

A Member of Trinity Health



Community Health Connections Health Home CareManager Attachment Naming

Selected File

- When uploading, the file name will appear in the Selected File field in CareManager.
- When saving documents for uploading and attaching, please save them using the Document Type from table below.
- If the document you are attaching is not listed in table below, please assign an appropriate and descriptive name.

Description

- In the Description Field, please enter the Document Type from the table below.
- If the document you are attaching is not listed in table below, please assign an appropriate name.

^{*}Many agencies choose to include Candidate/Member initials in the Selected File or Description. This is optional. The actual format of the text is up to agencies, but please be sure the descriptions are descriptive of the document, such as how they are shown in the table below.

Engagement and Enrollment Documents		
DOH 5055 [date]	DOH 5234	DOH 5236
[Provider/HIPAA] Consent	Medical Records	Bill of Rights
Member Acknowledgment		
HML Verification / Discharge Summaries		
HML Proof of Homelessness	HML Incarceration Release	Discharge Summary [date]
ED Discharge [date]	HIV Labs	PSYCKES Summary
HARP Documentation		
HARP Eligibility Assessment	HARP LOSD Request	HARP LOSD
HARP Full Plan of Care	CORE Referral Form	
Special Programs Documentation		
AOT Court Order	AOT Compliance Report	AOT Significant Event
HH+ Eligibility		
Case Closure Documents		
Discharge Letter	DOH 5235	Fidelis Inquiry Form