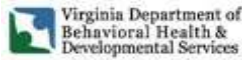


SOP-Screening for Admission Into An Intermediate Care Facility



DBHDS Guidance

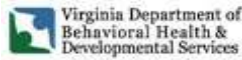
I. Purpose

To establish standard criteria to complete screening and determine eligibility for admission to Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID).

II. Definitions.

- a. **Individual:** This means a person who is seeking admission into an ICF/IID.
- b. **Department of Medical Assistance Services (DMAS):** The agency that administers Medicaid in Virginia.
- c. **Department of Behavioral Health and Developmental Services (DBHDS):** The agency responsible for the administration of Virginia's system of substance abuse, mental health and developmental disabilities services and supports.
- d. **Family Resource Consultant Manager (FRCM):** This means the central office position responsible for supervising the Family Resource Consultant and serves as the lead staff for the screening process.
- e. **Family Resource Consultant (FRC):** This means the central office position that is responsible for coordinating, scheduling, administering and/or reviewing the Virginia Individual Developmental Disability Eligibility Survey (VIDES) for individuals seeking admission into an ICF/IID.
- f. **Community Services Board (CSB):** This means the public body established pursuant to §37.2-501 or §37.2-602 of the Code of Virginia that serves the area in which an adult or in which a minor's parent or guardian resides, and that provides support coordination and discharge planning support.
- g. **Personal Support Team (PST):** This means a team, formally known as an interdisciplinary team (IDT), of professionals, paraprofessionals, and non-professionals who possess the knowledge, skills, and expertise necessary to accurately identify a specific individual's comprehensive array of needs and design a program that is responsive to those needs. At a minimum, the PST includes the individual, AR, CSB support coordinator, and other invited members of the individual's interdisciplinary team or those involved in the individual's life.
- h. **Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID):** A facility, of no less than four (4) beds, that meets Federal Conditions of Participation and has as its primary purpose the provision of health or rehabilitation services to individuals with developmental disabilities or related conditions receiving care services under the Medicaid program.

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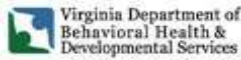


- i. **Regional Support Team (RST):** A group of professionals with knowledge and expertise related to services for individuals with developmental disabilities. This team is established for the purpose of providing recommendations to overcome barriers to supporting these individuals in the most integrated community settings consistent with their needs and informed choice.

III. Procedures:

- a. The screening process for entrance into an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) shall be coordinated through the Department of Medical Assistance Services (DMAS) or its designee.
- b. The Department of Behavioral Health and Developmental Services (DBHDS) shall serve as the DMAS designee.
- c. DBHDS shall accept requests for ICF/IID screenings and ensure that, within seven calendar days of the referral, those screenings are scheduled.
- d. Referrals for ICF/IID admission screenings that are considered emergencies due to abuse, neglect, imminent homelessness, or other circumstance placing the individual at immediate risk, will be scheduled and completed within 48 hours of receipt of the request.
 - i. Screenings will include completion of the Virginia Individual Developmental Disability Eligibility Survey (VIDES) as described in section IV of this SOP.
 - ii. If a VIDES has already been completed by the Community Services Board (CSB) within **90** days of an individuals' request for admission into an ICF/IID, the CSB will make it available to DBHDS for review. DBHDS will complete a review of the completed VIDES within seven calendar days of receipt from the CSB.
 - iii. DBHDS shall also explore and review more integrated community options with the families/guardians of children at the time of screening. Additionally, DBHDS will share information regarding the Regional Support Team (RST) with all individuals.
 - iv. DBHDS will coordinate the completion of a referral to the RST
 - v. DBHDS will send a copy of the VIDES, or notice of a concluded review of a previously completed VIDES, to the appropriate CSB and ICF/IID within seven calendar days of completion.
- e. DBHDS will process all admission packet paperwork from ICF/IID providers effective September 6, 2022 (See Section V).
- f. An Admission Awareness Letter will be sent to the CSB advising that a child from their catchment area is seeking placement in an ICF/IID. The letter will include contact information for the social worker and request that the child be added to the waiver waitlist. A copy of the VIDES will be provided for the CSB's record.

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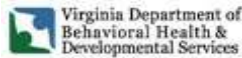


- g. DBHDS will collect information from the family regarding the reason ICF/IID placement is being sought for children.

