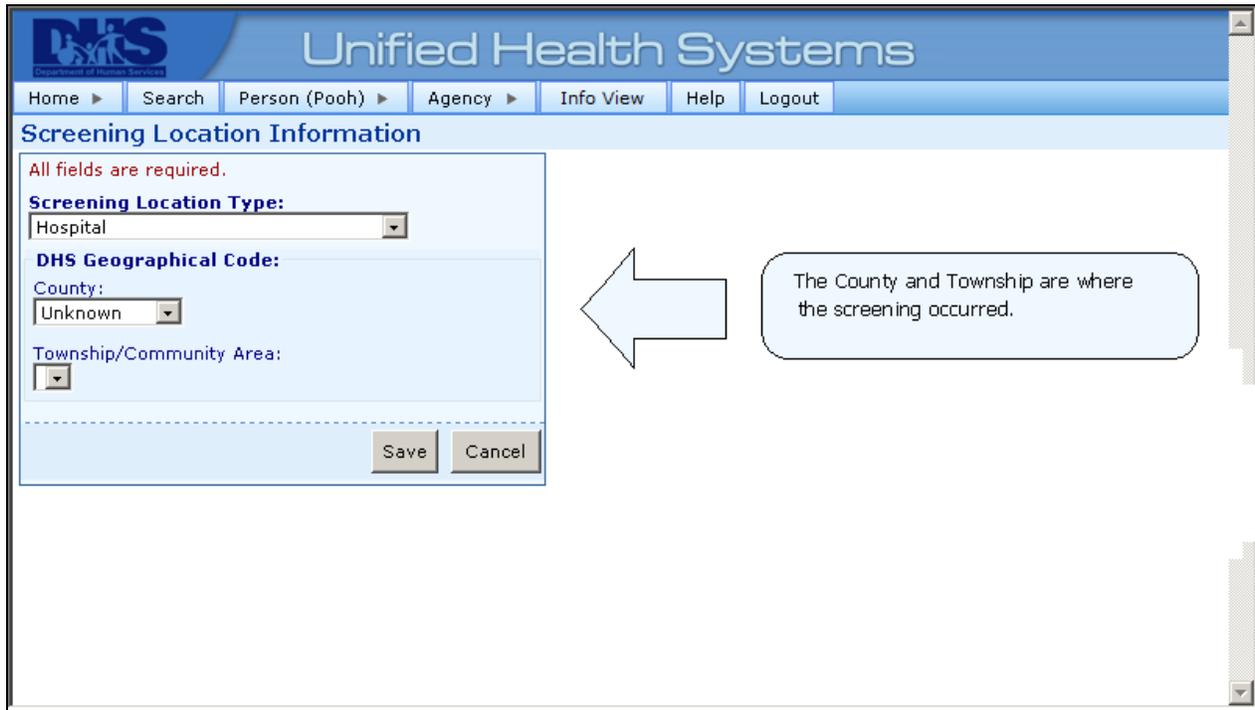
The screenshot shows the 'MH PAS Level II Checklist' page within the Unified Health Systems interface. The page header includes the DHS logo and the text 'Unified Health Systems'. Below the header is a navigation bar with links for Home, Search, Person (Pooh), Agency, Info View, Help, and Logout. The main content area is titled 'MH PAS Level II Checklist' and contains a list of checklist items, each with a checkbox and a hyperlink. The items are: Screening Location Information, Interim MH History Information, General Consumer Information, Psychiatric Medical Exam Assessment, LOCUS 2000/DON Scores and Ratings Assessment, Mental Status and Presenting Behaviors Assessment, Substance Use/Abuse Assessment, History of Antisocial/ Maladaptive/ Risk Behavior Assessment, and Determination and Disposition. Below the list are two hyperlinks: 'Level 1 Summary Report' and 'Level 1 Checklist Review'. At the bottom of the checklist area are two buttons: 'Save' and 'Complete and Submit to Billing'.

The **MH PAS Level II Checklist** page is displayed after a **Level I Checklist** has been completed and it is determined that a Level II is needed. All the Checklist items are hyperlinks and can be clicked on to access the information on the following pages.

When all information has been entered, select ***Save*** to save the information or ***Cancel*** when information has been entered in error. If information has been saved, select ***Complete and Submit to Billing*** to “complete” the MH PAS Level II Checklist.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.1 SCREENING LOCATION INFORMATION



The screenshot displays the 'Unified Health Systems' web interface. At the top, there is a navigation bar with links for Home, Search, Person (Pooh), Agency, Info View, Help, and Logout. Below this is the 'Screening Location Information' form. The form contains the following elements:

- A red error message: "All fields are required."
- A dropdown menu for "Screening Location Type" with "Hospital" selected.
- A section for "DHS Geographical Code" containing:
  - A dropdown menu for "County:" with "Unknown" selected.
  - A dropdown menu for "Township/Community Area:".
- Two buttons at the bottom: "Save" and "Cancel".

A callout box with a blue arrow pointing to the County and Township fields contains the text: "The County and Township are where the screening occurred."

The **Screening Location Information** page is displayed after selecting *Screening Location Information* from the **MH PAS Level II Checklist** page. Select the appropriate fields from the drop down lists.

Select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.2 INTERIM MH HISTORY INFORMATION

The screenshot shows the 'Interim MH History Information' page. At the top, there is a navigation bar with 'Home', 'Search', 'Person (Pooh)', 'Agency', 'Info View', 'Help', and 'Logout'. Below the navigation bar, the page title is 'Interim MH History Information'. A sub-header reads: 'Recent/Current MH Services that the consumer has been involved with since the last PAS or in the previous two years, when a recent screening does not exist.' Below this is a table titled 'History Of Services' with the following columns: 'Previous/Current MH Provider', 'Provider Type', 'Provider is Aware of PAS Referral', and 'Describe MH Services received in previous two years.'. The table content shows 'No Past Mental Health History'. Below the table, there is a link 'Add Recent/Current MH Services' and a 'Back to List' button.

The **Interim MH History Information** page is displayed after selecting *Interim MH History Information* from the **MH PAS Level II Checklist** page. Click on **Add Recent/Current MH Services** to add this information or *Back to List* to return to the **MH PAS Level II Checklist** page.

The screenshot shows the 'Add Interim MH Services' page. At the top, there is a navigation bar with 'Home', 'Search', 'Person (Wan)', 'Agency', 'Info View', 'Help', and 'Logout'. Below the navigation bar, the page title is 'Add Interim MH Services'. A sub-header reads: 'Provide Recent/Current MH Services that the consumer has been involved with since the last PAS or in the previous two years, when a recent screening does not exist.' Below this is a form with the following fields: 'Previous Inpatient/Residential Provider:' (text input), 'Provider Type:' (dropdown menu), 'Provider is Aware of PAS Referral?' (checkbox), and 'Describe Community MH Services received in previous two years.' (text area). Below the text area, it says '500 characters left'. At the bottom of the form, there are 'Save' and 'Cancel' buttons.

The **Add Interim MH History** page is displayed after selecting **Add Recent/Current MH Services**. Enter all information and select **Save** to save the information or **Cancel** when information has been entered in error. When information has been saved the system will return to the **Interim MH History Information** page. Then click on **Back to List** to return to the **MH PAS Level II Checklist** page.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.3 GENERAL CONSUMER INFORMATION

The screenshot shows the 'General Consumer Information' form within the Unified Health Systems interface. The form is titled 'General Consumer Information' and includes a navigation bar with links for Home, Search, Person (Wan), Agency, Info View, Help, and Logout. The form is divided into several sections, each with a header and a text input field with a '500 characters left' indicator. The sections are: 'Earned/Unearned Income:' with checkboxes for Medicaid, Medicare, Personal Income, Social Security Administration (SSA), Supplemental Security Income (SSI), and Social Security Disability Insurance (SSDI); 'SSI-SSDI Eligibility:' with a dropdown menu; 'Housing Instability Definitions:' with a dropdown menu; 'Instrumental Activities of Daily Living Impairments:' with a text input field; 'Medical/Physical Conditions:' with a text input field; 'Current Medications:' with a text input field; 'Medication Side Effects:' with a text input field; and 'Family History of Mental Illness:' with a text input field. At the bottom right of the form are 'Save' and 'Cancel' buttons.

The **General Consumer Information** page is displayed after selecting *General Consumer* from the **MH PAS Level II Checklist** page.

Enter all pertinent information and select *Save* to save the information or *Cancel* when information has been entered in error. When information has been saved the system will return to the **MH PAS Level II Checklist** page.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.4 LEVEL 2 PSYCHIATRIC MEDICAL EXAM

Unified Health Systems

Home Search Person (Pooh) Agency Info View Help Logout

### Level 2 Psychiatric Medical Exam

No Psychiatric/Medical Exam Available

Add Cancel

If there has been a previous exam, the Most recent exam will be displayed.

The **Level 2 Psychiatric Medical Exam** page is displayed after selecting *Psychiatric/Medical Exam Assessment* from the **MH PAS Level II Checklist** page. To add an Exam click on *Add* or *Cancel* when no Exam is to be entered.

Unified Health Systems

Home Search Person (RABBIT) Agency Info View Help Logout

### Add Psychiatric Medical Exam

**Physician Name**  
\*Physician Last Name: \*Physician First Name:

**Psychiatric Exam**  
\*Exam Type: \*Psychiatric Exam Date:

**Location**  
\*Location Type: \*Location Name:

**Axis I (Primary):**  
Agoraphobia Without History of Panic Disorder

**Axis I (Secondary):**

**Axis II:**

\*PAS Agency Purchased:

Save Cancel

When *Add* was selected from the **Level 2 Psychiatric Medical Exam** page the **Add Psychiatric Medical Exam** page is displayed. Fields marked with an asterisk (\*) are required fields.

Enter all pertinent information and select *Save* to save the information or *Cancel* when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.4 LEVEL 2 PSYCHIATRIC MEDICAL EXAM – continued

The screenshot displays the 'Level 2 Psychiatric Medical Exam' form within the Unified Health Systems interface. The page header includes the logo and navigation links: Home, Search, Person (RABBIT), Agency, Info View, Help, and Logout. The form content is as follows:

**Level 2 Psychiatric Medical Exam**

This is the most recent and valid exam on file:

**Psychiatric Exam Date:**  
03/06/2008

**Physician** (Last Name, First Name)  
House, Gregory

**Location Type:**  
Private Hospital

**Location Name:**  
St. Johns

**\*Has PAS Agency purchased this exam?**

Do you wish to use this most recent exam as part of the assessment?

If No, and you wish to add a new exam, complete the justification.

**Justification:**

The above page is displayed when a Level 2 Psychiatric Medical Exam has been added. A *Justification* is required when a valid Psychiatric Medical Exam exists but a different exam is to be used for this screening. Fields marked with an asterisk (\*) are required fields.

