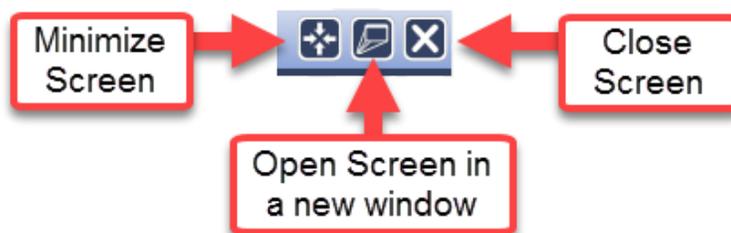
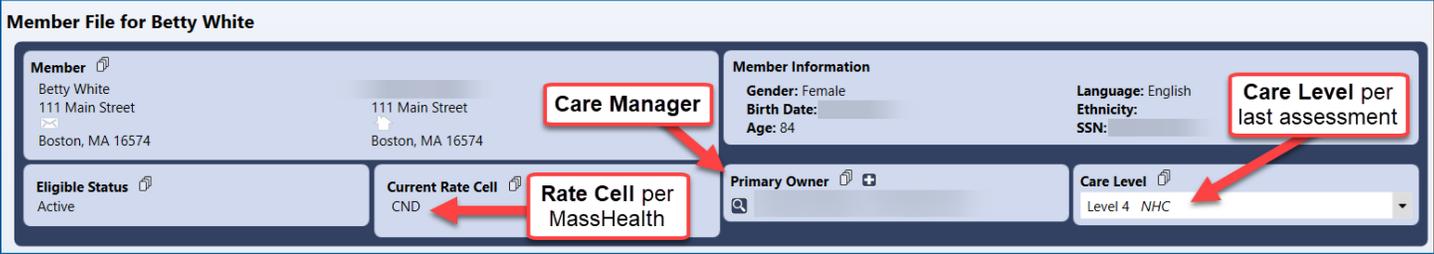


When you open the Member File screen, you can open the screen in a new window to avoid confusion with other screens. Look in the upper right corner of the Member File for that option:



Historical information is available in many fields by hovering over the  icon.

From top to bottom, here is what you can find on the Member File Screen:



The screenshot shows the 'Member File for Betty White' interface. It is divided into several sections: 'Member' (Betty White, 111 Main Street, Boston, MA 16574), 'Member Information' (Gender: Female, Birth Date, Age: 84, Language: English, Ethnicity, SSN), 'Eligible Status' (Active), 'Current Rate Cell' (CND), 'Primary Owner', and 'Care Level' (Level 4 NHC). Red callout boxes with arrows point to 'Care Manager', 'Rate Cell per MassHealth', and 'Care Level per last assessment'.

The blue area at the top of the screen is static, so will remain at the top of the screen as you scroll down. The **Member** section includes the member's **Mailing Address** () , **Home Address** () and **Telephone Number**. The **Member Information** section includes addition demographic information, including the member's **Language**. This information feeds from Diamond, so if there are any errors, corrections are sent to [SCO\\_Enrollment@tufts-health.com](mailto:SCO_Enrollment@tufts-health.com).

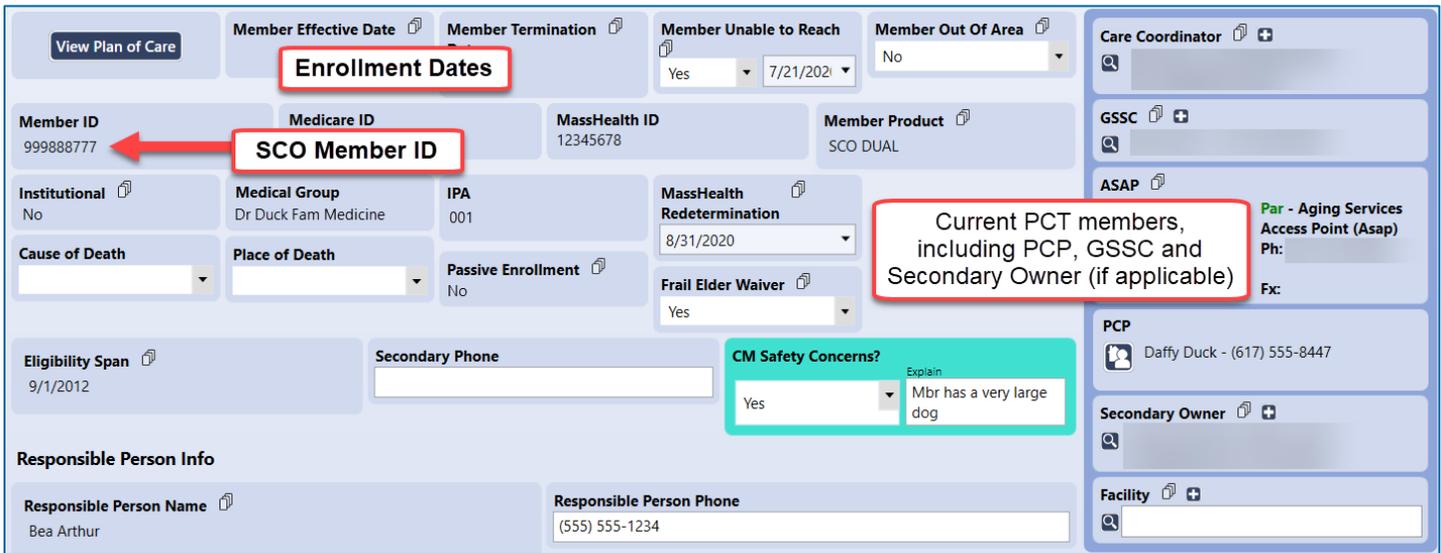
**Eligible Status** also feeds from Diamond. You can see a history of any changes by hovering over the  icon.

