# **SUMMARY**

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| **Child’s name (Last,First):** | **Date of determination:** |
| **Meets Medical Foster Care (MFC) medical necessity (check one):** Yes No | **LOC recommended:** |
| **Qualifying medically necessary medical condition(s):** |
| **Co-occurring clinical condition(s):** |
| **If eligible for MFC services, recommendation for time period for follow up staffing:** |

**MEDICAL NECESSITY FOR MFC SERVICES**

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| **Does the child meet medical necessity for MFC as defined in FAC 59G-1.010?***Medically Necessary* or *Medical Necessity* means that the medical or allied care, goods, or services furnished or ordered must meet the following conditions: | Yes | No |
| * Be necessary to protect life, to prevent significant illness or significant disability, or to alleviate severe pain.
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| * Be individualized, specific, and consistent with symptoms or confirmed diagnosis of the illness or injury under treatment, and not in excess of the patient’s needs.
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| * Be consistent with generally accepted professional medical standards as determined by the Medicaid program, and not experimental or investigational.
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| * Be reflective of the level of service that can be **safely furnished**, and for which no equally effective and more conservative treatment is available statewide.
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| * Be furnished in a manner not primarily intended for the convenience of the recipient, the recipient’s caretaker, or the provider. FAC 59G-1.010.
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| Note: The fact that a provider has prescribed, recommended, or approved medical or allied care, goods, or services does not in itself, make such care, goods, or services medically necessary or a medical necessity or a covered service. |  |  |

**Go no further if scored “no.” Child is not eligible for MFC services.**

# **LEVEL OF CARE DETERMINATION**

## **Overall Scoring Instructions**

For each of the following dimensions, there is a description of the child’s characteristics associated with the dimension. Choose the category that most accurately describes the child’s characteristics. For the first dimension, consider only the qualifying medical condition. For dimensions 2-5, consider the entire clinical situation, including co-morbid conditions such as behavioral health and intellectual or developmental conditions. Each category is assigned a specific number of points (in the parentheses). For each category, write the corresponding number of points in the right-hand column. If there is no concern in dimensions 2-5 check the appropriate box, with no points assigned for that dimension. Note that a particular child’s need may be considered for only one dimension.

## **Dimension One: Stability of the Child in a Home Setting (completed by the CMAT Medical Director)**

Write the number of points for the description chosen in the column on the right-hand side. If the child’s medical stability in a home setting does not present as a current concern based solely on the qualifying medical condition, the child may not meet medical necessity. If stability of the child is not a concern, review the decision determining medical necessity.

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| **Category A (3 points)** \_\_\_\_\_\_* The child is at risk for, **or** occasionally experiences infrequent and predictable changes in medical needs due to the qualifying medical condition,

**AND*** Child’s medical condition requires that the caregiver understand, monitor, and be prepared to respond to possible predictable changes in medical needs of the child.

*(Changes in medical needs is due to the qualifying medical condition only.* *Predictable changes may be based upon past changes in medical needs, and/or risks for changes in medical needs due to the child’s qualifying medical condition).* | **Category B (6 points)** \_\_\_\_\_\_* The child experiences frequent and predictable changes in baseline medical status,

**AND*** Requires that the caregiver understand, monitor and respond to predictable changes in medical needs of the child,

**OR*** The child experiences infrequent and unpredictable changes in baseline medical status due to the qualifying medical condition,

**AND*** Requires that the caregiver identify the child’s medical needs when they emerge,

**AND*** Have a plan to provide an effective response to both expected and unexpected changes in medical needs.
 | **Category C (9 points)** \_\_\_\_\_\_* The child experiences frequent and unpredictable changes in medical needs due to the qualifying medical condition(s),

**AND*** Requires that the caregiver provide daily and ongoing monitoring of the child for frequent and unexpected changes in the child’s medical needs,

**AND*** Have a plan for identifying the changes in medical needs,

**AND*** Is familiar with a wide variety of medical conditions,

**AND*** Is able to choose and implement the most appropriate and effective response.
 | **Number****of Points** |

## **Dimension Two: Tolerance to Delay and Task Error by Caregiver[[1]](#footnote-1)**

Write the number of points for the description you chose in the column on the right-hand side.

