

**COMMUNITY SERVICES INTEREST LIST  
(CSIL)**

**CLOSURE CODE USER'S GUIDE**

**AUGUST 2009**

## Table of Contents

<b>Section I. Closure Codes by Category .....</b>	<b>3</b>
<b>Eligibility Category .....</b>	<b>3</b>
Certified to Enter Program (419) .....	3
<b>Death Category.....</b>	<b>4</b>
Death (420).....	4
<b>Not Eligible Category .....</b>	<b>5</b>
Cannot Be Served Safely in the Community (648) .....	5
Does Not Meet Diagnostic Requirements (639).....	5
Does Not Meet Medical Necessity (426) .....	5
Does Not Meet Risk Criteria (427) .....	5
Does Not Reside in Allowable Residential Setting (638).....	5
Does Not Reside in Service Area (425).....	6
Exceeds Cost Ceiling (429).....	6
Ineligible Age (539) .....	6
No Medical Approval (651) .....	6
No Unmet Need (537).....	6
Not a Texas Resident (637).....	6
Not Financially Eligible (431) .....	6
Not Functionally Eligible (536) .....	7
HMO Reports Could Not Locate (652) .....	8
Mail Undeliverable/No Working Telephone Number (645).....	8
No Response to Contact/Monitoring Letter (526).....	8
Released From List/No Response to Letter (527).....	8
<b>Voluntary Withdrawal Category .....</b>	<b>9</b>
Determined Eligible/Offer Refused (643) .....	9
Did Not Complete Application/Service Plan Process (649).....	9
HMO Reports Consumer Does Not Want Services (653).....	9
Person Refused Due to MERP Provisions (545) .....	9
Released From List/Offer Refused (644) .....	9
Request Removal from Interest List (646).....	10
Withdrew to Bottom (542).....	10

Community Services Interest List (CSIL)  
User's Guide

**Needs Met Through Other Services Category ..... 11**  
Needs Met Through CBA Waiver Services (530)..... 11  
Needs Met Through CLASS Waiver Services (529) ..... 11  
Needs Met Through CWP Waiver Services (654)..... 11  
Needs Met Through DBMD Waiver Services (640)..... 11  
Needs Met Through HCS Waiver Services (532)..... 11  
Needs Met Through ICM Waiver Services (642)..... 11  
Needs Met Through MDCP Waiver Services (535) ..... 11  
Needs Met Through Non-Waiver Services (533)..... 11  
Needs Met Through STAR+PLUS Services (641) ..... 11  
Needs Met Through TxHmL Waiver Services (650) ..... 11

**Miscellaneous Category..... 12**  
Duplicate (525) ..... 12  
Opened in Error (623) ..... 12  
Other (534)..... 12  
Transfer to Another Region's List Within This Program (647)..... 12

**Section II. Automated Codes ..... 13**  
**Service Authorization System (SAS)..... 13**  
Client Receiving the Service (606) ..... 13  
Client Certified to Receive Waiver Services (607) ..... 13

**Community Services Interest List (CSIL)..... 13**  
Aged Out Of Program (572)..... 13

**Section III. Closure Code Tables..... 14**  
Existing Closure Codes..... 14  
New Closure Codes ..... 15  
Discontinued Closure Codes ..... 16

**Section IV. Acronym Guide..... 17**

## **Section I. Closure Codes by Category**

### **Eligibility Category**

- **Certified to Enter Program (419)**  
The individual has completed the enrollment process and is certified to receive services.

Community Services Interest List (CSIL)  
User's Guide

**Death Category**

- **Death (420)**  
DADS has received notification that an individual is deceased.

Community Services Interest List (CSIL)  
User's Guide

**Not Eligible Category**

Please choose the most appropriate code below to describe why the individual did not meet eligibility for the program.

• **Cannot Be Served Safely in the Community (648)**

STAR+PLUS

Health Plan Operations has determined this individual cannot be served safely in the community.

CLASS, DBMD, MDCP, CBA, ICMW, DAHS, and IHFS

DADS has determined and provided documentation that shows the individual cannot be served safely in the community.

