

FORWARDHEALTH PRENATAL CARE COORDINATION REFERRAL INSTRUCTIONS

INSTRUCTIONS

Prenatal care coordination (PNCC) providers use referrals to give members current information about available providers, community resources, and programs to help connect the member to services they need that were identified in the member's care plan.

PNCC providers can use this form for record-keeping and sharing information about the referred provider with the member. This form can be used:

- To list the services the member is being referred for or the organization the member is being referred to.
- By the referring provider to document referral activities and any needed follow-ups.

Referring providers are typically care coordinators and qualified professionals. Providers are required to follow up on all referrals within two weeks (unless otherwise stated) to confirm that the member received the service, that the service meets the member's needs, and that the service meets the goals and objectives of the care plan. In addition, providers are required to conclude all follow up before the covered postpartum period ends.

Note: This authorization does not replace the need for a consent document to release member information. For more information about consent and care coordination requirements, refer to the Key Prenatal Care Coordination Requirements section of the Prenatal Care Coordination service area (<https://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Display.aspx?ia=1&p=1&sa=54>) of the ForwardHealth Online Handbook.

SECTION I – MEMBER INFORMATION

The Date of Referral field should show the date the PNCC provider made the referral recommendation to the member.

SECTION II – REFERRAL INFORMATION

Help the member understand the referral and how to use the service. Providers should also keep a current list of appropriate community resources for referral purposes. The lists must include the name, address, and phone number of the agency, the contact person, a description of services offered, and any costs for the services. The following is a list of some, but not all, services and agencies the provider might be in contact with:

- Adoption
- AIDS/HIV
- Adult Protective Services
- Alcohol, Tobacco, and Other Drug Abuse
- Child Welfare Services
- Children With Special Health Care Needs Program
- Day Care Centers
- Domestic or Family Violence
- Early Childhood Intervention Programs (for example, Head Start or Birth to 3 Program)
- Education
- Employment or Job Training
- Family Planning
- Food Pantries or Other Food Services
- Housing and Shelters for the Homeless
- Legal Assistance
- Social Services (for example, family or marriage counseling, family support services, clothing for newborns)

- Parenting Education (including fathers)
- Perinatal Loss or Grief Counseling
- Respite or Family Resource Centers
- Transportation
- Women, Infants, and Children Supplemental Nutrition Program (WIC)

SECTION III – AUTHORIZATION

Members must give providers permission to give their information to other agencies. The member should fill out this section to give the provider permission to contact the referred agency.

Unless a member or applicant gives their permission, providers are not allowed to use the member or applicant's information (including billing information or medical records) for any reason except program administration. Program administration includes court-ordered release of information and contacting third-party payers to pursue payment.

SECTION IV – RECORD REFERRAL ACTIVITIES

Follow up on referrals within two weeks unless otherwise stated. Providers are required to conclude all follow up before the covered postpartum period ends. Use this section to document all relevant referral activities, including summaries of referral findings after the referral follow up, diagnoses, recommendations, and any further follow up. Include details that could be helpful to the member. Follow-up with the referred provider should include appropriate advocacy to make sure that the member received services. If needed, help the member learn how to access the referred service, including when and how to contact the referred provider.

After the summary of the completed referral has been made with this information, the PNCC service provider should sign and print their name with the referral completion date.