Select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.5 LOCUS 2000/DON ASSESSMENT

The screenshot displays the 'LOCUS 2000/DON Assessment' form within the Unified Health Systems interface. The form is organized into several sections, each with a title and a set of input fields. The 'Risk Of Harm' section includes a score dropdown and a comment text area. The 'Functional Status' section also includes a score dropdown and a comment text area. The 'Co-Morbidity' section includes a score dropdown and a comment text area. The 'Recovery Environment(Stress):' section includes a score dropdown and a comment text area. The 'Recovery Environment(Support)' section includes a score dropdown and a comment text area. The 'Treatment Recovery History:' section includes a score dropdown and a comment text area. The 'Engagement:' section includes a score dropdown and a comment text area. Below these sections are three dropdown menus for 'Composite Rating', 'LOCUS Determination Grid Rating', and 'PAS Specialist Recommendation Rating'. At the bottom, there is a 'Determination of Need Score' section with a text input field. The form concludes with 'Save' and 'Cancel' buttons.

Unified Health Systems

Home Search Person (Wan) Agency Info View Help Logout

LOCUS 2000/DON Assessment

**Risk Of Harm:**  
\*Score: Comment:  
250 characters left

**Functional Status:**  
\*Score: Comment:  
250 characters left

**Co-Morbidity:**  
\*Score: Comment:  
250 characters left

**Recovery Environment(Stress):**  
\*Score: Comment:  
250 characters left

**Recovery Environment(Support)**  
\*Score: Comment:  
250 characters left

**Treatment Recovery History:**  
\*Score: Comment:  
250 characters left

**Engagement:**  
\*Score: Comment:  
250 characters left

**\*Composite Rating:**  
\*LOCUS Determination Grid Rating:  
\*PAS Specialist Recommendation Rating:

**Determination of Need Score:**

\*Required to complete the Level II Screening  
\*Automatically calculated if all scores are entered

Save Cancel

The **LOCUS 2000/DON Assessment** page is displayed after selecting *LOCUS 2000/DON Scores and Ratings Assessment* from the **MH PAS Level II Checklist** page. Fields marked with an asterisk (\*) are required fields.

Enter all pertinent information and select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.6 MENTAL STATUS AND PRESENTING BEHAVIORS

**Unified Health Systems**

Home Search Person (Pooh) Agency Info View Help Logout

### Mental Status and Presenting Behaviors

Check or type all that apply, do not use N/A.  
At least one option from every field is required.

<p><b>Personal Appearance:</b></p> <input type="checkbox"/> Groomed <input type="checkbox"/> Unkempt <input type="checkbox"/> Poor Hygiene <input type="checkbox"/> Looks older than age	<p><b>Voice</b></p> <input type="checkbox"/> Appropriate <input type="checkbox"/> Loud/Shouting <input type="checkbox"/> Soft <input type="checkbox"/> Whining <input type="checkbox"/> Gruff	<p><b>Gait/Posture:</b></p> <input type="checkbox"/> Steady <input type="checkbox"/> Unsteady <input type="checkbox"/> Peculiar posturing <input type="checkbox"/> Not Observed <input type="checkbox"/> Unremarkable	<p><b>Facial Expression:</b></p> <input type="checkbox"/> Appropriate <input type="checkbox"/> Sad <input type="checkbox"/> Elated <input type="checkbox"/> Angry <input type="checkbox"/> Mask-Like <input type="checkbox"/> Anxious/Worried
<p><b>Presentation:</b></p> <input type="checkbox"/> Cooperative <input type="checkbox"/> Defensive <input type="checkbox"/> Disinterested <input type="checkbox"/> Helpless <input type="checkbox"/> Suspicious <input type="checkbox"/> Manipulative <input type="checkbox"/> Evasive <input type="checkbox"/> Belligerent <input type="checkbox"/> Demanding <input type="checkbox"/> Assertive	<p><b>Speech:</b></p> <input type="checkbox"/> Appropriate <input type="checkbox"/> Trembling <input type="checkbox"/> Stumbling <input type="checkbox"/> Slurred <input type="checkbox"/> Mute <input type="checkbox"/> Over talkative <input type="checkbox"/> Refused to talk <input type="checkbox"/> Controlled <input type="checkbox"/> Illogical <input type="checkbox"/> Rambling	<p><b>Psychomotor Behavior:</b></p> <input type="checkbox"/> Unremarkable <input type="checkbox"/> Relaxed <input type="checkbox"/> Manneristic <input type="checkbox"/> Tense/Rigid <input type="checkbox"/> Tremble/Tremor <input type="checkbox"/> Withdrawn <input type="checkbox"/> Aggressive <input type="checkbox"/> Underactive/Slow <input type="checkbox"/> Overactive/Agitated	<p><b>Concentration:</b></p> <input type="checkbox"/> Focused <input type="checkbox"/> Distractible <input type="checkbox"/> Inattentive <input type="checkbox"/> Preoccupied <input type="checkbox"/> Drowsy/Sedated <input type="checkbox"/> Adequate <input type="checkbox"/> Confused <input type="checkbox"/> Concrete
<p><b>Motivation:</b></p> <input type="checkbox"/> Adequate <input type="checkbox"/> Intense <input type="checkbox"/> Vacillating <input type="checkbox"/> Questionable <input type="checkbox"/> Absent <input type="checkbox"/> Resistive	<p><b>Reasoning Ability:</b></p> <input type="checkbox"/> Unremarkable <input type="checkbox"/> Poor reality contact <input type="checkbox"/> Perseveration <input type="checkbox"/> Confabulatory <input type="checkbox"/> Impoverished <input type="checkbox"/> Limited Insight <input type="checkbox"/> Poor Judgement	<p><b>Thought Disorder:</b></p> <input type="checkbox"/> Unremarkable <input type="checkbox"/> Delusions <input type="checkbox"/> Hallucination <input type="checkbox"/> Obsessive <input type="checkbox"/> Tangential <input type="checkbox"/> Loose-Associations <input type="checkbox"/> Blocking	<p><b>Physical/Sensory Disabilities:</b></p> <input type="checkbox"/> No Impairment <input type="checkbox"/> Hearing Impaired <input type="checkbox"/> Visually Impaired <input type="checkbox"/> Physically Challenged
<p><b>Affect/Mood:</b></p> <input type="checkbox"/> Appropriate <input type="checkbox"/> Irritable <input type="checkbox"/> Blunted <input type="checkbox"/> Flat <input type="checkbox"/> Guilty <input type="checkbox"/> Depressed <input type="checkbox"/> Cheerful <input type="checkbox"/> Angry <input type="checkbox"/> Expansive	<p><b>Memory:</b></p> <input type="checkbox"/> Normal <input type="checkbox"/> Impaired <input type="checkbox"/> Remote <input type="checkbox"/> Recent	<p><b>Intelligence Estimate:</b></p> <input type="checkbox"/> Above Average <input type="checkbox"/> Average <input type="checkbox"/> Below Average <input type="checkbox"/> Suspect MR	<p><b>Orientation:</b></p> <input type="checkbox"/> Oriented <input type="checkbox"/> Disoriented

**Narrative Summary: (provide an overview of significant findings):**

500 characters left

Save Cancel

The **Mental Status and Presenting Behaviors Assessment** page is displayed after selecting *Mental Status and Presenting Behaviors Assessment* from the **MH PAS Level II Checklist** page.

At least one option from each category is required. Select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.7 SUBSTANCE USE/ABUSE ASSESSMENT

The screenshot shows the 'Substance Use/Abuse Assessment' form within the Unified Health Systems application. The form is titled 'Substance Use/Abuse Assessment' and includes a navigation bar with 'Home', 'Search', 'Person (Pooh)', 'Agency', 'Info View', 'Help', and 'Logout'. The main content area contains a link for 'Substance Use/Abuse Definitions' and several dropdown menus for selecting substance types: Alcohol, Cocaine or crack, Heroin or other opiates, Inhalant, Marijuana, and Stimulants (include prescription drugs e.g., dexedrene or illegally manufactured drugs such as meth). Below these is a text area for 'Additional comments/explanations: (Include family history when applicable):' with a '500 characters left' indicator. At the bottom right, there are 'Save' and 'Cancel' buttons.

The **Substance Use/Abuse Assessment** page is displayed after selecting the same from the **MH PAS Level II Checklist** page.

Enter all information and select ***Save*** to save the information or ***Cancel*** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.8 HISTORY OF ANTISOCIAL/MALADAPTIVE/RISK BEHAVIORS

**Unified Health Systems**

Home Search Person (Pooh) Agency Info View Help Logout

### History of Antisocial/Maladaptive/Risk Behaviors

[Add Behavior Assessment](#)  
or, Click the specific occurrence to Update.

**Antisocial behavior:**  
Drug involvement, gang activity other aberrant behavior irrespective of prosecution.  
No Occurrences.

**Criminal justice system involvement:**  
If suspect incarceration in state penitentiary or local/county jail, nature of offenses, from record and self reports.  
No Occurrences.

**Fire setting or arson:**  
No Occurrences.

**Physical assault/injury threatening to others:**  
No Occurrences.

**Physical violence towards others:**  
No Occurrences.

**Poor judgement placing self or others at risk:**  
No Occurrences.

**Property damage:**  
No Occurrences.

**Self injurious behaviors:**  
e.g., suicidal gestures or threats, suicide attempts, self mutilation  
No Occurrences.

**Serious wandering, elopement:**  
No Occurrences.

**Sexual aggression:**  
Check all referrals against this registered sex offender website:  
Link opens in a new window.  
<http://www.isp.state.il.us/sor/>  
No Occurrences.

**Additional comments/explanations:**

500 characters left

Note: If a positive determination is made regarding admission into a NF, these findings should be forwarded with other reports to the receiving NF.

Save Cancel

The **History of Antisocial/Maladaptive/Risk Behaviors** page is displayed after selecting the **History of Antisocial/Maladaptive/Risk Behavior Assessment** from the **MH PAS Level II Checklist** page.

Update information if necessary and select **Save** to save the information or **Cancel** when information has been entered in error. If additional behavior assessments need to be added, click on **Add Behavior Assessment** at the top of the page.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.8.1 ADD BEHAVIOR ASSESSMENT

The screenshot shows the 'Add Behavior Assessment' form within the Unified Health Systems application. The form is titled 'Add Behavior Assessment' and includes a navigation menu with 'Home', 'Search', 'Person (Pooh)', 'Agency', 'Info View', 'Help', and 'Logout'. The form contains the following fields:

- Type:** A dropdown menu.
- Level:** A dropdown menu.
- Time Frame:** A text input field.
- Details:** A large text area with a vertical scrollbar.

Below the 'Details' field, it indicates '500 characters left'. At the bottom of the form, there are 'Save' and 'Cancel' buttons. A red error message 'All fields are required.' is displayed at the top of the form area.

The **Add Behavior Assessment** page is displayed after clicking on the link for *Add Behavior Assessment* on the **History of Antisocial/Maladaptive/Risk Behaviors** page.

