



Assessment Tools Overview

Assessment	Population	Description	Timing for Completion	Who Conducts Assessment	Credentials of Assessor	Mode	Reassessment Due
Initial Health Screen	Enrollees calling to enroll	Nine (9) yes or no questions to identify priorities for Level I Assessments	At time of the enrollment call with Michigan ENROLLS	Michigan ENROLLS	NA	Telephonic	NA
	Enrollees passively enrolled or who did not complete the screen during the enrollment call		Completed within 15 days following the enrollment start date if not done at the time of enrollment	ICO	NA	Telephonic	NA
Level I Assessment	Enrollees without early Level I assessment	Health risk assessment approved by MDHHS	Within 60days following the enrollment start date	ICO Care Coordinator or approved contractor	Michigan licensed RN, NP, PA, LLBSW, LBSW, LMSW, or LLMSW	Telephonic or in-person (must be in-person for those stratified at high risk)	At least annually, and upon a change in enrollee's health status or needs, or as requested by the enrollee, provider, guardian or other legal representative
Early Level I Assessment	Enrollees willing to participate in early assessment	Health risk assessment approved by MDHHS. ICOs must have approval from CMS to conduct early Level I assessments	No earlier than 20 days prior to the enrollment start date				NA – see Level I requirements

Assessment	Population	Description	Timing for Completion	Who Conducts Assessment	Credentials of Assessor	Mode	Reassessment Due
Personal Care Assessment (PCA)	Enrollees flagged in Level I in need of personal care without history of services	Assessment of ADLs and IADLs for personal care services	Following Level I Assessment and before the IICSP is developed	ICO Care Coordinator or approved contractor	Michigan licensed RN, NP, PA, LLBSW, LBSW, LMSW, or LLMSW	In-person (face-to-face)	Reassess every six months, or sooner, to determine if there is a change of functional and/or health status. If the enrollee, provider, guardian or other legal representative believes the enrollee’s functional and/or health status has changed before the time of reassessment, the ICO must complete a new PCA. This would start a new six-month schedule
	Enrollees with personal care flag in CC360, included in Home Help lists provided by MDHHS, or history of personal care services from another ICO		Within 90 days following the enrollment start date				
	Enrollees with transition of care, change in functional and/or health status, or requested by the enrollee, provider, guardian or other legal representative		As soon as there is a transition of care, change in functional and/or health status, or requested by the enrollee, provider, guardian or other legal representative				

Assessment	Population	Description	Timing for Completion	Who Conducts Assessment	Credentials of Assessor	Mode	Reassessment Due
Michigan Medicaid Nursing Facility Level of Care Determination (NFLOCD)	Enrollees residing in a nursing home at the time of ICO enrollment	Medicaid assessment tool to determine need for nursing facility level of care	If the enrollee resided in nursing home at the time of enrollment, the existing assessment is adoptable. The ICO must ensure that the adopted LOCD still reflects the enrollee’s present condition. If not, the ICO must conduct a new tool to allow enrollee appeal rights. The Freedom of Choice form must be completed when adopting an LOCD if there is a change in program/provider/or a new admission/enrollment.	ICO Care Coordinator	Michigan licensed RN, NP, PA, LLBSW, LBSW, LMSW, or LLMSW	In-person (face-to-face)	The ICO may adopt the current LOCD through the LOCD end date. Reassessment will occur when the adopted LOCD expires, or when there is a significant change in condition, whichever is sooner
	Enrollees enrolled in the MHL HCBS Waiver		Must be completed prior to submission of waiver application				
	Enrollees identified in Level I as needing nursing home or HCBS waiver services		An LOCD must be completed or adopted from another provider. If the ICO is completing LOCD it should be conducted after Level I and before or with the Level II Assessment, if applying for HCBS waiver services and after the Level I for nursing home residents. For any new custodial care admission, an assessment must be adopted from another provider and/or completed by day 1 of the custodial stay (day 91). FOC must be completed when adopting if there is a change in program/provider/or a new admission/enrollment.				ICO must reassess annually, or when there is a significant change in condition, whichever is sooner.

