



# Pre-Quiz

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Acuity scores should be updated how often, at minimum?

- A. Acuity scores only need to be completed at the start of MCM assessment and planning
- B. Twice a year, the minimum amount of times care plans must also be updated
- C. Every 6 months
- D. Every 3 months



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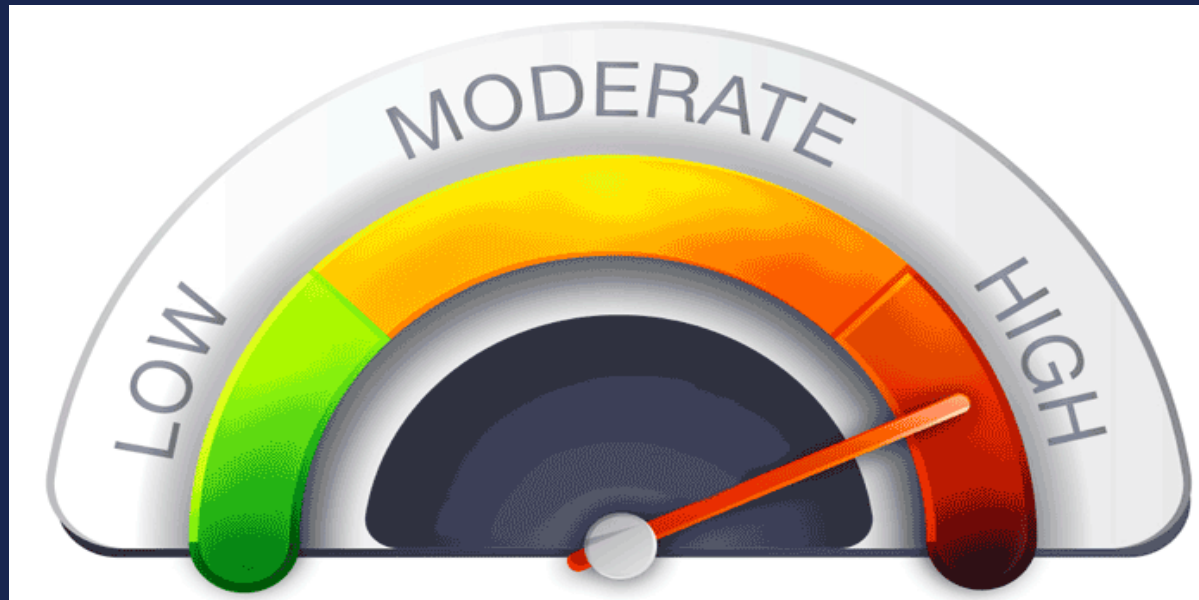
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# Acuity Scale: What Is It?

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- Definition: A tool that assists **medical** case managers with determining frequency of contact with the client and intensity of case management



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# Acuity Scale

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## Questions it can answer

- How often should a client be contacted?
- When is the client's projected graduation from case management?
- How often you need to update MCM care plans



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# Acuity Scale

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## Questions it CAN'T answer

- Does the client need case management?
- What type of case management is necessary?
- How to adapt for special populations as defined by standards of care?



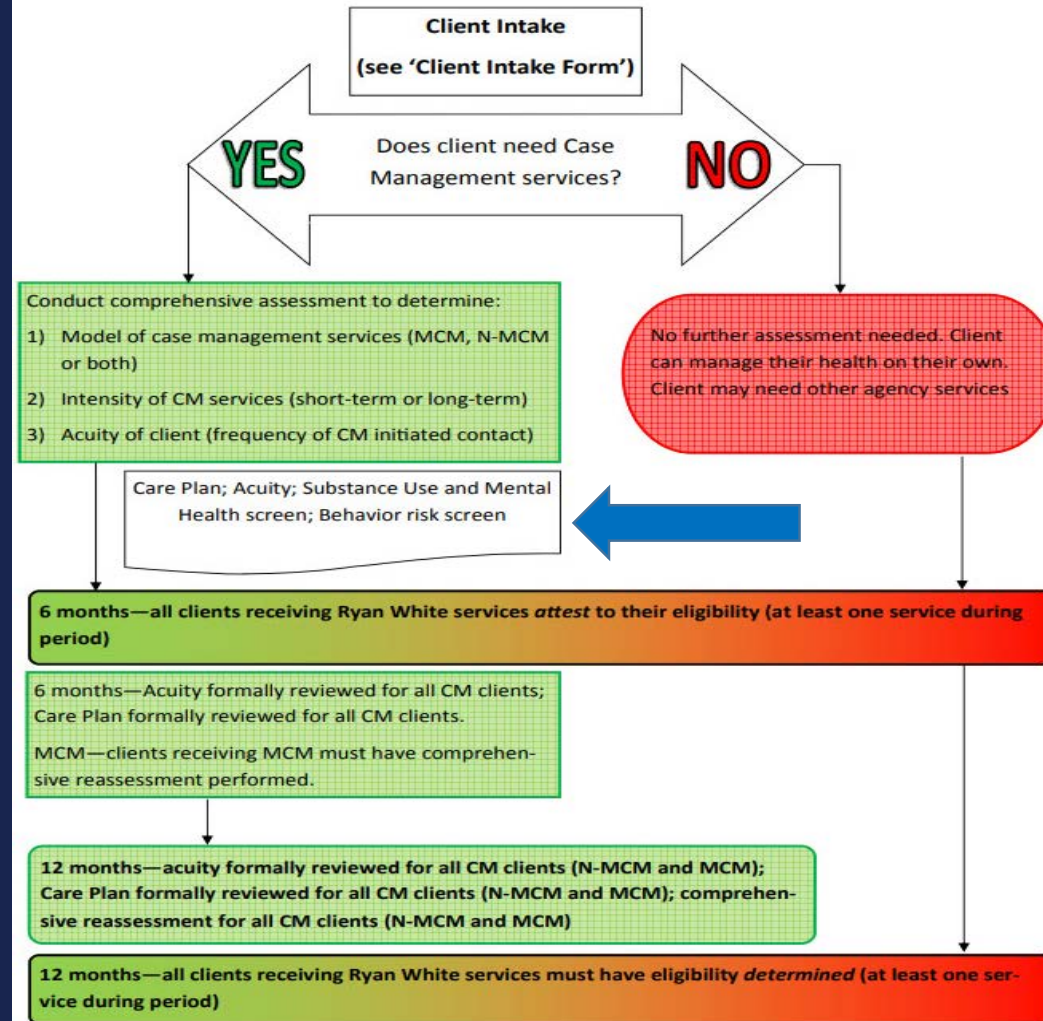
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# Acuity: When Does It Happen?

