




DHSS

The Reassessment Process

Bureau of Long Term Services and Support
Division of Senior and Disability Services
Department of Health and Senior Services

Division of Senior and Disability Services



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Confidentiality

- Ensure all PHI is kept confidential
- Only use PHI to perform functions, activities or services related to the deliver of HCBS
- Use encryption software or DSIDS provided Proofpoint software

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What provider reassessors should know:

- All HCBS policies and procedures
 - Eligibility Components
 - Services Available
 - PCCP process
 - Case note documentation
 - Abuse, neglect and/or exploitation identification
 - HCBS WebTool functionality

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Assigned Reassessment List

- Added to SharePoint ninety days prior to end of care plan
- Should review list as soon as available
- Should only complete reassessments on their lists

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Reviewing Reassessment List

- If unable to complete an assigned reassessment, notify:
ProviderReassessmentReview@health.mo.gov
- Medicaid eligibility shall be reviewed on all assigned reassessments
 - Spenddown recipient must have met spenddown at least once within the last three months

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Preparing for reassessment

- Provider reassessor must review:
 - Previous InterRAI HC
 - Current PCCP and utilization history
 - Case notes
 - Demographics and living arrangement
 - Attachments

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Scheduling Reassessment

- If a participant has a legal guardian, the legal guardian must be informed of reassessment
- Three attempts must be made to contact the participant and/or legal guardian
- If after third attempt, provider reassessor is unable to contact participant or legal guardian, DSDS Provider Reassessment Review Team shall be notified

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PCCP Development

- Self-determination
 - Any one may be involved in the process
 - Participant and/or legal guardian approval of the PCCP
- InterRAI HC
 - Focuses on the participant's functioning ability and quality of life

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PCCP Development

- PCCP will be completed in a 'requested' status and require review and approval by DSDS
- PCCPs need to be supported by a thorough, well-documented reassessment and case notes
- Formal and informal supports should be identified

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The Reassessment Process


- If additional information is needed from a collateral contact, confidentiality is vital
- Collateral contacts could be:
 - Medical sources
 - Relatives, friends or neighbors
 - Other agencies such as DMH

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Cost Cap


Cost cap is calculated as a percentage to the annual average statewide monthly cost for care in a nursing facility

HCBS Manual Chapter 3 Appendix 2

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Priority Risk Indicator

- Priority risk indicator is entered along with the requested care plan
- Used by providers to prioritize service delivery
- High priority should only be used when the lack of services would pose a serious threat to the health and safety of the participant

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Required Forms

- Participant Choice Statement
- Assessment Attestation Form
- Rights and Responsibility Forms (CDS, In Home, RCF/ALF, Adult Day Care)

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Additional Forms


- St. Louis University Mental Status Form (SLUMS)
- Self-Direction Assessment Questions
- Healthcare Professional Inquiry
- Healthcare Information Request


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Completed Reassessment

- Will have:
 - Reassessment and PCCP entered correctly
 - Participant Case Summary Screen updated
 - Documentation entered into HCBS WebTool
 - Notification of completed reassessment to DSDS Provider Reassessor Review Team
 - Immediately or by the last calendar day of the month

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Questions? 

 ReassessorTraining@health.mo.gov
or
ProviderReassessmentReview@health.mo.gov
