

## **APPENDIX II**

### **HIV Medical Case Management 2013 Mini-Acuity Scale & Complete Acuity Scale**

#### **Definition and Purpose**

The MCM Mini-Acuity Scale is used to determine whether a client is experiencing one of the prioritized barriers requiring immediate attention. Both the Mini Acuity Assessment and the full Acuity Scale are objective tools used to establish the frequency and intensity of engagement a client requires when receiving MCM services.

#### **Process & Description**

The Mini-Acuity Scale should be completed at the time of entry into MCM and at predetermined client assessment and reassessment periods during a measurement year.

Refer to the Acuity Scale for guidance on how to complete.

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#### **Indicators for placement into Tier III acuity**

***Clients that present to MCM in one of these ten (10) situations will automatically be placed in the Intensive Management tier or tier III on the Acuity Scale:***

- Homelessness
- Peri-incarceration
- Pregnancy without prenatal care
- CD4 count below 200 **and** a viral load above 400
- New diagnosis of HIV
- Untreated mental illness
- New to Antiretroviral therapy
- Not in care/Re-engaging in care
- Non-adherence to HIV medication
- Chemical health/substance use

These clients will remain at the Intensive management tier for a 3-month period in order to address the more immediate needs associated with such high risk clients. Clients **may** be moved to a lower acuity tier, if appropriate, after the reassessment has been completed.

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## Part 1: How to assign a score to a client using the Acuity Scale

The Acuity Scale is based on a “point” system that reflects the client’s needs across a broad spectrum of function areas that include medical, behavioral, and environmental factors. The points on the Acuity Grid range from 1 point (Self management) to 4 points (Intensive). There are 25 areas of function used to assess the appropriate tier of management. Within each area of function the point value increases as the client’s need for assistance increases.

- Within each area of functioning place a checkmark in the appropriate management tier box to assign a point value to the particular area.
- The medical case manager should make this decision based on client self-report, observation and/or documented evidence.
- The client should be assigned to only one management tier for each area of function.
- In certain cases, the client must meet one or more criteria within a management tier box in order to receive points. These criteria are connected using the word “**and.**”
- If the client must meet only one criterion in a management tier box the word “**or**” is used to separate the different criteria.
- If there are observed physical or behavioral indications that are so compelling that they may be potentially harmful or disabling to a client, a higher management tier should be assigned to that area of functioning category so that necessary support may be provided to stabilize the client or improve their health status.
- Enter the point(s) assigned to the particular area of functioning on the score line in the far left column on the acuity scale grid.
- At the end of the Acuity scale, add the points to obtain a final numerical score.
- Based on this score assign the client to the appropriate management tier using the “at-a-glance” table located in the fourth section of the Acuity Scale.

## Part 2: Characteristics of the client at each tier of management and the amount of client contact required for each tier

### Tier 3: Intensive management

A client in this tier is considered medically unstable and needs to be engaged on a concerted and consistent basis. The client has a recent history of being *lost to care*, missing medical appointments, has a *viral load* above 400, *CD4 count* below 200 and is non-adherent to medication and/or treatment options. The client may have an *opportunistic infection(s)* and other *co-morbidities* that are not being treated or addressed and has no support system in place to address related issues. The client needs monthly phone contacts, a face-to-face meeting every two months, and a complete reassessment every six months. **85 or Greater Points**

### Tier 2: Moderate management

This client requires the medical case manager’s assistance to access and/or remain in care. The client is at risk of failing the service plan, risk of becoming *lost to care* and is considered medically unstable without medical case manager’s assistance to ensure access and participation in the continuum of care. Support systems are not adequate to meet the client’s immediate needs without the medical case manager’s intervention. The client needs phone contacts every three months, a face-to-face meeting every six months, and a complete reassessment every six months. **61 to 84 Points**

