

**Department of Medical Assistance Services
Division of Long Term Care**

TECHNOLOGY ASSISTED WAIVER PEDIATRIC REFERRAL

Score daily nursing and technology needs to determine eligibility for the waiver.

**The completed assessment may be faxed with the screening forms to
DMAS Tech Waiver Services at: (804) 452-5468**

Applicant's Name _____ Phone _____ Date _____
 Address _____ Medicaid # _____
 Referral Source _____ Phone# _____
 Form Completed By _____ Phone # _____

Technology	Frequency	Points	Score
Ventilator	Continuous	50	
Ventilator	Intermittent	45	
Tracheostomy		43	
C-PAP, BIPAP		25	
Oxygen	Continuous	15	
Oxygen Continuous	Unstable Sats	35	
Peritoneal Dialysis		45	
J/G Tube	Continuous	15	
J/G Tube continuous	With Reflux	35	
NG Tube	Continuous	40	
NG Tube	Bolus	25	
IV Therapy	Continuous	40	
Subtotal Technology Score			
Nursing Needs	Frequency	Points	Score
Tracheal Suctioning	>Q1hr.	5	
	Q1-4hrs	3	
	Q4hrs.	2	
Enteral Feedings	Continuous	5	
	Q2hrs	4	
	Q3hrs	3	
	Q4hrs	2	

Nursing Needs	Frequency	Points	Score
Daily Medications Excluding nebulizers	3 or less meds	2	
	4-5 meds	4	
	6 or more	8	
Intermittent Catheter	Q4hrs	8	
	Q8hrs	6	
	Q12hrs	4	
Dressings	Q Day or PRN	2	
	Q8hrs or less	3	
	> Q8hrs	2	
Tracheostomy Care		5	
IV / Hyperal	Continuous	8	
	8-16hrs	6	
	4-7hrs	4	
Special Treatments (Nebs, chest PT)	< 4 hrs	2	
	QID	8	
	TID	6	
	BID	4	
Special monitor I&O	Q Day	2	
		5	
Other			
Subtotal Nursing Score			
Total Technology and Nursing Score			

**DMAS RN COORDINATOR'S
AUTHORIZATION**

Score Categories:

(DMAS COMPLETION ONLY)

- A** 50-56 points – Nursing 70 hours/ week
- B** 57-79 points – Nursing 84 hours/ week
- C** 80 or more - Nursing 112 hours/ week

DMAS USE ONLY

DMAS has the final authority to determine authorized nursing hours.

DMAS Total Technology / Skilled Nursing Score _____

DMAS Approved Nursing Hours / Week _____

DMAS Signature / Review Date _____

DMAS Comments:

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Pediatric Referral Instructions

1. Applicants are scored by the Pre-Admission Screening (PAS) team on this form for referral to the Technology Assisted Waiver as well as with any revisions/updates to the PAS. RN Supervisors will complete this form annually for LOCERI reviews and whenever there are major changes in the individual's medical or technical skilled needs.
2. Children (< 21 years old) must receive a minimum score of 50 points on the Pediatric Referral form (DMAS 109) for admission and to remain on the waiver.
3. Applicants must receive a score in the technology section of the form to qualify for waiver services. Scores in the technology section are adjusted to reflect the risk of death or disability if the technology stops as well as the degree of nursing assessment or judgment needed to operate the technology. Scores in the nursing needs section reflect the time needed to perform the skill.
4. Ventilator dependent children receive the technology score for ventilator regardless of the settings or type of support the ventilator is providing. BiPaP machines with an ordered breath rate will also receive the technology score for ventilator.
5. Oxygen is considered continuous when needed at least 8 hours per day. Increased points are awarded for unstable oxygen if children have continuous 24 hour per day oxygen use, and any two (2) of the following conditions:
 - Diuretic use
 - Albuterol treatments at least q4hrs around the clock
 - Weight is below 15th percentile for age and gain does not follow normal curve for height
 - Greater than three (3) hospitalizations in the last six (6) months for respiratory problems
 - Daily desaturations below physician ordered parameters and requiring nursing intervention
 - Physician ordered fluid intake restrictions
6. J/G-tube bolus feedings do not receive points in the Technology section of the DMAS 109 form.

J/G-tube feedings are considered continuous when received via pump at least 8 hours/day.

Children qualify for increased J/G-tube continuous with reflux points with one (1) of the following documented:
 - Swallow study that documents reflux within the last six (6) months
 - Treatment for aspiration pneumonia in the past twelve (12) months
 - Need for suctioning due to reflux at least daily (includes oral suctioning)
7. Suctioning is defined as pharyngeal or tracheal suctioning requiring a suction machine and flexible catheter. Nursing needs are assigned points based on the frequency of the need for the activity, i.e. trach suctioning q1hr. The child's nursing record must support the chosen frequency. Suctioning frequency should not be based on a period when a child has an infection or other acute respiratory illness but when he/she is at their normal baseline status. A child is ineligible for points in the suctioning category if he/she is able to suction their own trach.

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8. Medication points are awarded based on the complexity of the child's medication regimen:

- 3 or less medications = simple category (2 points)
- 4 or 5 medications = moderate category (4 points)
- 6 or more medications = complex category (6 points)

PRN or "as needed" medications are not counted when determining the appropriate medication category.

Nebulizer treatments do not count as medications, they are considered special treatments (see #10).

9. Dressing points are assigned depending on frequency of care for sterile dressing changes and wound care for stages II, III, or IV wounds. Dressing points are not assigned for tracheostomy tubes, gastrostomy tubes, etc. as these points are included in other sections.

10. Special treatments include routine nebulizer treatments, chest PT, blood sugar checks, INR checks (at home), colostomy/ileostomy/urostomy care, etc. Treatments must require a skilled professional. ROM or splint applications are not considered special treatments. Treatments that are done together, such as nebulizer treatments followed by chest PT three times per day (TID), would be assigned TID points (6 pts.)

Children receiving single or multiple different treatments four (4) or more times per day would receive QID points (8pts.) The maximum awarded in this category is eight (8) points no matter how many treatments are performed.

11. Specialized I/O monitoring is reserved for those who need careful monitoring of intake and output due to significant conditions such as kidney problems, severe dumping syndrome or peritoneal dialysis. Children are eligible for these points if I & O results require action on the part of the nurse to make adjustments in tube feeding amounts or IV fluid rates. Normally this monitoring would be due to the need for replacement fluids if the output is too high.

12. The "Other" category is for **major** procedures that are not covered elsewhere on the form. Children with needs that are not covered on the referral form should be discussed with a DMAS Health Care Coordinator who will assign a point score for the "Other" category.

13. Assign points in all relevant categories and record the total points at the bottom of the page.

14. Skilled nursing hours should decrease when there is a decrease in a child's total points indicating medical improvement.

If further help is needed questions may be sent to: LOCreview@dmas.virginia.gov