MFEI Level of Care Tool

Module 1 – How to Use the MFEI-LOC

Goals for Trainees

- To understand all items in the Medicaid Functional Eligibility Instrument Level of Care tool (MFEI-LOC)
- To complete sections of the MFEI-LOC with a satisfactory level of proficiency and consistency



Training Objectives

- To introduce you to the MFEI-LOC tool and to discuss its use
- To teach you the intent, process, and coding techniques for administering all sections of the MFEI-LOC
- To provide some practice in using the MFEI-LOC

Why Do We Assess?

- To determine the person's functional eligibility for Medicaid LTSS programs
- To make referrals to other community programs
- To address quality assurance
- To collect data for state policy planning

Why Do We Need Accurate Assessments?

- To allow for an equitable system that determines eligibility for programs/services
- To reduce time fixing problems and resolving issues; "Do it right the first time"

MFEI-LOC Background

- The Medicaid Functional Eligibility Instrument Level of Care (MFEI-LOC) is based on the interRAI Home Care (iHC) with some adaptations for Kansas
- interRAI tools are:

-Comprehensive, standardized instruments for evaluating needs, strengths, and preferences of those being assessed

-Designed for specific populations but with common universal core

-Not questionnaires; consist of **items, definitions, and response codes**

-Items describe performance, abilities, and capacity of person in a variety of domains

The Assessor's Role

- To capture a comprehensive picture of the person's functional capacity, quality of life, and health issues to ensure the person remains in the setting of choice for as long as possible
- To gather information from:
 - The person being assessed
 - Your observations
 - Collateral sources
 - Primary caregiver/family member
 - Hospital, medical or residential facility documents

MFEI-LOC Proficiency Skills for Assessors

- Understand:
 - Sections of the assessment
 - Intent, process, terms, and coding for each item
- Use questions:
 - To prompt person being assessed to describe how they perform tasks
 - To learn about outcomes
 - To take a consistent approach with each person
- interRAI uses a "look-back" period rather than an average or worse day standard:
 - More reliable
 - Three days (including today) unless noted otherwise
 - Include weekends
 - Set a "past 90 days" benchmark event for reference (e.g., Thanksgiving, 4th of July)

Conducting an Assessment with the MFEI-LOC

- The entire MFEI-LOC must be completed (all items)
- Assessor must meet with the consumer; assessment items cannot be completed or changed by assessors/staff not present at the assessment interview

- Review the assessment form carefully before using it for your first assessment
- Approach items by initiating a conversation from a person-centered, strengths perspective
- Regard the person being assessed as the primary source of information
- Use <u>all available</u> sources of information:
 - Direct questioning of person
 - Consulting primary informal helpers and caregivers
 - Consulting formal providers, as appropriate
 - Observation of person and environment
 - Communication with other members of support team
 - Review of available documents

Primary/Additional Informant Items

- These items will be found after the following sections: Cognition, Mood and Behavior, Functional Status, and Continence
- Use all available sources of information in completing the MFEI-LOC; after these sections, record a primary informant and all other additional informants
- If documentation, record based on source of documentation (e.g., doctor records are "provider")
- Coding:

 - **Gamily/Friend**
 - Legal Guardian/DPOA
 - **Provider**

- Talk in private with the person being assessed, if possible and as appropriate
- Communicate effectively using language that the person will understand (non-technical and primary language)
- Use your professional judgment of what information is most accurate when there are conflicts
 - Notes are required when there are conflicting sources of information
- Comment boxes are provided in each section of the assessment for assessors to make notes and add more information

- Probe further when needed
- Address items in any sequence that works best with a given person
- The assessment does not need to be completed in chronological item order
- You do not need to ask about each item individually (e.g. in checklists) if you already have the information needed to answer the item, such as from open ended questions, observations, or documentation
- Do not assume. If there is no evidence to support that a need is present, mark as unknown/not present

- Use the MFEI-LOC manual for consultation while out in the field; consult the interRAI manual for additional information
 - Examples in manual to help determine coding
- Information discovered in one area can be used in another section
- Follow agency protocols
- Take immediate action/report in the case of acute medical issues or risk of harm to self or others

- Standard Process
 - Start by interacting with the person
 - Have a conversation
 - Ask them questions
 - If the person has any hearing or communication devices, encourage their use during the assessment
 - Use probing questions to get more specific information when needed
 - e.g., "Did that happen in the last 3 days?"

(Standard Process Cont.)

- Observe the person
 - Observe how they interact with you and their caregiver/family, such as how well they follow the conversation
 - Observe how they move around in their environment
- Consult with caregiver, family member, or provider
 - Clarify answers if you are not sure of the correct response or if information presented by the person being assessed is contradictory
 - Use your professional judgment of what information is most accurate when there are conflicts, and note conflicting accounts in the comments area
- Check available records

- Sensitive Situations
 - Build rapport before asking sensitive questions
 - In some cases the information could negatively impact the relationship between the person and their caregiver/family
 - In these cases, speak with the caregiver/family separately from the person being assessed
 - For example, determining if the caregiver/family member is burned out and unable to continue providing care
 - It is okay if the person being assessed wants to leave the room during sensitive questions if another reliable informant can provide this information

- Broad questions may help the person to share information:
 - How are you doing?
 - What is a typical day like for you?
 - How do you take your medications?
 - Are you concerned about your health?
 Relationships? Your living situation?
 - What are your goals—short term and long term?

- Look Back Periods
 - Most of the items use a 3 day look back period
 - Some items use a 30, 90, or 180 day look back
 - If no look-back period is identified on the form, then use a 3 day look back period
- Non-interRAI items are marked with * and are not subject to look-back period
 - Average day, current status

Questions?