

# Children's Functional Screen Teleconference

Bureau of Children's Services  
Division of Medicaid Services  
August 10, 2023

# Agenda

- Teleconference information
- Rescreen reviews
- Katie Beckett Medical Assistance (MA)/Children's Long-Term Support (CLTS) Unwinding update
- Resources
- Upcoming 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.

# Children's Functional Screen Rescreen Review

Katie Dill and Mary Schlaak Sperry

# Module 2.3: Screen Types

(1 of 3)

## Initial Screen

- The first time a screen is created for a new applicant.
- A child has been awaiting enrollment for a Bureau of Children's Services (BCS) program longer than 12 months.
- A child's previous screen was non-functionally eligible (NFE).

# Module 2.3: Screen Types

(2 of 3)

## Rescreen

- A rescreen/recertification/redetermination screen is required every 12 months for as long as a child is enrolled in a long-term support program.
- Rescreens were placed on hold as of March 20, 2020, due to the continuous enrollment requirements for Medicaid under the Families First Coronavirus Response Act (FFCRA).
- Rescreens have resumed as of June 2023, per the child's level of care (LOC) end date.

# Module 2.3: Screen Types

(3 of 3)

## Edit

A screener should **edit** a screen when:

- Adding or changing information in a screen that they are currently working on.  
Example: Adding in relevant information after an internal or BCS review.
- Needing to make necessary updates to an unconfirmed NFE screen.  
Example: Updating diagnoses on an NFE screen that may result in eligibility.

# Module 4: Mental Health

- 4.4 Mental Health Services
  - Criminal Justice System: Includes ongoing support
  - Mental Health Services: Consider and check all that apply
  - School: Formal and **informal** supports
- Number of hours per week



# Module 5: Behaviors

- 5.3 Frequency of Behavior

What would the frequency be without current interventions in place?

- 5.8 Evaluating the Child not the Child in Services

- 5.4 Current Intervention Category

- Timeout/supervision
- Medical/professional
- Emergency

- 5.5 Duration of Behavior

If not expected to last, provide detailed notes.

# Module 5: Behaviors

- Running away
  - Wandering away
  - Environmental interventions
- Destruction of property
  - Inside the home
- Aggression
  - Multiple environments
- Animal abuse
  - Isolating animal from child

# Module 6: ADLs & IADLs

## Questions to Ask

- Have parent/guardian tell you the process of each activity of daily living (ADL) and instrumental activity of daily living (IADL) skill
- Ask open-ended questions based on description
  - Open ended questions
  - “Wh” questions
- Review the examples in the charts
- Prepare your questions before the visit
- Get signed ROIs before visit and send to access records (learning and communication) if eligibility might be unclear

# ADLs: Bathing, Dressing, and Grooming

- Bathing
  - Needs step-by-step cueing after age 6
  - Cueing can be in person or by checklist
- Dressing
  - If clothing inside-out, fine motor needs, weather-appropriate clothes
  - Eating – pickiness to the point of nutritional concerns
- Grooming

# ADLs: Toileting and Mobility

## ■ Toileting

- After the age of 6: toileting schedule, cueing and wiping can be considered
- After the age of 9: incontinence considered

## ■ Mobility

- Generic equipment used for longer distances considered
- Review of mobility devices – AFO (ankle foot orthotics)/SMO (supra malleolar orthotics) reminder

# IADL: Communication

- Does not use language to share information  
Examples: giving directions, describing feelings, providing details
- Does not follow two single-step instructions given at the same time, that are **unrelated** and **not routine**.

# IADL: Learning

## Age-based questions

- If child is two or three grades behind in school, explain why in notes (such as attention, cognitive delays, other)
- If child uses time to follow a schedule (alarms, cueing, other)
- If a child is at age level with a 1-1 aide; other modifications

# Common Screen Review Asks

(1 of 2)

## Previous Screen Review

- A child previously had express/receptive language/cognitive scores of significant delay; nothing now marked in these areas.
- A child previously needed assistance with a number of ADLs; nothing now marked in these areas.
- Notes mention behaviors but no behaviors chosen.



# Common Screen Review Asks

(2 of 2)

## Diagnostic and FS Section incompatibility

- Diagnosis of speech delay but nothing marked under communication
- History of cognitive delay or a condition that frequently causes a cognitive delay but nothing marked under learning
- Diagnosis of autism spectrum disorder (ASD) but nothing marked under social competency

# Quality Notes

- If rescreen, explain why you are not marking something that was previously marked
- Use notes to explain that categories were reviewed with parent/guardian and/or testing if nothing is marked in sections
- Explain reason why not expected to last
- Follow note format:
  - Date (**MM/DD/YY**): Comments...
  - Screener initials

# Quality Notes Examples: ADLs

- 05/27/2021
- Child is combative during bathing as they dislike having water on their face. They can eat, groom themselves, and use the bathroom independently. They do not have accidents during the day or at night. Parent reports that child walks short distances (50 feet) before needing to be carried or use a device such as a stroller or wagon. Child has no issues with transfers.
- KD, BCS

# Quality Notes Examples: IADLs

- 05/27/2021
- Communication: Child is unable to follow a two step instruction. He lacks attention to focus on what is being asked of him (R). He speaks at least 50 words (E). He can understand prepositions in a single step instruction. He does use the word “mine” to indicate possession.
- Learning: Child can match shapes and colors. He is unable to count to 10 without mistakes. He struggles to maintain an attention span of 3 minutes.
- Social Competency/Self-Direction: Per parent, he will parallel play with other children. He will pretend play. According to daycare, he is reported to very rarely participate in group play with other children.
- MSS, BCS

# After Eligibility Calculation: NFE

(1 of 2)

- Do not send results to iChange.
- Screeners should request an internal review by their agency. Each agency is responsible for quality assurance at a local level.
- Screens will begin to be reviewed by BCS program eligibility specialists the week (M-F) following the NFE calculation.
- Respond to BCS when receiving emails from us.
- Respond to BCS with changes in eligibility.

# After Eligibility Calculation: NFE

(2 of 2)

- County waiver agencies (CWAs) must work with the Wisconsin Department of Health Services (DHS) and follow the state's guidance to resolve any functional screen issues or errors.
- The CWA will delay disenrolling the participant until the NFE determination is confirmed by DHS.

# Katie Beckett Updates

Emily Brach

# Screen Coordination

## Best practices to consider

- Functional Screens completed for Katie Beckett MA/Waiver
- Functional screens are completed for several programs
  - Helpful to include provider and entity of provider
  - Update family information in iChange if updates



# Katie Beckett/CLTS Unwinding Updates

- Outreach to Katie Beckett Central Office
  - Not necessary if following outlined process
- Collaboration between CWAs and Katie Beckett Medicaid during Unwinding
  - Katie Beckett renewal paperwork
  - Important monthly dates and outreach efforts

Thank you!

# Resources

Katie Dill

# 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

# Functional Screen Information Access System

- The link to log in to Functional Screen Information Access (FSIA) and the form to request access can be found at: <https://fsia.wisconsin.gov/>
- Support for FSIA is provided by the DHS SOS Helpdesk
  - Email: [dhssoshelp@dhs.wisconsin.gov](mailto:dhssoshelp@dhs.wisconsin.gov)
  - 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

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Previous

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# Upcoming Outreach Dates

Mary Schlaak Sperry

# Teleconference Schedule 2023

- CLTS FS Teleconference  
November 9
- Drop-in sessions for CLTS  
August 17: Unwinding
- Bi-Monthly CLTS Teleconferences
  - September 21
  - November 16
- Quality Teleconference  
October 19