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Children, Families, Health, and Human Services Interim Committee Sue O'Connell, Legislative Research Analyst

HJR 24 STUDY: OPTIONS FOR ASSESSMENT TOOLS

Background

During the House Joint Resolution 24 study, providers of community services for people with developmental disabilities have questioned the adequacy of the assessment tool used in Montana to calculate the support a person needs in the community. They've suggested the state might want to consider using other, validated tools.

This briefing paper:

- discusses other available tools;
- outlines the potential costs of buying and using two nationally recognized tools; and
- provides options and questions for the committee's consideration.

The MONA and Other Assessment Tools

The Department of Public Health and Human Services (DPHHS) uses an assessment tool known as the Montana Resource Allocation Protocol, or MONA, as the starting point for determining the type and amount of services a person receives in the community. Many states use one of two nationally recognized assessment tools – the Supports Intensity Scale (SIS) or the Inventory for Client and Agency Planning (ICAP).

A 2006 Colorado study looked at a wide range of available tools. In addition to the SIS and ICAP, it listed as "national" tools:

- the Developmental Disabilities Profile, a four-page questionnaire developed by the state of New York that compiles information on a person's disability, intellectual challenges, medical conditions and medications, mobility, behavioral challenges and conditions, and self-care abilities; and
 - the North Carolina Support Needs Assessment Profile, a four-page tool developed by researchers at the state's Murdoch Developmental Center to rate a person's needs for daily living supports, health care supports, and behavioral supports.

The study also reviewed five state-developed tools, including the MONA.

The study recommended that Colorado adopt the SIS because it directly measures a person's support needs and is useful in planning individual services. It concluded that none of the tools developed by other states was suitable for use in Colorado. Instead, it suggested that the state revise its own state-developed tool if it wanted to use a "homegrown" assessment.



The table below compares some of the key element of the MONA, SIS, and ICAP assessments.

	MONA	SIS	ICAP
Developer	DPHHS	American Association on Intellectual and Developmental Disabilities	Riverside Press
Items Measured	Need for Paid Assistance for: Challenging behaviors Living in the community Current abilities Health and health care Employment	Need for Supports in: Home living Community living Lifelong learning Employment Health and safety Social Additional Measures Exceptional medical and behavioral support needs	 Skills in Four Areas: Motor skills Personal living skills Social and communications skills Community skills
Scoring System	 Scale of 1 to 5 1=Little or no paid assistance 5=High level of paid assistance 	Basic Support Needs: • Frequency of support • Daily support time • Type of support Exceptional Needs: • None • Some monitoring • Extensive support	Four Responses: Never or rarely completes Does, but not well Does fairly well Does well
Administered By	Case manager: state or provider	State FTE or contractor	State FTE or contractor
People Surveyed	Case manager and/or others	Client, family members, and others who know the person	Someone who has known the client at least 3 months and sees them on a day-to-day basis

Often, a state has selected a specific assessment tool after undertaking a review of available options. Stakeholders are sometimes part of that review process.

Costs

States that use the ICAP or SIS pay the developer a fee for each assessment or package of assessments, as well as for training on how to use the tool. In addition, states either have staff members or pay a contractor to conduct the assessments.

Reports reviewing assessment tools note that some people believe an independent third party should administer the assessment to ensure consistency in the way the assessments are conducted and scored. They also note that states may incur information technology costs if they choose a standardized tool that needs to be incorporated into existing computer systems.

The following information was readily available on costs in other states:

- The North Dakota Legislature has required use of the SIS and budgeted just over \$1 million for the current biennium to conduct 2,750 assessments.
- Colorado pays about \$53,000 a year to the SIS developer to use its online assessment system and pays trained interviewers \$236.35 per assessment. Last fiscal year, the state spent \$241,714 on SIS interviews by trained interviewers.
- Oregon has nine state employees who conduct SIS assessments as well as two other assessments and who are working on developing another tool. Each employee is able to assess about 200 people a year.
- Wyoming contracts with the University of Wyoming Institute on Disabilities to complete ICAP assessments. The annual \$312,000 contract allows for about 600 assessments to be completed each year. People are assessed when they initially apply for waiver services and are reassessed every 5 years.

Committee Considerations

If the committee decides to pursue legislation related to assessment tools, members should decide the following questions to guide the drafting of a bill:

- 1. Does the committee want to direct DPHHS to use a specific assessment tool? If so:
 - a. which tool should be used?
 - b. should DPHHS administer the assessments or contract to have the assessments done?
 - c. how many people should be evaluated each year and how frequently should reassessments be conducted? The number of evaluations done in a year will serve as a guide for the appropriation that should be included in any legislation.
- 2. Does the committee want to direct DPHHS to evaluate available validated assessment tools and to select the appropriate assessment tool based on that review? If so, does the committee want the bill draft to include:
 - a. a deadline by which DPHHS must complete the review and to begin using a new assessment tool?
 - b. direction on whether the tool should be used to evaluate people currently in the waiver or only people entering the waiver?
 - c. direction on how frequently reassessments should be conducted?
 - d. a requirement that DPHHS consult with stakeholders in the selection of a new assessment tool?
- 3. Does the committee want to direct DPHHS to evaluate available validated assessment tools and make a recommendation to the 2021 Legislature on the most appropriate tool to use and the funding needed to adopt use of a new tool?
- 4. Should the use of a new assessment tool be tested through a pilot project before being implemented more broadly?
 - a. If so, does the committee want to specify any parameters for the population to be included in the pilot or leave those decisions to DPHHS?
- 5. Are there other assessment-related bills the committee would like to have drafted for the June meeting?

Sources

- Barbara A. Lucenko and Lijian He, "Assessment Findings for Persons with Developmental Disabilities Served in Residential Habilitation Centers and Community Settings," *Washington State Department of Social and Health Services*, February 2011.
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 prepared by the Human Services Research Institute for the Colorado Division for Developmental Disabilities, June 2006.
- "Information about the ICAP for Respondents," Washington State Department of Social and Health Services, DSHS 10-329, revised June 2015.
- "People First Waiver Request for Information (RFI) Analysis-Assessment Section," New York State Office for People with Developmental Disabilities, July 17, 2012.
- E-mail correspondence with:
 - o Tina Bay, Director, Developmental Disabilities Division, North Dakota Department of Human Services, April 16, 2018;
 - Lee Grossman, Administrator, Developmental Disabilities Section, Behavioral Health Division, Wyoming Department of Health, April 27, 2018;
 - Fred Jabin, Manager, Assessment Unit, Office of Developmental Disability Services, Oregon Department of Human Services, April 26, 2018; and
 - o Brittani Trujillo, Case Management Services Coordinator, Office of Community Living, Colorado Department of Health Care Policy & Financing, April 26, 2018.

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