Note: If the child’s tolerance for delay and task error does not present as a current concern in the outcome of the child’s health care status, check this box and proceed to dimension 3. This dimension is then scored “0.”

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| **Category A (2 points**) \_\_\_\_\_\_* The child has a tolerance for delay in ongoing treatment and/or task error, with mild consequences due to delay or error in meeting the child’s needs,

**AND*** Requires that the caregiver provide the child’s treatment needs within reasonable timeframes and accuracy.
* (Mild consequences do not interfere with functioning, exacerbate clinical conditions, or pose a risk for immediate treatment or loss of life).
 | **Category B (4 points)** \_\_\_\_\_\_* The child has limited tolerance for delay of ongoing treatment and/or task error, with moderate consequences due to delay or error in meeting the child’s clinical needs,

**AND*** Requires that the caregiver implement a prompt schedule of tasks that supports the timely and accurate provision of services required by the child.

(Moderate consequences may include a decrease in functioning, an acute illness, a decline in general health status or need for prompt treatment). | **Category C (6 points)** \_\_\_\_\_\_* The child has no tolerance for delay of ongoing treatment and/or task error, with severe consequences from a delay or error in meeting the child’s clinical needs,

**AND*** Requires that the caregiver implement a stringent schedule of tasks to meet the child’s medical needs. The stringent schedule of tasks includes complex procedures requiring specific knowledge of the child’s condition and information to prevent medical errors.

(Severe consequences include need for immediate treatment or loss of a major function or life). | **Number****of****Points** |

## **Dimension Three: Interventions**

Write the number of points for the description you chose in the column on the right-hand side.

Note: If the child’s tolerance for delay and task error does not present as a current concern in the outcome of the child’s health care status, check this box and proceed to dimension 4. This dimension is then scored “0.”

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| **Category A (4 points**)     \_\_\_\_\_\_\_\_\_\_\_\_\_ * The child’s current clinical needs require simple interventions or treatments that require the caregiver to provide simple interventions which may include simple tasks that use in-home equipment and supplies,

**AND/OR*** The child’s current clinical needs require complex interventions that have been ordered but have not been administered in the past 6 months

**AND/OR*** Routine visits to health care providers that require coordination of routine health care visits related to the child’s clinical condition.

 Simple interventions may include a simple series of steps or instructions requiring basic skills. | **Category B (8 points)   \_\_\_\_\_\_\_\_\_\_\_\_** * The child’s current clinical needs require complex interventions requiring moderate skill which may require making quick independent decisions without awaiting instruction by a health care professional,

**AND/OR*** Support from multiple service provider types (specialists) that requires coordination of care, including health care visits, with multiple service provider types (specialists) that are not considered routine and are indicative of moderate service utilization for medical and co-occurring clinical conditions.

 (Complex interventions involve a series of instructions or steps requiring either moderate or advanced skills; AND/OR must be tailored to the child’s clinical or developmental condition requiring more time or skill to complete.) | **Category C (12 points)**    \_\_\_\_\_\_\_\_\_\_ * The child’s current clinical needs require complex interventions or treatments that require advanced skill or continuous monitoring (may include intervention or treatment for co-morbid conditions),

**AND*** The complex interventions are frequently  required (up to three times a week) or ongoing in order to maintain functioning and to prevent or respond to life threatening events,

**AND/OR*** Either moderate or frequent support from and visits to multiple specialist providers (high utilization of health services) that requires intensive coordination of care with multiple service provider types for medical and co-occurring clinical conditions.
 | **# Points** |

## **Dimension Four: Observation, Assessment, and Documentation**

Write the number of points for the description you chose in the column on the right-hand side.

Note: If the child’s tolerance for delay and task error does not present as a current concern in the outcome of the child’s health care status, check this box and proceed to dimension 4. This dimension is then scored “0.”

