Therap "Crosswalk" - MN DHS HCBS Intensive Services Sample Documentation Requirements – Program forms for 245D providers. **SEE DISCLAIMER BELOW**					
RESOURCE: MN DHS HCBS Intensive Services Sample Policies - 245D providers	Date of last Template Revision by MN DHS	Form / Format or Suggested Therap Module(s)	Therap & MN User Agency Solutions for 245D Compliance.	NOTES	
<u>45-Day Meeting Summary</u>	8/1/2020	> Agency Specific format (state or other). > Attach to the agency's determined location in Therap for reference.	Use the State provided template and attach to the SPA Plan generated for the Individual. Use the State provided template and attach to the Individual Support Plan for the Individual.	MN 245D specific Support Plan Addendum plan available via Questionnaire/Individual Plan> Build your own or request current SPA Questionnaire from our Therap MN Basecamp Group from your Support Specialist. Attach 45-Day Meeting Summary to this plan.	
Admission and Discharge Register	10/31/2013	INDIVIDUAL $ ightarrow$ Individual Demographic Form	IDF Active/Discharged Program & Site Information. The IDF can be exported and submitted with this detail.	Record of admit / discharge to agency programs and sites automatically maintained.	
Support Plan Addendum (SPA) (previously the CSSP Addendum)	Sept 2022	> INDIVIDUAL \rightarrow Questionnaire > INDIVIDUAL \rightarrow Individual Plan	 > Individual Plan Module > SPA Questionnaire > Agency Specific format (state or other). > Attach to the agency's determined location in Therap for reference. 	MN 245D specific Support Plan Addendum plan available via Questionnaire/Individual Plan> Build your own or request current SPA Questionnaire from our Therap MN Basecamp Group from your Support Specialist. Link the SPA Questionnaire to an Individual Plan and generate an individualized plan for each individual.	
Emergency Report and Internal Review	10/31/2013	 > GER > MIE GER > Agency Specific format (state or other). This form is Site / Program specific for Fire, Severe Weather, Natural Disaster, Power Failure or other event that "threated the immediate health and safety of a person". 	Attach completed form to an Individual's GER as appropriate. Place in Agency and / or Individual Document Storage.	Vast majority of the 245D documentation requirements can be added to the GER in it's present form. Follow-up Comment fields allow for additional detail input. Since this particular form is Site/Program specific, providers have completed the form and attached to the appropriate GER's for compliance. (e.g. There is a fire at a group home. A "Multi-Individual Event " (MIE) GER is created. Each of the respective MIE GERs would have the completed form attached). Use the MN state specific form embedded in the GER for events that meet certain state requirements. MN, 245D specific form has been added to the GER Module. Click here to learn more.	
Fire Drill Log	10/31/2013	 > T-Log > Agency Specific format (state or other). 	Use "T-Log without an Individual" to record the Fire Drill Log record. This will be Program (point of service delivery) specific.	Copy / Paste the required fields from the 245D template into the T-Log body and complete. Use a common Summary for easy searching. Search report can be exported to PDF for submission. Export search results "with details" to Excel for submission. Capture the information in the 245D template. Attach the completed template a T-Log. Use a common Summary for easy searching. Search report can be exported to PDF for submission. Export search results "with details" to Excel for submission.	