Enter all information and select **Save** to save the information or **Cancel** when information has been entered in error.

The page will return to the **History of Antisocial/Maladaptive/Risk Behaviors** page. Additional comments will be required at the bottom of this page. Then select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.9 LEVEL 2 DETERMINATION AND DISPOSITION

Unified Health Systems

Home Search Person (Pooh) Agency Info View Help Logout

**Level 2 Determination and Disposition**

Fields marked with an asterisk (\*) are required.

\***Determination:**

Save Cancel

The **Level 2 Determination and Disposition** page is displayed after selecting *Determination and Disposition* from the **MH PAS Level II Checklist** page. Select a determination from the drop down list.

Select *Save* to save the information or *Cancel* when information has been entered in error.

The *Disposition* will change to reflect the *Determination* selected as shown in the screen below and on the following pages.

Unified Health Systems

Home Search Person (Pooh) Agency Info View Help Logout

**Level 2 Determination and Disposition**

Fields marked with an asterisk (\*) are required.

\***Determination:**

Eligible Specialized Services

**Disposition**

Referred to inpatient hospital for SS

Save Cancel

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 5.10 LEVEL 2 DETERMINATION AND DISPOSITION – continued

The screenshot displays the 'Level 2 Determination and Disposition' form in the Unified Health Systems application. The form is titled 'Level 2 Determination and Disposition' and includes a note: 'Fields marked with an asterisk (\*) are required.' The form is divided into several sections:

- \*Determination:** A dropdown menu set to 'Eligible for Nursing Facility'.
- Disposition:** A section titled 'Nursing Facility Placement' containing:
  - \*Nursing Facility:** A dropdown menu set to 'A MERKLE C KNIPPRATH N H - 6000012'.
  - \*Nursing Facility Admission Date:** A date field with a calendar icon.
  - \*Is eligibility time limited?:** Radio buttons for 'Yes (up to 120 days)' and 'No (indefinite length of stay)'. 'No' is selected.
  - \*Select the special care needs of the consumer:** A list of checkboxes for various care needs, all of which are currently unchecked.
    - Aggression/Anger management
    - Community re-integration activities
    - Instrumental Activities of Daily Living training/reinforcement
    - Illness self management
    - Mental Health Rehabilitation activities
    - Professional Observation (MD/RN) for medication monitoring, adjustment and/or stabilization
    - Substance use/abuse management
    - Incentive program to improve participation in treatments
  - \*Does consumer have serious risk factors requiring a facility with special capabilities?:** Radio buttons for 'Yes' and 'No'. 'No' is selected.
  - If consumer has serious risk factors, please describe the needed capabilities:** A text area with a character count of '500 characters left'.
  - \*Was the consumer placed in a nursing facility prior to Screening?:** Radio buttons for 'Yes' and 'No'. 'No' is selected.
  - Post Placement Reason:** A dropdown menu.
  - Post Placement Reason Explanation:** A text area with a character count of '250 characters left'.

At the bottom right of the form, there are 'Save' and 'Cancel' buttons.

When the *Determination* has been selected that the consumer is “Eligible for Nursing Facility” the above page will be displayed. Fields marked with an asterisk (\*) are required fields. Select a *Nursing Facility* from the drop down list and enter all other required information.

Select **Save** to save the information or **Cancel** when information has been entered in error.

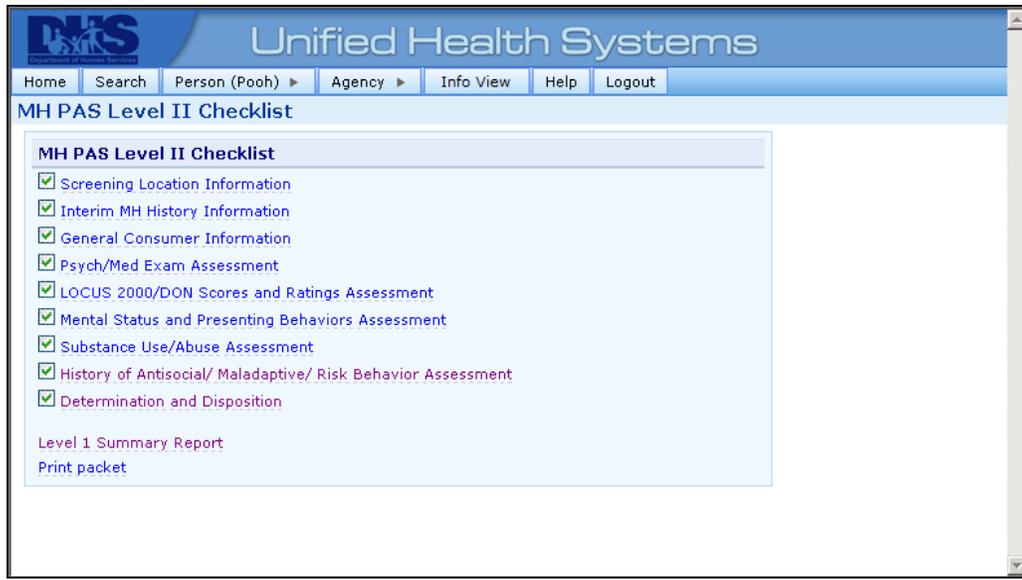
# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

The screenshot displays the 'MH PAS Level II Checklist' form within the Unified Health Systems web application. The interface includes a navigation bar with links for Home, Search, Person (Pooh), Agency, Info View, Help, and Logout. The form title is 'MH PAS Level II Checklist'. Below the title, there is a list of checklist items, each with a checked checkbox and a link to a specific form: Screening Location Information, Interim MH History Information, General Consumer Information, Psychiatric Medical Exam Assessment, LOCUS 2000/DON Scores and Ratings Assessment, Mental Status and Presenting Behaviors Assessment, Substance Use/Abuse Assessment, History of Antisocial/ Maladaptive/ Risk Behavior Assessment, and Determination and Disposition. Below the list, there are two additional links: Level 1 Summary Report and Level 1 Checklist Review. At the bottom of the form, there are two buttons: Save and Complete and Submit to Billing.

After all pertinent information has been entered for a MH PAS Level II place a (T) next to each level of information that was complete. Click on **Save** to save all Checklist fields. This will allow the *Level I Summary Report* and the *Level I Checklist Review* pages to be viewed.

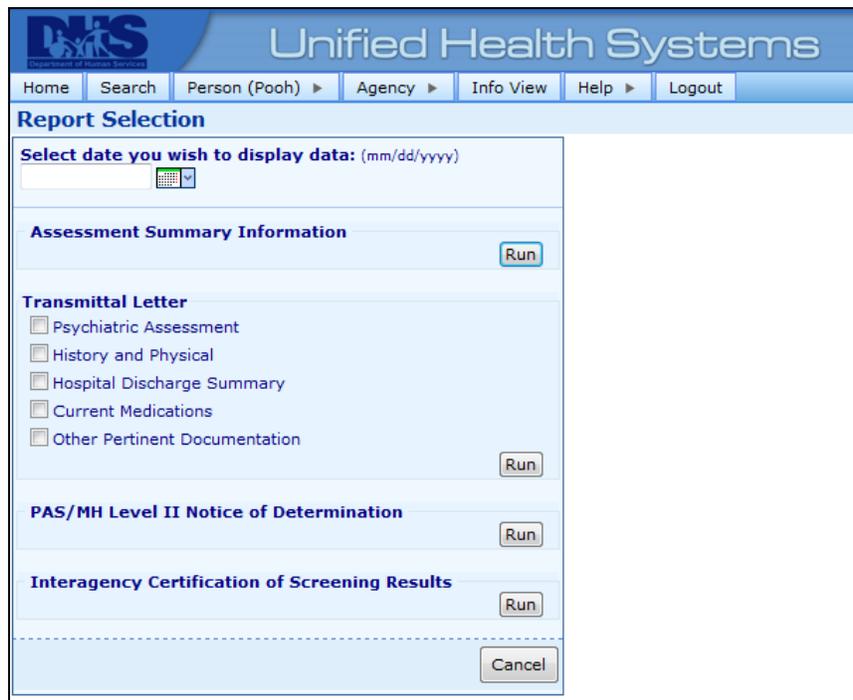
Click on **Complete and Submit to Billing** to submit the completed billing for processing or **Cancel** when information is not complete and will be returned to at a later time to complete.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL



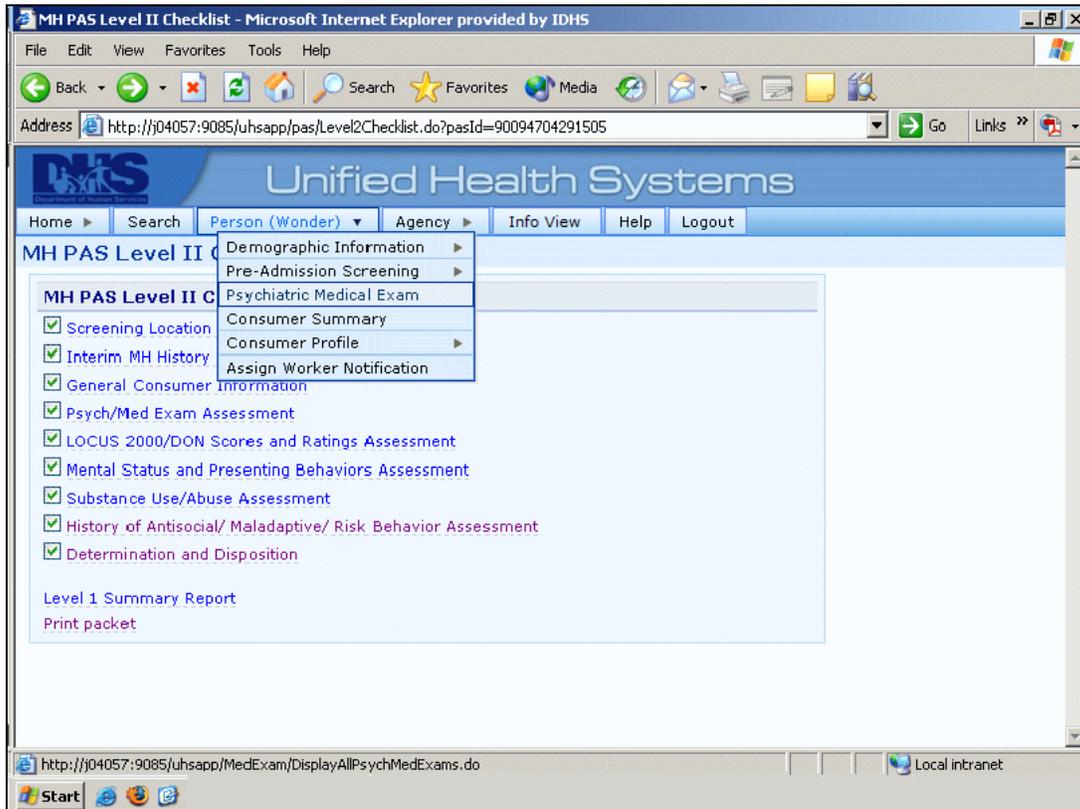
The **Report Selection** page is displayed after selecting *Print Packet* from the **MH PAS Level II Checklist** page when all items have been completed and submitted to billing.