## Tier 1: Basic management

This client is adherent to medical appointments and ARV medications with occasional missed appointments. Most of the time, the client reschedules appointments and is able to communicate by phone when called. The client is in treatment, medically stable with minimal medical case manager's assistance and does not show signs of needing assistance getting access to care. The client needs phone contacts every six months, a face-to-face meeting every six months, and a complete reassessment every six months. **36 to 60 Points**

## Tier SM: Self management

This client has demonstrated capability of managing self and disease. The client is independent, maintains a medical home, is medically stable, virally suppressed and has no problem getting access to HIV care. The client needs phone contacts every six months, a face-to-face annually, and a complete reassessment annually. **Up to 35 Points**

## Part 3: Description of Areas of Functioning

### Access

Description of the client's need and eligibility for health benefit programs and support services to assist in establishing, maintaining, and participating in medical care and treatment services.

- **Medical Home:** Evaluates the degree to which the client is established and engaged in care with a HIV primary care provider.
- **Health Insurance/Benefits:** Evaluates the client's access to health insurance/benefits that cover medical care services and medications; ability to pay for any applicable *co-payments, deductibles, premiums and/or spend-down requirements* associated with those benefits; and capacity to complete documentation and navigate the systems necessary to maintain health insurance/benefits.
- **Cultural/Linguistic:** Evaluates how the client's cultural beliefs/practices, literacy tier, and English language skills affect his/her ability to understand medical information, collaborate with professionals in the health care continuum, access referral resources or degree of participation in ones own care secondary to religious beliefs.
- **Transportation:** Measures the client's access to public and/or private transportation services and the degree to which the availability of transportation impacts the client's ability to attend appointments with core medical services providers.

### Health Status

Description of the client's current physical and medical condition, prognosis and ability to meet his/her own basic life and care needs.

- **Activities of Daily Living:** Measures the client's functional status and ability to manage the everyday tasks required to live independently and to routinely use medical care.
- **Disease Progression:** Measures the degree to which HIV disease has compromised the client's immune system, the **need** for acute medical intervention to stabilize the client's health and the tier of intervention necessary to help the client achieve and maintain optimal health.

- **Disease Co-Morbidities:** Evaluates the presence of any additional medical diagnoses that may complicate the client's medical care and the impact of these co-morbid diagnoses on the client's overall health stability.
- **Oral Health:** Evaluates the effect of acute and/or chronic oral health problems on the client's overall health and the client's access to oral care health services.
- **Nutritional Needs:** Evaluates the effect of medical illnesses on the client's ability to maintain a healthy weight, the need for medical nutritional counseling to address nutritional problems, and the need for access to additional support systems to purchase food and food supplements.

## Health Knowledge

Describes the client's ability to understand his/her current health status and diagnoses as well as his/her ability to comprehend and participate in his/her own health care and treatment.

- **Health Literacy:** Measures the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.
- **HIV Knowledge:** Evaluates the client's understanding of HIV disease, its mode of transmission and prevention and its effects on the body as well as the client's ability to translate this knowledge into healthy behaviors.

## Treatment Adherence

Details the client's current and historical adherence to both medical care and treatment *regimens*; assesses any physical, environmental, and/or emotional factors that may directly impact the client's ability to maintain treatment adherence; and determines the tier of support the client may need to achieve medically recommended tiers of treatment adherence.

- **Medication Adherence:** Explores the client's current tier of adherence to his/her ARV medication *regimen* and the client's ability to take medications as prescribed.
- **Appointments:** Explores the client's current tier of attendance at appointments for core medical services and his/her understanding of the role of regular attendance at medical and non-medical appointments in achieving positive health outcomes.
- **ARV Medication Side Effects:** Evaluates the degree to which adverse side effects associated with *antiretroviral (ARV)* treatment impact the client's functioning and adherence tiers.
- **Knowledge of HIV Medications:** Evaluates the client's understanding of his/her prescribed ARV medication regimen, the role of medications in achieving positive health outcomes and techniques to manage side effects of *ARV medication*.
- **Treatment Support:** Measures the degree to which the client's relationship with family, friends, and/or community support systems either promotes or hinders the client's ability to adhere to treatment protocols.

