



WISCONSIN DEPARTMENT
of HEALTH SERVICES

Children's Long-Term Support Functional Screen

Bureau of Children's Services (BCS)

Division of Medicaid Services (DMS)

May 14, 2026



Agenda

- Outreach date change
- Children's Long-Term Support (CLTS) eligibility appeals process and reminders
- Level of Care (LOC) Guidelines update
- Certified Screener Training update
- CLTS Functional Screen (FS) best practices
- Post-teleconference meetings
- Resources
- Outreach





Teleconference Information

Accessing teleconference materials:

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



Outreach Date Change

Mary Schlaak Sperry, BCS



August Functional Screen Teleconference Date Change

The August CLTS Functional Screen Teleconference date has been changed to **August 6, 2026**, to accommodate the BCS training schedule.



CLTS Eligibility Appeals Processes and Reminders

Mary Schlaak Sperry, BCS



Appeals Request Process

1. Family receives Notice of Action (NOA).
2. Family notifies Division of Hearing and Appeals (DHA) of their appeals request.
3. DHA intakes request and begins fair hearing scheduling process.
4. Sent to the county consortium's Income Maintenance (IM) mailbox.
5. Consortium is responsible to send out accordingly.



Roles and Responsibilities

Bureau of Children's Services	Administrative Law Judge (ALJ): Department of Administration
Set program policy and provide guidance	Presides over appeals for the CLTS Program
Monitoring and oversight through quality measures and appeal tracking	Conducts impartial hearings
Provide technical assistance	Hears from both the family and the CWA to resolve disputes over a related decision
	Receives and assesses evidence and testimony
	Makes a legal and factual determination on the appeal



Roles and Responsibilities

County Waiver Agency (CWA)

Determine service authorization decisions based on CLTS Program policy and Deciding Together.

Issue timely, complete, and policy-aligned NOAs.

Partner with families to navigate complex needs and document decisions transparently.

Determine and be able to articulate how the child initially met eligibility according to the Institutional Level of Care Guidelines.

Review and be able to articulate what has changed upon rescreen that is now causing the child to no longer be eligible (NFE).

Participant and Family


Participate in Deciding Together conversations.

Communicate evolving needs and preferences.

Ask questions, seek clarification, and exercise appeal rights.

Responding to an Appeal

- Petitioner information
- Benefit information
- Explanation of action
 - Why was action taken?
 - Why does county waiver agency (CWA) think the family is appealing?
 - The more detail, the better.



Summary of Action Leading to Appeal

ATTACH THE NOTICE OF ACTION THAT PROMPTED THE APPEAL

Clicking the submit button will open your email program with a data file attached. You may attach the notice to the email

PLEASE SUBMIT THIS FORM, EVEN IF THE ISSUE HAS BEEN RESOLVED.

Petitioner Information

Last First Middle

Address

City State Zip

SSN Medical ID (if applicable)

Benefit Information

CARES # Program/Benefit

Action taken on Benefits

<input type="checkbox"/> Delayed	<input type="checkbox"/> Insufficient	<input type="checkbox"/> Reduced
<input type="checkbox"/> Denied	<input type="checkbox"/> Nonreceipt	<input type="checkbox"/> Repayment
<input type="checkbox"/> Department Review	<input type="checkbox"/> Other	<input type="checkbox"/> Modified
<input type="checkbox"/> Discontinued	<input type="checkbox"/> Recoupment	<input type="checkbox"/> 5173

Effective Date of Adverse Action:

Hearing Location

This Office

County where petitioner resides

Other

This hearing is expected to take longer than 15 minutes.

Explanation of Action (why was this action taken and why has the client appealed?)

If your explanation is lengthy or if you have a document you prefer not to retype, please indicate in this box that you will be sending documents by postal mail. If the document is 10 pages or less, you may attach it to the email message that is created when you submit this form.

If you have resolved the issue with the client, please describe the action taken and provide the petitioner with the Withdrawal Request Form.