Select the date for which you wish to display the data. Click on *Run* under the specific report requested. When the Transmittal Letter is to be ran, select the type of information indicating copies that will be attached to the letter. The reports may take a few seconds to be displayed on the screen and are created in PDF format. Once a report is displayed it can then be printed.



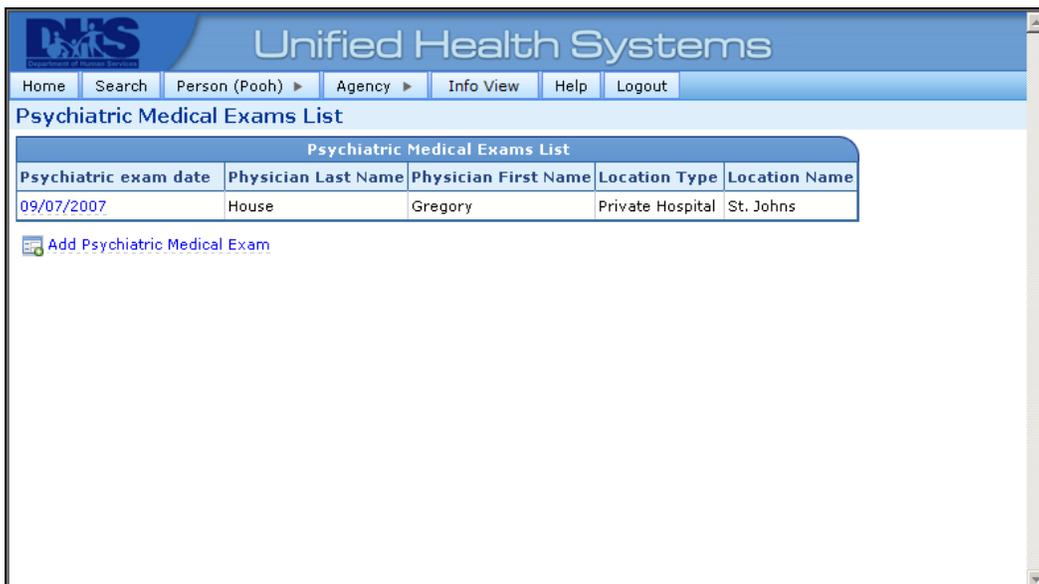
# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## SECTION 6 - PSYCHIATRIC MEDICAL EXAM



The **Psychiatric Medical Exam** page is displayed by selecting *Person* from the Menu Bar and selecting *Psychiatric Medical Exam* from the drop down list as shown above.

Click on **Add Psychiatric Medical Exam** as shown below to add a new exam or click on the *Psychiatric exam date* link to access a previous exam.



# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 6.1 PSYCHIATRIC MEDICAL EXAM – ADD

The screenshot shows a web application interface for adding a psychiatric medical exam. The page title is "Add Psychiatric Medical Exam". The form is organized into several sections:

- Physician Name:** Includes two required text input fields: "\*Physician Last Name:" and "\*Physician First Name:".
- Psychiatric Exam:** Includes a required dropdown menu for "\*Exam Type:" and a required date field for "\*Psychiatric Exam Date:" with a calendar icon.
- Location:** Includes a required dropdown menu for "\*Location Type:" and a required text input field for "\*Location Name:".
- Axis I (Primary):** A dropdown menu with the selected value "Agoraphobia Without History of Panic Disorder".
- Axis I (Secondary):** An empty dropdown menu.
- Axis II:** An empty dropdown menu.
- \*PAS Agency Purchased:** A required dropdown menu.

At the bottom right of the form, there are two buttons: "Save" and "Cancel".

The **Add Psychiatric Medical Exam** page will be displayed after *Add Psychiatric Medical Exam* was selected on the previous page. Fields marked with an asterisk (\*) are required fields.

Enter the appropriate information or select from the drop down lists and click on **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## SECTION 7 - NOTIFICATIONS FOR RESIDENT REVIEW

The screenshot displays the UHS Worker Home Page with the following sections:

**Unfinished Screenings**

Consumer Name	Referral Received Date	Screening Type
<a href="#">Hound, Mouse</a>		Resident Review
<a href="#">Jackson, Janet</a>	07/23/2007	MH PAS Level I
<a href="#">Jackson, Michael</a>	08/03/2007	MH PAS Level I
<a href="#">June, One</a>	09/07/2007	MH PAS Level I
<a href="#">Kirk, Ryan</a>		Resident Review
<a href="#">Leno, Jay</a>	08/02/2007	MH PAS Level I
<a href="#">Ludwig, Ryan</a>		Resident Review

**Screenings Ready for Billing Approval**

PAS Specialist Name	Completion Date	Screening Type
TestPAS, Uhs-Harold	09/10/2007	MH PAS Level II
TestPAS, Uhs-Harold	09/10/2007	Resident Review
TestPAS, Uhs-Harold	09/12/2007	MH PAS Level II
TestPAS, Uhs-Harold	09/13/2007	MH PAS Level I
TestPAS, Uhs-Harold	09/12/2007	Resident Review
TestPAS, Uhs-Harold	09/18/2007	MH PAS Level I
TestPAS, Uhs-Harold	09/12/2007	Resident Review

**Completed Screenings Within Last 60 Days**

Consumer Name	Date of Birth	RIN	Screening Type
<a href="#">Williams, Venus</a>	09/12/1971		MH PAS Level II
<a href="#">Watson, Tom</a>	08/09/1958		MH PAS Level II
<a href="#">Washington, George</a>	04/15/1942		MH PAS Level II
<a href="#">Uncle, Goerge</a>	08/10/1988		MH PAS Level I
<a href="#">Turner, Tina</a>	08/08/1955		MH PAS Level I
<a href="#">Thomason, Terri</a>	09/22/1976		MH PAS Level II
<a href="#">Superna, Doug</a>	09/06/1957		MH PAS Level I

**Notifications**

Consumer Name	Facility Name	Message Type	Days Remaining
<a href="#">Presley, Priscilla</a>	ADDOLORATA VILLA	Initial Resident Review	-20 (Over Due)
<a href="#">Obrian, Conan</a>	ALDEN LAKELAND	Targeted Review	12
<a href="#">November, One</a>	ADDOLORATA VILLA	Initial Resident Review	11
<a href="#">moose, mr</a>	ADDOLORATA VILLA	Initial Resident Review	11
<a href="#">Meintenance,</a>	ALDEN LAKELAND	Initial Resident Review	11

Resident Review *Notifications* are displayed at the bottom of the **UHS Worker Home Page**. The *Consumer Name* is a link that when clicked on will display the **Resident Review Information** page.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

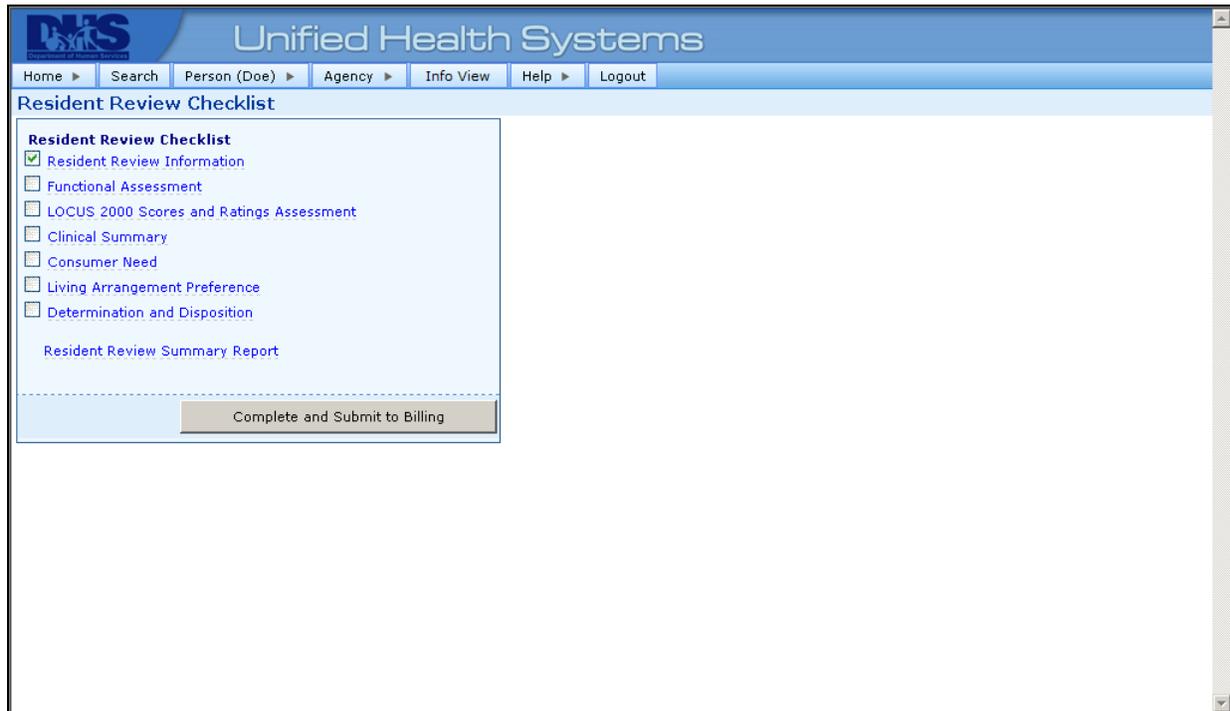
## 7.1 RESIDENT REVIEW INFORMATION

The screenshot shows a web application interface for 'Unified Health Systems'. At the top, there is a navigation bar with links: Home, Search, Person (Pooh), Agency, Info View, Help, and Logout. Below this is a header for 'Resident Review Information'. A note states: 'Fields marked with an asterisk (\*) are required.' The form contains several sections: 'Reason for Resident Review:' with a dropdown menu set to 'Initial Admission'; '\* Consumer Status:' with a dropdown menu; '\* PAS Specialist:' with a dropdown menu; '\* Current Nursing Facility:' with a dropdown menu; '\* Nursing Facility Admission Date:' with a date input field and a calendar icon; and 'Psychiatrist/Physician' with 'Last Name:' and 'First Name:' input fields. At the bottom of the form are 'Save' and 'Cancel' buttons.

The **Resident Review Information** page will be displayed when a *Consumer Name* is selected under the *Notifications* on the **UHS Worker Home Page**. Fields marked with an asterisk (\*) are required fields. Select the *Consumer Status*, *Nursing Facility*, *PAS Specialist* and *Reason for Resident Review* from the drop down lists. Enter other pertinent information.