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### Behavioral Health

Details any emotional, cognitive, disordered and/or addictive behaviors diagnosed, displayed, or reported by the client and the impact of these behaviors on the client's ability to collaborate with health care professionals and adhere to health care *regimens*.

- **Mental Health:** Evaluates the degree to which diagnosed or perceived cognitive impairment, emotional problems, or disordered behaviors or thinking impact the client's functioning and ability to adhere and participate in medical care as well as the client's access to mental health services to address these issues.
- **Addiction:** Assesses affect of addictive behaviors on the client's functioning and ability to adhere and participate in medical care as well as the client's access to substance abuse treatment services to address these problems.
- **Risk Reduction:** Assesses the client's current engagement in high-risk behaviors including his/her ability to identify past and present HIV transmission risk and willingness to understand, implement and sustain behavioral change.

### Children/Families

Describes the client's primary, self-identified familial relationships particularly any individuals dependent on the client for basic life needs; the tier of support needed to assist the client in sustaining these primary relationships; and the degree to which these relationships impact the client's ability to adhere to recommended medical practices.

- **Children:** Evaluates the client's role in caring for minor dependents; the impact of care responsibilities on the client's ability to adhere to medical appointments and ARV medication regimens; the impact of the client's health status on his/her ability to provide care for dependent children; and the need for interventions to assist clients experiencing acute illnesses to secure temporary and/or permanent placement for dependent minors.
- **Dependents:** Evaluates the client's role in caring for other dependents; the impact of care responsibilities on the client's ability to adhere to medical appointments and ARV medication regimens; the impact of the client's health status on his/her ability to provide care for dependents; and the need for interventions to assist clients experiencing acute illnesses to secure temporary and/or permanent placement for dependents.

### Environmental Factors

Describes the client's current social and physical environment; how contributing environmental factors either support or hinder the client's ability to maintain medical care and achieve positive health outcomes; and the tier of external support needed to address critical barriers to successful outcomes.

- **Domestic Violence:** Gauges the presence of physical, sexual, economic and/or psychological violence by the client's intimate partner and the impact of this domestic violence on the client's safety and ability to adhere to health care treatment.
- **Living Situation:** Evaluates the stability of the client's current residential location, the client's ability to maintain rental and utility payments, the impact of the client's housing situation on

his/her ability to access medical care services, and the availability of housing support programs to assist the client in securing a stable residence.

- **Financial:** Measures the degree to which the client's income suffices to meet his/her basic needs and the tier of intervention necessary to increase his/her income and promote access to resources such as vocational rehabilitation, education, employment opportunities, entitlement programs, etc.
- **Legal:** Measures the client's current and historical involvement with the correctional system; the client's needs for *advanced directives* including *living will*, *will*, *durable medical power of attorney (DMPOA)* and/or *power of attorney (POA)*; and the client's need for legal services in order to obtain HIV-related entitlements including disability benefits.

*Part 4: Acuity Scale for Adults*

Areas of Functioning	INTENSIVE MANAGEMENT TIER 3 (4 points)	MODERATE MANAGEMENT TIER 2 (3 points)	BASIC MANAGEMENT TIER 1 (2 points)	SELF MANAGEMENT TIER SM (1 point)
<p><b>The Mini Acuity Assessment</b> is administered with every client as part of the initial intake to identify and address crisis needs. It can be a companion document for the Acuity Scale and provides information for the development of the individual service plan (ISP).</p>				
<p><b>Peri-Incarceration</b></p> <p>Score _____</p>	<p>* Client was recently incarcerated with over 3 month lapse in treatment and care.</p>	<p>* Client was recently incarcerated with lapse in treatment and care.</p>	<p>N/A</p>	<p>N/A</p>
<p><b>Pregnancy without prenatal care</b></p> <p>Score _____</p>	<p>* Client is currently not accessing prenatal care.</p>		<p>N/A</p>	<p>N/A</p>

