

Priority of Need FAQ

Why does the Division of DD require a prioritization of need assessment to access services?

The Olmstead Supreme Court Decision in 1999 re-affirmed the right of people with disabilities to have access to programs and services in the most integrated setting. A series of federal laws dating back to Civil Rights legislation in the 1960s, subsequently the Individuals with Disabilities Education Act, and then the Americans with Disabilities Act have affirmed that it is discrimination to segregate people on the basis of a disability. The Supreme Court Decision, filed on behalf of two women in a state facility in Georgia who were denied the opportunity to live in the community, concluded that people with disabilities have a right to services in the most integrated setting as long as their needs can be met safely. The Supreme Court went on to say that a state might have a waiting list for home and community-based services as long as the waiting list moved at a reasonable pace and had a method to prioritize access for people who wished to transition from a facility and for those in the community, but not yet receiving services, with the most urgent needs to prevent them from entering a facility.

How did Missouri develop the prioritization of need process?

Shortly after the Olmstead Supreme Court Decision, the Missouri Division of Developmental Disabilities, with input from SB 40 Boards and community providers, researched prioritization of need protocols and assessment instruments in other states and developed a tool that was initially implemented in 2000. The instrument and protocol was then codified in state regulations in 2006.

Why did the division make changes in the PON instrument?

A stakeholder group including community providers, SB 40 boards and division staff met several times in 2007 and recommended studies be conducted to test the instrument for reliability (is the scoring process accurate) and validity (does it ask the right questions) and inter-rater reliability (is the score consistent when more than one person completes the assessment). In late 2008, the division, using CMS Real Choice Systems Transformation Grant funds and through competitive bid process awarded a contract to The Lewin to assist in reviewing the instrument, recommending improvements, and then conducting field tests for validity and reliability.

Cynthia Gruman, Ph. D., who had experience in other states developing prioritization of need protocols was the project director. A workgroup comprised of representatives from MACDDS and MARF, parents, and state staff met with Dr. Gruman throughout 2009 and made recommendations for a comprehensive questions that would more accurately determine the type of support needs, and more important, the level of unmet need. The instrument was then field tested during the spring and summer of 2009. During 2010 and 2011, representatives of SB 40 boards assisted the division to draft an amendment to the regulation.

Did other stakeholders have an opportunity for input?

The draft regulation amendment and revised PON assessment tool was posted on the division's website during the summer of 2011 for informal review and comment. The formal regulation amendment was then filed with the Secretary of State in the winter of 2012, published in the Missouri Register for public comment, a final order of rulemaking filed during the summer of 2012. The revised instrument has been published in the Code of State regulations and is effective September 30, 2012.

Why has the instrument been incorporated into CIMOR?

Using CIMOR enables the scoring to be calculated by the system, and will reduce the potential for mathematical errors. CIMOR will also enable electronic transmission from the support coordinator, who completes the form with input from the participant, family and others, to the Regional Office for final approval.

Why can't the SB40 UR Committees verify and score PON's?

CMS requires conflict free services (service decisions that are separated from service provision). Per the waiver agreements between the Division of Developmental Disabilities and CMS:

Appendix B: Participant Access and Eligibility, B-3, "Number served":

f. Selection of Entrants to the Waiver. Specify the policies that apply to the selection of individuals for entrance to the waiver:

Division of DD's Utilization Review (UR) Process, **conducted by regional offices,** prioritizes the needs of individuals in order to identify and serve individuals with the greatest needs first. The UR process is applied to all new service plans and new/increased budgets developed by planning teams. The UR process is standardized for use at all regional offices. Service plans and budgets developed by Targeted Case Management Entities are also subject to this review process. The process rates priority of need and assigns points with a score of 12 representing individuals who have the greatest need in the State.

Individuals with scores of 12 are served first statewide before individuals with scores of 11, 10, etc. are served. Should there be any change in the person's status during this time, the Utilization Review Process will be updated in order to reflect the individual's current needs.

Why are some tabs or questions unavailable? There are items that are grayed out and it won't let me score those.

The PON system is designed so that items that are inappropriate due to the individual's age are not available for scoring. For example, very young children already require intensive supervision, regardless of their abilities.

How quickly and where can I find the PON score after submitting it for verification?

The PON score will be available in the PON tab of Screenings. It is available immediately after the Regional Office verifies the PON for that individual. This generally should occur within a few days of submission.

How can I know what the PON score will be before I submit it to the Regional Office?

Until the RO verifies the PON, no one, including the RO, will know what the score will be.

How are the scores calculated?

The Lewin Group developed the scoring formula, which is driven by unmet needs. The scoring of the PON is automatic, without risk of arithmetical errors.

If the individual disagrees with the PON score, are there appeal rights?

The PON score cannot be formally appealed through the Department of Mental Health's appeals process. However, if you disagree with the accuracy of the PON score, you may request a review from the local Regional Director.

Will a person taking the new PON receive the same score they would have had on the old PON?

Not necessarily. Some individuals would get a higher or lower score with the new PON, as the instruments differ. The new PON is a more reliable instrument than was the older version, so that subsequent administrations of the test are likely to be less variable than that which would have occurred with multiple administrations of the old test. The new instrument more accurately identifies and gives scoring weight to unmet need.

If an individual already has a PON score from the old instrument, do they have to retake the test?

No. Individuals who have received a PON score as of 9/30/2012 may keep their score or ask to be tested through the new instrument. If the new PON score is less than their previous score, they may keep the higher of the two.

Does the Individualized Support Plan always have to be submitted with the PON?

Yes. The Regional Office will check the documentation within the ISP to verify the responses on the PON.

Can a user save an incomplete PON, then return to work on it again?

Yes

Who has authority to edit the PON?

Before a PON is submitted, the SC or TCM can make any edits necessary.

Once a PON has been submitted, only the RO staff have the ability to make edits.

Will the RO change the score on the PON?

No. If the RO UR Chair has a question about an item on the PON, they will contact the SC or TCM to discuss their concerns. If the issue is minor, such as a reference to the wrong page or paragraph, the UR Chair can make the change in the PON. If the issue is more significant, and the UR Chair and SC/TCM cannot come to an agreement, then the Regional Office director will make the final determination. The PON will remain unscored until that decision.

How often are you supposed to administer the PON?

That has not changed. Give a new PON whenever an individual has a significant life event.

Is coordinating and completing the PON billable?

It is billable for any Medicaid eligible individual.

Can the evaluator print out a paper copy, and later enter those responses into CIMOR at a later date?

Yes

What date should the evaluator enter into CIMOR, the date the PON was administered or the date it was entered into CIMOR?

Use the date administered.

Is there any difference in how the PON score interacts with the wait lists?

No

The previous PON score would generate a score and a letter that corresponded to the area in which the most significant impairment was found. What does the updated PON provide?

The newer PON does not specify the score by the area, so there are only "10's", for example. In CIMOR, where there is a space to enter a letter, use "Z" in that space.