Therap "Crosswalk" - MN D	HS HCBS Inten	sive Services Sample Documentation	on Requirements – Program forms f	or 245D providers. **SEE DISCLAIMER BELOW**
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	10/31/2013	Agency Specific format (state or other).	Part of admission packet. Attach to IDF, ISP Plan, place in Individual Document Storage.	Any form that requires a wet signature can be scanned & attached to the Individual's record. If the agency desires, this information can be included in the individual's ISP Plan for reference.
Funds and Property Authorization				Personal Property inventory can be captured and maintained in the Therap specific custom form that is available from Global Custom Form Template Library.
				All applied Custom forms can be easily accessed from the Plans Tab on the Individual Home Page.
Health Needs Change Notice	7/1/2015	Agency Specific format (state or other).	Given that this form is a simple document to record that a notification was provided to the Guardian and Case Mgr, the agency can determine their preferred attachment location.	Depending on level of needed detail. Therap offers ontions to include
			Data from the Health modules can be used to verify and/or supplement Health Need Changes.	Module.
Health Needs Record	10/31/2013	 > Agency Specific format (state or other). > Individual Demographic Form > Health Tracking Modules > Optional Health Plus Modules 	 > IDF Health Information > Adaptive equipment can be listed in IDF. > T-Logs for Health Information. > Health Tracking → All HT Modules > Individual Support Plan updates. > CSSPA Custom Form Updates. > ISP Program for daily health checks and / or specific health related supports. 	Medication Administration and Assistance: Use Medication History, optional MAR Plus, Med Admin ISP Program to capture this data.
				Monitoring Health Conditions: Health conditions can be monitored via the Health Tracking and optional Health Plus modules. The Care Plan module (included with Health Plus) can used to share specific instructions.
				Health Service Appointments: Health Tracking \rightarrow Appointments
				MEDICAL EQUIPMENT, DEVICES, AIDS, TECHNOLOGY : IDF \rightarrow Medical Information \rightarrow Adaptive Equipment
				Reports can be generated from these inputs for reporting.
Incident Report and Internal Review	8/1/2020	Specifc MN 245D Form embedded in the Therap GER available.	Use the State Specific 245D in the GER module. Upload & attach agency form to GER / GER Resolution / Individual Document Storage. Includes ICF "Injury of Unknown Source" language.	MN, 245D specific form has been added to the GER Module. Click here to learn more.
				Click here to learn more about GER Resolution.
Individual Abuse Prevention Plan (IAPP)	10/31/2013	> INDIVIDUAL \rightarrow Questionnaire > INDIVIDUAL \rightarrow Individual Plan	Individual Abuse Prevention Plan (IAPP) [Version: MN2018.4]	MN 245D specific IAPP plan available via Questionnaire/Individual Plan> Build your own or request current IAPP Questionnaire from our Therap MN Basecamp Group from your Support Specialist. Link the IAPP Questionnaire to an Individual Plan and generate an individualized plan for each individual.
				Use the State provided template and attach to the Individual Support Plan/Support Plan Addendum generated for the Individual.

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Intensive Support Self-Management Assessment (f.k.a. "SMA")		 INDIVIDUAL → Care → Global Template Library → Search Custom Form Template. Import available "Intensive Support Self-Management Assessment [Version 2018.4]" Custom Form. 	Use the available Custom Form: "Intensive Support Self-Management Assessment [Version 2018.4]"	Available through the Global Template Library for download to the agency platform. Global Custom Form Template Library→Search Custom Form Template → Keywords: 245D, MN, Minnesota. See "Intensive Support Self-Management Assessment [Version 2018.4]" All applied Custom forms can be easily accessed from the Plans Tab on the Individual Home Page.		
HCBS Incident Reporting Requirements - Who to	9/15/2014	This form is a list of Incident Reporting Requirements that should be incorportated into an agency's policy for the management of Incident / Accident.	Store agency policy in Agency Document Storage for reference.	Per state and agency policy, all required notifications(including date, time and method) can be added to the Notifications section in the GER form. This record is incident specific.		
Notify		All Incident notifications can be recorded in a GER to demonstrate compliance for "Serious injuries" as determined by section 245.91, subdivision 6.		A provider has the option of defining "GER Event Category Rule" to assist with capture of the required notifications. Click here to learn more about GER Event Category Rule.		
HCBS Service Recipient Rights Packet	8/1/2020	Agency Specific format (state or other). (Admission Packet / Annual Planning Packet)	Upload completed agency template & attach to your preferred Therap module. Options include: > Individual Demographic Form > CSSP Custom Form > Individual Support Plan > Individual Document Storage.	There is an available Custom Form / "Admissions Checklist" (with 21 common admission fields) in the Global Template Library for download and use in the agency platform. Use the Rights field to note reception of the this information.		
HCBS Service Recipient Rights Restrictions	7/1/2017	Agency Specific format (state or other).	Upload completed agency template & attach to your preferred Therap module. Options include: > Individual Demographic Form > CSSP Custom Form > Individual Support Plan > Individual Document Storage.	There is an available Custom Form / "Human Rights Consent Review" that is medication specific in the Global Template Library for download and use in the agency platform.		
Intensive Support Self-Management Assessment	7/1/2017	INDIVIDUAL → Care → Global Template Library → Search Custom Form Template. Import available "Intensive Support Self- Management Assessment [Version 2018.4]" Custom Form.	Agencies also upload completed agency template & attach to your preferred Therap module. Options include: > Individual Demographic Form > CSSP Custom Form > Individual Support Plan > Individual Document Storage.	All applied Custom forms can be easily accessed from the Plans Tab on the Individual Home Page.		
			<u>Medication Authorizations</u> → Medication History → MAR Specific authorizations can included in Medication History as comment or attachment.	Therap has a varity of option to collect this information and/or attach agency specific forms and documents. Data can be included in Medication History, standing orders can be attached or included in ISP Plans or IDF		
Medication Administration and Emergency Medical Authorization	7/1/2015	 > Agency Specific format (state or other). > EMERGENCY PSYCHOTROPIC MEDICATION INITIATION Custom Form 	Form can be attached to IDF / ISP Plan or placed in the optional Individual Document Storage module.	"EMERGENCY PSYCHOTROPIC MEDICATION INITIATION" Custom Form is available for agency download and use.		

