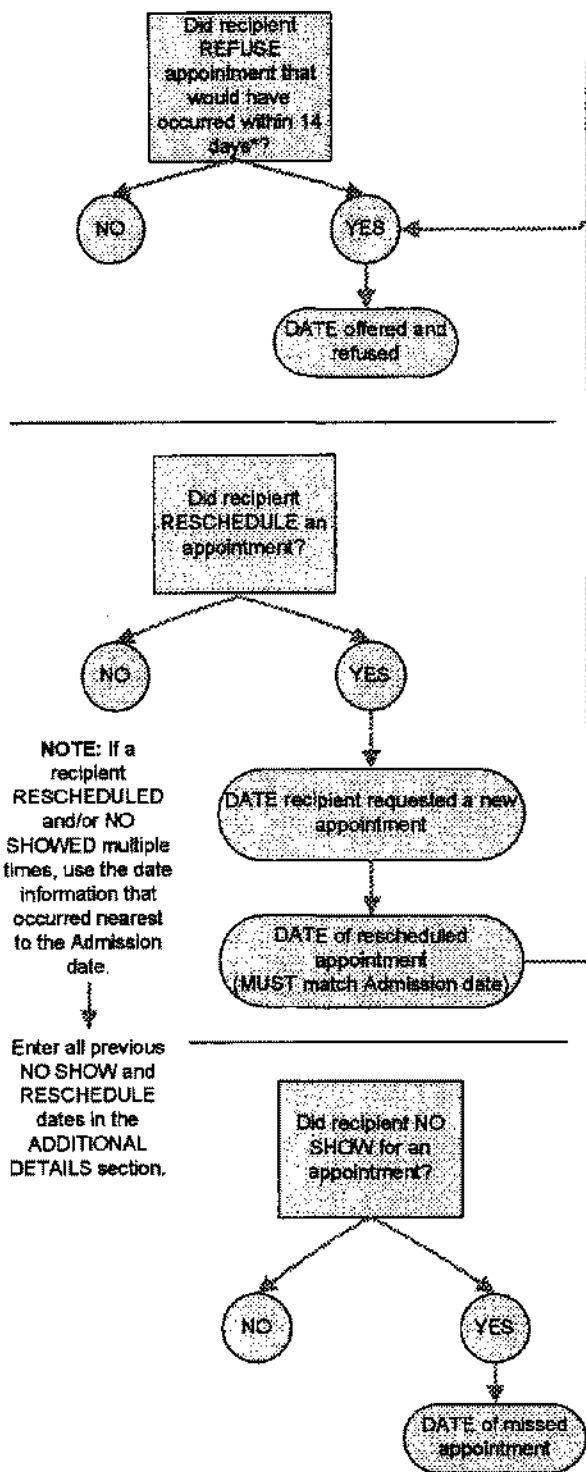


Mid-South Substance Abuse Commission Prepaid Inpatient Health Plan (PIHP) Performance Indicators

Indicator #3

Client Admission Appointment Information

(all corrections MUST be made by Provider)



Admission Form

(Provider MUST contact MSSAC to make corrections)

Treatment Admission Information:

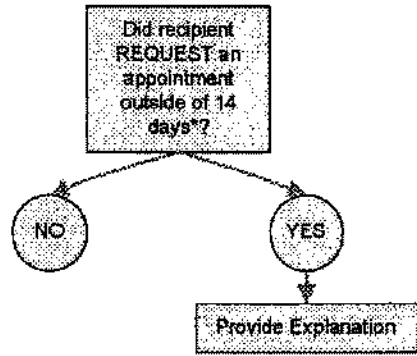
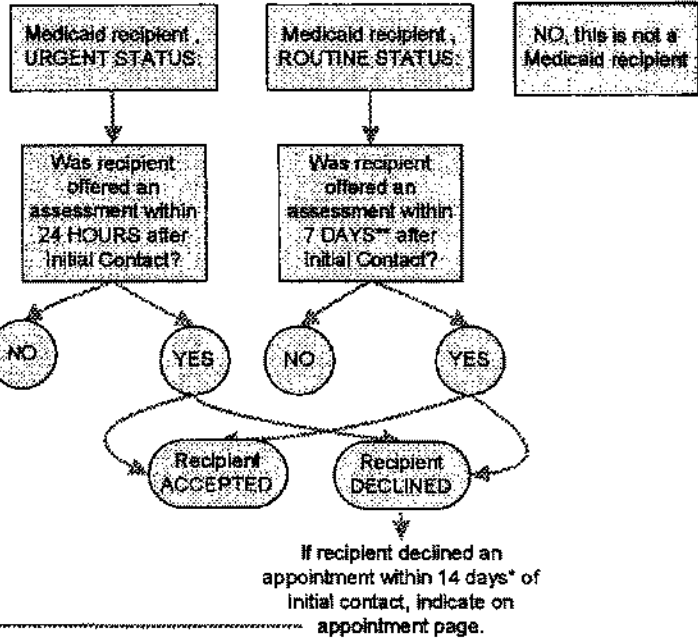
Treatment Admission Date
(MUST match 1st Progress Note, etc)

Additional Information:

TIME waiting to enter treatment:
(days* since request made)
= Date of SARF to Date of Treatment Admission

Indicate Reason for Delay
(MUST correlate with appl. page if exceptions are used)

Timeliness:



*CALENDAR DAYS
**WORKING DAYS