

Clarifying SPL Frequency Criteria: Propose Phase 1 Changes (draft v1.1)

ADL	Current Language	Proposed	Note
<p>(7) Eating means the activity of feeding and eating and may include using assistive devices.</p>	<p>N/A</p>	<p>b) Nominal: When eating, the individual requires another person to be within sight and immediately available to actively assist at least once each month but less than an average of 4 days per week. The individual must require hands-on assistance with feeding, special utensils, or immediate hands-on assistance to address choking or cueing during the act of eating.</p>	<p><i>The intention of adding a “Nominal Service Need” is to raise the eligibility threshold but still allow case managers to assign hours in the service planning process.</i></p>
	<p>(a) Assist: When eating, the individual requires another person to be within sight and immediately available. Assistance requires hands-on feeding, hands-on assistance with special utensils, cueing during the act of eating, or monitoring to prevent choking or aspiration. Assistance with eating is a daily need or may vary if an individual's medical condition fluctuates significantly during a one-month period.</p>	<p>c) Assist: When eating the individual requires another person to be within sight and immediately available to actively assist an average of 4 or more days per week. The individual must require hands-on assistance with feeding, special utensils, or immediate hands-on assistance to address choking or cueing during the act of eating.</p>	<p><i>Increases frequency Adds in assistance type Defines that the assistance is based on the individual’s inability to clear their airway not just a risk of choking.</i></p>
	<p>(b) Full Assist: When eating, the individual always requires one-on-one assistance for direct feeding, constant cueing, or to prevent choking or aspiration. This includes nutritional IV or feeding tube set-up by another person. This means the individual needs the assistance of another person through all phases of the activity, every time the activity is attempted.</p>	<p>d) Full Assist: When eating, the individual requires one-on-one assistance through all phases of the activity for direct feeding, constant cueing, or to prevent choking or aspiration via hands on assistance every time the activity is attempted.</p>	<p><i>Increases frequency Adds in assistance type Defines that the assistance is based on the individual’s inability to clear their airway not just a risk of choking.</i></p>

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		This includes nutritional IV or feeding tube set-up by another person.	
(8) Elimination is comprised of three components. To be considered Assist, the individual must require assistance in at least one of the three components. To be considered Full Assist the individual must require full assistance in any of the three components. Dialysis care needs are not assessed as part of elimination	a) Bladder means managing bladder care. This includes tasks such as catheter care, toileting schedule, monitoring for infection, ostomy care, and changing incontinence supplies.	a) Bladder means managing bladder care. This includes tasks such as hands on assistance to manage catheter care, and ostomy care.	<i>Adds in assistance type and removes monitoring for infection, changing incontinence supplies and toileting scheduling. Moves incontinence supplies to toileting.</i>
		A) Nominal: When bladder care is required, the individual requires hands on assistance of another person to complete tasks of bladder care at least once each month but less than an average of 4 days per week.	<i>The intention of adding a “Nominal Service Need” is to raise the eligibility threshold but still allow case managers to assign hours in the service planning process.</i>
	(B) Assist: Even with assistive devices or supplies, the individual is unable to accomplish some of the tasks of bladder care without at least monthly assistance from another person	B) Assist: When bladder care is required inside the care setting, the individual requires hands on assistance of another person to complete some tasks of bladder care an average of 4 or more days per week even with assistive devices.	<i>Increases frequency Adds in assistance type Adds in location of assessment</i>
	(B) Full Assist: The individual is unable to manage any part of bladder or catheter care without the assistance of another person. This means the individual needs the assistance of	d) Full Assist: When bladder care is required inside the care setting, the individual requires hands on assistance of another person to complete all tasks	<i>Increases frequency Adds in assistance type Adds in location of assessment</i>

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	another person through all phases of the activity, every time the activity is attempted.	of bladder care every time the task is attempted even with assistive devices.	
	(b) Bowel means managing bowel care. This includes tasks such as digital stimulation, toileting schedule, suppository insertion, ostomy care, enemas, and changing incontinence supplies.	Bowel means managing bowel care. This includes tasks such as hands on assistance to manage digital stimulation, suppository insertion, ostomy care, and enemas inside the care setting.	<i>Adds in assistance type</i> <i>Adds in location of assessment</i>
		b) Nominal: When bowel care is required, the individual requires hands on assistance of another person to complete tasks of bowel care at least once each month but less than an average of 4 days per week.	<i>The intention of adding a “Nominal Service Need” is to raise the eligibility threshold but still allow case managers to assign hours in the service planning process.</i>
	(A) Assist: Even with assistive devices the individual is unable to accomplish some tasks of bowel care without at least monthly assistance of another person	c) Assist: When bowel care is required, the individual requires hands on assistance of another person to complete tasks of bowel care an average of 4 or more days per week, even with assistive devices inside the care setting.	<i>Increases frequency</i> <i>Adds in assistance type</i> <i>Adds in location of assessment</i>
	(B) Full Assist: The individual is unable to accomplish any part of bowel care without the assistance of another person. This means the individual needs the assistance of another person through all phases of the activity, every time the activity is attempted.	d) Full Assist: When bowel care is required, the individual requires hands on assistance of another person to complete all tasks of bowel care every time the task is attempted, even with assistive devices.	<i>Increases frequency</i> <i>Adds in assistance type</i> <i>Adds in location of assessment</i>
	(c) Toileting means the activity of getting to and from, and on and off the toilet (including bedpan, commode, or urinal), cleansing after elimination or adjusting clothing cleaning and maintaining assistive devices, or cleaning the	Toileting means tasks requiring the hands on assistance to transfer on or off the toilet (including bedpan, commode or urinal), cleanse after elimination, change incontinence supplies or soiled clothing,	<i>Adds in assistance type</i> <i>Adds in location of assessment</i> <i>Cleaning the toileting area becomes part of housekeeping.</i>