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			The completed form can be attached to IDF / ISP Plan or placed in Individual Document Storage. Can also attach to GER as needed.	All applied Custom forms can be easily accessed from the Plans Tab on the Individual Home Page.
Medication Administration Review Record	10/31/2013	 > Agency Specific format (state or other). > T-Log > Health Tracking → Medication History > Health Tracking → Medication Review. This can be completed and the MAR can be attached for each month. > Optional MAR Plus module. 	Copy / Paste the required fields from the 245D template into the T-Log body and complete. Use a common Summary for easy searching (e.g. (Month) MAR Review). Search report can be exported to PDF for submission. Export search results "with details" to Excel for submission. If the agency is using MAR Plus, export the completed MAR(s) to PDF and attached to the T-Log for ease of reference. If the agency is not using MAR Plus,	Most Users find this method easier to maintain of completed each month as opposed to quarterly. Use various Therap reports to generate reports to demonstrate capture of these requirements. For Medication Errors, use GER Search or GER Event Summary Report to generate the required detail for the defined time window. This data can also be generated from the optional Health Tracking Business Intelligence module.
			Scan/Attach completed MAR(s) to the T- Log for ease of reference. Medication History: Track medication and treatment orders.	
Medication and Treatment Administration Packet	10/31/2013	 > Health Tracking → Medication History > Medication Administration Record if subscribing to the MAR Plus Module. 	MAR: Prescribed, OTC , PRN meds and treatments	All of the required documentation can be input into the Therap Modules. Reports can be generated from the data to satisfy the reporting requirement(s). (e.g. Health Tracking \rightarrow Health Care Report)
			GER: Track med errors, refusals, adverse effects	
Medication Setup Record	10/31/2013	HEALTH \rightarrow Medication Administration Record / Medication History	MAR: Add Schedule Treatment in MAR to note 'Daily Medication Setup' for each pass.	All of the required documentation can be input into the Therap Modules. Reports can be generated from the data to satisfy the reporting requirement(s). (e.g. Health Tracking \rightarrow Health Care Report). If using ISP Program: ISP data reports.
			Add ISP Program to capture daily Health Supports and include daily Medication Setup review.	To maintain a record of MAR Setup and reviews, output the completed MAR to a PDF, attach to a T-Log with appropriate notes, include "(Month) MAR Review" (or similar) in the Summary field and save. Search for the records using "MAR" in the Summary search field for the individual.
Notice of Service Termination Form	8/1/2020	Agency Specific format (state or other).	Complete the state provided form and attach to the Individual Demographic Form for discharge record needs.	This form is a letter template used to inform the person receiving services or legal representative of service termination and explaintion as to why.
Notice of Temporary Service Suspension Form	8/1/2020	Agency Specific format (state or other).	Complete the state provided form and attach to the Individual Demographic Form for discharge record needs.	This form is a letter template used to inform the person receiving services or legal representative of service termination and explaintion as to why.

