

# Children's Long-Term Support Functional Screen Teleconference

Bureau of Children's Services  
Division of Medicaid Services  
February 8, 2024



# Agenda

- Functional screen not functionally eligible (NFE) reviews
- Functional screen data from 2023
- Functional screen reminders
- Functional screen clarifications
- Preview May Children's Long-Term Support (CLTS) Functional Screen (FS) Teleconference
- Resources
- Outreach

# Teleconference Information

## Accessing teleconference materials

- We will send GovDelivery message with a copy of the PowerPoint.
- We will post a recording of this teleconference on our [Vimeo](#) site.

# Functional Screen NFE Reviews

Katie Dill

# Quality Review of Screens

- County waiver agencies (CWAs) conduct an internal quality review of screens with a result of NFE.
- The Bureau of Children's Services (BCS) conducts a quality review of screens with a result of NFE.
- Do not send screen results to iChange unless the NFE is confirmed at BCS.
  - ◆ Follow guidance in [Module 10: Functional Eligibility Results](#) once NFE is confirmed.
- BCS is the state agency responsible for administration of the CLTS FS.

# After NFE Confirmation

- See program-specific manuals and follow policies regarding NFE result.
- See screen lead at your agency with questions.
- Other resources:
  - ◆ CLTS and Children's Community Options Program (CCOP): [DHSBCSTAC](#)
  - ◆ Katie Beckett Medicaid: [DHS Katie Beckett](#)
  - ◆ Comprehensive Community Services (CCS): [DHSDCTSCCS](#)

# Functional Screen Data from 2023

Katie Dill

# Functional Screen Data from 2023

**22,896**

children were screened in 2023

**8%**

of these screens were NFEs reviewed by the  
Functional Screen Team



# Functional Screen Reminders

Katie Dill and Mary Schlaak Sperry

# Topics

- Instrumental activities of daily living (IADLs)
  - Communication
  - Learning
  - Social competency
- Screen correspondence
- SOS HelpDesk
- Social security numbers (SSNs)

# Instrumental Activities of Daily Living

- The functional screen will calculate the child's age and present only the questions that pertain to their age cohort.
- Each instrumental activity of daily living (IADL) section has a guide for reference that gives additional information for each question presented.

Navigation Menu

Instrumental Activities of Daily Living ? Cancel  Reset

None of the IADLs

None of the IADLs below apply

Communication ?

## 6.14 Communication

0-6 mos	6-12 mos	12-18 mos	18-24 mos	24-36 mos	3-4 yrs	4-6 yrs	6-9 yrs	9-12 yrs	12-14 yrs	14-17 yrs	18 yrs +	
												<input checked="" type="checkbox"/> Indicates that the item on the functional screen should be checked. <input type="checkbox"/> Indicates that the item on the functional screen should NOT be checked. An R following an item stands for a receptive skill; An E following an item stands for an expressive skill.
												<b>Does not jabber or babble as if they are trying to say something. (E)</b> <input checked="" type="checkbox"/> Does not make noises as if they are talking. <input checked="" type="checkbox"/> Does not use simple words or sounds meaningfully (mama, papa, baba). <input type="checkbox"/> Uses variations in intonation, sentence patterns (breaks in babble), or multiple consonants sounds.
												<b>Does not respond to simple requests (e.g., no, stop, come here, give me, look). (R)</b> <input checked="" type="checkbox"/> Does not seem to notice that someone has said (signed) something to them. <input checked="" type="checkbox"/> Does not look to familiar people when named. <input type="checkbox"/> Understands the request but does not comply.

# Communication and Learning

- 6.5 Communication and Learning Assessments
- It is important to obtain a release of information (ROI) for other services to gain assessment information.
  - ◆ These assessments can come from school, applied behavior analysis programs, speech language therapy, Birth to 3 Programs.
  - ◆ Utilizing the assessment on the screen.

# Communication

- [6.14 Communication](#)
- There are two categories of questions/assessments:
  - ◆ Expressive
  - ◆ Receptive
- The latest editions of assessments delivered and reported on from the last three years should be used.
- If a norm-referenced assessment is not listed, write it in the “other” section.

# Learning

- [6.15 Learning](#)
- There are two categories of assessments:
  - ◆ Full-scale IQ
  - ◆ Assessment in cognition
- The latest editions of assessments delivered and reported on regarding cognition from the last three years should be used.
- The latest IQ scores should be used on the screen regardless of how long ago they were determined.

# Social Competency

- 6.16 Social Competency
- Social competency evolves and changes over time.
- It is imperative to discuss each social competency question that is presented and not just deficits that were marked on the last screen.

# Screen Correspondence

- Please respond to our email inquiries in a timely manner.
  - ◆ Questions regarding a screen
  - ◆ If eligibility changes
- Check that your email is correct in Functional Screen Information Access (FSIA).
  - Use an agency email when registering for access.
- Questions are always welcome!