Areas of Functioning	INTENSIVE MANAGEMENT TIER 3 (4 points)	MODERATE MANAGEMENT TIER 2 (3 points)	BASIC MANAGEMENT TIER 1 (2 points)	SELF MANAGEMENT TIER SM (1 point)
<p><b>The Mini Acuity Assessment</b> is administered with every client as part of the initial intake to identify and address crisis needs. It can be a companion document for the Acuity Scale and provides information for the development of the individual service plan (ISP).</p>				
<p><b>Living situation</b></p> <p><b>Score_____</b></p>	<p>* Client is homeless, living in a shelter, sleeping on streets or in his/her car; <b>OR</b> * * Client is in immediate danger of becoming homeless and needs housing placement ; <b>OR</b> * Client is unable to live independently and needs to be placed in assisted living facility.</p>	<p>* Client is in transitional or unstable housing; <b>OR</b> * Client is at-risk of eviction, having utility(s) shutoff and/or of losing housing due to financial strain; <b>OR</b> * Client needs assistance with rent/utilities to maintain housing.</p>	<p>* Client currently has adequate housing but may need occasional short-term rent or utilities assistance to remain stable.</p>	<p>* Client is in permanent housing and is not in danger of losing housing.</p>





Areas of Functioning	INTENSIVE MANAGEMENT TIER 3 (4 points)	MODERATE MANAGEMENT TIER 2 (3 points)	BASIC MANAGEMENT TIER 1 (2 points)	SELF MANAGEMENT TIER SM (1 point)
<b>Behavioral Health</b>	<p><b>The Mini Acuity Assessment</b> is administered with every client as part of the initial intake to identify and address crisis needs. It can be a companion document for the Acuity Scale and provides information for the development of the individual service plan (ISP). Details any emotional, cognitive, disordered and/or addictive behaviors diagnosed, displayed, or reported by the Client and the impact of these behaviors on the Client's ability to collaborate with health care professionals and</p>			
<b>Mental Health</b>  <b>Score_____</b>	<p>* Client expresses or exhibits behavior that indicates the Client is a danger to self or others;  <b>OR</b>  * Client has been diagnosed with a <i>mental illness</i> and is not in treatment.</p>	<p>* Client self-reports <i>mental illness</i> or history of <i>mental illness</i> and is in treatment but is non-compliant with following treatment prescribed.</p>	<p>* Client self-reports <i>mental illness</i> or history of <i>mental illness</i> and receives treatment and/or is evaluated consistently; and condition is stable.</p>	<p>* Client self-reports no history of <i>mental illness</i> and does not exhibit any behavior that may need an assessment.</p>
<b>Addiction</b>  <b>Score_____</b>	<p>* Client self-reports or exhibits behavior of current <i>addiction</i> or <i>substance abuse</i> and is not willing to seek help;  <b>OR</b>  * Client is not willing to resume treatment;  <b>OR</b>  * Client displays indifference regarding consequences related to an <i>addiction</i> or <i>substance</i></p>	<p>* Client self-reports <i>addiction</i> or <i>substance abuse</i> but is willing to seek assistance.</p>	<p>* Client self-reports past problems with <i>addiction</i> or <i>substance abuse</i> with less than 1 year of recovery.</p>	<p>* Client self-reports no difficulties with <i>addictions</i> or <i>substance abuse</i>;  <b>OR</b>  * Client reports past problems with <i>addiction</i> or <i>substance abuse</i> with more than 1 year in recovery;  <b>OR</b>  * Client has no need for treatment or no referral is indicated.</p>