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| **Category A (2 point**) \_\_\_\_\_\_* The child’s current clinical needs require routine observation (appropriate to the chronological and developmental stage of the child) to ensure the safety and well-being of the child,

**AND*** Routine with potential for occasional detailed/moderate, assessment of the child’s status.
 | **Category B (4 points)** \_\_\_\_\_\_* The child’s current clinical needs require frequent (at least every four hours) observation and monitoring,

**AND*** Detailed (moderate) assessment requiring interpretation to formulate a plan of action,

**AND*** Implementation of plan of action and detailed documentation of observation, assessment, plan of action and results.
 | **Category C (6 points)** \_\_\_\_\_\_* The child’s current clinical needs require ongoing or (24/7) observation (child must be continuously monitored while awake or 24/7),

**AND*** Comprehensive assessment requiring interpretation to formulate a plan of action,

**AND*** Implementation of action plan and comprehensive documentation of observation, assessment, plan of action and results.
 | **Number****Of****Points** |

## **Dimension Five: Personal Care[[2]](#footnote-2)**

Write the number of points for the description you chose in the column on the right-hand side.

Note: If the child’s need for personal care does not present as a current concern, check this box and proceed to the next section. This dimension is then scored “0.”

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| **Category A (3 point**) \_\_\_\_\_\_* Although the required personal care assistance is developmentally or age appropriate, the child requires personal care assistance more frequently than is normally required.

**OR*** Personal care assistance requires more time to complete than is typically required.
 | **Category B (6 points)** \_\_\_\_\_\_* The child’s ability for personal care is not developmentally or age appropriate and requires more assistance with personal care than is typically required (with more than one aspect of the child’s personal care).

**AND*** Daily assistance with some activities of daily living (ADLs).
* (ADLs include personal care, mobility, dressing, and eating).
 | **Category C (9 points)** \_\_\_\_\_\_* The child’s ability for personal care is significantly developmentally or age delayed, and the child requires total care for most or all of the child’s personal care needs, and support of most ADLs.
 | **Number****of****Points** |

# **LEVEL OF CARE TOOL SCORING**

Copy the score for each dimension (including any “0s”), and total. Then put a check mark in the appropriate LOC based upon the total score.

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| **Dimension** | **Score Values** |
| 1. Stability of the Child in a Home Setting  | A = 3 B = 6 C = 9 |
| 2. Tolerance to Delay and Task Error  | A = 2 B = 4 C = 6 |
| 3. Interventions  | A = 4 B = 8 C = 12 |
| 4. Observation, Assessment, and Documentation  | A = 2 B = 4 C = 6 |
| 5. Personal Care  | A = 3 B = 6 C = 9 |

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| --- | --- |
| **Dimension** | **Score** |
| 1. Stability |  |
| 2. Tolerance |  |
| 3. Interventions |  |
| 4. Observation |  |
| 5. Personal Care |  |
| **Total Score** |  |

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| **Category Points** | **Child’s LOC** |
| Level I 3-14 points |  |
| Level II 15-28 points |  |
| Level III 29-42 points |  |

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| **Level One (3-14 points)** | **Level Two (15-28 points)** | **Level Three (29-42 points)** |
| The client is at risk for, or is experiencing, infrequent and predictable changes in medical needs. The children’s clinical needs require simple interventions, medical management, reliable observation and documentation by a trained caregiver. | The client is experiencing frequent and predictable changes in medical needs or infrequent and unpredictable changes in medical needs. The child’s clinical needs can be met by a caregiver that provides regular observation, significant medical management, complex interventions, and is prepared to meet both anticipated and unanticipated events. | The client is experiencing frequent and unpredictable changes in medical needs. The children’s clinical needs can be met in a home setting by a caregiver who provides ongoing observation and assessment, daily significant medical management and healthcare management, and is prepared to intervene when the client experiences both anticipated and unanticipated events. |

# **LEVEL OF CARE DEFINITIONS**

1. Impact and severity of consequences of a delay or task error in the child’s medical needs. [↑](#footnote-ref-1)
2. Required care due to the child’s clinical condition(s), including co-occurring conditions. [↑](#footnote-ref-2)