# DHS SOS HelpEmail Box Uses

- Technical issues related to the CLTS FS
- Changes in screeners' email or contact information
- Errors with identifying information that the screener is unable to change
- Master Customer Index (MCI) number, level of care, and parental payment liability fee issues in the ForwardHealth CLTS Waiver Enrollment Wizard

# Use of SSN

- SOS HelpDesk wants true SSN used in all cases
- Exceptions:
  - ◆ If child is newborn and SSN has not been received
  - ◆ In cases where a child is adopted (internationally)

# Functional Screen Clarifications

Mary Schlaak Sperry

# Health Related Services Clarifications - Cancer

**Stage 4 Cancer - Not all childhood cancers are staged.**

- Other terms used in records or by providers
- Types and number of interventions

## 8.2 Medical or Skilled Nursing Needs



Medical or Skilled Nursing Needs (Check all that Apply)	<input checked="" type="checkbox"/> Indicates that the item on the functional screen should be met <input type="checkbox"/> Indicates that the item on the functional screen should not be met
<b>Rehabilitation program for brain injury or coma – minimum 15 hours/week</b>	<input checked="" type="checkbox"/> Child has comprehensive home rehabilitation program addressing physical, social, and psychological needs to follow recommended rehabilitation hospital. <input type="checkbox"/> Child has finished inpatient brain injury rehabilitation therapies at home or school. <input type="checkbox"/> Child had a brain injury years ago and receives ongoing care at home and school.
<b>Unable to turn self in bed or reposition self in wheelchair</b>	<input checked="" type="checkbox"/> Child has quadriplegia and cannot turn self over in bed without help (child to need help with ADLs as well.) <input checked="" type="checkbox"/> Child needs someone to reposition them in a wheelchair to prevent skin breakdown. <input type="checkbox"/> Child can reposition self somewhat in a wheelchair at home and school.
<b>Recurrent Cancer</b>	<input checked="" type="checkbox"/> "Recurrent cancer" is written in child's records. <input checked="" type="checkbox"/> Parent can clearly state cancer is "recurrent," or that it has come back. <input checked="" type="checkbox"/> Child was in remission but now cancer is growing again. <input checked="" type="checkbox"/> Child completed chemotherapy last year, but the cancer has come back. <input checked="" type="checkbox"/> Child has had radiation therapy, but the cancer has spread to other parts of the body ("metastasized"). <input checked="" type="checkbox"/> A new kind of cancer has developed, regardless of how long it has passed since the last cancer was treated. <input type="checkbox"/> Child is still in first series of treatment. <input type="checkbox"/> Screener is not sure whether cancer is "recurrent" or not.
<b>Stage IV Cancer</b>	<b>Stage IV ("four") Cancer is particularly life threatening. Treatment for Stage IV Cancer, chemotherapy or radiation treatment is provided primarily for symptom relief and suffering rather than as an anticipated cure.</b> <input checked="" type="checkbox"/> Parents clearly state that M.D. told them the child has Stage IV cancer. <input checked="" type="checkbox"/> "Stage IV" is written in medical records. <input checked="" type="checkbox"/> A health care provider tells the screener that the child has Stage IV cancer. <input type="checkbox"/> Parent says child's prognosis is poor, but has not heard from the doctor.

# Health Related Services Clarifications - Therapy

- Add all sessions of therapy
- Joint sessions can be considered as two
- Group sessions can count if done by qualified provider
- All environments considered
- 15 minutes is considered a session

# Health Related Services -Therapy

## 8.2 Medical or Skilled Nursing Needs

Medical or Skilled Nursing Needs (Check all that Apply)	<input checked="" type="checkbox"/> Indicates that the item on the functional screen should be checked. <input type="checkbox"/> Indicates that the item on the functional screen should NOT be checked.
Ventilator (positive pressure)	<input checked="" type="checkbox"/> Child continually uses an invasive or mechanical volume ventilator, through their tracheostomy tube as the child is unable to breathe on their own. <input checked="" type="checkbox"/> Child uses a mechanical volume ventilator only while sleeping. <input type="checkbox"/> Child uses "C-PAP" or "BI-PAP" (See respiratory treatment below) <i>If ventilator is checked as a Medical Need, the criteria for Tracheostomy also needs to be met.</i>
PT, OT, OR SLP by therapist (does not include behavioral problems)	<input checked="" type="checkbox"/> Child receives PT (physical therapy), OT (occupational therapy), or SLP (speech language pathology) from a licensed therapist or an appropriately supervised therapy aide. <input checked="" type="checkbox"/> Child receives PT, OT, or SLP during the school year but not over the summer, because it is not provided by the school at that time. <input checked="" type="checkbox"/> PT, OT, or SLP has been recommended at a specific frequency but child has not received it yet. <input type="checkbox"/> In-home autism spectrum disorder program. <input type="checkbox"/> Behavioral therapies. <input type="checkbox"/> PT, OT, or SLP has been recommended by a physician but no evaluation of required frequency has been established. <input type="checkbox"/> Exercises done by someone other than a therapist or therapy aide. <input type="checkbox"/> Child sees a therapist less than once a month.  <b>"Less than 6 sessions/week" OR "6 or more sessions/week"</b> Add all three therapy disciplines to count the number of sessions per week. A joint therapy session (e.g., PT and OT together at same time) can be counted as two sessions. Group therapy sessions can be counted as long as led by a qualified professional. Therapy can be provided at any location: home, school, or clinic. A session must be at least 15 minutes long to be counted.