The **Current Rate Cell** is the member's Rating Category as reflected by MassHealth, feeding from Diamond.

**Primary Owner** is the Care Manager (CM) responsible for the member. The CM can be changed using the  icon, which will open a directory of CaseTrakker users.

- Non-complex members (CW) are managed by a GSSC
- Complex AD/CMI members are managed by a Behavioral Health (BH) CM
- Complex NHC members are managed by an RN CM

**Care Level** is a drop-down populated by the CM based on their Comprehensive Assessment. Clinical Managers are contacted if there is a discrepancy.



**View Plan of Care** Member Effective Date Member Termination Member Unable to Reach Member Out Of Area Care Coordinator

**Enrollment Dates**

Member ID 999888777 **SCO Member ID** Medicare ID MassHealth ID 12345678 Member Product SCO DUAL

Institutional No Medical Group Dr Duck Fam Medicine IPA 001 MassHealth Redetermination 8/31/2020

Cause of Death Place of Death Passive Enrollment No Frail Elder Waiver Yes

Eligibility Span 9/1/2012 Secondary Phone CM Safety Concerns? Yes Explain Mbr has a very large dog

Responsible Person Info Responsible Person Name Bea Arthur Responsible Person Phone (555) 555-1234

Current PCT members, including PCP, GSSC and Secondary Owner (if applicable)

PCP Daffy Duck - (617) 555-8447

Click the **View Plan of Care** button on the left to view the member's **Plan of Care** with identified Problems, Goals and Interventions. (Covered in another handout.)

The member's **Effective Date** (Enrollment Date) and **Termination Date** (Disenrollment Date) are recorded as applicable.

There are additional fields to track whether a member is **Unable to Reach** or **Out of Area**.



Remember to email [SCO\\_Enrollment@tufts-health.com](mailto:SCO_Enrollment@tufts-health.com) if the member is Out of Area.

The member's **SCO Member ID**, **Medicare ID** (if applicable) and **MassHealth ID** are populated from Diamond, in addition to other read-only fields like **Member Product** (Dual or Medi), **Institutional** (Yes/No), **Medical Group** and **IPA**, **Passive Enrollment** (Yes/No), **Eligibility Span** and **Secondary Phone**.

**MassHealth Redetermination** and **Frail Elder Waiver** fields are editable; however, these fields are managed by Sales & Enrollment.



If the **MassHealth Redetermination** field is populated, contact the member's GSSC to ensure they have reached out to assist the member with their paperwork.

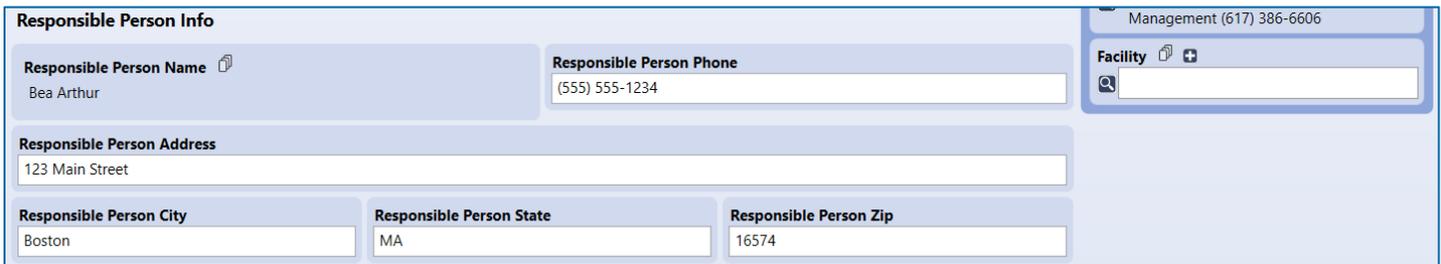
The **Cause of Death** (Alzheimer's Disease, Cancer, Cerebrovascular Disease, Chronic Respiratory Disease, Diabetes, Heart Disease, Influenza and Pneumonia, Nephritis, Other, Septicemia or Unintentional Injury) and **Place of Death** (Home, Hospice Facility, Hospital, Nursing Home or Other) fields are for documentation when a CM

