

§8107. Resource Assessment Process

A. Each community choices waiver applicant/participant shall be assessed using the uniform international resident assessment instrument (interRAI) designed to verify that an

individual meets nursing facility level of care and to assess multiple key domains of function, health, social support and service use. The interRAI assessment generates a score that assigns the individual to a resource utilization group (RUG-III/HC).

B. The following seven primary RUG-III/HC categories and subcategories will be utilized to determine the assistance needed for various activities of daily living (ADLs) and instrumental activities of daily living (IADLs).

1. **Special Rehabilitation.** Individuals in this category have had at least 120 minutes of rehabilitation therapy (physical, occupational and/or speech) within the seven days prior to their interRAI assessment.

2. **Extensive Services.** Individuals in this category have a medium to high level of need for assistance with ADLs and require one or more of the following services:

- a. tracheostomy;
- b. ventilator or respirator; or
- c. suctioning.

3. **Special Care.** Individuals in this category have a medium to high level of need for assistance with ADLs and have one or more of the following conditions or require one or more of the following treatments:

- a. stage 3 or 4 pressure ulcers;
- b. tube feeding;
- c. multiple sclerosis diagnosis;
- d. quadriplegia;
- e. burn treatment;
- f. radiation treatment;
- g. intravenous (IV) medications; or
- h. fever and one or more of the following conditions:
 - i. dehydration diagnosis;
 - ii. pneumonia diagnosis;
 - iii. vomiting; or
 - iv. unintended weight loss.

4. **Clinically Complex.** Individuals in this category have the following specific clinical diagnoses or require the specified treatments:

- a. dehydration;
- b. any stasis ulcer. A stasis ulcer is a breakdown of the skin caused by fluid build-up in the skin from poor circulation;
- c. end-stage/terminal illness;
- d. chemotherapy;
- e. blood transfusion;

- f. skin problem;
- g. cerebral palsy diagnosis;
- h. urinary tract infection;

i. **hemiplegia diagnosis.** Hemiplegia diagnosis shall include a total or partial inability to move, experienced on one side of the body, caused by brain disease or injury;

- j. dialysis treatment;
- k. diagnosis of pneumonia;

l. one or more of the eight criteria in special care (with low ADL need); or

m. one or more of the three criteria in extensive services (with low ADL need).

5. **Impaired Cognition.** Individuals in this category have a low to medium need for assistance with ADLs and impairment in cognitive ability. This category includes individuals with short-term memory loss, trouble in decision-making, difficulty in making themselves understood by others and difficulty in eating performance.

6. **Behavior Problems.** Individuals in this category have a low to medium need for assistance with ADLs and behavior problems. This category includes individuals that may have socially inappropriate behavior, are physically or verbally abusive, have hallucinations or exhibit wandering behavior.

7. **Reduced Physical Function.** Persons in this category do not meet the criteria in one of the previous six categories.

C. Based on the RUG III/HC score, the applicant/participant is assigned to a level of support category and is eligible for a set annual services budget associated with that level.

1. If the applicant/participant disagrees with his/her annual services budget, the applicant/participant or his/her responsible representative may request a fair hearing to appeal the decision.

2. The applicant/participant may qualify for an increase in the annual services budget amount upon showing that:

- a. one or more answers are incorrect as recorded on the assessment (except for the answers in the identification information, personal intake and initial history, assessment date and reason, and/or signature sections); or
- b. he/she needs an increase in the annual services budget to avoid entering into a nursing facility.

D. Each community choices waiver participant shall be re-assessed at least annually.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 37:3518 (December 2011), amended by the Department of Health, Bureau of Health Services

Financing and the Office of Aging and Adult Services, LR 44:1896
(October 2018).