# Health Related Services Clarifications - Therapy Follow Through

- If the child is in therapy, this question should be answered
- If therapy is occurring, there is most likely some follow through
- Consider listed aspects and others
- Review therapy evaluation, notes, and treatment plans if needed



# Health Related Services- Therapy Follow Through

## 8.2 Medical or Skilled Nursing Needs

<b>Medical or Skilled Nursing Needs</b> (Check all that Apply)	<input checked="" type="checkbox"/> Indicates that the item on the functional screen should be checked. <input type="checkbox"/> Indicates that the item on the functional screen should NOT be checked.
<b>PT, OT, SLP therapy follow through: Exercises, sensory stim, stander, serial splinting/casting, braces, orthotics</b>	<p>This item captures a mix of things, all of which should be established by a physician or licensed therapist. Follow the definitions provided below.</p> <p><b>“Exercises”</b></p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Records indicate the exercises are “PT, OT, SLP therapy follow through.”</li> <li><input checked="" type="checkbox"/> Exercises are part of an individualized treatment plan developed from a therapist’s full assessment, and therapist(s) taught caregivers what to do.</li> <li><input checked="" type="checkbox"/> Parents continue to do therapy exercises with their child, as instructed by therapists, although they and child no longer require therapy oversight at this time.</li> <li><input type="checkbox"/> The exercises are general things like taking a walk or riding a bike.</li> </ul> <p><b>“Sensory stimulation”</b></p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> A therapist has taught the family or school staff to do sensory stim for a child with tactile sensitivity.</li> </ul> <p><b>“Stander”</b> (A special positioning device to place a child in an upright position for weight bearing)</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Child is put into a stander for 30 minutes a day.</li> <li><input type="checkbox"/> Child has a stander but doesn’t use it anymore.</li> </ul> <p><b>“Serial splinting or serial casting”</b></p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Child’s parents are doing “serial splinting,” applying specially adjusted splints or bi-valved casts to progressively stretch the child’s muscles to prevent contractures and facilitate treatment.</li> <li><input type="checkbox"/> Child has worn the same splints (e.g., AFOs, KAFOs) for months to prevent contractures. This is not “serial splinting.”</li> <li><input type="checkbox"/> Child is in a total body cast.</li> </ul> <p><b>“Braces, orthotics”</b></p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Child is unable and parents or caregivers must apply braces or orthotics and monitor for skin and nerve involvement.</li> </ul>

# Preview May CLTS FS Teleconference

Mary Schlaak Sperry

# CLTS FS Clinical Instructions Updates - May 2024

- Improve readability and clarity
- Address questions asked by screeners
- Update definitions and terminology for accuracy
- Update policy and screen changes that occurred during unwinding and following the CLTS Waiver Renewal
- New protocol/online forms for screen access

# Resources

Mary Schlaak Sperry

# Resources for Leads and Screeners

- [Learning Center UW-Oshkosh](#)
- [CLTS Functional Screen Clinical Instructions](#)
- [Wisconsin's Functional Screen webpage](#)
- [DHS CLTS FS Staff email](#)
- [SOS Help Desk email](#)
- SOS Phone: 608-266-9198

# Wisconsin Functional Screen Webpage

## Resources for Children's Long-Term Support (CLTS) Functional Screen screeners

- [CLTS FS Clinical Instructions](#) (Updated September 8, 2021)
- [Children's Long-Term Support Functional Screen and Clinical Instruction Updates, P-03083](#) (PDF)
- [Institutional Levels of Care: Children's Long-Term Support Programs in Wisconsin, P-03027](#) (PDF)
- [Sign up for email updates](#)<sup>en</sup>
- Tools and Guides for CLTS FS Screeners
  - [Creating a Document of Age-Dependent ADL and IADL Questions \(FSIA\), P-03470](#) (PDF)
  - [Creating Timeline Reports in Functional Screen Information Access \(FSIA\), P-03295](#) (PDF)
  - [Diagnosis Cue Sheet, P-00920](#) (PDF)
  - [Norm-Referenced Assessment Tools for Communication and Learning, P-00933](#) (PDF)
  - [Paper Form, F-00367](#) (PDF)
- [Screener Certification On-line Course](#)<sup>en</sup>
- [Child Development Modules: Typical and Atypical Development](#)<sup>en</sup>

## CLTS FS teleconferences

Upcoming



Previous



# Upcoming Outreach Dates

Mary Schlaak Sperry

# 2024 Teleconference Schedule

- **CLTS FS Quarterly Teleconference**
  - ◆ May 9
  - ◆ August 8
  - ◆ November 14
- **CLTS Teleconference**  
March 21, 10-11:30 a.m.
- **CLTS Quality Teleconference**  
April 18, 10-11:30 a.m.