learns of a member’s passing. Official disenrollment due to death will come from MassHealth.

**CM Safety Concerns?** is used to alert other CM staff to potential dangers. If the drop down is changed to **Yes**, a free-text field is added to explain the alert.

Along the right side of the screen is a space for additional contacts, including the member’s **PCP, GSSC/ASAP, Care Coordinator, Secondary Owner** and **Facility**, if the member resides in an institutional setting. Secondary Owners are not always populated, but could include:

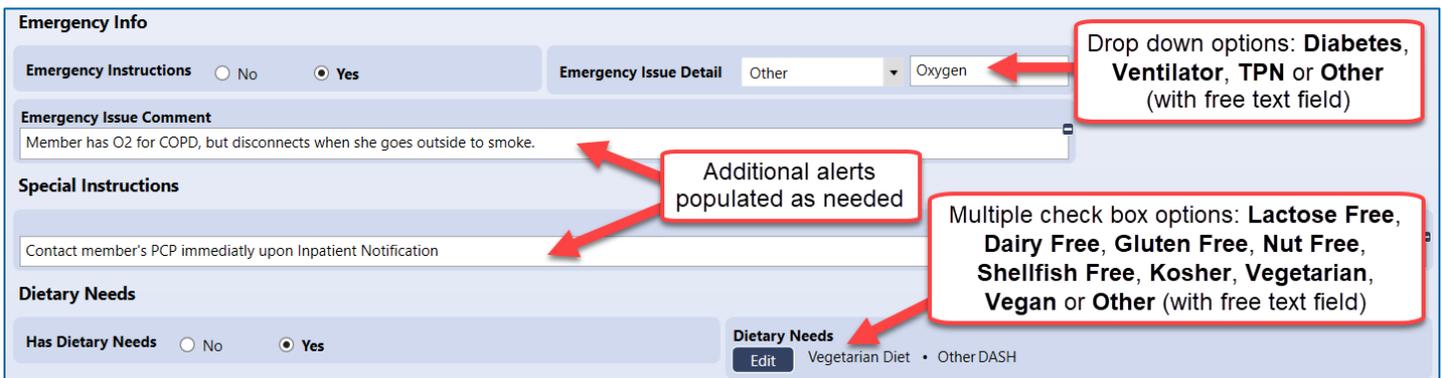
- An RN CM, if the member is Level 3 and the primary owner is a BH CM
- A BH CM, if the member has behavioral health needs but is not Level 3
- An NP, if the member has been identified for the **Advanced Illness** program



The **Responsible Person Info** is populated from Diamond as the member’s Emergency Contact. The CM is able to update this person’s contact information after their visit to ensure this information is up to date.



Care Management staff are required to confirm HIPAA permissions (including Responsible Person) in MACCESS prior to every member interaction.



**Emergency Info** is populated for members with **Diabetes**, on a **Ventilator**, on **Total Parenteral Nutrition (TPN)** or with **Other** conditions/equipment (i.e. oxygen). **Emergency Issue Comment** is a free-text field to add additional details.

**Special Instructions** for the member can be added to alert other CM Staff as necessary.

Member **Dietary Needs** can be recorded, both for cultural/preferential diets (**Kosher**, **Vegetarian** and **Vegan**), or for medically necessary diets (**Lactose Free**, **Dairy Free**, **Gluten Free**, **Nut Free** and **Shellfish Free**). There is an option for **Other** which includes a free-text field to record additional dietary restrictions.

Allergies			
Date Entered	Allergy Type	Reaction	Notes
<a href="#">09/19/2019</a>	Animal - Sheep (wool)	Hives	Member cannot tolerate any % of wool in fabric they are wearing
<a href="#">06/29/2015</a>	Seasonal	Itchy, watery eyes	Moderate seasonal allergies April-June
<a href="#">09/13/2012</a>	Animal - Cat	Skin Rash	Member can tolerate being in the same room, but not petting cats

[Click here to add Allergies](#)
[Click to Add](#)

**Allergies** are listed as reported, either from the member or from the H&P received from the PCP. Click the **Date Entered** hyperlink to edit the allergy line. All information recorded is shown in this view, and each line expands to fit all **Notes**.

