

| Interviewin | ig: Review Assessme | <u>ents</u> | |
|--------------|------------------------------|---------------------------|---|
| Determine p | patient category: | | |
| | | | |
| | Behavioral | Refer to | |
| | Health Dept | ICCP | |
| nplative 🗲 | ≥ 4 | < 4 | |
| tive 🔶 | ≥ 4 | < 4 | |
| → | ≤1 | > 1 | |
| ce 🔸 | ≤1 | >1 | |
| | | | |
| aluate medi | ical necessity for me | ntal health counseling or | |
| or mild depr | ression | | |
| | | | |
| etermine act | ivity related to Quali | ty of Life. Review | |
| se to the qu | estion. Identify up to | o 3 items for ICCP | |
| iner. | | | |
| | | | |
| velop and co | ordinate nutrition a | nd exercise education | |
| | | | |
| | | | |
| evelop and | coordinate sleep hyg | giene education and plar | 1 |
| . . | | , | |
| | 3, communicate to t | - | |
| ovement pro | cess. (QAPI) <i>(To be l</i> | Jevelopea) | |
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