Preparation for the Fair Hearing

In preparation for the fair hearing, the county must:

- Ensure timelines of returning required documentation is met.
- Ensure county sends **all** information to DHA **and family**.
- Ensure county is prepared to discuss rationale grounded in policy, guidance or program requirements.
 - Submit any policy or guidance that the CWA used to make the decision as evidence to DHA and family.



What to Expect During the Fair Hearing

- Takes place over the phone.
- Standard hearing time is 30 minutes.
- The judge will give a brief overview of the process.
- Those that will be testifying are sworn in.
- The CWA is usually asked to begin.



The Functional Screen and Appeals

- Review the:
 - Institutional levels of care and target groups that the child was previously eligible under.
 - Eligibility Results Page of the previous CLTS FS.
 - Institutional Levels of Care document for specific criteria needed for eligibility in these areas.
 - CLTS Functional Screen Narrative for NFE Results.
 - [Wisconsin's Functional Screen webpage](#)

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

- [CLTS FS Clinical Instructions](#) (Updated May 2024)
- [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](#)
- 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](#)
- [Child Development Modules: Typical and Atypical Development](#)



The Functional Screen and Appeals

Determined On:
10/01/2024

Screen Status:
Active

Work with the existing screen:
EDIT SCREEN

Screen Begin Date:
MM/DD/YYYY

Create screen for Children's LTS:
INITIAL SCREEN **RESCREEN**

Current Screen Reports:
FS w/Eligibility Report

VIEW

Print NFE Results

Work with the history screen:
VIEW HISTORY

Utilities:
TRANSFER **ARCHIVE**

DD Level of Care

A child may be assigned this level of care if the child meets **ALL THREE** of the criteria listed below for Developmental Disability

The criteria are

- 1.The child has a diagnosis of a **Cognitive Disability** that substantially impairs learning and that is expected to continue indefinitely, and
- 2.The child demonstrates **Substantial Functional Limitations** when compared to age appropriate activities that are expected to last a year or longer; and
- 3.The child has the **Need for Active Treatment**

Child's Results
This child does not have a diagnosis of a Cognitive Disability or a similar diagnosis as required to meet Criterion 1 of the DD Level of Care.

SED Level of Care

A child may be assigned a SED level of care if the child meets **ALL FOUR** of the criteria listed below for Severe Emotional Disturbance

The criteria are

- 1.The child has a **Diagnosis** of a mental health condition, and
- 2.The child's mental health diagnosis or symptoms related to the diagnosis have existed and are expected to persist for a specific **Duration** of time, and
- 3.The child is in need of **Involvement with Service Systems** related to mental health support, and
- 4.The child exhibits **Severe Symptomology or Dangerous Behaviors** at a specific intensity and frequency of required interventions such that without this direct, daily community-based intervention, the child is at risk for institutionalization within a psychiatric hospital.

- Standard I: Psychotic symptoms
- Standard II: Suicidality
- Standard III: Violence
- Standard IV: Anorexia/Bulimia
- Standard V: Multiple Dangerous Behaviors
- Standard VI: Dangerous Behavior PLUS Substantial Social Competency Impairment
- Standard VII: Rare and Extreme Circumstances PLUS Dangerous Behavior OR Substantial Social Competency Impairment

Child's Results:
This child does not exhibit the rare or extreme circumstances or substantial social competency impairment required to meet Criterion 4; Standard VII of the SED Level of Care Requirements.

PH Level of Care

A child may be assigned this level of care if the child meets **BOTH** of the criteria listed below for Physical Disability

The criteria are

- 1.The child has a **Diagnosis** of a medical/physical condition resulting in needs requiring long term care services, and
- 2.The child requires skilled **Nursing Interventions** and/or has **Substantial Functional Limitations** requiring hands on assistance from others throughout their day

Child's Results
This child does not require the skilled nursing interventions or does not have substantial functional limitations required to meet Criterion 2 of the PH Level of Care Requirements.

POB Level of Care

A child may be assigned this level of care if the child meets **ALL THREE** of the criteria listed below for Physical Disability

The criteria are

- 1.The child needs **Frequent and Complex Medical Care** that require the use of equipment to prevent life-threatening situations, and
- 2.The child's complex skilled medical interventions are expected to persist for a specific **Duration** of time, and
- 3.The child's overall health condition requires **Continuous Assessment of an Unstable And Life-Threatening Condition**.



