



## Coordinated Assessment System (CAS) Frequently Asked Questions

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### **In what stage of development is the assessment tool and how close are we to implementing the needs assessment process statewide?**

OPWDD has worked closely with researchers from interRAI to modify the interRAI Intellectual Disabilities Needs Assessment tool for use in the OPWDD service system prior to the start of the People First Waiver Case Studies. The result is the OPWDD Coordinated Assessment System (CAS) which was developed specifically to meet the needs of individuals with developmental disabilities. This draft tool is now complete and has been approved by the interRAI research consortium. OPWDD will test the draft tool and gather feedback through the case studies to ensure that the CAS is gathering adequate information to inform a person-centered care plan. Trained Assessment Specialists will be meeting with individuals and families to complete the assessment process during the case studies.

### **The interRAI is described as a comprehensive assessment suite. What kinds of need domains will be included in OPWDD's CAS?**

The domains of the interRAI cover a wide range of information related to an individual with developmental disabilities and are as follows: Demographics/Identification Information, Intake/Initial history, Communication and Social Involvement, Strengths, Relationships and Natural Supports, Lifestyle, Environmental Assessment, Communication and Vision, Cognition, Health Conditions, Independence in Everyday Activities (including ADLs, IADLs, functional and wheelchair mobility), Oral and Nutritional Status, Mood and Behavior, Medications, Supports and Services Utilization and Interventions, and Diagnostic Information. The NYS interRAI DD tool will be at the core of the needs assessment process, but the CAS will draw items (questions) from multiple tools within the interRAI Suite such as the Child and Youth Intellectual Disabilities tool, Community Mental Health, the Long Term Care, and the Correctional Facilities tools. There will be special items in the core tool that, if answered affirmatively, will trigger the need to complete supplemental items in specialty areas (i.e. Child and Adolescent, Forensics, Mental Health, Substance Use, etc.).

### **How reliable and valid is the Coordinated Assessment System (CAS)?**

The interRAI Intellectual Disabilities tool was found to have strong reliability and validity when used to assess individuals in various studies. Because the New York State CAS added to interRAI's Intellectual Disabilities tool and incorporated items from other tools within the interRAI Integrated Suite, the Case Studies will be an opportunity to test the reliability of new items. The Case Studies will also allow OPWDD to ensure the correct items were drawn into the CAS and that the assessment is providing a comprehensive and accurate portrayal of an individual and his/her strengths, needs and interests.

### **What will the needs assessment process be like for individuals and their families?**

Assessment Specialists will meet with individuals, their families and other people who are most important to the individual in their homes or certified residences. Assessment Specialists will spend a few hours with each individual getting to know him/her, observing his/her normal daily routine and hearing about his/her interests, needs, life goals. The needs assessment process will feel like a conversation between the individual, family and the Assessment Specialist. It will not be carried out like a formal interview or a test.

**Will there be an appeals process of assessment results for individuals and families?**

The appeals process afforded individuals enrolled in DISCOs will essentially follow the process that is currently established in state law for managed long-term care (MLTC) organizations (Article 44 of the Public Health Law and associated regulations NYCRR 98-1). In this process, as in OPWDD's system today, the individual or family member does not appeal the results of a needs assessment, but rather, can appeal a decision about services. Thus, if a member of a DISCO feels the results of a needs assessment have limited the individual's access to a requested service, an individual, family or advocate may appeal the service plan. The DISCO will review all grievances and appeals and make a decision within required timeframes. If the DISCO is unable to resolve the issue or an individual finds the appeal result unsatisfactory, individuals also have recourse to outside review through a Medicaid Fair Hearing and/or an External Review. The first step of any appeals process, however, involves both parties making an effort to address the complaint informally and avoid the need for filing a grievance or appeal. OPWDD anticipates that DISCOs' Care Coordinators will work closely with individuals to minimize the need for formal appeals.

**How will a new needs assessment process impact people currently receiving services?**

A needs assessment process is needed to establish consistent practices in assessing individuals' interests and needs across the state and to ensure that the system provides supports and services according to people's needs, rather than according to regional budget allocations. In November 2012, focused case studies will begin to test the Coordinated Assessment System (CAS) to determine how the tool can best be used to achieve these goals. Over the next several years, OPWDD will begin to implement the new needs assessment for people entering the service system for the first time and develop a plan for reassessing individuals who currently receive services as their needs change. Reassessment will be phased in over many years and will be carefully implemented to ensure that people's lives are not disrupted and their needs remain fully supported.

**How does the CAS inform a person-centered care plan?**

The CAS will be supported by an information technology system that will score the assessment and automatically identify where additional assessment is needed. When an area of high need or high risk is identified, assessment specialists will complete supplemental items with the individual, which will help guide person-centered care planning discussions between the individual, his or her family and advocates and the care coordination team.

**Are there states or other countries using the interRAI Integrated Assessment Suite?**

The interRAI suite of assessment tools is used extensively in other states and countries. The interRAI Home Care (HC) assessment was developed in 1994, and a version of this tool is currently being used to assess community health needs of various populations in 17 states. Later, in 2003, interRAI developed a tool focused on the specific needs of individuals with ID/DD, the interRAI ID. The tool was used by Michigan's Department of Community Health and in Canada for planning for deinstitutionalization. The instrument for people with ID/DD has also been used to assess individuals living in community residential settings in Canada and in long-term care settings throughout the U.S.

**How often will reassessments occur?**

Reassessments will occur on an ongoing basis, perhaps annually, to detect changes in the needs of an individual. These reassessments will ensure that the needs and interests of individuals receiving services within the People First Waiver are being adequately and consistently supported. In addition, reassessments will occur in response to a significant change in an individual's needs.