

Care Level Classification Guidelines

Many supports and services available through Wisconsin's Children's Long-Term Support (CLTS) Program are subject to a uniform, statewide rate schedule. Within the rate schedule, two service categories are structured to reflect the intensity of support and/or degree of professional experience that an individual participant may require. Respite and personal supports are divided into three rate classifications: low, medium, and high. A participant receiving both respite and personal supports may have a different care level classification for each service, depending on the particular circumstances and needs of the child and their family.

Support and service coordination is central to the CLTS Program and entails considering the child and family holistically; developing a collaborative working relationship with the family; and identifying each child and family's unique strengths, goals, and support needs through a comprehensive assessment. This approach is key to determining care levels for CLTS participants.

Support and service coordinators (SSCs) determine care levels by working with the family and applying their expertise to assess the child and family's level (or intensity) of support need with respect to these two service categories. SSCs must consider information from formal sources along with input from the participant and their family to determine the most appropriate care level. A combination of factors must be considered to determine care level, including:

- Information gathered through the functional screen and assessment processes.
- The child and family's particular situation or circumstances.
- The intensity, type of support, or degree of professional experience that a participant's health and/or behavior warrant.
- The extent of training and/or experience a caregiver must have in order to safely and effectively work with the participant.

The following care level classifications describe general characteristics of CLTS participants and caregivers. The frequency, degree, and/or severity of a child's condition(s) or behavior(s) inform the care level by indicating the degree of support that each particular child requires. SSCs work with the child and family to determine which care level is the best fit or most appropriately reflects the participant's typical support needs.

The Wisconsin Department of Health Services (DHS) anticipates that the majority of CLTS participants will meet the medium care level; that a smaller percentage will require more or less support (that is, the high or low care levels); and an even smaller percentage will have care needs that exceed the high care level and call for an outlier rate.



Care Level Classification Descriptions

The following descriptions consist of general characteristics to help guide the care level decision-making process.

Low care level

Consider the child and family's particular situation or circumstances along with the following.

Common participant characteristics may include:	Caregivers working with participants who fit this care level may commonly have:
By being eligible for the CLTS Program, all participants at least meet the low care level.	Basic skills and training related to the service category.
One diagnosis, of any type.	Some experience providing care for individuals with low-intensity care needs.
Up to two functional impairments within or among the following: <ul style="list-style-type: none"> • Bathing • Grooming • Dressing • Eating • Toileting • Mobility • Transfers 	Some experience working with the particular CLTS participant.
Limited or minimal functional impairments within or among the following: <ul style="list-style-type: none"> • Communication (either receptive or expressive) • Learning • Social competency 	
Up to one mental health-related service.	
No significant behavioral issues.	

Medium care level

Consider the child and family's particular situation or circumstances along with the following.

Common participant characteristics may include:	Caregivers working with participants who fit this care level may commonly have:
Qualifying for one or two target groups.	Specific skills, training, or experience related to the service category.
One or two diagnoses, of any type.	Experience providing care for individuals with medium-intensity care needs.
Up to two health-related services.	A moderate amount of experience working with the particular CLTS participant.
Up to three functional impairments within or among the following: <ul style="list-style-type: none"> • Bathing • Grooming • Dressing • Eating • Toileting • Mobility • Transfers 	
Substantial functional impairments within or among the following: <ul style="list-style-type: none"> • Communication (either receptive or expressive) • Learning • Social competency 	
Up to two mental health-related services.	
At least one significant behavioral issue.	

High care level

Consider the child and family's particular situation or circumstances along with the following.

Common participant characteristics may include:	Caregivers working with participants who fit this care level may commonly have:
Qualifying for one or two target groups.	Professional knowledge and education.
Two or more diagnoses, of any type.	Experience providing care for individuals with high-intensity care needs.
Three health-related services.	Extensive experience working with the particular CLTS participant.
Four or more functional impairments within or among the following: <ul style="list-style-type: none"> • Bathing • Grooming • Dressing • Eating • Toileting • Mobility • Transfers 	
Significant and/or multiple functional impairments within or among the following: <ul style="list-style-type: none"> • Communication (either receptive or expressive) • Learning • Social competency 	
Two mental health-related services.	
Two or more significant behavioral issues.	

NOTE: If the participant's care level needs exceed the high care level classification, it may be appropriate to consider an outlier rate.

Care Level Process

SSCs must determine the care level classification(s) for any CLTS participant receiving respite and/or personal supports* and record it in the designated field on the CLTS Individual Service Plan (ISP). A care level determination must be made whenever either of these services is added to the ISP. At the time of the annual ISP review, SSCs must assess whether there is a change in care level classification for a participant receiving these services.

*** IMPORTANT NOTE:** Four supports under the respite and personal supports are exempt from care level classification determinations. SSCs do not complete a care level classification for any of the following:

- Camp
- Institutional respite
- Chore services
- Personal care

Care level determinations are subject to review by DHS.

Waiver agencies are instructed to submit any questions to their [CLTS children and family program specialist](#), including when there are difficulties determining the appropriate care level classification for a participant or when the family disagrees with the chosen classification. Waiver agencies must work with DHS and follow the state's guidance to resolve any issues when they arise.

All care level determinations are subject to record reviews, corrective action plans, or financial disallowances upon a negative finding.