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				Instructional document as to what is required for the Person Centered Plar and Service Delivery needs.
Person-Centered Planning and Service Delivery Requirements	10/31/2013	N/A	N/A	If using the Individual Support Plan, use the directives to capture the plan i the Narrative Section of the ISP Plan.
				Consider the optional Charting the LifeCourse module(s) for PCP development. Charting the LifeCourse is a person-centered planning framework developed by the Charting the LifeCourse Nexus.
				Click here to learn more about Charting the LifeCourse (CtLC).
			Complete the state provided form and	Complete the state provided form and attach to the Individual Demographi
Policy Receipt and Signature Page	7/1/2017	Agency Specific format (state or other).	Complete the state provided form and attach agency's determined / preferred	Form for admission record needs.
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Agency specific format (state of other).	location.	Complete the state provided form and store in Individual Document Storag for admission record needs.
Program Abuse Prevention Plan (PAPP)	7/1/2015	Agency Specific format (state or other).	Complete the state provided form and store and attach to a T-Log (without an Individual) for storage / reference needs. Use a defined Summary for ease of searching.	This form is Program / Site (facility) specific. Not Individual specific.
			Complete the state provided form and store in Agency Document Storage for PAPP record and reference needs.	
Progress Review Report for Intensive Support Services	8/1/2020	> Agency Specific format (state or other).	ISP Data Programmatic Report and attach to the appropriate Individual Support Plan.	This report is best produced with the ISP Data Programmatic Report. The Programmatic Report contains more information than the identified requirements.
	-, -,	> ISP Data Programmatic Report	Complete the state provided form and attach to the appropriated CSSP Custom Form.	Recommend attaching report PDF to the respective CSSP Custom Form or ISP Plan.
Progress Review Meeting Summary	8/1/2020	 > Agency Specific format (state or other). > Use optional Case Note w/ Questionnaire to create the form within your Therap system. 	This form contains a set of questions to be reviewed during the Progress Review	Supplement this form with an ISP Programmactic Report for the specific window of time.
			Meeting. Complete this form and attached to the agency's defined location within the Therap System.	The optional Case Note / Questionnaire can be used to create / emulate any form. <u>Click here to learn more about the Case Note module.</u> Click here to learn more about the Questionnaire module.
				Available MN Custom Forms for Psych Meds:
<u>Psychotropic Medication Use and Monitoring</u> <u>Record</u>	ng10/31/2013	> Agency Specific format (state or other).	In Custom Forms for download and addition to your Therap platform.	> INFORMED CONSENT FOR THE ADMINISTRATION OF PSYCHOTROPIC MEDICATION(S)
		> Use available Custom Forms: INDIVIDUAL \rightarrow Global Custom Form Template Library \rightarrow Search Custom Form Template \rightarrow Keywords: 245D, MN, Minnesota	If using agency specific format, complete the form as required and attach or store within Therap as determined by the agency.	 > Appendix 1 Psychotropic Medication Use Checklist (PMUC) > Behavioral Support Plan when Psychotropic Medication(s) are Prescribed > EMERGENCY PSYCHOTROPIC MEDICATION INITIATION, PSYCHOTROPIC MEDICATION REVIEW.
				Global Custom Form Template Library—Search Custom Form Template \rightarrow Keywords: 245D, MN, Minnesota

