

Practitioner Attestation Practice Site Standards Form

In order to safeguard CarePartners of Connecticut members, standards related to the physical environment in which members will be treated and the way in which confidential information will be maintained have been established. Only practice sites that are certified by a site visit or attestation will be considered locations covered under the contract. Your signature below certifies your compliance with these standards, which must be met while you are a participating provider with CarePartners of Connecticut:

Medical Record Keeping and Storage

1. Medical records include the name, address, home phone number and date of birth for all patients.
2. The patient's name and/or identification number appear on each page, and all entries are signed and dated.
3. Medical records include adequate history, risk assessment, treatment plan, progress notes, and (where appropriate) medication records for each patient.
4. Individual records are labeled and stored in an organized way (so as to allow for prompt retrieval in the event that the record is required for review by the Plan).
5. Medical record files are maintained in a secure area and kept under lock and key when unattended.

Office/Facility standards

6. Patients' Rights are posted in an accessible location and/or distributed to patients.
7. For home offices, there is a separate entrance and waiting area clearly defined from personal spaces.
8. All patient areas (including waiting rooms, treatment rooms and bathroom facilities) are properly maintained and kept clean.
9. Exit signs are present and visible.
10. Smoke detectors are present.

Please sign and date below to indicate your compliance with these standards at the practice site(s) listed below. Please note that CarePartners of Connecticut reserves the right to conduct an on-site visit of your practice site at its discretion.

Address 1

Address 2

City, State, Zip Code

City, State, Zip Code

Phone #

Print Name

Signature

Provider NPI ID #

Date

Return completed form to:

AHCBehavioralHealth@tufts-health.com or fax 617.673.0909.

CarePartners of Connecticut Provider Services: 888.341.1508