



**CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF THE SECRETARY**

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Contract Correspondence Transmittal (CCT)

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Key Words/Phrases: Rehabilitative Services Monthly Report	
Attachments/Forms: DPP-1294A Rehabilitative Services Monthly Contact Report; DPP-1294A Rehabilitative Services Monthly Contact Report Instructions for Completion; DPP-1294A Rehabilitative Services Monthly Contact Report Sample; DPP-1294B Rehabilitative Services Monthly Progress Report; DPP-1294B Rehabilitative Services Monthly Progress Report Instructions for Completion; DPP-1294B Rehabilitative Services Monthly Progress Report Sample	

Dear PCC/PCP Provider,

After further consideration of information contained within the issuance of CCT 15-02, the current DPP-1294 will be split into two distinctive forms to reflect monthly contacts and monthly progress:

- The DPP-1294A Rehabilitative Services Monthly Contact Report is an optional form and will relate to visits. Regardless of whether or not the provider chooses to use the paper version of the DPP-1294A, information contained within the form must be complete and **entered into PCC Tracking by the 4th of each month** to reflect caseworker visits.
- The DPP-1294B, Rehabilitative Services Monthly Progress Report is a required form and must be completed and submitted to the DCBS worker by the 15th of each month.

It is our intent to alleviate concerns expressed by providers, while working within DCBS expectations. If you have any questions, please contact Christa Bell at Christa.Bell@ky.gov.

