



# Technology Assisted Waiver Program

## MATLOC Eligibility Assessor Policy

### Question and Answers

June 24, 2015

- 1. Will the changes in assessment policy impact the amount of children who will qualify for TA?**

A: KDADS does not anticipate a significant change in the number of children who will remain eligible for the Technology Assisted Waiver.

- 2. Why children under the age of 2 are not awarded points for incontinence?**

A: Since most children under the age of two are not yet potty trained incontinence is part of the normal development for children under age 2.

- 3. Why is this policy being issued?**

A: The purpose of this policy is to provide clarification in order to standardize the interpretation by the assessors conducting the eligibility assessment using MATLOC.

- 4. Why do “wound care” exclude wounds that affect only the epidermis, and do not reach down to the dermis?**

A: General wound care points are awarded only if wounds require a minimum of a daily dressing, or a treatment under the direction of a physician. As stated in the policy, no points are awarded for superficial (surface) wounds or lacerations (e.g. cut, scratch, and tear).

- 5. Why are points awarded by weight, and not the number of caregivers required, or level of difficulty of dressing, bathing, or lifting the patient?**

A: The points signify the number of minutes or hours necessary to provide that specific care identified in the MATLOC Assessment.

- 6. There are many children who are sensory impaired to such an extent that are not candidates for assisted devices. It takes extra time to care for these individuals.**

**Why, then, does the definition for auditory and visual assisting devices include only those who wear them “daily, at all times during waking hours”?**

A: Qualification for acuity points is under the professional assessment by the assessor. KDADS has established a baseline for assessing visual and auditory impairments which includes the definition provided in this policy. See policy revision for clarification.

**“Visual: Have a diagnosis of legal blindness or cortical vision impairment, and/or must require an assistive device, used daily, in use at all times during waking hours.**

**Auditory: Must have a diagnosis of major hearing loss or deafness, and/or must require an assistive device, use daily, in use at all times during waking hours.”**

**7. Why the change in point awarding for suctioning? As the amount of suctioning a child receives varies on a day-to-day basis, why is there not more leniency in this wording?**

A: This is not a change. The definition of “special treatment” previously established and noted this policy is:

*“Special Treatments=10 points: reserved for medical technologies not identified above and should be considered as an additional technology need. Compensation points will be awarded if the technology requires a need for intervention at least 4 times per day and is a medically necessary treatment for the individual as determined by the attending physician.”*

**8. If my child is primarily fed by gastric tube (g-tube), and receives supplemental feedings by mouth, will my child lose eligibility for the TA waiver?**

A: To qualify for the TA waiver individuals must depend on a G-tube as a primary source of nutrition. G-tube feeding and technology points will be awarded only when the G-tube is required for the primary purpose of nutritional feedings.

**9. My child takes some nutritional feeding by g-tube and uses g-tube for primary hydration. Will that make my child eligible for the same technology points as children who receive their food via g-tube?**

A: G-tube used for the primary purpose of “hydration” or “medication” is not considered a qualifying technology.

**“Utilization of G-tube solely for the purpose of hydration is not a qualifying technology, however nursing acuity points may be awarded for assessed need for hydration as ordered by the medical provider.”**

**10. Can consumers receive “reflux” acuity points if they were on reflux meds that are controlling the condition?**

A: See (C)(ii)(c)

**“In order to receive reflux points, an individual who has a qualifying G-tube must have documented one of the following conditions:**

- **Swallow study within the last six months that documents reflux.**
- **Treatment for aspiration pneumonia in the past 12 months**
- **Need for suctioning due to reflux (not oral secretions) at least daily.”**

**11. Why did KDADS write this policy without input from the stakeholders?**

A: This policy was posted on the KDADS website for a 30 day public comment period to seek stakeholder input.

KDADS is collecting email addresses for future stakeholder notification of proposed new or policy revisions. If you would like to be removed from the ListServ, please send your request to [hcbs-ks@kdads.ks.gov](mailto:hcbs-ks@kdads.ks.gov) .

**12. Why are specific guidelines necessary for interpreting the assessment tool, what about professional nursing judgement?**

A: Specific guidelines are necessary to establish consistency in the interpretation of the MATLOC instrument while allowing flexibility for Assessors to apply professional nursing judgment in order to ensure consistency in eligibility determination across assessors.