## New Client Process



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# Acuity Scale: Application

Texas Case Management Acuity Scale



\*Make only one selection for each of the 18 life areas

Life Area	Self-Management (0 points)	Basic (1 point)	Moderate (2 points)	Intensive (3 points)
<b>Medical and Mental Health</b>				
Linked to HIV medical care	Engaged in consistent HIV medical care <i>Selection</i>	Completed 50% or more HIV medical appointments in the last 6 months <i>Selection</i>	Has completed < 50% of HIV medical appointments OR has completed 1st medical visit <i>Selection</i>	Newly diagnosed, lost to care, or no medical care in more than 6 months <i>Selection</i>
Current HIV Health Status	Virally suppressed, no history of opportunistic infections (OI), no hospitalization in > 12 months <i>Selection</i>	Detectable viral load (VL) but on ARVs, no OIs in the < 6 months or is on treatment, no hospitalization < 6 months <i>Selection</i>	Refuses ARVs with CD4 > 200, OI not treated in the < 6 months, hospitalized < 6 months, newly dx in the < 6 months <i>Selection</i>	Refuses ARVs with CD4 < 200, OI not treated in the > 6 months, hospitalized > 6 months, newly dx in the > 6 months <i>Selection</i>
Medication Adherence	Adherent to medications as prescribed for more than 6 months without assistance OR is not being prescribed <i>Selection</i>	Adherent to medications as prescribed less than 6 months and more than 3 months with minimal assistance <i>Selection</i>	Misses taking several doses of scheduled meds weekly. Takes long/extended "drug holidays" against medical advice <i>Selection</i>	Resistance/minimal adherence to medications and treatment plan even with assistance <i>Selection</i>
Mental Health	No history of mental health problems or long term stability demonstrated, no need for referral <i>Selection</i>	Past problems and/or reports current difficulties, already engaged in mental health care <i>Selection</i>	Experiencing severe difficulty in daily functioning, requires significant support, needs referral to mental health care <i>Selection</i>	Danger to self or others, needs immediate intervention, needs but not accessing therapy <i>Selection</i>
Substance Misuse	No difficulties with substance misuse or long term stability demonstrated, no need for referral <i>Selection</i>	Past problems, < 1 year recovery, recurrent problems, not impacting ability to pay bills or health <i>Selection</i>	Current substance misuse, willing to seek help, impact ability to pay bills and access to medical care <i>Selection</i>	Current substance misuse, not willing to seek help, unable to pay bills or maintain medical care. Crisis <i>Selection</i>
HIV Knowledge & Understanding	Verbalizes clear understanding about HIV <i>Selection</i>	Some understanding verbalized, needs additional information in some areas <i>Selection</i>	Little understanding, needs counseling or referral to make informed health decisions <i>Selection</i>	Uninformed of HIV disease progression, unable to make informed decisions about health <i>Selection</i>
Sexual Health	Practices safer sex 100% of the time, demonstrates a strong understanding of safer sex <i>Selection</i>	Engages in safer sex practices > 75% of the time, demonstrates a fair understanding of safer sex <i>Selection</i>	Engages in safer sex practices 50-75% of the time, demonstrates poor understanding of safer sex <i>Selection</i>	Engages in safer sex practices < 50% of the time, little or no understanding of safer sex <i>Selection</i>



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<https://www.dshs.texas.gov/hivstd/contractor/cm.shtm> (Click: Texas Acuity Scale Link)

# Acuity Scale: Application



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## No Case Management:

0-9 points

- NO Care Plan
- Documentation in ARIES will NOT reflect case management

## Basic Case Management:

*Projected graduation 3-6 months*

10-18 points

- Initial Case Management Assessment
- Minimum contact every 90 days to reassess acuity
- Ongoing documentation in ARIES
- Up-to-date Care Plan
- Active case management services are reflected in documentation

## Moderate Case Management:

*Projected graduation 6-9 months*

19-36 points

- Initial Case Management Assessment
- Minimum contact every 60 days to reassess acuity
- Ongoing documentation in ARIES
- Up-to-date Care Plan
- Active case management services are reflected in documentation

## Intensive Case Management:

*Projected graduation 9-12 months*

*\* Contact for special populations will need to follow the Case Management Standards of Care expectations and guidelines*

37-54 points

- Initial Case Management Assessment
- Minimum contact every 45 days to reassess acuity
- Ongoing documentation in ARIES
- Up-to-date Care Plan
- Active case management services are reflected in documentation

# Performance Measures

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- Clients must have completed acuity levels documented using an approved acuity scale, in primary client record
- Clients must have documented evidence of review of acuity, at a minimum of every three months, to ensure acuity is still appropriate
- Acuity and frequency of contact by MCM must match



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# Critical Thinking Scenarios

## What would you do?

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