

Billing Procedures

Section: BASIS

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Title: BASIS Protocol

Procedure No: 1

Effective Date: 3/2003

Purpose: The Basic Assessment and Services Information System (BASIS) began in December 1995. The BASIS is a database used to collect comprehensive information about persons with developmental disabilities, and to provide more timely funding eligibility determinations. BASIS consists of three sections. Section 1 contains individual information – basic demographic information about each person who is receiving, or waiting for, services. Section 2 contains assessment information, about the person’s ability to perform a variety of daily living skills, his or her medical condition, and any challenging behaviors. Section 3 consists of service information - the kind of service(s) the person is receiving or waiting to receive.

For information to be included in BASIS for a specific person, the following conditions must be met:

1. The person must meet the MR/DD definition as established by statute and SRS regulation;
2. Assessment information must be completed if the person is five years of age or older;
3. The person, family, or guardian must indicate willingness to accept services if offered;
4. The person, family, or guardian has requested, or is receiving, one or more of the following services and supports:
 - a. Residential services;
 - b. Day Services;
 - c. Individual/family support;
 - d. Other support; or
 - e. Direct financial support and
5. The person, family, or guardian is contacted annually and indicates the continued need for services or support.

Protocol:

1. All CDDO staff conducting BASIS screenings must have successfully completed the DBHS BASIS Training.
2. Data is collected for BASIS as persons apply for or enter service. Revisions to all but the Assessment Section can be made at any time; the Assessment Section is updated annually during the month of the person's birth. To request changes to the Information or Services Section, the Consumer's Case Manager will complete the BASIS Notice of Change form and send it to the CDDO Specialist for data entry.
3. The BASIS Assessment information will be gathered by the CDDO Specialists in the month prior to the consumer's birth month and entered by the CDDO Specialists no later than the 15th day of the consumer's date-of-birth month.
4. Consumers who have not participated in a BASIS screening by the 15th of their birth month will be sent a BASIS declination letter to sign and return to the CDDO by the 30th of the month, indicating their desire to not conduct a BASIS screening and be closed and deleted from BASIS.
5. Children under age 11 will also have the Children's Assessment completed at the time of their annual BASIS screening.
6. Copies of completed BASIS entered by the CDDO Specialist will be sent to the appropriate Case Management provider with a stamped date of entry.
7. Before transmitting the data on Wednesday's, an error check is conducted to check for errors in any of the data. All errors will be corrected prior to transmitting the data.
8. Data must be transmitted at least once per week to DBHS's Citrix server and using the Citrix Password by the CDDO Specialist. The back-up individual is the other CDDO Specialist or the Director of CDDO Administration. In order for transmissions to be processed weekly, each CDDO must transmit prior to 6:00 AM on Thursday. The "transmission week" begins at 6:01 AM and ends at 5:59 AM on the following Thursday.
9. All three sections of BASIS must be transmitted each time. No data is processed until all CDDO's have transmitted. This is necessary to ensure that any statewide data reported is all from the same time period, and is as current as possible. All CDDO's must designate a "BASIS Contact" to receive information and reports from DBHS. The "BASIS Contact" for Cottonwood is the Director of the CDDO Administration.
10. Individual Assessments cannot be processed by DBHS to obtain DDP scores. DBHS will not process individual agency data, except on Thursdays, when all CDDO data is processed.
11. The processed data is downloaded by the CDDO Specialist or alternate after the e-mailed message is received. The processed data is printed and sorted by case management affiliate. Each affiliate report is then routed or faxed to the affiliate.
12. BASIS Assessments, which result in a change of two or more Tier levels or a change to or from a Tier 0, will require a Tier Review of the BASIS Assessment by the CDDO.
13. DBHS Notice of Action Reports will be scanned and sent to the appropriate Case Management provider.

To Request a BASIS Re-Assessment out of the Birth Month

The criteria for receiving special permission as outlined in the BASIS Manual by SRS/DBHS/CSS are the following:

1. Reporter error which directly impacted **ELIGIBILITY** (either made the person eligible or ineligible when they should not have been), or
2. There have been **SUBSTANTIAL CHANGES THAT REQUIRE ADDITIONAL SUPPORTS, HAVE BEEN DOCUMENTED FOR A PERIOD OF AT LEAST 90 DAYS AND WERE NOT REASONABLY ASCERTAINABLE AT THE TIME OF THE ASSESSMENT**, or
3. The individual has experienced significant and long-term life altering events that require additional supports and will impact their life for the foreseeable future. For example: stroke, car accident or other medical emergency.

Protocol:

1. Submit the request for the re-assessment to the Director of CDDO Administration.
2. The request should contain a) information detailing the significant change in the person's condition, b) what question(s) and sub-set(s) in the BASIS Assessment have been impacted by the person's change in condition that needs to be re-assessed, c) documentation to support changes to questions requesting to be re-assessed, and d) a revised Person Centered Support Plan documenting the significant changes in the person's condition.
3. Information for the request will be reviewed at the next scheduled Prior Authorization Committee.
4. If the request is approved by the Prior Authorization Committee, then the CDDO will submit a request for a special re-assessment to the MR/DD Waiver Manager at SRS/DBHS/CSS and the answer will be returned to the Case Manager.
5. If the request is denied by the Prior Authorization Committee, then the request will be returned to the Case Manager with the Committee's response.
6. If the re-assessment is approved by DBHS, then a date for the re-assessment should be scheduled and conducted as soon as possible and the revisions will be entered by the CDDO Specialist.
7. After weekly transmission, a new tier may or may not be returned. If a new tier is returned, then a new Plan of Care with the revised Tier rate should be submitted to the Director of CDDO Administration with a start date of the first day of the next month.
8. If the Tier remains the same after the re-assessment, then no changes to the current Plan of Care need to be made.