User Name: margarita.osipova.nyc
Program: CMA - JASA Storefront - 2MG
User Role: Program Admin

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peerplace
the human services connection

NYC DEPARTMENT FOR THE AGING:
Senior Tracking, Analysis and Reporting System (STARS)

Test, Test
Client ID: 00642-02293-1500137953
DOB: 07/02/1921
Cell: 917-123-8888
2 Lafayette Street
NEW YORK, NY 10007

Home Care Plan

- Home Care Plan

CMA Referral Date (mm/dd/yyyy):	06/29/2023
Case Manager Name:	Alan Hom
Case Management Agency:	CMA - CCNS Benson Ridge - 2MH
Primary Language:	Sanskrit
Service Type:	Homemaker/Personal Care
Frequency:	Weekly
Authorized Hours:	12
Cost Share Amount *:	10.00
Cost Share Monthly Maximum *:	400.00
Contribution Amount *:	0.00

Note ☐ Home Care Service Start Date is entered by the Home Care Provider

Home Care Service Start Date(mm/dd/yyyy):	
Service Never Started:	

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