

Sec. 17a-230-7. Eligibility determination

(a) Determination of client eligibility for authorization shall be based on the regional eligibility team's review of the information provided in written referral materials in accordance with Section 6 of these regulations. This review shall include, but shall not be limited to, verification of the client's diagnosis of mental retardation as defined in these regulations, determination of the level of care required by the client and determination of need for residential services. The commissioner or his designee may waive the level of care assigned to a specific client by the regional eligibility team, and assign a different level, if the commissioner or his designee deems such action reasonable to facilitate or promote an otherwise appropriate placement.

(b) There shall be five levels of care: (1) Level I shall be the supervised level of care which shall provide minimal protection and supervision, limited professional, consultative and support services concentrating on the use of generic community services, refinement of independent living skills and counseling for placement into employment. Residents shall have self-preservation skills and shall be capable of self-administering any medications they may require. (2) Level II shall be the semi-structured level of care which shall provide the supervision of basic living skills, training in the use of leisure time and development of social skills. Residents shall have self-preservation skills, shall be capable of administering any medications they may require and shall receive training to assure maintenance of these skills. (3) Level III shall be the structured level of care which shall provide training in basic living skills, training in the use of leisure time and development of social skills and professional consultative and support services as needed. Residents may not have acquired self-preservation skills or may not be capable of self-administering medications and shall receive training in both. (4) Level IV shall be the intensive level of care which shall provide training in basic self-care skills, behavioral intervention and modification of problem behaviors, and direct professional support services. Residents shall receive intensive training designed to develop self-preservation skills and shall have medications administered by appropriately training personnel. (5) Level V shall be the highly intensive level of care which shall provide total support for self-care, intensive behavioral intervention and modification, and direct professional support services. Residents shall require twenty-four hour supervision due to total lack of self preservation skills and may require up to twenty-four hour medical monitoring.

(c) The department shall determine if the client meets the following financial eligibility requirements: (1) the client is eligible for or receiving aid to the disabled, aid to the blind or aid to the elderly, or (2) the client does not have the ability to pay for any portion of the residential services at his assigned level of care at the established rate, as evidenced by a signed financial disclosure statement on forms provided by the department, or (3) the client has the ability to pay for only a portion of the residential services at his assigned level of care at the established rate, as evidenced by a signed financial disclosure statement on forms provided by the department.

(d) If financial eligibility is based on ability to pay for a portion of residential services as in sub-section (c) (3) of this section, the client shall be eligible for authorization for funding of only that portion of the residential services for which he is unable to pay.

(e) The regional eligibility team shall create three separate lists of individuals who are

Regulations of Connecticut State Agencies

determined to be eligible for authorization in accordance with sub-sections (a) and (b) above as follows: (1) public sector clients, (2) department's urgent waiting lists of clients from the private sector, (3) private sector clients. Each list shall be maintained according to levels of care in order to facilitate residential development and client selection by the private sector according to the established prevailing ratios addressed in Section 8 of these regulations.

(f) The regional eligibility team shall create a separate list of individuals who are determined to be eligible for respite in accordance with (a) and (c) above and without regard to whether the individual is from the public sector or the private sector.

(g) Appeals under Section 7 shall be processed according to Section 14—Hearings and Reviews.

(Effective June 28, 1994)