GUIDE #3 - Major Mental Disorder diagnoses include: Schizophrenia, Schizoaffective Disorder, Delusional Disorder, Major Depressive Disorder, Bipolar Disorder, Panic Disorder, Severe Anxiety Disorder, Somatoform Disorder, Personality Disorder, Anorexia Nervosa.

GUIDE #4 - <u>Alzheimer's Disease</u>: Defined as a dementia with insidious onset with a generally progressive deteriorating course. Diagnoses include Alzheimer's disease with delirium, Alzheimer's disease with delusions, Alzheimer's disease with depression, Major Neurocognitive Disorder, or Alzheimer's disease uncomplicated.

<u>Related Disorder:</u> An organic disorder or condition which manifests itself as a change in the persons' mood, orientation, or behavior. Examples are:

- Anxiety Disorder due to Another Medical Condition,
- Psychotic Disorder due to Another Medical Condition,
- Delirium due to General Medical Condition,
- Vascular Neurocognitive Disorder DSM-5.

Also consider other central nervous system conditions that cause progressive deficits in memory or cognition such as:

- Cerebrovascular disease,
- Parkinson's disease,
- · Huntington's disease, or
- Systemic conditions that are known to cause dementia (such as hypothyroidism, vitamin B12 deficiency, etc.)

GUIDE #5 - <u>Serious Problems in Level of Functioning</u>; Defined as functional limitations in major life activities that would be appropriate for the individual's developmental stage. An individual typically has at least one of the following characteristics on a continuing or intermittent basis:

- Interpersonal functioning individual has serious difficulty interacting appropriately and communicating effectively with other persons; has a possible history of altercations, evictions, firing, fear of strangers, avoidance of interpersonal relationships and social isolation.
- Concentration, persistence and pace Individual has serious difficulty in sustaining focused attention for a long enough period to permit completion of tasks commonly found in work settings or in work-like structured activities occurring in school or home settings; manifests difficulties in concentration; inability to complete simple tasks within an established time period; makes frequent errors; or requires assist in completion of these tasks; and
- Adaptation to change Individual has serious difficulty in adapting to typical changes in circumstances associated with work, school, family, or social interaction; manifests agitation, exacerbated signs and symptoms associated with the mental illness, or withdrawal from the situation, or requires intervention by mental health or judicial system.

GUIDE #6 -Intensive Psychiatric Treatment. Defined as:

- inpatient psychiatric hospitalization and/or
- any intensive mental health service provided by mental health professionals that is required to stabilize or maintain a person experiencing major mental disorder. Services may be rendered within their current residence, or the person may be moved to another residential setting. These services are not merely medication changes, weekly counseling sessions or routine outpatient visits.

GUIDE #7 - Intellectual Disability Related Conditions: Defined as related to intellectual disability if it:

- a) results in impairment of general intellectual functioning or adaptive behavior similar to that of intellectual disability, and requires treatment/services similar to intellectual disability; and
- b) occurs before the age of 22; and
- c) is likely to continue indefinitely; and
- d) results in substantial functional limitations in 3 or more major

life activities (see following list):

- self-care,
- understanding and use of language,
- learning,
- mobility,
- self-direction, and
- capacity for independent living.

Examples of diagnoses that may qualify as related condition if <u>all</u> criteria "a" through "d" (above) are met:

- cerebral palsy,
- · epilepsy,
- head or spinal cord injury,
- autism,
- · severe hearing and visual impairment,
- · multiple sclerosis,
- spina bifida,
- muscular dystrophy,
- orthopedic impairment.

NOTE: Mental illness is not considered a related condition; it is covered under Screening Criteria for Serious Mental Illness.

GUIDE #8 - Special Admission Categories:

