

**LTS PLANNING COMMITTEE  
COP VARIANCE REQUEST**

**Case Manager:** Sammy Azuma **Date:** 8-3-17

**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:** Belmont Nursing Home

**2. EXPECTED DURATION:** 1-2 months

**3. PARTICIPANT INFORMATION**

- Male ☐ Female ☒ Age 78 Time on COP/Waiver programs 4 months Protective Placement No
- Current living arrangement: ☒ home  
☐ AFH  
☐ CBRF (name, size) \_\_\_\_\_  
☐ NH (name) \_\_\_\_\_
- Health & medical problems (please use non-medical terms): Client was hospitalized from 7/2/17 to 7/7/17, when she was discharged to Belmont Nursing Home. Client was admitted to the hospital with shortness of breath; client used her Lifeline button to call 911 and be taken to the hospital. Client has had a history of becoming anxious when she experiences shortness of breath and calling 911. She was transferred to Belmont on 7/7 for rehabilitation. She also has the following diagnoses: coronary artery disease/CAD [heart disease], ischemia [lack of oxygen to the heart muscle], atrial fibrillation [abnormal heart rhythm], venous stasis [veins in legs having difficulty pumping blood to the heart], failure to thrive, hypothyroidism [under active thyroid gland], hyperlipidemia [high cholesterol], chronic obstructive pulmonary disease/COPD [lung disease], shortness of breath, mild cognitive impairment, depression, weakness, and osteopenia [low bone density]. Client has had numerous admissions to the hospital over the last several months. Client has stated she experiences anxiety as a result of her shortness of breath, which exacerbates her breathing difficulties.
- Situation requiring rehabilitation and desired outcomes: The main goal of therapy was to help client return to baseline with her breathing and regain strength so she can support herself at home. Client stabilized at the hospital and was referred for rehabilitation services at Belmont. The hospital social worker reported it is not recommended that client discharge to home; this was also reiterated by client's primary physician. Client is receiving physical, occupational, and speech therapy at the nursing home. Facility staff report that client has needed assistance with ADLs such as dressing, but client disputes this, stating she is able to dress independently. Client stated her goal is to return home to her apartment. Facility staff and client's PCP recommend placement in an assisted living facility. Client has waived back and forth regarding interest in an assisted living facility. She has been encouraged to tour facilities. Nursing home staff recommends home health services and increased supports to assist client in maintaining her independence. Client does not like a lot of people coming in and out of her apartment. Care manager will also encourage her to tour assisted living facilities so that she is aware of other options available.

- Services to be funded during rehabilitation:

Case Management ☒ \$552.20 [5 hours @ \$110.44/hour] \_\_\_\_\_

Lifeline ☐ \$23.95/month \_\_\_\_\_

Other (identify other) ☒ \$200 [transportation to tour assisted living facilities] \_\_\_\_\_

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

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

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