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	toileting area after elimination because of unsanitary conditions that pose a health risk. This does not include routine bathroom cleaning.	removing clothing to enable elimination or cue to prevent incontinence inside the care setting.	<i>Ambulation to and from the toilet area becomes part of Mobility. Clarifies tasks.</i>
		b) Nominal Assist: When toileting is required, the individual requires hands on assistance from another person to complete tasks of toileting at least once each month but less than an average of 4 days per week.	<i>The intention of adding a “Nominal Service Need” is to raise the eligibility threshold but still allow case managers to assign hours in the service planning process.</i>
	(A) Assist: Even with assistive devices, the individual is unable to accomplish some tasks of toileting without hands-on assistance of another person at least monthly. Hands-on assistance is required for all tasks, except tasks associated with cleaning devices or the toileting area.	c) Assist: When toileting is required, the individual requires hands on assistance from another person to complete tasks of toileting an average of 4 or more days per week, even with assistive devices, inside the care setting.	<i>Increases frequency Adds in location of assessment</i>
	(B) Full Assist: The individual is unable to accomplish any part of toileting without the assistance of another person. This means the individual needs hands-on assistance of another person through all phases of the activity, every time the activity is attempted. Hands-on assistance is required for all tasks, except tasks associated with cleaning devices or the toileting area.	d) Full Assist: The individual is unable to accomplish any part of toileting without hands on assistance from another person. This means the individual needs hands-on assistance of another person through all tasks of the activity, every time the activity is attempted.	<i>Clarifies language</i>
(9) Mobility is comprised of two components, which are ambulation and	Ambulation means the activity of moving around both inside and outside the home or care setting, during the assessment time frame, while using assistive devices, if needed.	Ambulation means the hands on assistance to move around inside and outside the care setting. This includes assessing the individual’s needs after taking into	<i>Clarifies language around assistive devices.</i>

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<p>transfer. In the mobility cluster only, assistance is categorized into three levels. To be considered Minimal Assist, the individual must require minimal assistance in ambulation. To be considered Substantial Assist, the individual must require substantial assistance with ambulation or an assist with transfer. To be considered Full Assist, the individual must require full assistance with ambulation or transfer.</p>	<p>Ambulation does not include exercise or physical therapy.</p>	<p>consideration their level of independence while using assistive devices such as walkers, canes, crutches, manual and electric wheelchairs and motorized scooters. Ambulation does not include exercise or physical therapy.</p>	
	<p>(A) Minimal Assist: Even with assistive devices, if needed, the individual can get around inside his or her home or care setting without the assistance of another person. Outside of the individual's home or care setting, the individual requires hands-on assistance of another person.</p>	<p>b) Minimal Assist: When ambulation is required, the individual requires hands on assistance from another person to ambulate outside the care setting at least once each month but less than an average of 4 days per week. The individual can get around inside his or her home or care setting without the assistance of another person.</p>	<p><i>Clarifies language</i></p> <p><i>Does not impact eligibility</i></p>
	<p>(B) Substantial Assist: Even with assistive devices, the individual is unable to ambulate during the assessment time frame without hands-on assistance of another person inside his or her home or care setting. Even with assistive devices, this assistance may also be needed outside.</p>	<p>c) Substantial Assist: When ambulation is required, the individual requires hands on assistance from another person to ambulate an average of 4 or more days per week, even with assistive devices inside the care setting.</p>	<p><i>Increases frequency</i></p>
	<p>(C) Full Assist: Even with assistive devices, the individual is unable to ambulate without assistance from another person. This means the individual needs the hands-on assistance of another person through all phases of the activity, every time the activity is attempted.</p>	<p>d) Full Assist: When ambulation is required, the individual requires hands on assistance from another person to ambulate every time the task is attempted, even with assistive devices. Individuals with a physical disability who are bedbound because of that condition are full assist in ambulation.</p>	<p><i>Adds bedbound</i></p>

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	<p>Transfer means the activity of moving to or from a chair, bed, or wheelchair using assistive devices, if needed. This assistance must be needed inside the individual's home or care setting.</p>	<p>Transfer means the hands on assistance to move to or from a chair, bed, or wheelchair inside the care setting. This includes the use of assistive devices, if needed. It does not include transfers on or off the toilet.</p>	
		<p>b) Nominal Assist: When a transfers is required, the individual requires hands on assistance from another person to transfer at least once each month but less than an average of 4 days per week, inside the care setting even with assistive devices.</p>	<p><i>The intention of adding a “Nominal Service Need” is to raise the eligibility threshold but still allow case managers to assign hours in the service planning process.</i></p>
	<p>(A) Assist: Even with assistive devices, the individual is unable to accomplish a transfer without hands-on assistance of another person at least four days during a month.</p>	<p>c) Assist: When a transfers is required, the individual requires hands on assistance from another person to transfer an average of 4 or more days per week, even with assistive devices.</p>	<p><i>Clarifies language Increases frequency</i></p>
	<p>(B) Full Assist: Even with assistive devices, the individual is unable to transfer and is dependent on at least one other person to perform the transfer. This means the individual needs hands-on assistance of another person through all phases of the activity, every time the activity is attempted.</p>	<p>d) Full Assist: When a transfers is required, the individual requires hands on assistance from another person to transfer every time the activity is attempted, even with assistive devices.</p>	<p><i>Eliminates task and inserts activity.</i></p>

Definitions:

“More often than not” is defined as more than 50% of the time or at least 4 days per week.