Areas of Functioning	INTENSIVE MANAGEMENT TIER 3 (4 points)	MODERATE MANAGEMENT TIER 2 (3 points)	BASIC MANAGEMENT TIER 1 (2 points)	SELF MANAGEMENT TIER SM (1 point)
<b>Access</b> <i>(continued)</i>				
<b>Cultural/ Linguistic</b>  <b>Score</b> _____	Client is unable to understand or function within the continuum of care system; <b>OR</b> Client is in a crisis situation and in need of immediate assistance with translation services or culturally sensitive interpreters and advocates.	Client often needs translation services or sign interpretation to operate within the continuum of care or to understand complicated medical concepts.	Client may need infrequent, occasional assistance in understanding complicated forms; <b>OR</b> Client may need occasional help from translator or sign interpreters.	Client has no language barriers and is capable of high tier functioning within linguistic/cultural environments.
<b>Transportation</b>  <b>Score</b> _____	... Client has no access to public or private transportation (e.g. lives in an area not served by public transportation, has no resources available for transportation options) <b>AND/OR</b> ... Client is unable to access transportation due to physical disabilities.	... Client has frequent access needs for transportation; <b>OR</b> ... Client has difficulty accessing transportation due to physical disabilities.	Client needs occasional, infrequent transportation assistance for HIV related needs; <b>OR</b> Client is unable to understand bus/train schedules or how to manage bus/train transfers.	Client is fully self-sufficient and has available and reliable transportation; and has no physical disabilities or physical disabilities limiting access to transportation.







Areas of Functioning	INTENSIVE MANAGEMENT TIER 3 (4 points)	MODERATE MANAGEMENT TIER 2 (3 points)	BASIC MANAGEMENT TIER 1 (2 points)	SELF MANAGEMENT TIER SM (1 point)
<b>Health Knowledge</b>	Describes the Client's ability to understand his/her current health status and diagnoses as well as his/her ability to comprehend and participate in his/her own health care and treatment.			
<b>Health Literacy</b>	<p>Client needs repeated oral instruction to understand health information;</p> <p style="text-align: center;"><b>OR</b></p> <p>Client cannot translate basic written prescription/health information into daily <i>Antiretroviral therapy (ART)</i>;</p> <p style="text-align: center;"><b>OR</b></p> <p>Client does not have the capacity to understand basic health or prescription information;</p> <p style="text-align: center;"><b>OR</b></p> <p>Client is <i>cognitively impaired</i>.</p>	<p>Client can read some health /prescription information;</p> <p style="text-align: center;"><b>OR</b></p> <p>Client may need assistance to translate complicated prescription/health information into daily <i>ART</i>;</p> <p style="text-align: center;"><b>OR</b></p> <p>Client is mildly <i>cognitively impaired</i>.</p>	<p>Client can read most basic health/prescription information;</p> <p style="text-align: center;"><b>OR</b></p> <p>Client may occasionally need assistance to translate changes in prescription/health information into daily <i>ART</i>;</p>	<p>Client has the capacity to obtain, process and understand health/prescription information; And Client is able to manage complicated <i>ART</i> without additional assistance.</p>
<b>Score</b> _____				





Areas of Functioning	INTENSIVE MANAGEMENT TIER 3 (4 points)	MODERATE MANAGEMENT TIER 2 (3 points)	BASIC MANAGEMENT TIER 1 (2 points)	SELF MANAGEMENT TIER SM (1 point)
<b>Treatment Adherence</b> <i>(continued)</i>				
<b>Adherence to appointments</b>  <b>Score</b> _____	Client has missed multiple scheduled appointments in last 60 days.	History of 3 or more missed appointments in the last 120 days.	Client has missed no more than 1 appointment within the last 120 days with appropriate rescheduling and	No history of missed appointments in the last 12 months.
<b>ARV medication side effects</b>  <b>Score</b> _____	Client is experiencing severe <i>side effects</i> with <i>ARV medications</i> ; <b>OR</b> Client has been newly prescribed <i>ARV medication</i> .	Client is experiencing mild <i>side effects</i> with <i>ARV medication</i> .	Client has a recent history of <i>side effects</i> with <i>ARV medication</i> .	No current report of <i>side effects</i> with <i>ARV medications</i> ; <b>OR</b> ARV medication is not indicated at this time.