Select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL



The **Resident Review Checklist** page is displayed after a *Consumer Name* is selected under the *Notifications* section on the **UHS Worker Home Page** and the **Resident Review Information** page has been entered and saved. A (T) next to *Resident Review Information* indicates the information is complete and passed validation; no further information to be entered. Worker can save partial information (to be completed at a later date) without completing all checklist items. All fields are hyper links and can be clicked on to access the information on the following pages.

When all information has been entered, select **Complete and Submit to Billing** to save and submit the information.

The *Resident Review Summary Report* may be ran at any time. It contains a summary of any of the Resident Review information that has been entered.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 7.2 RESIDENT REVIEW FUNCTIONAL ASSESSMENT

The screenshot shows a web application interface for 'Unified Health Systems'. At the top, there is a navigation bar with the following items: Home, Search, Person (Doe), Agency, Info View, Help, and Logout. Below the navigation bar, the main heading is 'Resident Review Functional Assessment'. The form contains three sections, each marked with an asterisk to indicate it is a required field:

- \*Overall Rating of Independent Living:** A dropdown menu.
- \*Overall Rating of Independent Living:** A label with a red asterisk icon.
- \*Familial/Social Supports:** A question: 'Are there any family members or other significant others who are available, willing, and capable of providing substantial support to the consumer upon discharge?' with radio buttons for 'Yes' and 'No'.
- \*Housing Instability:** A question: 'Rate circumstances prior to admission if consumer is already in a residential/institutional care:' followed by a dropdown menu.
- Housing Instability:** A label with a red asterisk icon.

At the bottom right of the form, there are two buttons: 'Save' and 'Cancel'.

The **Resident Review Functional Assessment** page is displayed after selecting *Functional Assessment* from the **Resident Review Checklist** page. Fields marked with an asterisk (\*) are required fields.

Select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 7.3 LOCUS 2000 SCORES AND RATINGS ASSESSMENT

The screenshot displays the 'LOCUS 2000/DON Assessment' form within the Unified Health Systems interface. The form is organized into several sections, each with a score dropdown and a comment text area (250 characters left). The sections are: Risk Of Harm (Score: 2), Functional Status (Score: 5), Co-Morbidity (Score: 3), Recovery Environment(Stress) (Score: 3), Recovery Environment(Support) (Score: 1), and Treatment Recovery History (Score: 3). Below these is an Engagement section (Score: 1). At the bottom, there are two dropdown menus for 'Composite Rating': 'LOCUS Determination Grid Rating' and 'PAS Specialist Recommendation Rating', both currently set to 'High Intensity Community Based Services'. A 'Determination of Need Score' field is present but empty. A note at the bottom states: '\*Required to complete the Level II Screening' and '\*Automatically calculated if all scores are entered'. 'Save' and 'Cancel' buttons are located at the bottom right of the form.

The **LOCUS 2000/DON Assessment** page is displayed after selecting *LOCUS 2000 Scores and Ratings Assessment* from the **Resident Review Checklist** page. Fields marked with an asterisk (\*) are required fields.

Enter all pertinent information and select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 7.4 CLINICAL SUMMARY

The screenshot shows the 'Resident Review Clinical Summary' form within the Unified Health Systems interface. The form is divided into several sections for data entry:

- Previous Diagnoses:**
  - Axis I (Primary):** Text input field containing 'Agoraphobia Without History of Panic Disorder'.
  - Axis I (Secondary):** Text input field containing 'Alcohol Withdrawal'.
  - Axis II:** Empty text input field.
- Current Diagnoses:**
  - Axis I (Primary):** Dropdown menu.
  - Axis I (Secondary):** Dropdown menu.
  - Axis II:** Dropdown menu.
- \*Current Medications:** Text input field with a character count of '500 characters left'.
- \*Describe changes in medications, responses and/or side effects to medications:** Text input field with a character count of '500 characters left'.
- \*Indicate change in psychiatric symptoms in the past three months:** Dropdown menu.
- \*Explain change in psychiatric symptoms:** Text input field with a character count of '500 characters left'.
- \*Indicate change in role functioning impairments in the past three months:** Dropdown menu.
- \*Explain change in role functioning impairments:** Text input field with a character count of '500 characters left'.
- \*Is the individual currently receiving services from DHS/DMH funded community mental health provider?** Radio button options for 'Yes' and 'No'.

At the bottom right of the form, there are 'Save' and 'Cancel' buttons.

The **Resident Review Clinical Summary** page is displayed after selecting *Clinical Summary* from the **Resident Review Checklist** page. Fields marked with an asterisk (\*) are required fields.

Enter all pertinent information and select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 7.5 CONSUMER NEED

The screenshot shows the 'Resident Review Consumer Need' form within the Unified Health Systems interface. The form includes a navigation bar with 'Home', 'Search', 'Person (Pooh)', 'Agency', 'Info View', 'Help', and 'Logout'. The main content area is titled 'Resident Review Consumer Need' and contains the following sections:

- A note: 'Fields marked with an asterisk (\*) are required.'
- A section titled '\*Select the special care needs of the consumer' with a list of checkboxes:
  - Aggression/Anger management
  - Community re-integration activities
  - Instrumental Activities of Daily Living training/reinforcement
  - Illness self management
  - Mental Health Rehabilitation activities
  - Professional Observation (MD/RN) for medication monitoring, adjustment and/or stabilization
  - Substance use/abuse management
  - Incentive program to improve participation in treatments
- A section titled '\*Service Strategies' with a text area for commenting on existing services and recommendations. Below the text area is a '500 characters left' indicator.
- A section titled '\*Discharge Potential' with a text area for describing discharge potential and referral recommendations. Below the text area is a '500 characters left' indicator.
- At the bottom right, there are 'Save' and 'Cancel' buttons.

The **Resident Review Consumer Need** page is displayed after selecting *Consumer Need* from the **Resident Review Checklist** page. Fields marked with an asterisk (\*) are required fields.

Enter all pertinent information and select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 7.6 LIVING ARRANGEMENT PREFERENCE

The screenshot shows the 'Living Arrangement Preference' form within the Unified Health Systems interface. The form is titled 'Living Arrangement Preference' and includes the following fields and controls:

- \*Living Arrangement Length:** A dropdown menu.
- \*Consumer Choice:** A dropdown menu.
- Consumer Living Arrangement Preference:** A large text area with a character count of '500 characters left'.
- Guardian Name:** Displayed as 'Doe, John'.
- \*Date of Last Contact with the Guardian:** A date picker field.
- \*Does the Guardian Agree with the individual's Choice of Living Arrangement?:** Radio buttons for 'Yes' and 'No'.
- Summary of Guardian's Remarks:** A large text area with a character count of '500 characters left'.

At the bottom of the form, there are 'Save' and 'Cancel' buttons.

The **Living Arrangement Preference** page is displayed after selecting *Living Arrangement Preference* from the **Resident Review Checklist** page. If Guardian information was not entered previously only the *Living Arrangement Length*, *Consumer Choice* and *Consumer Living Arrangement Preference* fields will be displayed. Fields marked with an asterisk (\*) are required fields.

Enter all pertinent information and select **Save** to save the information or **Cancel** when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 7.7 DETERMINATION AND DISPOSITION

The screenshot shows a web browser window titled "Resident Review Determination and Disposition - Microsoft Internet Explorer provided by IDHS". The address bar shows the URL: <http://j04057:9085/uhsapp/pas/residentReview/Determination.do?pasId=46008524291508>. The page header includes the "Unified Health Systems" logo and navigation tabs: Home, Search, Person (Test), Agency, Info View, Help, and Logout. The main content area is titled "Resident Review Determination and Disposition" and includes a note: "Fields marked with an asterisk (\*) are required." Below this, there is a dropdown menu labeled "\* Determination:" with a list of options: "Eligible Specialized Services", "Eligible for Nursing Facility; high potential discharge within 6 months", "Eligible for Nursing Facility; indefinite period of time", "Not Eligible for Nursing Facility", "Withdrawn", and "Entered in error". To the right of the dropdown, the text "diagnosis of dementia or a" is partially visible. Below the dropdown is a text input field with a "500 characters left" indicator. At the bottom right of the form are "Save" and "Cancel" buttons. The browser's status bar at the bottom shows "Done" and "Local intranet".

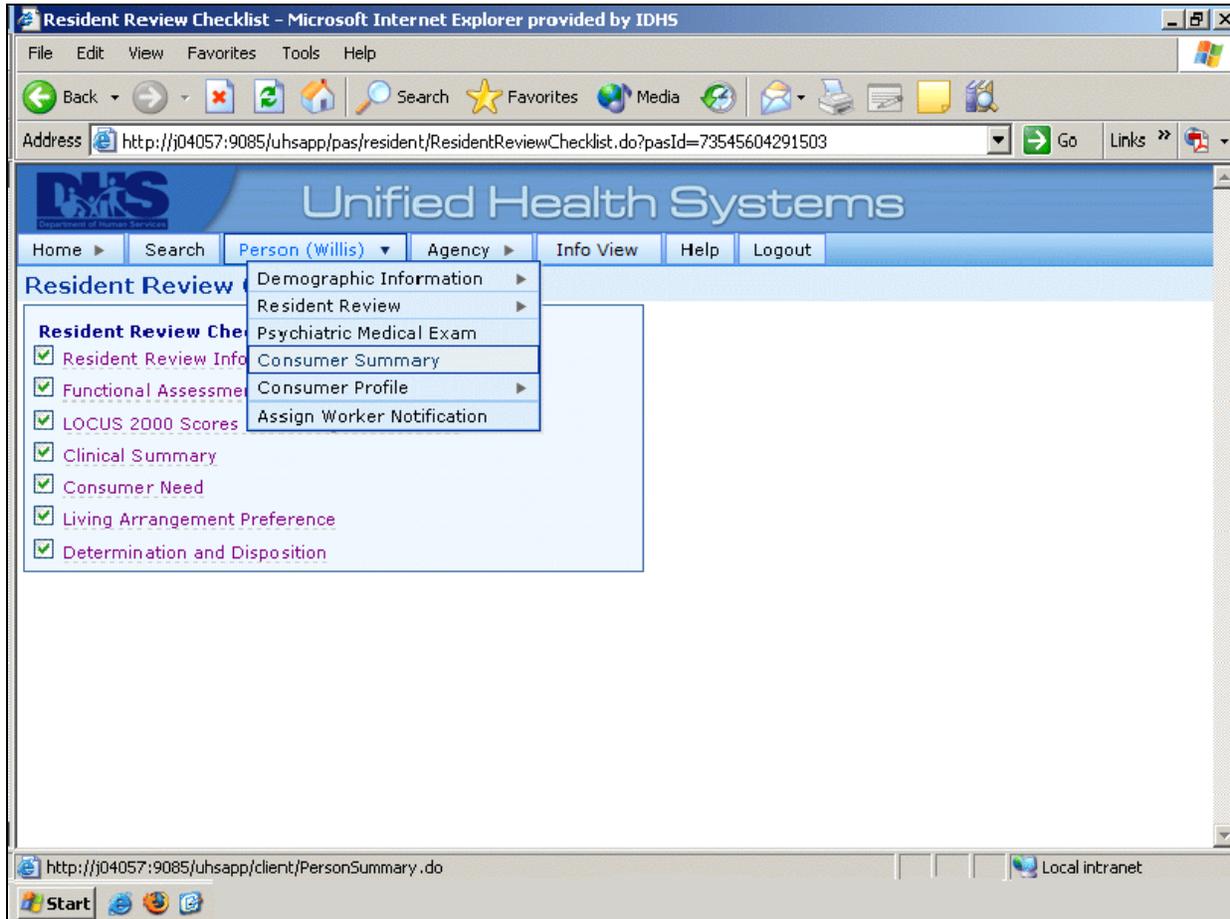
The **Resident Review Determination and Disposition** page is displayed after selection *Determination and Disposition* from the **Resident Review Checklist** page. This page will change depending on the selection for *Determination* from the drop down list as shown above. Fields marked with an asterisk (\*) are required fields.

