

**LTS PLANNING COMMITTEE  
COP VARIANCE REQUEST**

Case Manager: Lacie Ball

Date: 3/3/16

**FUND COP SERVICES FOR PARTICIPANT RECEIVING RECUPERATIVE SERVICES IN AN INSTITUTION (UP TO 90 DAYS).**

The purpose of this variance is to maintain a participant's support network during relatively brief institutional stays. No variance is needed for recuperative stays of 30 days or less. When a recuperative stay exceeds 30 days a variance is necessary to allow the use of COP funds to continue to pay for noninstitutional community service expenses for up to 90 days for current COP recipients.

**1. INSTITUTION NAME:** Stoughton Hospital Geriatric Psychiatry Unit

**2. EXPECTED DURATION:** Up to 90 days

**3. PARTICIPANT INFORMATION**

- Male  Female  Age 75 Time on a Waiver Programs Since 11/2015 Protective Placement No
- Current living arrangement:  home  
 AFH  
 CBRF (name, size) Brookdale Madison North, 73 beds

• **Health & medical problems (please use non-medical terms, include a list of their diagnoses):**

Incisional Hernia (surgical wound hernia), Esophageal Reflux, Hypovitaminosis D (Vitamin D deficiency), Anemia, Pulmonary Hypertension (high blood pressure that affects arteries in the lungs and in the heart), Congestive Heart Failure, Hypertension, Osteoporosis, Back Pain, Dementia, Asthma, Depression, Breast Cancer (over 5 years ago), Mitral Regurgitation (A backflow of blood caused by failure of the heart's mitral valve to close tightly), Aortic Valve Replacement, Mitral Valve Repair, Chronic Anticoagulation, Thiamine Deficiency, Personal History of Venous Thrombosis (blood clots in veins) and Embolism (sudden artery blockage) and Wedge Fracture of Thoracic Vertebrae

• **Situation requiring rehabilitation and desired outcomes:**

Client was discharged to Capital Lakes NH for rehabilitation after several reoccurring hospital stays due to issues with her heart and lungs. During the overnight hours of 2/16 NH aides went into client's room and found her call light cord wrapped around her neck twice and client was threatening to kill herself. Client was sent to UW-Health for a Geriatric Assessment and admitted to the Geriatric Psychiatry Inpatient Program at Stoughton Hospital for a therapeutic stay.

**Services to be funded during rehabilitation:** Case Management, CBRF (first 30 days paid in full, Day 31 – 90, the CBRF will be paid 50% of the CBRF rate), Alzheimer's Dementia Alliance & Dr. Lisa Boyle

**LTS Committee action:** Chair approval date \_\_\_\_\_; Full committee approval date \_\_\_\_\_;

Non approval date \_\_\_\_\_; Reason \_\_\_\_\_

Consumer Name: \_\_\_\_\_