

Policy Transmittal Aging and People with Disabilities



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Number: APD-PT-19-019

Issue date: 6/18/2019

Topic: Long Term Care

Due date:

Transmitting (check the box that best applies):

- New policy
 Policy change
 Policy clarification
 Executive letter
 Administrative Rule
 Manual update
 Other:

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Type B | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children's Intensive In Home Services |
| <input type="checkbox"/> County DD program managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> ODDS Children's Residential Services | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> Child Welfare Programs | |

Policy/rule title:	Mental or Emotional Disorders (MED) Referral Process Update		
Policy/rule number(s):	411-015-0005 (30), 411-015-006(3)(c), 411-015-0015	Release number:	
Effective date:	Immediately	Expiration date:	
References:	APD-PT-18-049		
Web address:			

Discussion/interpretation: This transmittal provides a policy change on when a MED referral is required as outlined in [APD-PT-18-049](#). The change is to help streamline and improve the process to better serve consumers by making accurate and appropriate eligibility determination decisions.

The policy change below applies to **new applicants** only. The criteria for redeterminations remains the same as outlined in [APD-PT-18-049](#).

As stated in [APD-PT-18-049](#), case managers must make a MED referral for all consumers under the age of 65 that are assessed as a SPL 1-13 if any one of the

following applies:

- The individual has a diagnosis of an ongoing mental, emotional, and/or substance use disorder (even if the consumer may also have physical needs); or
- The individual has no known cause for their assessed cognitive impairment.

Local offices may now make eligibility determinations without a MED referral for individuals who are:

- Enrolled in hospice;
- Requiring ventilator care due to a medical issue;
- With quadriplegia or substantially similar condition; or
- In a coma.

Local offices may make this decision only if the service needs are based on these conditions and the individual is not experiencing active delusions.

If there are questions about whether a case should be referred, the MED screener will provide case consultation via email. For case managers that would like to consult on a case to see if a MED referral is required, please email the following information with the subject line "Case Consult" to MED.SPD@dhsosha.state.or.us:

*Applicant name and prime number

*Summary of known case information that is not available in case notes (including psychiatric conditions, medical conditions, and what services are already in place)

All other scenarios must be referred for MED review. Some referrals may be determined by the MED screener without Maximus (the contractor for MED reviews) review when medical documentation is provided. Local offices will be notified if a referral has been determined by central office or accepted by Maximus for full MED review within 5 days of receipt of the referral.

In summary:

- Local offices can make the MED determination if the person meets the criteria in this transmittal.
- Central office may make the determination based on information received without requiring contractor visit within 5 days of referral.
- Central office will make the determination base on contractor visit, review, and recommendation within 30 days of referral.

Implementation/transition instructions: Local offices should use the new criteria for MED referrals effective immediately.

Training/communication plan: Frequently asked questions have been posted to Case Management Tools website on the MED page. Central office consultation is available through the MED.SPD@dhsosha.state.or.us mailbox. Additional training materials are being developed and will be posted on the [MED section](#) of the Case Management Tools website.

Local/branch action required: Implement as outlined

Central office action required: Provide training and technical assistance as needed

Field/stakeholder review: Yes No

If yes, reviewed by: Policy and Operations

Filing instructions:

If you have any questions about this policy, contact:

Contact(s): Bob Weir or Darla Zeisset	
Phone: 971-600-7876 or 503-779-8983	Fax: 503-947-4245
Email: bob.weir@state.or.us	