How to complete a paper UMDAP Financial Assessment for UMDAP clients.

THERE SHOULD ONLY BE ONE CURRENT UMDAP FINANCIAL ASSESSMENT IN THE SYSTEM. THIS WILL BE SHARED BY BOTH MH & DAS PROGRAMS.

AA completes the paper cost agreement identifying the client's funding source and explains what happens if the client loses their Medi-Cal coverage.

If a client needs an UMDAP....

Service Providers are responsible for completing this five-page cost agreement doc from SmartCare, the AA will enter, and HIT will verify.

For clients with Medicare Only, Private Insurance, or no insurance/funding source, an UMDAP will be set by the service provider. The service provider will need to complete the UMDAP Financial Assessment (on paper) & set the UMDAP. Once completed, the service provider will give to the clinic AA to enter in to SmartCare.

Start by ascertaining if a current UMDAP is already in the system.

With the client open, search Client Fee. Select Client Fee (Client).



Set the begin date to go back one full year and click apply filter. (Leave all other fields set as All.)

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C	Client Fee ((0)							Ө☆★☆□	?
	All Locations All Client Fee T	Types	* *	All Programs Begin Date: 05/01/2022	*	All Staff End Date:	~ ≅ *	Apply Filter		
	Template Id	Begin Date	End Date	% of Standard Rate	Amount	Self Pay	Client Fee Types	Location(s)	Program(s) P	
						No	data to display			

If nothing is shown in this field, you may proceed with entering a new UMDAP Financial Assessment. Note: if there is a current UMDAP in place, the annual start and end dates, along with the UMDAP amount, will display here. If the start and end dates are within the current time client is starting services with us, you do not need to obtain a new UMDAP Financial Assessment.

Locations I Client Fee Types	~ ~	All Programs Begin Date: 05/01/20	∨	All Staff	~	Apply Filter		
piate Id Begin Date	End Date	% of Standard Rate	Amount	Self Pay	Client Fee Types	Location(s)	Program(s)	P
					No data to display			

THERE SHOULD ONLY BE ONE UMDAP FINANCIAL ASSESSMENT IN SMARTCARE PER ANNUAL PERIOD.

Complete a paper UMDAP Financial Assessment

1. On the Responsible Party page, complete the outlined sections. If the client is the responsible party, select the radial button next to yes. Answer if client is Medi-Cal eligible.

- a. If the client is not the financially responsible person, put in the name of the financially responsible person. Answer if client is Medi-Cal eligible.
- b. You may complete the other sections on this page, but it is not required.

MDAP Financial Assessment		e [°] : 🖻 (9 GOTO 🛓 🧞 🛅 🖨 🗅 🖪 Save
Effective 05/22/2023 🗮 Status New	Author So Co, Test Front Office 🗸 05/	10/2023	Sign 🙆 <
Responsible Party Third Party Information Finan	ncial Liability UMDAP Liability Determination Other Information	<u>n</u>	
Responsible Party Information			A
Client is Responsible Party OYes No	Medi-Cal Eligible OYes N	۹٥	
Name Search Contact	Relationship to Client	~	
Date of Birth	Marital Status	~	
Address	Telephone Number		
Home 🔽			
_	Home		
	Business		
Billing	Home 2		
Details	Business 2		
Veteran O Yes O No	Social Security Number	Modify	
mployer	Position		
Employer's Address	Employer Telephone Number		

2. On the next page (Third Party Information) indicate the insurance information.

a. Check yes for Assignment/Release of Information obtained.

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UMDAP Financial Assessment		🗳 🗄 🖻 🕒 Goto 🚢 🎝 🛅 🖶 🗅 🖬 Savo 🗙
Effective 05/22/2023	Author So Co, Test Front Office 🗸 05/10/2023	C O Sign O C +
Responsible Party Third Party Information Financial Liability	MDAP Liability Determination Other Information	
Third Party Information		
Insurance	Insurance ID	
Medicare Policy ID Number	Medi-Cal CIN	
Address	Assignment/Release of information Yes (○ No
Home 🔽		
Billing		
Details		

3. On the Financial Liability page, enter the annual period start date (first day of the month in which they are beginning services) and end date.

a. Enter responsible person/client income amount. Enter income amounts for spouse and any other income client may have. Enter number of dependents on income.

1DAP Financial Asse	ssment					Ē	: 🖻
Effective 05/30/2023	Status Ne	8W	Author Seaman, Kimberly 🗸				00
Responsible Party Third Par	ty Information	Financial Liability	UMDAP Liability Determinat	ion Other Info	ormation		
Annual Period							
	us Decised Start Data 05/05/2022						
Annual Period Start Date 05	/01/2023 🛗 🗸	Annual Perio	iod End Date 04/30/2024				
Annual Period Start Date 05,	/01/2023 🛗 🗸	Annual Perio	iod End Date 04/30/2024				
Annual Period Start Date 05	/01/2023 📋 🕶	Annual Perio	iod End Date 04/30/2024				
Annual Period Start Date 05 Income Responsible person	\$ 1200	Annual Perio	iod End Date 04/30/2024				
Annual Period Start Date 05 Income Responsible person Spouse	(01/2023	Annual Perio	iod End Date 04/30/2024				
Annual Period Start Date 05 Income Responsible person Spouse Other	\$ 1200 \$ 0 \$ 0	Annual Perio	iod End Date 04/30/2024				
Annual Period Start Date 05 Income Responsible person Spouse Dther Total gross monthly family income	\$ 1200 \$ 0 \$ 12000 \$ 0 \$ 1200.00	Annual Perio	iod End Date 04/30/2024				

4. On the UMDAP Liability Determination page, ask client for amounts and enter in all fields in the Liquid Assets section and the Allowable Expenses section.