Enter all pertinent information and select *Save* to save the information or *Cancel* when information has been entered in error.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## SECTION 8 - CONSUMER SUMMARY/CONSUMER PROFILE

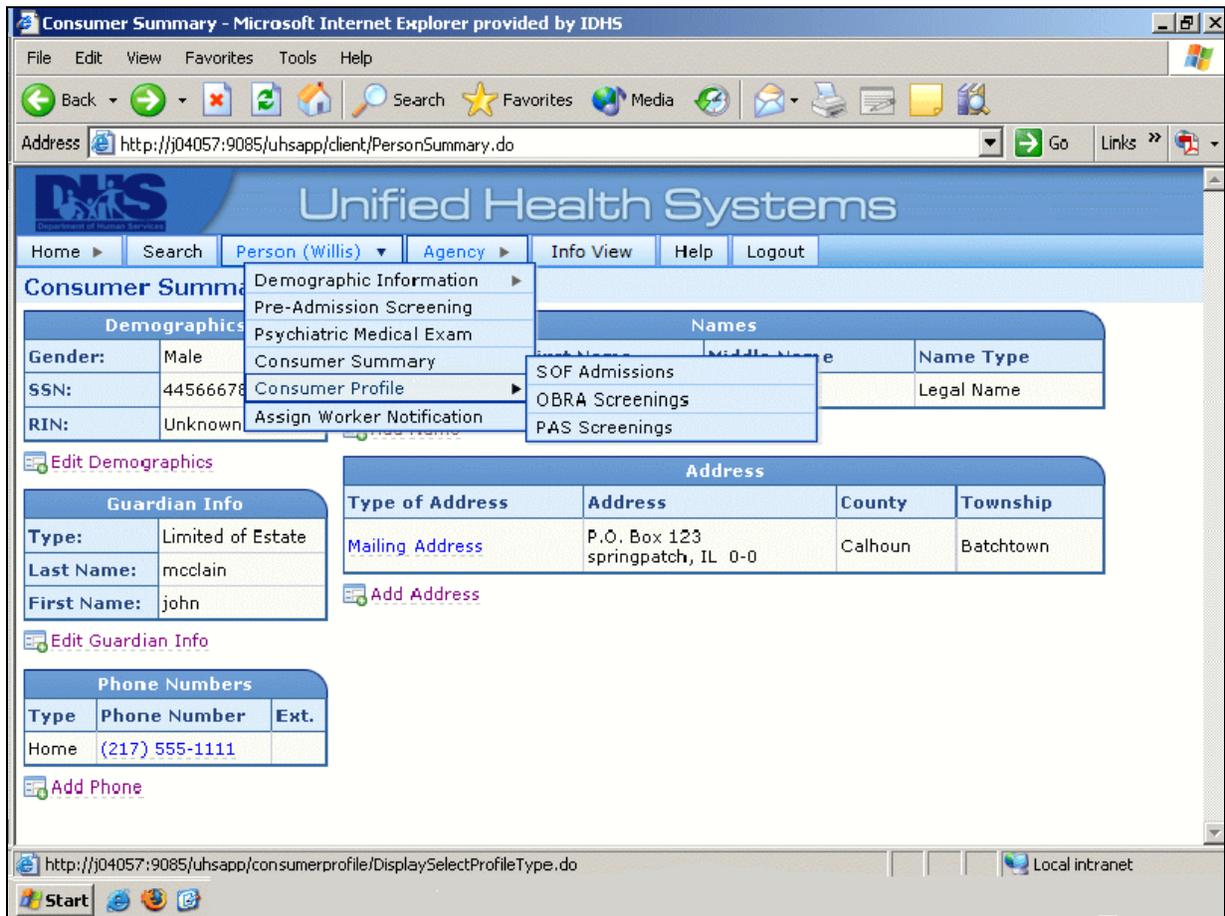
### 8.1 CONSUMER SUMMARY



The **Consumer Summary** page is displayed by selecting *Person* from the Menu Bar and selecting *Consumer Summary* from the drop down list as shown above. Consumer Summary information may be added or edited.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 8.2 CONSUMER PROFILE



The **Consumer Profile** page is displayed by selecting *Person* from the Menu Bar and selecting *Consumer Profile* from the drop down list as shown above.

The **Consumer Profile** page will allow access for viewing of *SOF (State Operated Facility) Admissions*, *OBRA (Omnibus Reconciliation Act) Screenings* or *PAS (Pre-Admission Screening information) Screenings* by clicking on the appropriate link. When no information exists for a consumer, a message will be displayed to indicate this.

*SOF Admissions* will display detailed information about a consumer who has resided at a state operated facility such as the start end stop dates, type of service and location of service.

*OBRA Screenings* will display information about a consumer extracted from the OBRA system such as date screened, disposition type, determination code and agency name.

*PAS Screenings* will display information about a consumer extracted from the Pre-Admission Screening system such as the completion date, screening type, agency name and PAS specialist name.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 8.2.1 PAS SCREENINGS

The screenshot shows the 'PAS Screenings' page in the Unified Health Systems application. The breadcrumb trail is: Home > Search > Person (Pooh) > Agency > Info View > Help > Logout. The page title is 'PAS Screenings'. Below the title is a pagination control showing 'Page 1 of 1 | 1'. The main content is a table with the following data:

Completion Date	Screening Type	Agency Name	PAS Agent
<a href="#">09/19/2007</a>	MH PAS Level II	agency 1	TestPAS, Uhs-Harold
<a href="#">09/19/2007</a>	Resident Review	agency 1	TestPAS, Uhs-Harold

Below the table is another pagination control showing 'Page 1 of 1 | 1' and a 'Back' link.

The above page is an example of what is displayed when *PAS Screenings* are selected on the **Consumer Profile** page. The *Completion Date* is a link that will direct the User to the **Level II Checklist** page.

Below is an example of what is displayed when *OBRA Screenings* are selected on the **Consumer Profile** page.

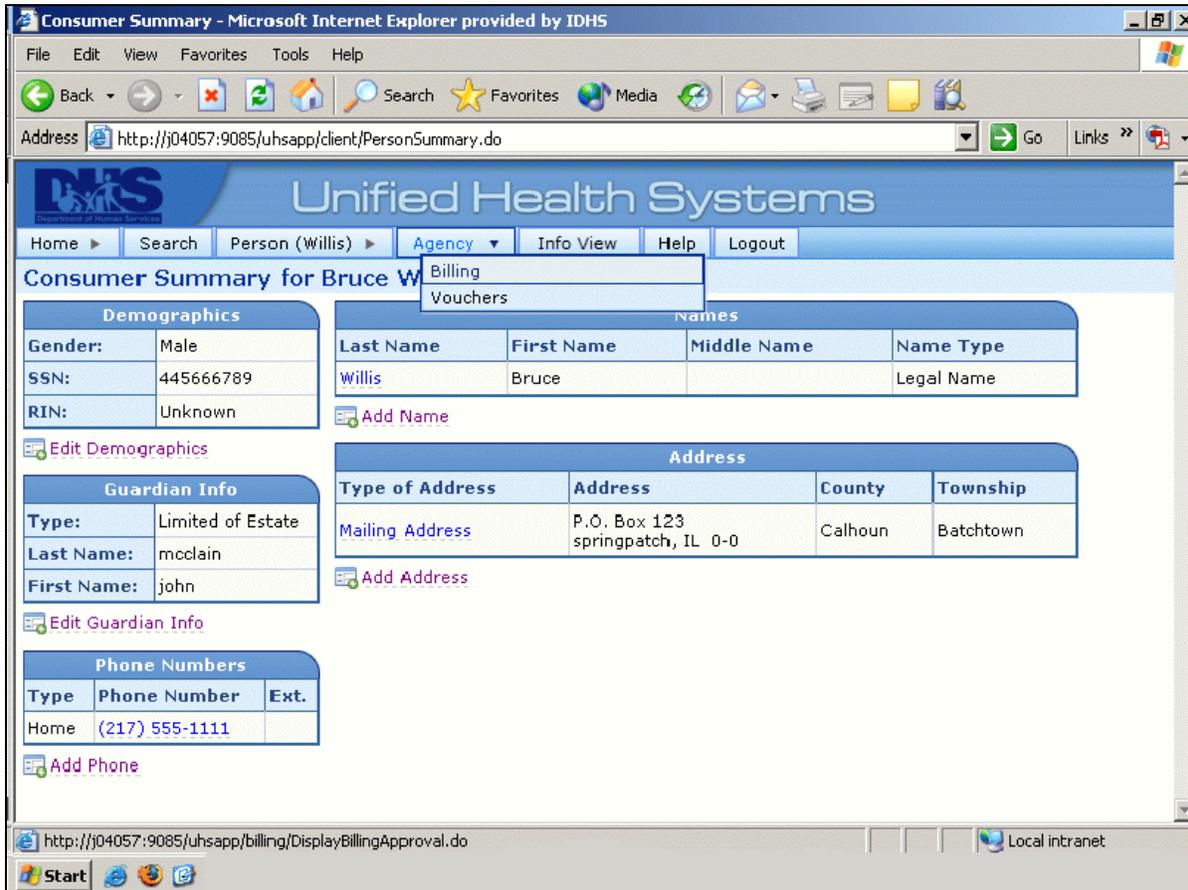
The screenshot shows the 'OBRA Screenings' page in the Unified Health Systems application. The breadcrumb trail is: Home > Search > Person (Espinoza) > Agency > Info View > Help > Logout. The page title is 'OBRA Screenings'. Below the title is a pagination control showing 'Page 1 of 1 | 1'. The main content is a table with the following data:

Date Screened	Disposition	Determination	Agency Name
04/11/2006			DUPAGE CNTY HEALTH DEPT
04/11/2006			DUPAGE CNTY HEALTH DEPT
04/11/2006			DUPAGE CNTY HEALTH DEPT
04/11/2006			DUPAGE CNTY HEALTH DEPT
04/11/2006			HEALTH AND ED CTR OF WEST CHICAGO

Below the table is another pagination control showing 'Page 1 of 1 | 1' and a 'Back' link.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## SECTION 9 - AGENCY/BILLING/VOUCHERS



The Agency **Billing** and **Voucher** pages are displayed by selecting *Agency* from the Menu Bar and selecting either *Billing* or *Vouchers* from the drop down list as shown above.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 9.1 PAS BILLING APPROVAL

The **PAS Billing Approval** page displays the PAS Billings approved with the Voucher amounts and the completion date.