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Quality Management Evaluation and Program Improvement Plan	8/1/2020	Agency Specific format (state or other).	Agency Specific. Place in Agency Document Storage for reference. Complete the state provided form and store and attach to a T-Log (without an Individual) for storage / reference needs. Use a defined Summary for ease of searching.	This form is Program / Site (facility) specific. Not Individual specific.
Release of Information Authorization	10/31/2013	Agency Specific format (state or other).	Attach completed form in the agency's preferred method: > Attach to IDF. > Attach to the ISP Plan. > Attach to the appropriate CSSPA Custom Form. > Store in Individual Document Storage. > Attach to T-Log. > Optional Health Plus → Consents & Authorization Module. Photo release Custom Form available for	This is a generic form that the agency can modify for a variety of records [i. e., bank statements, health diagnosis, medical records, personal information]. The completed Release Form can be scanned / attached to the agency's preferred method of storage / access.
Residency Agreement	3/1/2017	Agency Specific format (state or other).	 import to your Therap system. Attach completed form in the agency's preferred method (typically with an Admission Packet): > Attach to IDF. > Attach to the ISP Plan. > Attach to the appropriate CSSPA Custom Form. > Store in Individual Document Storage. > Attach to T-Log. 	Effectively, this form emulates a lease type of agreement between the Individual and a landlord or provider.
Satisfaction Evaluation	10/31/2013	 > Agency Specific format (state or other). > Case Note / Questionnaire > ISP Program / ISP Data > Data Driven Outcomes w/Business Intelligence 	 > IDF > IDF > ISP Plan > Appropriate CSSPA Custom Form > Individual Document Storage. > Create ISP Program to collect data as needed (e.g. annual meeting prep). > Use Case Note / Questionnaire to record survey results. > Use of Data Driven Outcomes to easily view the Individual's results of overall 	The survey can be emulated with the optional Case Note / Questionnaire modules if the provider wants to capture this data directly in Therap. It is common is to see the agency complete form and attach to their preferred location within their Therap system. The optional Data Driven Outcomes with Business Intelligence will allow the provider to drill into ISP Data to the Individual level and use collected data to support any survey / satisfaction survey results. Click here to learn more about the Data Driven Outcomes module.
Service Admission Checklist for Intensive Services	8/1/2020	Agency Specific format (state or other).	Attach completed form in the agency's preferred method (typically with an Admission Packet): > Attach to IDF. > Attach to IDF. > Attach to the ISP Plan. > Attach to the appropriate CSSPA Custom Form. > Store in Individual Document Storage.	There is an available Custom Form / "Admissions Checklist" (with 21 common admission fields) in the Global Template Library for download and use in the agency platform. While not MN specific, this has the capability to

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Service Recipient Information Cover Sheet	7/1/2017	$INDIVIDUAL \rightarrow Individual Demographic Form$	IDF (Individual Demographic Form)	The IDF is a comprehensive "face sheet" that will encompass all of the information stated as "required" by 245D.	
Service Recipient Record Checklist	10/31/2013	Agency Specific format (state or other).	Upload & attach to IDF or ISP Plan / ISP Plan inclusion or update / Individual Document Storage.	All 14, 245D documentation requirements are housed within Therap, in either the specific modules and/or attached agency specific records (individual or otherwise). Much of the data can be output in various Therap generated reports.	
Staff Annual Training Record	8/1/2020	AGENCY \rightarrow Training Mangement System	employee files.	The Training Management System (TMS) has been designed to help providers monitor and manage staff training, and communicate information	
	8/1/2020	Agency Specific format (state or other).	All training records and certifications can be managed and stored in the Training	about classes, certification, and expiration to all the people involved. <u>Click here to learn more about TMS.</u>	
Staff Orientation Record	8/1/2020	AGENCY \rightarrow Training Mangement System	employee files.	The Training Management System (TMS) has been designed to help providers monitor and manage staff training, and communicate information	
		Agency Specific format (state or other).	All training records and certifications can be managed and stored in the Training	about classes, certification, and expiration to all the people involved. Click here to learn more about TMS.	
	8/1/2020	entered into an Individual Specific	Mangamant System /TMS) modula	The agency should "map" which form line items will be placed into what ISP Program fields to establish an internal best practice and consistancy.	
Supports and Outcome Methods for Intensive Support Services			The items listed in this form can be entered into an Individual Specific ISP	Examples: <u>Person-Centered Outcome</u> → "Long Term Objective" or "Reason for Program"	
		Agency Specific format (state or other).	Program for goals and supports.	<u>Criteria for Achievement</u> \rightarrow Criteria for Completion	
				Identify required equipment and materials — Materials Required	
				Create an ISP Program Template for internal reference.	
Variance Request DHS-3141	8/1/2020	MN OIG Specific Form	Attach completed form in the agency's preferred method. Suggestions > Attach to IDF. > Attach to the ISP Plan. > Attach to the appropriate CSSPA Custom Form. > Store in Individual Document Storage. > Attach to T-Log.	MN OIG tends to require use of their format and forms.	