Areas of Functioning	INTENSIVE MANAGEMENT TIER 3 (4 points)	MODERATE MANAGEMENT TIER 2 (3 points)	BASIC MANAGEMENT TIER 1 (2 points)	SELF MANAGEMENT TIER SM (1 point)
<b>Environmental</b>	Describes the Client's current social and physical environment; how contributing environmental factors either support or hinder the Client's ability to maintain medical care and achieve positive health outcomes; and the tier of external support needed to address critical barriers to successful outcomes.			
<b>Domestic Violence</b>  <b>Score _____</b>	Client reports that he/she is currently engaged in physically, sexually and/or emotionally abusive relationship and feels life is in danger of violence.	Client reports that he/she has experienced domestic violence in the past 12 months;  <b>OR</b> MCM observes visible evidence that the Client may be at risk.	Client self-reports a history of domestic violence, but is not in abusive relationship;  <b>OR</b> Client is removed from abuser.	Client self-reports no history of domestic violence.





*Part 5: Acuity Scale “AT-A-GLANCE”*

<b>Ranges of Summary Acuity Score</b>				
<b>Points</b>	<b>Health Status/Medical Condition</b>	<b>Support System</b>	<b>Management Tier</b>	<b>Frequency</b>
<b>Up to - 35 Points</b>	Medically stable without Medical Case Management assistance	Able to manage supportive needs without assistance	Self-Management	Face to Face at least once every 6 months for reassessment no phone contact indicated
<b>36 - 60 Points</b>	Medically stable with minimal Medical Case Management assistance	Able to manage supportive needs with minimal Medical Case Management assistance	Basic Management	Face to Face every 6 months with at least one phone contact every 3 months
<b>61 - 84 Points</b>	At risk of becoming medically unstable without Medical Case Management assistance	Support systems are not adequate to meet Client’s immediate needs without Medical Case Management assistance	Moderate Management	Face to Face a minimum of every 3 months with at least one phone contact monthly.
<b>85 or More Points</b>	Medically unstable and in need of comprehensive Medical Case Management assistance	Has no support system in place and unable to manage supportive needs without comprehensive Medical Case Management assistance	Intensive Management	Face to Face at least once a month with phone contacts weekly

## Appendix I: Mini -Assessment Tool

### *Instructions for use of MCM Mini Assessment tool*

#### **Instructions for use**

The MCM Mini Assessment Tool is administered to elicit the information necessary to confirm self management (tier SM) upon intake. It also serves as a companion document for the Acuity Scale. It can also function as an information source for the development of the MCM Service Plan.

**The mini-assessment tool should always confirm the self management tier of a client. If the client is not determined to be self-managed, a comprehensive assessment is needed.** The mini-assessment tool covers all the functional areas in a compressed format but gathers enough important information to assist in determining that the client can indeed self-manage.

The medical questions are related to clients' retention in care and achievement of positive health outcomes. Clients will bring documented evidence of laboratory results or the medical case manager will verify the data with the medical provider. When assessing any medical area, the medical case manager should include any identified deficiency as part of client's service plan. Achieving viral suppression is a priority in the service plan.

If any deficiency is identified in the medical area during assessment, medical case manager should **STOP** and conduct a comprehensive assessment. If deficiencies are found in the behavioral and psychosocial areas, the client should be referred to appropriate personnel either in the intake agency or to another agency that have specialty in that area. However if the client reports **suicidal or homicidal** thoughts/intents, an **IMMEDIATE REFERRAL** is required. The medical case manager will follow up to ensure that services were received.