"*Show details*" is a link which can be clicked on to display the breakdown of billing information as shown below.

Assessment Classification	Assessment Amount
MH PAS Level I	\$80.00
MH PAS Level II - Full	\$240.00
Determination	\$80.00

**Unified Health Systems**

Home Search Agency Info View Help Logout

**PAS Billing Approval**

**Voucher Total: \$5,440.00**

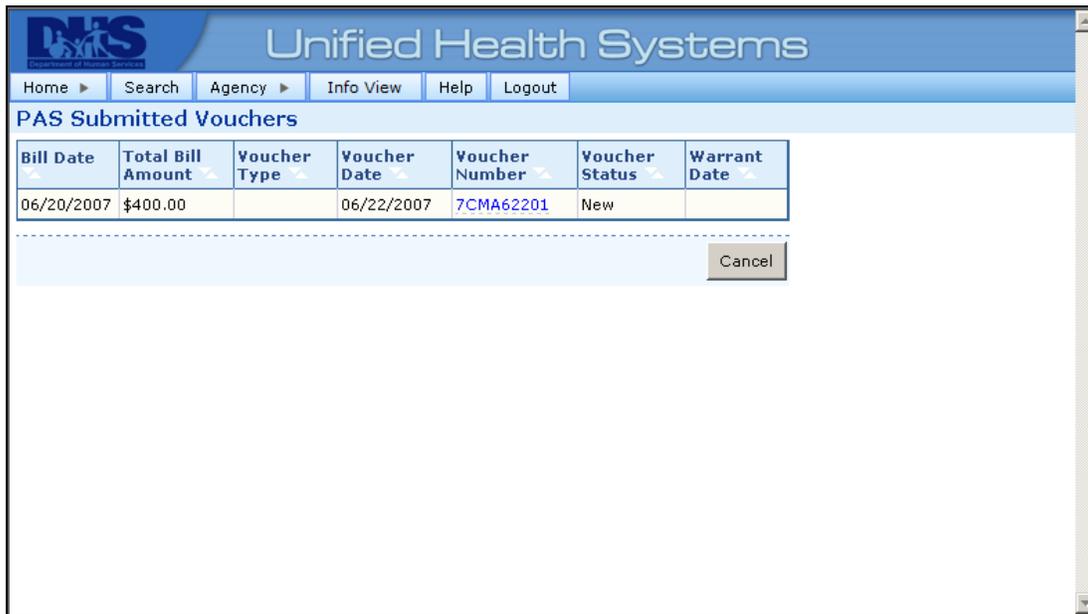
⚠ Indicates a RIN number has been requested. Until the system assigns a RIN, the bill will be held from payment processing. When held for more than 4 days, you may call eRIN support @ 1-800-385-0872 to assist in consumer identification.

Check/Uncheck all for approval. All billing details: [Show](#) / [Hide](#)

PAS Billing Approval				
Approved	Specialist Name	Consumer Name	Completion Date	Assessed Amount
⚠ <input type="checkbox"/>	UhsRosePas, Cindy	Simpson, Jessica	09/14/2007	\$400.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRosePas, Cindy	Earnhart, Dale Jr	09/14/2007	\$80.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRoseAll, Adam	Pooh, Winnie	09/18/2007	\$400.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRoseAll, Adam	Baker, Dusty	09/12/2007	\$400.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRosePas, Cindy	Wallace, Rusty	09/14/2007	\$320.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRoseAll, Adam	Denver, John	09/19/2007	\$400.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRoseAll, Adam	Scenario, Three	09/14/2007	\$400.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRosePas, Cindy	Siefert, Keith	09/14/2007	\$400.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRoseAll, Adam	Scenario, Five	09/14/2007	\$80.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRoseAll, Adam	Scenario, Last	09/14/2007	\$400.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRoseAll, Adam	Scenario, Three	09/14/2007	\$80.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRoseAll, Adam	Scenario, Six	09/14/2007	\$80.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRosePas, Cindy	Frey, Glenn	09/13/2007	\$400.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRosePas, Cindy	King, Kevin	09/14/2007	\$320.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRosePas, Cindy	Siefert, Keith	09/14/2007	\$80.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRoseAll, Adam	Scenario, Nine	09/14/2007	\$320.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRoseAll, Adam	Rr, One	09/14/2007	\$400.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRosePas, Cindy	Gordan, Jeff	09/14/2007	\$80.00 <a href="#">Show details</a>
⚠ <input type="checkbox"/>	UhsRoseAll, Adam	Smith, Veronica	09/13/2007	\$400.00 <a href="#">Show details</a>

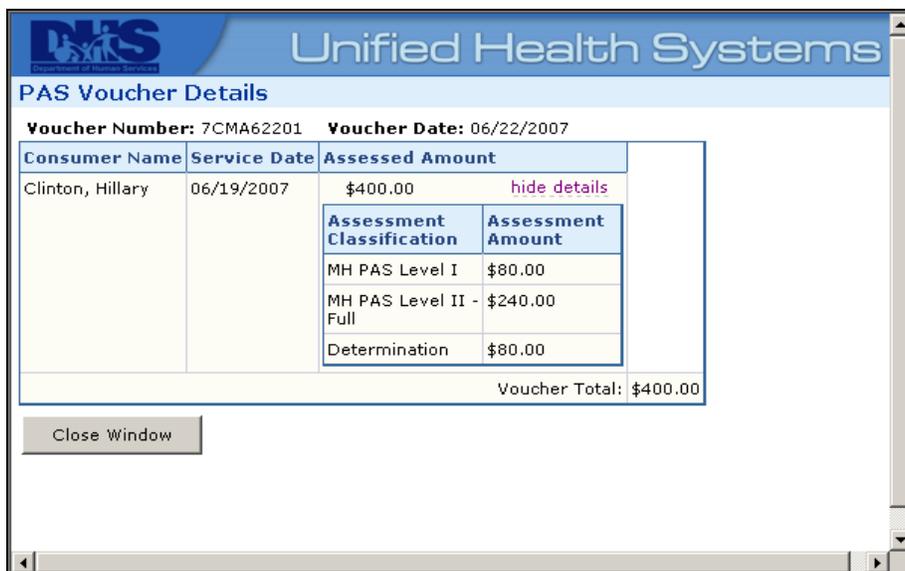
# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## 9.2 PAS SUBMITTED VOUCHERS



The **PAS Submitted Vouchers** page displays the submitted vouchers with the Total Bill Amount, Voucher Date, Voucher Number, Voucher Status and Warrant Date. The *Voucher Number* is a link that when clicked on will display the **PAS Voucher Details** page. The values for Voucher Status are; New - no voucher has been issued, DHS - is in processing at DHS, not sent to Comptrollers, Comptroller - has been sent to Comptrollers office, no waiver as yet, Paid - Comptroller has issued a warrant, and Voucher Missing - voucher is missing from DHS and Comptrollers office.

From the **PAS Voucher Details** page the link *show details* will display information on the particular voucher (see below).



# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## SECTION 10 – INFOVIEW REPORTS



The screenshot shows the top navigation bar of the Unified Health Systems application. The logo for the Department of Healthcare Services is on the left. The main title "Unified Health Systems" is centered. Below the title is a navigation menu with the following items: Home, Search, Agency, Info View, Help, and Logout. The "Info View" item is highlighted. Below the navigation bar, the page content includes a link to "Enterprise Reporting Development Environment". A prominent note states: "Note: This feature requires additional authorization." The note explains that users need to register for a free State of Illinois email address to access InfoView reports. It provides a link to "Create Illinois.gov ID" and instructions on how to contact the MIS Unified Health System's Help Desk for assistance.

To access the InfoView reporting system, click *InfoView* from the Menu Bar and then click *Enterprise Reporting Development Environment*. If you do not have required authorization to access InfoView reporting system, follow the steps to request necessary authorization. For more information on how to use InfoView reporting system, refer to the Help section after login.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## APPENDIX A - "HOW TO"

### ADD A NEW CONSUMER

The screenshot displays the 'UHS Worker Home Page' with a navigation bar (Home, Search, Agency, Info View, Help, Logout) and a logo for Unified Health Systems. The page is divided into four main sections, each with a table of data:

Unfinished Screenings		
Consumer Name	Referral Received Date	Screening Type
Benny, Jack	09/07/2007	MH PAS Level II
Benny, Jack	09/13/2007	MH PAS Level II
Fender, Freddie	09/07/2007	MH PAS Level II
Scenario, Five	09/13/2007	MH PAS Level I
Scenario, Four	09/13/2007	MH PAS Level I
Scenario, Nine	09/13/2007	MH PAS Level I
Scenario, Seven	09/13/2007	MH PAS Level I

Screenings Ready for Billing Approval		
PAS Specialist Name	Completion Date	Screening Type
UhsRoseAll, Adam	09/19/2007	MH PAS Level II
UhsRoseAll, Adam	09/12/2007	MH PAS Level II
UhsRosePas, Cindy	09/13/2007	MH PAS Level II
UhsRoseAll, Adam	09/13/2007	MH PAS Level II
UhsRoseAll, Adam	09/13/2007	MH PAS Level II
UhsRosePas, Cindy	09/27/2007	MH PAS Level I
UhsRosePas, Cindy	09/14/2007	MH PAS Level II

Completed Screenings Within Last 60 Days			
Consumer Name	Date of Birth	RIN	Screening Type
Denver, John	04/12/1947		MH PAS Level II
Baker, Dusty	09/12/1948		MH PAS Level II
Smith, Veronica	06/25/1962		MH PAS Level II
Scenario, Three	04/12/1978		MH PAS Level II
Scenario, Three	04/12/1978		MH PAS Level I
Scenario, Five	07/15/1955		MH PAS Level I
Scenario, Six	08/25/1942		MH PAS Level I

Notifications			
Consumer Name	Facility Name	Message Type	Days Remaining
No notification.			