Click here to access HCBS intensive services sample policies - 245D providers from the MN DHS website.

Searching Therap's Global Template Library for Custom Forms: Individual \rightarrow Global Template Library \rightarrow Search Custom Form Template. Search by common phrase, keyword, template name or Form ID. Click here to learn more about the Global Template Library for Custom Forms.

Custom Forms in Therap, specific to Minnesota 245D requirements available for download to the agency platform: (Keyword: 245D, MN, Minnesota)

FORM TITLE (Note: Some forms were created for older regs. e.g. 245B, etc.)	FORM ID	
> 45 Day Meeting Summary	GCTL-JD74TCNZF5SNE	
> Appendix 1 Psychotropic Medication Use Checklist (PMUC)	GCTL-8E32V9GLMH	
> Behavioral Support Plan when Psychotropic Medication(s) are Prescribed	GCTL-8E32HNBC86	
> Coordinated Service and Support Plan (CSSP) Addendum Summary [Version: 2020.2]	GCTL-J454VURY8FLPQ	(outdated)
> DYSKINESIA IDENTIFICATION SYSTEM: CONDENSED USER SCALE (DISCUS)	GCTL-A5X26628XH	
> EMERGENCY PSYCHOTROPIC MEDICATION INITIATION	GCTL-93U2V7QRTE	

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by MIN DHS	
> Individual Abuse Prevention Plan (IAPP) [Version: MN2018.4]	GCTL-G6K4VW4YCPJVP
> Informed Consent For The Administration of Psychotropic Medication(s) [Version:2013.3]	GCTL-B5G3F72BCM
> Intensive Support Self-Management Assessment [Version 2018.4]	GCTL-G6E4RLJW3PMRY
> MINIMAL EFFECTIVE DOSE (M.E.D) DELETION	GCTL-8DC2YZ8FFE
> PSYCHOTROPIC MEDICATION REVIEW	GCTL-8DW2JCD4BC
> Risk Management Assessment and Plan	GCTL-A3T2VDEMBW

DISCLAIMER: This document was developed to share 245D documentation solutions from Therap outputs as identified by members of the MN Therap User Community. Updates are completed as changes are brought to the attention of Therap by the MN Therap User Community. It is subject to change without notice. Updated versions will be made available upon request.

While these solutions have been, and are, successfully used by MN THerap Provider Users across the state, it is possible that some counties may require use of the templates provided by MN DHS.

Any information, support services or advice related to functionality of Therap Services' products is for general guidance only. Care providers are expected to know the procedures, practices and terminology required to provide care for the individuals they serve.

Using Therap should neither circumvent nor take precedence over required care, nor should it impede the human intervention of care providers in a manner that would have a negative impact on any individual's well being.

Seek professional advice on specific issues and their impact regarding any individual or entity. No liability can be accepted for any errors or omissions or for any person acting or refraining from acting on the information provided in these materials and/or presentations.

Any discussion of future functionality is intended for informational purposes only. It is not a commitment to deliver any material, code, or functionality, nor should it be relied upon in making purchasing decisions. The development, release, and timing of any features or functionality described is at the sole discretion of Therap.