• **Does Not Meet Diagnostic Requirements (639)**

CLASS and DBMD

The individual's primary diagnosis is not listed on the program's related conditions list **OR** the onset of this diagnosis occurred after the age of 22.

IHFS

The individual does not have a physical disability that substantially limits the individual's ability to function independently.

DAHS

For all individuals who do not meet functional or medical requirements found on Form 3055, Day Activity and Health Services Physician's Orders, use code 651, *no medical approval*.

• **Does Not Meet Medical Necessity (426)**

Individual does not meet medical necessity.

• **Does Not Meet Risk Criteria (427)**

Individual does not meet risk criteria according to program rules.

• **Does Not Reside in Allowable Residential Setting (638)**

AFC and RC

An allowable setting is one that has been contracted by DADS to provide foster care or residential services.

DAHS, ERS, FC, HDM, IHFS, and SSPD

An allowable setting is one that is not an institution (nursing facility, state school, ICF/MR facility, hospital, state hospital, jail, assisted living facility with more than six beds, or prison).

CLASS, DBMD, MDCP, CBA, ICMW, and STAR+PLUS

The individual or person resides in an institution and does not choose to return to the community.

Community Services Interest List (CSIL)  
User's Guide

(Not Eligible Category continued)

- **Does Not Reside in Service Area (425)**

Individual does not reside in a service area where the program is available and has chosen not to move to the service area. If individual does not reside in Texas, use code 637, *not a Texas resident*.

NOTE: If the individual needs to transfer to another region's list, use code 647, *transfer to another region's list within this program*, and assist them with this process.

DBMD

The individual does not reside in the county in which services are offered.

- **Exceeds Cost Ceiling (429)**

The projected cost of services exceeds the maximum amount allowed.

- **Ineligible Age (539)**

The individual does not meet the age requirement for the program.

- **No Medical Approval (651)**

DADS staff did not receive Form 3055, Day Activity and Health Services Physician's Orders, documenting medical approval. **OR** The individual does not have a functional disability related to the medical diagnosis. **OR** The individual does not have medical approval.

- **No Unmet Need (537)**

The individual does not have an unmet need for services as required by program rules.

- **Not a Texas Resident (637)**

During routine interest list contacts, releases, or assignments, individuals on the list who do not have a Texas address should be removed from the list and informed they must be a resident of Texas to be on an interest list.

- **Not Financially Eligible (431)**

CLASS, DBMD, MDCP CBA, ICMW, and STAR+PLUS

The individual has been denied Medicaid.

AFC, DAHS, ERS, FC, HDM, IHFS, RC, and SSPD

The individual's income/resources are not within limits established by program rules.

Community Services Interest List (CSIL)  
User's Guide

(Not Eligible Category continued)

- **Not Functionally Eligible (536)**

CLASS and DBMD

The individual's adaptive behavior level (ABL) or related condition (RC) scores do not meet program requirements.

AFC, ERS, FC, HDM, RC, and SSPD

The individual's score determined on Form 2060, Needs Assessment Questionnaire and Task/Hour Guide, does not meet the minimum required for program eligibility.

IHFS

Information documented on Form 2364, Disabilities Screening Instrument, or Form 2355, Physician Statement, indicates the individual does not meet functional eligibility criteria.



Community Services Interest List (CSIL)  
User's Guide

**Could Not Locate Category**

Please choose the most appropriate code to describe the circumstances of the person who could not be located.

- **HMO Reports Could Not Locate (652)**  
The HMO reports they have not been able to locate the individual.
- **Mail Undeliverable/No Working Telephone Number (645)**  
Code to be used if letter has been returned as undeliverable in any attempt to contact or to make an offer to an individual on the interest list AND there is no working telephone number.
- **No Response to Contact/Monitoring Letter (526)**  
During routine interest list contacts, staff made unsuccessful attempts at contact using all known addresses and telephone numbers available.

NOTE: If mail is returned as undeliverable, use code 645, *mail undeliverable/no working telephone number*.

- **Released From List/No Response to Letter (527)**  
An offer for program/services has been mailed to the individual and no response has been received within the 30-day timeframe. Additional attempts to contact the person were not successful.

NOTE: If the letter has been returned as undeliverable, use code 645, *mail undeliverable/no working telephone number*.