The Functional Screen and Appeals

- The burden of proof is on the CWA.
 - Note and explain which items were marked when the child was eligible that are not now.
 - Be prepared with details on how that information was gathered:
 - What questions were asked to gain information?
 - What documentation was sought and reviewed?



The Functional Screen and Appeals

- Who was the information gathered from?:
 - Child
 - Parent/guardians
 - Collateral contacts
 - School/teachers/therapists
 - Clinics/doctors/counselors



The Functional Screen and Appeals

- What questions were asked by BCS for the NFE review and what was the response?
- Send any documentation that was part of the process to DHA ahead of time.
 - CLTS FS-current (NFE) and prior (eligible).
 - Individualized education programs (IEPs) and/or evaluations that were used in screen completion.
 - Notices of Action (NOA).



The Functional Screen and Appeals

- The judges are looking to the CWA to provide proof that the child is no longer eligible.
 - The LOC Guidelines should be referenced regarding specifics of eligibility.
 - The algorithm for the CLTS FS is based on the LOC Guidelines.
- When attending a hearing, it helps to have the person who completed the screen and any support staff present at the hearing to help explain the changes.



Level of Care Guidelines Update

Mary Schlaak Sperry, BCS



Level of Care Guidelines Update: Deaf and Hard of Hearing

- Under Criterion 1 for Nursing Home Level of Care: Physical Disabilities, the following line has been removed:
 - Children diagnosed as blind or deaf without another qualifying diagnosis or medical/physical needs do not meet this criterion.
- There is nothing prohibiting children with these diagnoses from being eligible on the functional screen or from receiving needed services.



Level of Care Guidelines Update: Diagnoses

- Information pertaining to automatic diagnoses has been moved, clarified, and detailed within the document.
 - Regardless of diagnosis, the Functional Screen needs to be filled out in its entirety.



Certified Screener Training Update

Katie Dill, BCS



Certified Screener Training Update: Upcoming

- Updating and revising questions for the Certified Screener Training.
- Creating a review course for the training that can easily be reviewed by screeners.
 - More information regarding how to access the review course will be provided at the August CLTS FS Teleconference.



Certified Screener Training Registration

The entire form must be filled out.

- Education
 - Indicate education as well as major/degree.
- Experience in human services field
 - Duration: One year or less than one year
 - If less than one year, a list of professional experience needs to be detailed in the box on the form. **Managers** may then be asked for a training plan for the staff member indicating how they will gain experience within their training.



CLTS FS Best Practices

Katie Dill, BCS



Instrumental Activities of Daily Living

- **Communication**
- **Learning**
- Social competency/self direction
- Capacity for independent living




Instrumental Activities of Daily Living

- Questions are based on age cohorts created using developmental guidelines.
 - If a child is within 3 months of the next age cohort, those questions will be presented as well.
 - Norm and criterion referenced assessments
 - Expressive and receptive communication
 - Cognition
 - Valid Full Scale IQ
-



Instrumental Activities of Daily Living

- Each module area has a corresponding document showing the questions for each age cohort as well as qualifying and disqualifying options. This document is also linked in FSIA on the screen.

Communication 

*** Communication (9 years to 11 years, 9 months)**

A norm referenced assessment in receptive language within the last three (3) years. (A substantial functional impairment is defined by results that indicate a delay of 30% or greater or 2 Standard Deviations (SD) below the mean.)

Assessment Date: (mm/yyyy)

Assessment Tool:

Other:

Assessment Result: Within normal limits

% delay

Standard Deviations (SD) below the norm



Instrumental Activities of Daily Living

Communication example:

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.
													Does not seem to understand most of what is said to them at home or in school. (R) <input checked="" type="checkbox"/> Does not answer simple questions about a short story.

- The left side indicates ages the questions apply to (boxes without shadow).
- The top identifies the key for the qualifiers.
- The words in bold are shown on the screen.
- Italicized words give further explanation.