- 1. TERMINAL ILLNESS. The person has a terminal illness which is expected to result in death in six (6) months or less. (Check Box 2 on Notice to Applicant Form.)
- SERIOUS PHYSICAL ILLNESS. Examples: comatose, ventilator dependent, functioning at brain stem level, or a diagnosis of severe/end stage chronic pulmonary disease, severe/end stage Parkinson's Disease, amyotrophic lateral sclerosis, severe/ end stage congestive heart failure, or end stage renal disease. (Check Box 2 on Notice to Applicant Form.)
- 3. RESPITE CARE. Defined as very brief, finite stays in a Nursing Facility provided for the purpose of relieving family, friends or other primary in-home caregivers with whom the person resides and will continue to reside following the respite stay. If it becomes apparent that the person will stay longer than 30 days, the nursing facility must immediately notify the Division of Regulation & Licensure, COMRU, at COMRU@health. mo.gov, to determine continued stay. (Check Box 3 on Notice to Applicant Form.)
- 4. EMERGENCY PROVISIONAL ADMISSION. An Emergency Admission must be HOTLINED. The admission is for the purpose of protecting the person from serious physical harm to self or others and will not exceed 7 days. If it becomes apparent that the person will stay longer than 7 day, the nursing facility must immediately notify the Division of Regulation & Licensure, COMRU, at COMRU@health.mo.gov, to determine continued stay. (Check box 4 on Notice to Applicant Form.)
- 5. DIRECT TRANSFER FROM A HOSPITAL. There must be physician certification that the person is likely to require less than 30 days of nursing facility services for the condition for which the person is currently receiving hospital care. If it becomes apparent that the person will stay longer than 30 days, the nursing facility must immediately notify the Division of Regulation & Licensure, COMRU, at COMRU@health.mo.gov, to determine continued stay. (Check Box 5 on Notice to Applicant Form.)
 - If none of the special admission categories apply, check Box 1 on Notice to Applicant Form.
 - Forms are available online at https://health.mo.gov/seniors/ nursinghomes/pasrr.php.

AUTHORITY: sections 192.006, 192.2000, and 198.079, RSMo 2016. This rule was previously filed as 13 CSR 40-81.084 and 13 CSR 15-9.030. Original rule filed Aug. 9, 1982, effective Nov. 11, 1982. For intervening history, please consult the **Code of State Regulations**. Emergency amendment filed Oct. 15, 2021, effective Oct.29, 2021, expires April 26, 2022. A proposed amendment covering this same material is published in this issue of the **Missouri Register**.

PUBLIC COST: This emergency amendment will cost state agencies or political subdivisions twelve million six hundred one thousand four hundred forty dollars (\$12,601,440) in the time the emergency is effective.

PRIVATE COST: This emergency amendment will not cost private entities more than five hundred dollars (\$500) in the time the emergency is effective.

FISCAL NOTE PUBLIC COST

I. Department Title: Department of Health and Senior Services Division Title: Division of Regulation and Licensure Chapter Title: Certification

Rule Number and	19 CSR 30-81.030 Evaluation and Assessment Measures for Title XIX
Name:	Recipients and Applicants
Type of Rulemaking:	Emergency Amendment

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
 Department of Health and Senior Services (DHSS), Division of Senior and Disability Services 	\$12,601,440 during the six (6) months that the emergency amendment is in effect
TOTAL COSTS =	\$12,601,440 during the six (6) months that the emergency amendment is in effect

III. WORKSHEET

1600 (individuals who will qualify under the old level-of-care assessment for the six (6) months in which the emergency amendment is effective until the proposed amendment becomes effective) X 1,312.65 (average monthly costs for Home and Community Based services) X six (6) months = 12,601,440 during the six (6) months that the emergency amendment is in effect.

IV. ASSUMPTIONS

The section for long-term care does not anticipate that there will be any individuals qualifying under the old level-of-care assessment added back into 19 CSR 30-81.030(8) because most, if not all, individuals will qualify under the new level-of-care assessment in 19 CSR 30-81.030(5) which increased the level-of-care categories and lowered the required number of points to meet level-of-care in order to be determined as eligible for Title XIX-funded long-term care services.

The Division of Senior and Disability Services estimates that approximately 3,154 individuals will qualify annually under the old level-of-care assessment added back into 19 CSR 30-81.030(8). The Division of Senior and Disability Services estimates 1600 individuals will qualify under the old level-of-care assessment added back into 19 CSR 30-81.030(8) for the six (6) months that the emergency amendment is in effect. The average cost for individuals receiving Home and Community Based Services in 2021 is \$1,312.65 per month.

The money to pay for these Home and Community Based services will come from the temporary enhanced federal medical assistance percentage from the American Rescue Plan Act of 2021. The Missouri legislature will have to appropriate this federal funding to the Missouri Department of Health and Senior Services to be utilized for Home and Community Based services. This annual cost will continue until all of the funds from the temporary enhanced federal medical assistance percentage from the American Rescue Plan Act of 2021 that has been appropriated to the Missouri Department of Health and Senior Services has been expended by the Missouri Department of Health and Senior Services.