IV. Virginia Individual Developmental Disability Eligibility Survey (VIDES):

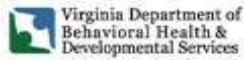
- a. Level of dependency in each category is indicated from the most dependent to the least dependent. In some categories, the dependency status is rated by the degree of assistance required. In other categories, the dependency is established by the frequency of a behavior or the ability to perform a given task.
- b. The adult-individual (18 years of age and older) shall demonstrate an overall total level for the VIDES assessment of dependency in three or more of the skills or statuses listed in subdivisions 1 through 8 of this subsection. To demonstrate a skill or exhibit a status, the individual shall meet the criteria for the dependency level described for that skill or status.
- c. Children (ages three years through 17 years old) and infants (younger than three years of age) shall demonstrate an overall total level for the VIDES assessment of dependency in two or more areas for the VIDES specific for the child's or infant's age.
 - i. **Health status.** To meet the criteria for this category:
 - 1. Any two or more questions shall be answered with a score of 4 for the Adult VIDES;
 - 2. b. Any one question shall be answered with a score of 4 for the Child VIDES (ages 3-5 years old);
 - 3. c. Any two or more questions shall be answered with a score of 4 for the Child VIDES (ages 6 through 17 years); or
 - 4. d. Any one question shall be answered with a score of 3 or 4 for the Infant VIDES.
 - ii. **Communication skills**
 - 1. Any three or more questions shall be answered with a score of 3 or 4 for the Adult VIDES;
 - 2. b. Any three or more questions shall be answered with a score of 3 or 4 for the Child VIDES (ages 3 or older);
 - 3. c. Any two or more questions shall be answered with a score of 3 or 4 for the Infant VIDES (ages 6 months or 2 years of age); or
 - 4. d. Any one or more questions shall be answered with a score of 3 or 4 for the Infant VIDES (ages one year or 18 months).
 - iii. **Task learning skills**
 - 1. Any three or more questions shall be answered with a score of 3 or 4 for the Adult VIDES;
 - 2. b. Any one question shall be answered with a score of 3 or 4 for the Child VIDES (ages 3-5 years old);
 - 3. c. Any two questions shall be answered with a score of 3 or 4 for the Child VIDES (ages 6-9 years old);
 - 4. c. Any three or more questions shall be answered with a score of 3 or 4 for the Child VIDES (ages 10 through 17 years);

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5. d. Any one question shall be answered with a score of 3 or 4 for the Infant VIDES (age 6 months); or
 6. e. Any two or more questions shall be answered with a score of 3 or 4 for the Infant VIDES (ages 12 months and 18 months).
- iv. **Personal/self-care skills**
1. Any one question shall be answered with a 4 or 5 for the Adult VIDES; or
 2. b. Any one question shall be answered with a 4 or 5 for the Child VIDES (ages 3 years through 17 years).
- v. **Motor skills.**
1. Any two or more questions shall be answered with a 4 or 5 for the Adult VIDES;
 2. b. Any two or more questions shall be answered with a 4 or 5 for the Child VIDES (ages 3 through 17 years);
 3. c. Any two or more questions shall be answered with a 3 or 4 for the Infant VIDES (ages 6 months, 18 months or 2 years); or
 4. d. Any one or more questions shall be answered with a 3 or 4 for the Infant VIDES (ages 12 months).
- vi. **Behavior status**
1. Any one question shall be answered with a 3 or 4 for the Adult VIDES;
 2. b. Any one question shall be answered with a 4 or 5 for the Child VIDES (ages 3 through 17 years);
 3. c. Any two or more questions shall be answered with a 3 or 4 (in the Social/emotional category) for the Infant VIDES (ages 6 months, 18 months or 2 years); or
 4. d. Any one or more questions shall be answered with a 3 or 4 for the Infant VIDES (ages 12 months).
- vii. **Community living skills**
1. Three or more questions shall be answered with a 4 or 5 for the Adult VIDES;
 2. b. Any two or more questions shall be answered with a 4 or 5 for Child VIDES (ages 6 years through 7 years); or
 3. c. Any three or more questions shall be answered with 4 or 5 for the Child VIDES (ages 8 years through 17 years).
- viii. **Self-direction skills.**
1. Any three or more questions shall be answered with a 2 for the Adult VIDES;
 2. b. Any one question shall be answered with a 2 for the Child VIDES (ages 10 years and 11 years); or
 3. c. Any two or more questions shall be answered with a 2 for the Child VIDES (ages 12 years through 17 years).

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V. Admission to an ICF/IID

- a. Effective September 6, 2022, DBHDS will receive and process admission paperwork for the ICF/IID providers.
- b. Providers will forward all adult and children ICF/IID admission packets to DBHDS to include the DMAS 225, DMAS 121, MAP 119, and MAP 121A.
- c. Each admission packet will be paired with the VIDES and checked to ensure that all sections are complete and accurate.
- d. A quality check of the forms will be conducted to ensure that the physician signatures coincide with the date of admission to the facility; not prior to or thereafter.
- e. DBHDS will confirm admission date of the individual with the appropriate ICF/IID facility point of contact.
- f. DBHDS will communicate with the DMAS Contract Monitor requesting that DMAS update the level of care (LOC) in the Medicaid Enterprise System (MES).
- g. The DMAS Contract Monitor will update the LOC in MES. Subsequent to the update, the DMAS Contract Monitor will communicate with DBHDS when the LOC update in MES has been completed.
- h. DBHDS will notify all ICF/IID providers in the Commonwealth of Virginia to begin forwarding any new admission packets to DBHDS henceforth and will provide contact information.
- i. Upon an individual's admission to an ICF/IID, the facility shall perform an assessment of the individual consistent with 42 CFR 443.20.