

## I-SNP Assessment Log Tip Sheet

### Tips:

- ✓ Only report your monthly **I-SNP activities** on the log. Do not report any other product assessments.
- ✓ Every month your agency should submit **one combined** Excel spreadsheet with all the activity/assessments completed by your Care Coordinators.
- ✓ All logs need to be emailed to UCare at [assessmentreporting@ucare.org](mailto:assessmentreporting@ucare.org) by the 10<sup>th</sup> of the following month for the previous month's activity. Example: Assessment conducted in February, should be reported on log submitted by March 10<sup>th</sup>.
- ✓ Save the spreadsheet in the following format: delegate/month/year. Example: FairviewJuly2025.
- ✓ Only add comments to the comment section, do not add to any other column or try to change the formatting of the spreadsheet.
- ✓ Be sure to enter the UCare ID# and not the PMI#.
- ✓ **Do not** log transfers between UCare delegates or transfers within your organization. Example: Member was care managed by Genevive and transferred to Fairview Partners. **Do not** put transfer on the log unless you are completing a new assessment. Review of the existing assessment/POC does not constitute a new Health Risk Assessment.
- ✓ The I-SNP Assessment Log is designed as tool for delegates to report assessments/activities completed during that month.

### Column Descriptions:

**Column A – “Delegate”** Indicate the entity you are from (i.e. delegate name). Choose from the drop-down choice offered.

**Column F – “Living Status”**

- **Assisted Living** – Member resides in Assisted Living
- **Institutionalized** – Member resides in an institutional setting (examples: SNF/NF, inpatient psychiatric facility)

**Column G – “Date of current activity completed in 2025”** – enter the date of the assessment/activity conducted during the month of the log you are submitting. For unable to reach, this date is your 4<sup>th</sup> attempt. Ensure you enter the other 3 attempt dates accordingly.

**Column H – “Activity Location in 2025”** - Choose drop down option as to how the activity was conducted. In-Person, Televideo (Audio and Visual) or Phone.

**Column I – “Type of current activity completed in 2025”** -Choose the type of assessment conducted from the drop down choices offered.

- For unable to reach, this date is your 4<sup>th</sup> attempt. Ensure you enter the other 3 attempt dates accordingly (columns J through L).
- Also enter in this area, any midyear care plan update date or updates to the care plan related to a

transition of care.

## REMINDERS:

- When **Unable to Reach** is indicated, ensure you have **4 documented attempts** to reach the member, and reflect those dates within the log.
- Be sure you indicate your delegate name in the first column of the spreadsheet.
- Ensure you label your spreadsheet: delegate/month/year.
- If you miss an assessment in one month's log, you can enter that assessment in the following month's log.
- Only include I-SNP members on this report.