Assessment	Population	Description	Timing for Completion	Who Conducts Assessment	Credentials of Assessor	Mode	Reassessment Due
Level II – interRAI Home Care (iHC)	Enrollees identified in Level I as needing HCBS waiver services	Assessment to determine long term care supports and services needed to support independent living	Within 15 days of referral	ICO Care Coordinator or LTSS Coordinator	Michigan licensed RN, NP, PA, LLBSW, LBSW, LMSW, or LLMSW	In-person (face-to-face)	See ‘Reassessment Due’ for ‘Enrollees enrolled in the MHL HCBS Waiver’ requirements
	Enrollees enrolled in the MHL HCBS Waiver		Within 15 days of referral		Michigan licensed RN, NP, PA, LLBSW, LBSW, LMSW, or LLMSW	In-person (face-to-face)	Annually, when there is a significant change in condition, or when the results of the current iHC are inconsistent with the results of the LOCD renewal, whichever is sooner
Level II - Supports Intensity Scale (SIS)	People referred to PIHP for I/DD service needs	Assessment for Intellectual/Developmental Disability needs	Within 15 days of ICO referral	PIHP	Trained in SIS, qualifications outlined by AAIDD	In-person (face-to-face)	Every three years or with significant change in support needs
	People currently receiving I/DD services as flagged in CC360		NA – Existing bio-psychosocial assessment is adoptable		Trained in SIS, qualifications outlined by AAIDD	In-person (face-to-face)	Every three years (from date on adopted assessment) or with significant change in support needs

Assessment	Population	Description	Timing for Completion	Who Conducts Assessment	Credentials of Assessor	Mode	Reassessment Due
Level II – American Society of Addiction Medicine (ASAM)	People referred to PIHP for Substance Use Disorder needs	Assessment for Substance Use Disorder	Within 15 days of ICO referral	PIHP	Credentialing standards through MCBAP	Telephonic or in-person (face to face preferred)	Conducted initially and then as needed to determine the appropriate level of care as individual progresses through the treatment plan. Annual reassessment is required
	People currently receiving Substance Use Disorder services		NA – Existing bio- psychosocial assessment is adoptable		Credentialing standards through MCBAP	Telephonic or in-person (face to face preferred)	Conducted as needed to determine the appropriate level of care as individual progresses through the treatment plan. Annual reassessment is required
Level II - Level of Care Utilization System (LOCUS)	People referred to PIHP for BH services needs	Assessment for mental health service needs	Within 15 days of ICO referral	PIHP	Appropriately licensed and/or credentialed working within scope of practice and trained in LOCUS	Telephonic or in-person (face to face preferred)	Annually or with significant change in acuity or condition
	People currently receiving BH services		NA – Existing bio- psychosocial assessment is adoptable		Appropriately licensed and/or credentialed working within scope of practice and trained in LOCUS	Telephonic or in-person (face to face preferred)	Annually (from date on the adopted assessment) or with significant change in acuity or condition

Note: This assessment schedule allows flexibility in completing the Personal Care Assessment at the same time as the Level I assessment (if being completed in-person) and/or the iHC Level II assessment. The NFLOCD may be completed at the same time as the PCA and/or iHC Level II Assessment to minimize in-person assessments with the enrollee. NFLOCD, PCA and iHC Level II Assessment must be conducted in-person and cannot be combined with a telephonic Level I Assessment. The ASAM, LOCUS and SIS Level II Assessments must be completed through referral to the PIHP as assessors must meet specific qualifications for each tool. The PIHP will continue to follow its existing intake and screening processes for MI Health Link enrollees. The ICOs should coordinate with the PIHP to conduct Level I Assessments for enrollees identified with a history or need of BH services. If a MI Health Link enrollee declines a referral to the PIHP for the PIHP to conduct a Level II Assessment, the ICO must make a note of this decision in the enrollee’s record and may not send a referral to the PIHP.