- a. Calculate the Annual Liability amount. If you need to adjust this amount, enter the adjusted amount into the Adjusted Annual Liability field.
- b. Indicate the monthly amount client can pay in the Agreed upon payment plan to satisfy the above liability field.

Effective 05/30/2023	Status New	Author Seaman, Kimberly	~	00
Responsible Party Third Par	ty Information Financial Liability	UMDAP Liability Determination Other Info	ormation	
Liquid Assets				
Savings	\$ 50			
RA, CD, Market Value of Stocks, Bonds and Mutual Funds	S 0			
Checking Accounts	\$ 1000			
otal of liquid assets	\$ 1050.00			
ess Asset Allowance	\$ 1500			
otal net liquid assets	\$ 0.00			
fonthly Asset Valuation	\$ 0.00			
djusted gross monthly income	\$ 1200			
wable Expenses	\$ 1200			0.00
djusted gross monthly income s wable Expenses	\$ 1200	Monthly child care (necessary for e	employment)	\$ 250
djusted gross monthly income s wable Expenses ordered obligations paid mont hly dependent support payment	the system of 2% of gross income	Monthly child care (necessary for e Monthly medical expense payment	employment) ts	\$ 250 \$ 50 \$ 26.00
idjusted gross monthly income 3 wable Expenses t ordered obligations paid mont hly dependent support payment thly medical expense payments	thy \$ 0 the \$ 0 the \$ 0 the second of the	Monthly child care (necessary for e Monthly medical expense payment ot Social Security - Allowance made in payment	employment) ts t schedule)	\$ 250 \$ 50 \$ 26.00 \$ 0
Adjusted gross monthly income s wable Expenses t ordered obligations paid mont hly dependent support payments thly medical expense payments thly mandated deductions from I allowable expenses	thy \$0 the \$0 the solution of the solution of	Monthly child care (necessary for e Monthly medical expense payment of Social Security - Allowance made in payment	employment) ts t schedule)	\$ 250 \$ 50 \$ 26.00 \$ 0 \$ 276.00
Adjusted gross monthly income 3 bowable Expenses t ordered obligations paid mont thly dependent support payment thly medical expense payments thly mandated deductions from I allowable expenses	\$ 1200 hty \$ 0 its \$ 0 in excess of 2% of gross income gross income for retirement plans (n	Monthly child care (necessary for e Monthly medical expense payment of Social Security - Allowance made in payment	employment) ts t schedule)	\$ 250 \$ 50 \$ 26.00 \$ 0 \$ 276.00
adjusted gross monthly income some betterning and the second seco	thy \$0 the \$0 the second secon	Monthly child care (necessary for e Monthly medical expense payment of Social Security - Allowance made in payment	employment) ts t schedule)	\$ 250 \$ 50 \$ 26.00 \$ 0 \$ 276.00
djusted gross monthly income s wable Expenses ordered obligations paid mont hly dependent support paymen hly medical expense payments hly mandated deductions from allowable expenses usted Monthly Income ited gross monthly income mini		Monthly child care (necessary for e Monthly medical expense payment of Social Security - Allowance made in payment	employment) ts t schedule)	\$ 250 \$ 50 \$ 26.00 \$ 0 \$ 276.00
Adjusted gross monthly income source of the second		Monthly child care (necessary for e Monthly medical expense payment of Social Security - Allowance made in payment	employment) ts t schedule)	\$ 250 \$ 50 \$ 26.00 \$ 0 \$ 276.00
Adjusted gross monthly income 3 owable Expenses t ordered obligations paid mont thly dependent support payment thly mandated deductions from I allowable expenses justed Monthly Income sted gross monthly income mini DAP Liability Determinal pail Liability \$	tion	Monthly child care (necessary for e Monthly medical expense payment of Social Security - Allowance made in payment 4.00 Adjusted Annual Liability (if applicable)	employment) ts t schedule) \$ 50	\$ 250 \$ 50 \$ 26.00 \$ 0 \$ 276.00

5. On the Other Information page, enter in the name of the person you obtained the financial information from (if other than the client).

a. If you adjusted the annual liability amount, enter your name in the adjusted by field, enter the reason for the adjustment in the adjusted reason field, add your name to the approved by field

and select the approval date. (If you did not adjust the annual liability amount, leave these fields blank.)

- b. Select the yes radial button next to an explanation of the UMDAP liability was provided.
- c. Sign the form. Obtain client's signature. Give the paper form to clinic AA to enter in to SmartCare.

Effective 05/30/2023	Status In Progress	Author Seaman, Kimbe	erty 🗸	00	Sign 🗿 🚅
Responsible Party	Third Party Information Financial Liability I	JMDAP Liability Determination	Other Information		
Other Information	1				
Provider of Financial	Information (if other than patient or responsible pe	rson)			
Name		Adjusted by	Seaman, Kimberly		
Approved by	Seaman, Kimberly	Adjusted Reason	Therapeutic Exemption	~	
Approval Date	05/30/2023 🛗 🕶	An explanation of the U	MDAP liability was provided	Yes 🔿 No	
Address					
Home 🔽	2000 				
Billing					