CSHCS Transition Checklist for Local Health Departments

Client Name: ___________________________ I.D. #: ___________________ D.O.B: __________

**Ages 14-17**
- When in contact with client and family, talk about any transition needs or goals they may have
- Encourage the client to complete a transition readiness assessment
- If completing a care plan, incorporate the transition readiness assessment into the plan
- Provide information on services they may have need for such as Social Security, Michigan Rehab Services, etc.

**Ages 17-19**
- When in contact with client and family, talk about any transition needs or goals they may have
- If client desires, have them complete the Authorization to Disclose Protected Health Information form. This form is sent to the client the month of their 18th birthday directly from CSHCS Central Office.
- Encourage the client to complete a transition readiness assessment
- If completing a care plan, incorporate the transition readiness assessment into the plan
- Have client sign application and other documents unless guardianship is in place
- Address all mailings in client’s name, unless guardianship is in place
- When updating authorized providers, ask client if they need to find providers who treat adults
- Complete a financial assessment form when 18. This form should be completed with client income only
- Discuss Health Insurance Options
- Provide information on services they may have need for such as Social Security, Michigan Rehab Services, etc.

**Ages 19-21**
- When in contact with client and family, talk about any transition needs or goals they may have
- Finalize plans for health insurance
- Explore options for clients with no health insurance eligibility
- If client receiving PDN, assist in PDN transition process
- Make any arrangements necessary for a transfer of care

**Three months before age-out**
- Follow policy and procedure for Medicaid Health Plan enrollment if needed
- Provide information on services they may have need for such as Social Security, Michigan Rehab Services, etc.
- Determine if client has made necessary transfers to adult health care providers
- Identify the success and challenges the client encountered as they transitioned to adult health care model