



Greeting Military OneSource Providers,

Please take a moment to review the following Case Activity Form (CAF) completion reminders and recommendations:

1. **Conciseness:** Provide clear and concise notes that cover the essential details of each counseling session.
 - a. What was the presentation of the participant OR what occurred during the session?
 - b. What steps were taken by the provider toward established goals?
 - c. What was the response of the participant (or couple/family)?
2. **Completeness:** Make sure to cover all required sections of the CAF.
3. **Clarity:** Use clear and professional language that accurately reflects the counseling session. Avoid jargon unless it is necessary and well-defined.
4. **Timeliness:** Submit your CAFs promptly and within the timely filing deadline.
5. **Avoid:** Copying and pasting session notes or writing the same notes for each session. A unique note is required for each session.

It's crucial to ensure that notes are entered under the correct participant to maintain the integrity and confidentiality of client records. Here's what to do in case of an incorrect entry:

1. **Immediate Correction:** As soon as an incorrect entry is identified, take steps to correct the issue straight away. Contact Provider Relations via [email](#) for assistance.
2. **Notification:** Providers who make such errors will be contacted by the provider relations department and instructed on how to rectify the mistake.
3. **Impact on Status:** Be aware that entering notes under the wrong participant will lead to being placed on a "no referral" status for three months. This means you won't receive new referrals during that period or be able to extend any current authorizations. During that time providers will be reassigned the Military OneSource Provider Administration training to complete.

To prevent this, always double-check participant details before entering notes. If you have any questions or need assistance with the correction process, don't hesitate to reach out for support.



High Risk/Out of Scope Documentation:

High Risk Cases: If the participant is engaging in high-risk behaviors (violence, abuse, self-harm, and impulsive or addictive behaviors that present risk to self or others), please document those behaviors and call Military OneSource at 800-342-9647 to report and/or consult.

Safety Plan Developed: If a safety plan was developed, please document a summary of that safety plan.

Current Abuse: If "Current" if selected for Domestic Violence, Child Abuse/Neglect, Sexual Assault, or Sexual Abuse (of a minor) needs to be documented in the Case Summary Note and immediately reported to Military OneSource by calling 800-342-9647.

Risk and Functional Assessment indicating Severe Impairment: If the participant exhibits Severe Impairment of functioning in any of the Assessment factors (this is indicated by a '3'), please clarify what behaviors lead to that determination in the Case Summary Note.

Note: If 'Severe Impairment' is determined, it may indicate that the participant is out-of Scope for Military OneSource services.

Thank you!

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