A. Purpose

Each DMR region will have a Utilization Resource Review Committee that:

- Reviews all initial requests for intensive staffing
- Reviews budget requests that exceed the DMR funding limits
- Monitors intensive staffing situations which are medically required

The Department of Mental Retardation (DMR) shall have a Statewide Utilization Resource Review Committee that:

- Reviews and approves all intensive staffing requests which are required for behavioral reasons and are expected to continue for longer than six months.
- Reviews a sample of budget allocations that exceed the DMR funding limit that have been approved by the regional Utilization Resource Review (URR) committees.

All individuals with intensive staffing will have programs to address the need for such staffing levels, with data kept to document success or problems, and strategies modified responsively. Programs will include activities that engage the individual proactively in accordance with his or her needs.

B. Applicability

This revised procedure applies to all intensive staffing situations in DMR funded, operated, or licensed services except for those individuals who are reviewed by the Regional and/or Statewide Forensic Committee.

C. Definitions

Funding limit: The maximum level of funding for supports and services is established by the department on an annual basis.

Intensive staffing is defined as two levels of staff support as follows:

1. **Intensive Staffing - Arm’s Length**: The assignment of clearly identified staff to a specific individual whose sole responsibility, for the duration of his or her assignment, is the supervision of that individual and to be within arm’s length of the individual at all times. Only in an emergency situation may the identified arm’s length staff be utilized to supplement the rest of the staff.

2. **Intensive Staffing - Line of Sight**: The assignment of clearly identified staff to a specific individual. It is the responsibility of the staff person(s) to have that individual within their visual sight at all times for the duration of their assignment. The IDT must specify the maximum distance allowable between the individual and the staff necessary to protect the individual.

**NOTE**: At both levels, it is understood the assigned staff will implement active habilitation programs and provide supports and services as defined by the person’s individual plan.

**Statewide Utilization Resource Review Committee members** will include a DMR health services representative, a minimum of two licensed psychologists, a representative from the Central Office...
Operations Center and a representative from the Central Office Strategic Leadership Center. Membership will be rotated so no one serves more than 2 years.

Regional Utilization Resource Review Committee membership will include, but is not limited to, the Assistant Regional Director (ARD) of Private Administration, the ARD of Individual and Family Support, the ARD of Public Programs or the ARD’s designee, the Director of Quality Improvement, the PRAT Manager, the Director of Clinical Services, and the Health Services Director.

D. Implementation:

**Regional Utilization Review Process**

1. The Regional Planning and Resource Allocation Team (PRAT) is responsible for implementing the utilization resource review process.

2. All service requests are submitted to the PRAT Manager. PRAT assigns priority, reviews Level of Need, determines whether a URR is required and notifies the Case Manager of the decisions.

3. If a Regional URR is required the Team completes and the Case Manager submits the following:
   a. The DMR Intensive Staffing Request Form
   b. PRAT Request for Services Form, if applicable
   c. The Level of Need assessment
   d. The Individual Plan document (including safety risks)
   e. Current Behavioral Support Plan
   f. Current Staffing Schedule
   g. An itemized funding request

4. The PRAT reviews all documentation submitted and summarizes their recommendation on the Regional Utilization Resource Review Request Form. The PRAT’s recommendation is then forwarded to the Regional Director.

5. The regional URR will, on an annual basis, monitor Intensive Staffing situations which are medically required, such as Prader-Willi syndrome or an active seizure disorder that causes the individual to be at risk for injuries or choking. In those cases where a regional URR is done on an individual who requires enhanced staffing for a medical condition that is not expected to improve, the PRAT can recommend to the Regional Director that no future reviews are required.

6. The Regional Director reviews the PRAT’s recommendation for approval, modifications or disapproval. If the Regional Director does not agree with the PRAT’s recommendation, she/he will return the packet to the PRAT with written comments, for further review and modifications.

7. The Regional Director makes his/her decision and forwards it back to PRAT.

8. For waiver participants, any decision made by the Regional Director that results in the denial of or decrease in waiver services and supports that decision must also be forwarded to the CO Waiver Policy Unit for the purpose of providing appropriate Medicaid appeal notification information to the waiver participant.
9. The PRAT Manager completes the appropriate notifications and enters the required information into the URR database.

**Statewide Utilization Review Process**

10. The Statewide Utilization Resource Review Committee will do random samplings of the Region’s PRAT resource allocations above the funding limits to assess the consistency in the process of allocations across regions. The reviews will be submitted to the Regional Directors for appropriate action.

11. If an individual’s need for intensive staffing support for behavioral reasons is expected to continue for more than six months the case will be sent to the Statewide Utilization Resource Review committee.

12. Each region will maintain a list of those individuals who require intensive staffing for behavioral reasons and will forward a copy of the list to the Statewide URR chairperson(s) quarterly. It will be the responsibility of the Statewide URR committee to review periodically, or at least every two years, any intensive staffing situation for behavioral reasons to ensure that the level of support is still needed and that the habilitative programs for the individuals are being implemented to reduce such staffing, as indicated. The Statewide URR schedule will be sent to the regions annually by the Statewide URR chairperson(s).

13. When a Statewide URR is required the individual’s team completes and the Case Manager submits the following to the URR chairperson(s):
   a. The DMR Intensive Staffing Request Form
   b. PRAT Request Form, if applicable
   c. The Level of Need assessment
   d. The Individual Plan document (including safety risks)
   e. Current Behavioral Support Plan
   f. Current Staffing Schedule (with enhanced staffing highlighted)
   g. An itemized funding request.

14. The statewide committee shall be scheduled to meet no less than once per month.

15. The Statewide Utilization Resource Review Chairperson shall:
   a. Convene meetings as required
   b. Ensure that individuals are scheduled for presentation
   c. Coordinate the Committee’s review of the individual’s data and information
   d. Coordinate the Committee’s random review of Regional budget approvals as oversight on regional consistency in implementation of the policy and procedure and prepare a semi-annual report that provides feedback on system issues found during the reviews for the Deputy Commissioner and Regional Directors.
   e. Ensure that a Statewide Utilization Resource Review document is completed for each individual reviewed and forwarded to the appropriate Regional Director
   f. Decisions and recommendations that are made by the statewide Committee will be forwarded to the Regional Director within 25 working days.

16. The Regional Director will review the recommendations of the Statewide URR Committee with the region’s Director of QI Division and/or PRAT Manager and the responsible Assistant Regional Director for appropriate adjustment to the individual’s supports.
17. The Assistant Regional Director will communicate the decision to the Case Manager and ensure that the required notification(s), documentation and follow up are implemented.

18. If a Region and/or the individual disagrees with the decision of the Statewide Committee, they may request a review by the Deputy Commissioner.

19. For waiver participants, any decision of the Statewide Utilization Review Committee resulting in the denial of or decrease in waiver services and supports that decision must also be forwarded to the CO Waiver Policy Unit for the purpose of providing appropriate Medicaid appeal notification information to the waiver participant.

20. The Regional QI Division will be responsible to maintain data on the decisions (both regional and statewide reviews) and follow up actions by the PRAT.

E. References
   Policy I.C.PO.001 Utilization Resource Review

F. Attachments
   1. DMR Intensive Staffing Request Form
   2. Regional Utilization Resource Review form