A new Consumer may be added by selecting *Search* from the **UHS Worker Home Page**. Enter the consumers *Last Name* and *First Name* and click on **Search**.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## ADD A NEW CONSUMER - continued

**UHS Consumer Search Results** Page 1 of 1

Basic Search Criteria		Search Results				
<b>Name</b> Last Name: <input type="text" value="Rabbit"/> First Name: <input type="text" value="Roger"/> Name Search Type: <input type="text" value="Exact Match"/>		<b>Name(s)</b>	<b>Date of Birth</b>	<b>Gender</b>	<b>RIN</b>	<b>Details</b>
SSN: <input type="text"/> RIN: <input type="text"/> <b>Search Scope:</b> <input checked="" type="radio"/> Unified Health Systems <input type="radio"/> Statewide		RABBIT, ROGER (Legal Name)	01/29/1968	Male		<a href="#">Details</a>
<b>Additional Search Criteria</b> <b>Gender:</b> <input type="text"/> <b>Date of Birth</b> Match Birth Date By: <input type="text" value="Exact Match"/> Date of Birth: <input type="text"/> <small>mm/dd/yyyy</small> <b>State:</b> <input type="text"/> <b>Zip:</b> <input type="text"/> - <input type="text"/> <b>County:</b> <input type="text"/>						

When search criteria is entered and a match found the above page will be displayed with a list of the *Name(s)* found for the match. *Name(s)* is a hyperlink which can be clicked on to add/edit Consumer Summary information. *Details* is also a hyperlink that will allow viewing only of details on the consumer.

When a match was not found using the Unified Health Systems data, conduct the search again using the Statewide search. It is important that the information be located if consumer is in either system. If a match is still not found, click on **Add** to add the new consumer information.

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## ADD A NEW CONSUMER – continued

**Unified Health Systems**

Home Search Agency Info View Help Logout

**Preparing Consumer for Intake**

**Consumer Intake**

Fields marked with an asterisk (\*) are required.

\*Last Name: Pooh    \*First Name: Winnie    Middle Name:

\*Gender:    \*Date of Birth:

RIN:    SSN: (123-45-6789 or 123456789)

**Address**

\*Address Type:

Street Address1:

Street Address2:

City:    \*State:

Zip code: -

\*County:    \*Township:

Save Cancel

Fields marked with an asterisk (\*) are required fields. All other information should be entered if possible. When **Save** is selected the **Consumer Summary** page will be displayed. **All** other information such as guardian info, phone numbers, etc. should be entered if possible. Click on the appropriate links (*Edit Demographics, Edit Guardian Info, Add Phone, Add Name* or *Add Address*) on the **Consumer Summary** page to add this information.

**Unified Health Systems**

Home Search Person (Pooh) Agency Info View Help Logout

**Consumer Summary for Winnie Pooh**

**Demographics**

Gender:	Male
SSN:	Unknown
RIN:	Unknown

[Edit Demographics](#)

**Names**

Last Name	First Name	Middle Name	Name Type
Pooh	Winnie		Legal Name
Pooh	Little	Bear	Alias

[Add Name](#)

**Guardian Info**

Type:	Limited of Person
Last Name:	Doe
First Name:	John

[Edit Guardian Info](#)

**Address**

Type of Address	Address	County	Township
Residential Address	1 Hollow Tree Lane Springfield, IL 62526	Sangamon	Clear Lake
Mailing Address	P.O. Box 101 Springfield, IL 62526	Sangamon	Clear Lake

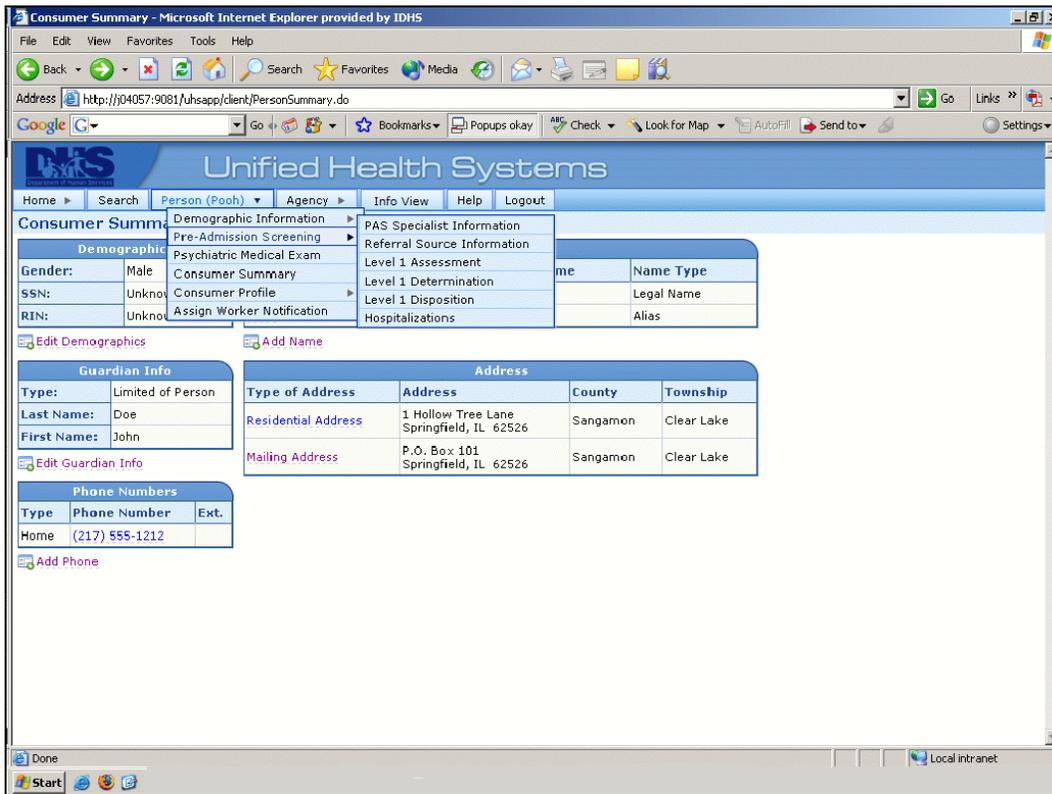
**Phone Numbers**

Type	Phone Number	Ext.
Home	(217) 555-1212	

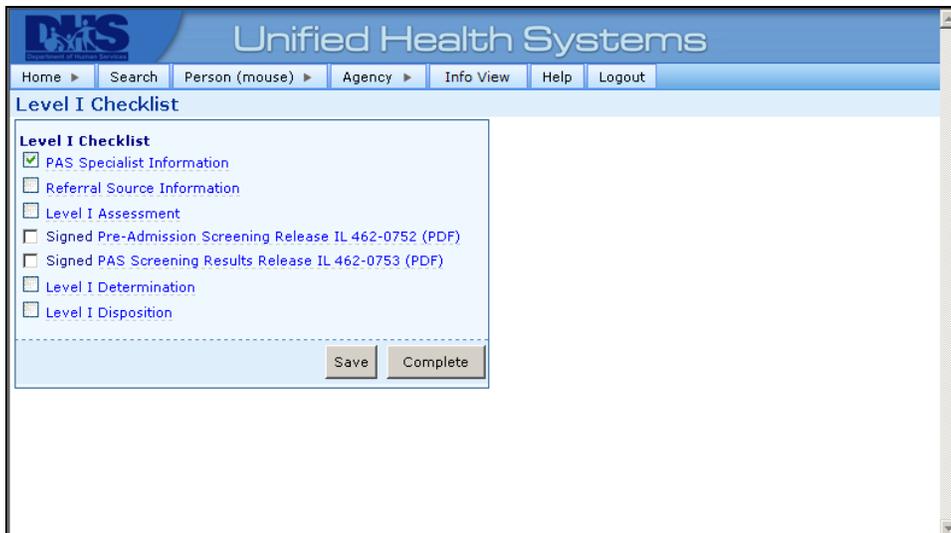
[Add Phone](#)

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## ENTERING PRE-ADMISSION SCREENING (Level I)



Select *Person* from the Menu Bar and *Pre-Admission Screening* from the drop down list. This will display the **PAS Specialist Information** page. If a screening is already in progress select *Pre-Admission Screening* and the appropriate level to access the screening in progress. If a new screening is being entered the system will display the **PAS Specialist Information** page for entry. When the specialist information has been entered and saved the system will return to the **Level I Checklist** page where other Level I screening information is to be accessed and entered. After all Level I information has been saved, click on **Complete** on the **Level I Checklist** page to submit the Level I information for billing or if it has been determined that a Level II Screening is required the system will then go to the **Level II Checklist** page. (More detailed information on the Level I screening pages are given in Section 4.)



# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

## ENTERING PRE-ADMISSION SCREENING (Level II)

The screenshot displays the Unified Health Systems web application interface. At the top, there is a navigation bar with the following menu items: Home, Search, Person (Pooh), Agency, Info View, Help, and Logout. Below the navigation bar, the page title is "MH PAS Level II Checklist". The main content area contains a list of checklist items, each with an unchecked checkbox:

- Screening Location Information
- Interim MH History Information
- General Consumer Information
- Psychiatric Medical Exam Assessment
- LOCUS 2000/DON Scores and Ratings Assessment
- Mental Status and Presenting Behaviors Assessment
- Substance Use/Abuse Assessment
- History of Antisocial/ Maladaptive/ Risk Behavior Assessment
- Determination and Disposition

Below the checklist items, there are two links: "Level 1 Summary Report" and "Level 1 Checklist Review". At the bottom of the form, there are two buttons: "Save" and "Complete and Submit to Billing".

If the Level I screening has been completed and a determination has been made that a Level II screening is necessary the system will display the **Level II Checklist** page where Level II screening information is to be accessed and entered. (More detailed information on the Level II screening pages are given in Section 5.)

# UNIFIED HEALTH SYSTEMS USER REFERENCE MANUAL

The screenshot shows a web application interface for Unified Health Systems. At the top, there is a navigation bar with the following items: Home, Search, Person (Pooh) with a dropdown arrow, Agency with a dropdown arrow, Info View, Help, and Logout. Below the navigation bar, the main heading is "MH PAS Level II Checklist". Underneath this heading, there is a list of checklist items, each with a checked checkbox and a link: 

- [Screening Location Information](#)
- [Interim MH History Information](#)
- [General Consumer Information](#)
- [Psychiatric Medical Exam Assessment](#)
- [LOCUS 2000/DON Scores and Ratings Assessment](#)
- [Mental Status and Presenting Behaviors Assessment](#)
- [Substance Use/Abuse Assessment](#)
- [History of Antisocial/ Maladaptive/ Risk Behavior Assessment](#)
- [Determination and Disposition](#)

Below the list, there are two links: [Level 1 Summary Report](#) and [Level 1 Checklist Review](#). At the bottom of the checklist area, there are two buttons: "Save" and "Complete and Submit to Billing".

After all pertinent information has been entered for a MH PAS Level II, place a (T) next to each level of information that was complete. Click on **Save** to save all Checklist fields. Click on **Complete and Submit to Billing** to submit the completed billing for processing or **Cancel** when information is not complete and will be returned to at a later time to complete.