Immunizations/Screenings				
Date Entered	Immunization/Screening	Immunization Screening Detail	Date Administered	Notes
<a href="#">09/19/2019</a>	Eye Exam	Dilated Eye Exam		Member refuses to have her eyes dilated as she hates the procedure.
<a href="#">09/12/2017</a>	Breast Cancer Screening	Mammogram	9/12/2017	normal
<a href="#">06/14/2013</a>	Colorectal Screening	Colonoscopy	5/1/2012	
<a href="#">06/14/2013</a>	Influenza		6/14/2013	

[Click here to add an Immunization/Screening](#)
[Click to Add](#)

If there is no **Date Administered**, the member probably Refused. Confirm refusal in **Notes** with member's reason, if known. Other CM Staff may address the member's refusal reasons at a later date.

**Immunizations/Screenings** are reported, including refusals (reason or "Refused" should be included in **Notes** section). Options available are:

- Breast Cancer Screening – Mammogram
- Breast Cancer Screening – Ultrasound
- Colorectal Screening – Colonoscopy
- Colorectal Screening – Fecal Occult Blood Test
- Colorectal Screening – Sigmoidoscopy
- Eye Exam – Dilated Eye Exam
- Eye Exam – Glaucoma Screening
- Hearing Exam
- Influenza
- Pneumococcal
- Prevnar

Date	Name	Phone	Contact Type
<a href="#">10/04/2013</a>	Bob Barker	(508) 665-8956	Emergency Contact
<a href="#">07/20/2020</a>	Virtual Visit		Other
<a href="#">06/29/2015</a>	Mary Poppins		

[Click here to add a new Contact](#)

Additional **Contacts** are added, with key information visible in the contact line. Clicking on the **Date** hyperlink will show additional information, including any pertinent notes (restricted information, location of paperwork, etc.).

- Care Management staff are required to confirm HIPAA permissions (including Responsible Person) in MACCESS prior to every member interaction.
- Contacts may also be considered members of the PCT, so should also be added to the Care Team screen to reflect their involvement.

Date	Member Completed Docs	Location of Docs	Notes
<a href="#">10/04/2013</a>	5 Wishes booklet	PCP's office	
<a href="#">10/04/2013</a>	Healthcare Proxy	PCP's office	HCP is daughter, Grace White.
<a href="#">06/29/2015</a>	Durable Power of Attorney	Family member has it	DPOA not yet invoked; In daughter Grace White's possession
<a href="#">05/12/2016</a>	DNH	HCP/POA has it	

[Click here to add a new Advance Directive](#)

The **Advance Directive** section allows CMs to mark **Member does not wish to answer** under **Goals of Care** and **Refused** under **Member Completed Docs** to indicate when a member is reluctant to engage in an Advance Directive conversation. Clicking on the date allows you to edit the Advance Directive document record. All information is shown in the Record line.

**Member Completed Document** options are:

- DNR (*Do not resuscitate*)
- DNI (*Do not intubate*)
- DNH (*Do not hospitalize*)
- Living Will
- 5 Wishes booklet
- Health Care Proxy
- Durable Power of Attorney
- Refused
- MOLST
- Other (*with free text field*)

**Location of Advance Document** options are:

- PCP's office
- Family member has it
- HCP/POA has it (*Health Care Proxy/Power of Attorney*)
- In member's home
- Nursing Facility Record
- I don't know

Hospice			
Date Entered	Start Date	End Date	Notes
<a href="#">08/18/2016</a>	8/4/2016	8/18/2016	Hope Hospice
<a href="#">Click here to add Hospice Admissions</a>			

**Hospice** stay dates are recorded in the Hospice section. Please note that the **Date Entered** field is the date the information is entered into CaseTrakker. **Start Date** and **End Date** reflect the dates the member was in hospice.

The **Hospice Name** should be included in the **Notes** field.

Clicking on the **Date Entered** hyperlink allows you to edit the hospice record. All information is shown in the Record line.

Rate Cell History	
There is no Rate Cell History for this Member.	
Current Rate Cell Date Range	Member Import Date
9/1/2012 - 12/31/2012	9/13/2012

The final section shows technical information regarding when the member's information was first loaded or changed into CaseTrakker.

Additional information not included on the Member File can be found using the tabs that float at the bottom of the screen (buttons appear on a single row; use the arrows at either end to scroll right and left):

Member File	Activity Log Summary	Letters & Attachments	Assessment Summary	Authorization Summary	
Medications/Medical History	Labs	Grievance Summary	Appeal Summary	Disease Management	Care Team