Tests/Assessments: Sources

Testing and assessment results can come from a variety of providers and sources:

- Doctors
- Psychiatrists
- Psychologists
- Behavior analysts
- Speech language pathologists
- Birth to 3 Program assessments
- IEPs
- Applied Behavior Analysis (ABA) evaluations




Tests/Assessments

Learning

Learning ?

* **Learning (9 years to 11 years, 9 months)**


Has a valid full scale IQ. (A substantial functional impairment is defined by a full scale IQ score of 75 or less.)

IQ Test: 

Score:

A norm referenced assessment in cognition within the last three (3) years. (A substantial functional impairment is defined by results that indicate a delay of 30% or greater or 2 Standard Deviations (SD) below the mean.)

Assessment Date: (mm/yyyy)

Assessment Tool: 

Assessment Result: Within normal limits

% delay

Standard Deviations (SD) below the norm


Communication

Communication ?

* **Communication (9 years to 11 years, 9 months)**

A norm referenced assessment in receptive language within the last three (3) years. (A substantial functional impairment is defined by results that indicate a delay of 30% or greater or 2 Standard Deviations (SD) below the mean.)

Assessment Date: (mm/yyyy)

Assessment Tool: 

Other:


Assessment Result: Within normal limits

% delay

Standard Deviations (SD) below the norm

A norm referenced assessment in expressive language within the last three (3) years. (A substantial functional impairment is defined by results that indicate a delay of 30% or greater or 2 Standard Deviations (SD) below the mean.)

Assessment Date: (mm/yyyy)

Assessment Tool: 

Other:

Assessment Result: Within normal limits

% delay

Standard Deviations (SD) below the norm

To see eligible tests/assessments, click on the caret (circled above).



Test/Assessment Results

Module 6.5 Communication and Learning Assessments

- To document a valid assessment, the following information must be available:
 - Assessment date
 - Name of the assessment tool
 - Valid results of the assessment
 - When unsure of results, please reach out to the administrator of the test to help interpret scores and results.



Test/Assessment Results

- Standard deviation
 - Normative score of 100
 - Standard deviation of 15
 - Results within 15 points of 100 are considered to be normal: 85-115
 - Results 2 standard deviations below the norm: 70



Test/Assessment Results

- Percent delay
 - A percent delay measures how far behind the child's results are to other children their age.
 - Age equivalence (AE) scores are written in years and months.
 - For example, 4.5 years old is 4 and 6 months.
 - To determine percent delay
 - Take the valid AE score and divide it by the child's age at the time of testing. This tells you the percent they scored on the assessment.
 - Subtract the percent they scored from 1.0 or 100 percent.
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Post-Teleconference Meetings

Katie Dill, BCS

Mary Schlaak-Sperry, BCS



Post-Teleconference Meetings

- Post-teleconference meetings for screen leads will take place one to two weeks after CLTS FS Teleconference.
 - First post-teleconference meeting will occur on May 27, 2026, from 11 a.m.–noon.
 - Invitations will be sent out.
 - Goals:
 - Further discussion of teleconference topics.
 - Dedicated time to answer complicated or in-depth questions regarding the Functional Screen and processes surrounding it.
 - Time to connect and ensure understanding.
-



Resources

Katie Dill, BCS

Mary Schlaak-Sperry, BCS



Resources for Leads and Screeners

 [Learning Center UW-Oshkosh](#)

 [CLTS Functional Screen Clinical instructions](#)

 [Wisconsin's Functional Screen webpage](#)

 [DHS CLTS FS staff email](#)

 [DHS CLTS Waiver TA staff email](#)

 [SOS Help Desk email](#)

 SOS Phone: 608-266-9198



Upcoming Outreach Dates

Katie Dill, BCS

Mary Schlaak-Sperry, BCS



2026 CLTS FS Outreach Dates

- Quarterly teleconference
 - **Thursday, August 6, 11 a.m.–noon**
 - Thursday, November 12, 11 a.m.–noon
- Post-teleconference meetings
 - Wednesday, May 27, 11 a.m. –noon