

	<b>Addictive and Mental Disorders Division</b> Severe and Disabling Mental Illness, Home and Community Based Services Waiver Manual
	<b>Date effective:</b> July 1, 2020  <b>Date revised:</b>
<b>Policy Number:</b> <i>HCBS SDMI 110</i>	<b>Subject:</b> Wait List Scoring

### Definition

Members wait list score is determined using a combination of the Level of Care screening completed by Mountain Pacific Quality Health and the Level of Impairment screening completed by the appropriate entity as described on the form. If members have the same wait list score, they are then placed on the list first come first served.

### Wait List Scoring

#### **Level of Care Scoring:**

- (1) Level of Care screening is scored under the Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL) section of the level of care document, there is a total of 24 self-performance tasks listed (first column).
- (2) Self-performance tasks are scored by Mountain Pacific Quality Health (MPQH) Nurse using the follow metric:
  - 0-Independent
  - 1-Stand by Assist
  - 2-Limited Assistance
  - 3-Extensive Assistance
  - 4-Total Dependence
  - 5-Age Appropriate
  - 6-Unknown
- (3) On the level of care form, only metrics 2, 3, and 4 are applicable.
- (4) The case management team (CMT) must add the instances of the metric number of 2, 3, and 4 listed under self-performance, this is the members level of care score for the purpose of the waitlist.
- (5) The minimum score possible is 0, the maximum score is 24.

**Level of Impairment Scoring:**

- (6) The Level of Impairment form has eight areas that are scored.
- (7) Each area is scored using a metric:
  - 0-No Problems
  - 1-Mild Impairment
  - 2-Moderate Impairment
  - 3-High Impairment
  - 4-Severe Impairment
  - 5-Grave Impairment
- (8) The CMT must add the 8 areas to determine an overall score for the Level of Impairment.
- (9) The minimum score possible is 0, the maximum score is 40.
- (10) The CMT must then add the two scores together to determine the members placement on the wait list. The maximum score from both assessments is 64.
- (11) Members must be placed on the wait list in order of their assessed need.
- (12) If members have the same combined total score, they would then be placed in the order of first come, first served.
- (13) Members must be selected from the wait list in order of their assessed need, members with the highest score first.
- (14) Members placed on the wait list must be referred to other community resources as identified by the CMT.
- (15) CMTs must contact members on the wait list every 90 days and document the following information in the care management system:
  - (a) is the member still in need of services;
  - (b) it is suspected that the members level of care has changed, if so rerefer to MPQH to complete a new LOC;
  - (c) what service/s does the member need; and
  - (d) what resources has the member been referred to.
- (16) A member may be referred, either through self-referral or other referral, to the Severe and Disabling Mental Illness waiver multiple times. Each time a member is referred, the level of care and level of impairment form must be completed.

- (17) The member may be removed from the wait list under the following circumstances:
- (a) the member requests to be removed from the wait list. The request, if not in writing, must be thoroughly documented to reflect the date, time, and nature of the request;
  - (b) the member moves to another state;
  - (c) the member is deceased; or
  - (d) the CMT has attempted to contact the member a minimum of twice per quarter for 12 months. The CMT must document all attempts to contact the member which includes the date, time, and method of the contact attempt (i.e. in person or by phone).
- (18) The CMT must notify a member if they remove a member from the wait list for any reason by sending the Letter of Notification DPHHS AMDD 144, found in the care management system, at least ten days prior to the action.