



UTAH DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF SERVICES FOR PEOPLE WITH DISABILITIES POLICY AND PROCEDURES		
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MINIMUM DATA SET HOME AND COMMUNITY-BASED		
RATIONALE: The intent of this policy is to establish procedures for administering the Minimum Data Set Home and Community-Based (MDS-HC) interRAI assessment. This assessment determines eligibility for the Physical Disabilities waiver (PDW), and establishes level of care. Authorizing Code: 26B-6-403 Rule: R539-1 Forms: MDS-HC		
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I. DESCRIPTION

This policy provides guidelines for division staff to follow when administering the Minimum Data Set Home and Community-Based (MDS-HC) interRAI assessment.

II. DEFINITIONS

The following terms are defined for this policy as:

- A. Eligibility review committee (ERC):** means the committee as described in Policy 1.63 "Eligibility review committee." ERC provides an eligibility recommendation in cases where an individual does not already clearly meet the state eligibility requirements and a recommendation is needed. This recommendation applies to eligibility for intellectual disability and related conditions, acquired brain injury, or physical disability services.
- B. Minimum Data Set Home and Community-Based (MDS-HC) interRAI assessment ("the assessment"):** means an instrument developed by interRAI, a global non-profit network of researchers and clinicians who develop standardized, evidence-based assessment tools to evaluate the health and care needs of vulnerable people.
- C. Physical disabilities waiver administrative case manager (PDW case manager):** means a division staff who is a registered nurse in the state of Utah and who is qualified to perform the assessment.
- D. Physical disabilities waiver program manager (PDW program manager):** means the division staff who manages the Physical Disabilities waiver (PDW) program.

III. POLICY

- A. The assessment shall be completed by a PDW case manager.
- B. The assessment shall be used to:
 - 1. determine eligibility for both the physical disabilities waiver and for non-waiver services;
 - 2. establish level of care for waiver services; and
 - 3. inform person-centered planning.
- C. Assessment results shall identify a Person's functional limitations and abilities.
- D. Results from the assessment inform decisions about the type, intensity, and duration of services to meet the Person's support needs and goals.
- E. The assessment shall be completed during intake for each individual applying for physical disability services.
- F. The assessment may be updated:
 - 1. Annually;
 - 2. when a second opinion is required;
 - 3. after an institutional stay; or
 - 4. after a significant change in health status.
- G. A PDW case manager shall be licensed in Utah as a registered nurse (RN).

IV. PROCEDURE

- A. The assessment is generally designed to be completed in-person, except as described in J through N.
- B. The PDW case manager shall use the assessment components:
 - 1. in a structured interview format;
 - 2. using clinical assessment protocols; and
 - 3. using observations of the Person in a physical environment.

Standardized Assessment.

- C. The PDW case manager shall:
 - 1. follow the assessment as outlined in the most current interRAI Home Care Assessment Manual;
 - 2. use the relevant sections of the assessment to explore a Person's functional capacity, quality of life, physical health, and mental health; and
 - 3. complete the clinical assessment protocols (CAP) as described in the manual.

Observation.

- D. The PDW case manager shall use observations from both the Person's living environment and from caregivers/direct support staff to inform each assessed area.

Reassessment: second opinions, institutions, and significant change in health status.

- E. A new assessment shall be required when a second opinion is needed. A second opinion is needed when:
 - 1. the ERC determines that a second opinion is necessary;
 - 2. there is a question about the validity of a Person's assessment scores; or
 - 3. a Request for Services (RFS) includes a service increase that is not supported by the most recent assessment.
- F. A new assessment may also be required when a significant change in health status occurs.
- G. A new assessment shall be required when establishing level of care after discharge from a skilled nursing facility or any other institution.

- H. The PDW program manager may assign a reassessment to a different PDW case manager, who is not the Person's case manager, for a second opinion, a significant change in health, or to reestablish level of care after admission to an institution.
- I. All assessments administered as a second opinion shall be reviewed by the PDW program manager.

Remote assessments.

- J. The assessment is generally conducted in-person. However, it may be completed remotely through any HIPAA compliant product or platform (e.g. Telehealth) during exceptional circumstances. Exceptional circumstances include:
 - 1. pandemics;
 - 2. infectious illnesses (other than pandemics);
 - 3. severe weather;
 - 4. natural disasters; or
 - 5. travel restrictions.
- K. Before conducting an assessment remotely, the PDW program manager or PDW case manager may consider whether a Person has any other diagnoses or disabilities that may need additional support during the assessment.
- L. Remote assessments require the PDW program manager or PDW case manager to determine whether any preassessment preparation or modifications shall be required. A supporting individual (family, friend, employee) shall be available for in-person assistance to a Person during the assessment.
- M. The PDW program manager or PDW case manager shall pay special attention to changes or symptoms related to the exceptional circumstance and then use the relevant sections of the assessment to evaluate:
 - 1. cognitive or functional losses;
 - 2. psychosocial issues;
 - 3. issues related to medication or food; and
 - 4. physical health symptoms.
- N. An in-person assessment shall be required if the Person:
 - 1. does not have access to the internet;
 - 2. Does not have access to a HIPAA compliant device that could be used for telehealth;
or
 - 3. is not able to effectively use telehealth software.