### **Voluntary Withdrawal Category**

Please choose the most appropriate code to describe the circumstances of the person's withdrawal from the interest list.

- **Determined Eligible/Offer Refused (643)**

Individual has successfully completed the eligibility process and has refused the offer of services.

NOTE: If the individual refused the offer of services due to MERP, use code 545, *person refused due to MERP provisions*. If the individual refused the offer of services because other services are meeting his needs at this time, use appropriate code from voluntary withdrawal category.

- **Did Not Complete Application/Service Plan Process (649)**

Individual did not file or follow through with Medicaid application OR did not participate as required in the development of the service plan. Individual must be in assign status to use this code.

CLASS and DBMD

This includes the preassessment process, MR/RC, or IPC.

- **HMO Reports Consumer Does Not Want Services (653)**

The HMO reports the individual has informed them that he/she is no longer interested in services.

- **Person Refused Due to MERP Provisions (545)**

Individual has been informed of the provision of MERP and has chosen to have his/her name removed from the interest list.

NOTE: Use of this code should be accompanied by written confirmation. If the individual refused to sign or provide written confirmation, use this code and document in comments section.

- **Released From List/Offer Refused (644)**

Individual has received offer to begin eligibility determination process and has informed DADS staff that he/she is no longer interested in pursuing eligibility and has requested name be removed from the interest list. Individual must be in release status to use this code.

NOTE: If the individual refused the offer to begin eligibility determination process due to MERP, use code 545, *person refused due to MERP provisions*. If the individual refused offer to begin eligibility determination process because other services are meeting his needs at this time, use appropriate code from voluntary withdrawal category.

## Community Services Interest List (CSIL) User's Guide

(Voluntary Withdrawal category continued)

- **Request Removal from Interest List (646)**

Individual has informed DADS staff he is no longer interested in having his name remain on the interest list and has requested name be removed from the interest list.

NOTE: Use this code only when the individual is in OPEN status.

- **Withdrew to Bottom (542)**

Individual has informed DADS staff that he would like his name be placed at the bottom of the interest list because services are not needed at this time. If the individual requests his name be moved to the bottom of the interest list because other services are meeting his needs at this time, use appropriate code from voluntary withdrawal category.

NOTE: If the individual is in release or assign status, this code should be accompanied by written confirmation.

### **Needs Met Through Other Services Category**

Please choose the appropriate code to describe why the person is declining the opportunity for services.

- **Needs Met Through CBA Waiver Services (530)**  
Individual requests name be removed from the interest list because the individual prefers to continue receiving services through the CBA waiver.
- **Needs Met Through CLASS Waiver Services (529)**  
Individual requests name be removed from the interest list because the individual prefers to continue receiving services through the CLASS waiver.
- **Needs Met Through CWP Waiver Services (654)**  
Individual requests name be removed from the interest list because the individual prefers to continue receiving services through the CWP waiver.
- **Needs Met Through DBMD Waiver Services (640)**  
Individual requests name be removed from the interest list because the individual prefers to continue receiving services through the DBMD waiver.
- **Needs Met Through HCS Waiver Services (532)**  
Individual requests name be removed from the interest list because the individual prefers to continue receiving services through the HCS waiver.
- **Needs Met Through ICMW Services (642)**  
Individual requests name be removed from the interest list because the individual prefers to continue receiving services through the ICM Waiver services.
- **Needs Met Through MDCP Waiver Services (535)**  
Individual requests name be removed from the interest list because the individual prefers to continue receiving services through the MDCP waiver.
- **Needs Met Through Non-Waiver Services (533)**  
Individual requests name be removed from the interest list because the individual prefers to continue receiving services through the non-waiver services. This includes services received through AAA, CCAD, CCP, PACE, or PCS.
- **Needs Met Through STAR+PLUS Services (641)**  
Individual requests name be removed from the interest list because the individual prefers to continue receiving services through the STAR+PLUS services.
- **Needs Met Through TxHmL Waiver Services (650)**  
Individual requests name be removed from the interest list because the individual prefers to continue receiving services through the TxHmL waiver.

Community Services Interest List (CSIL)  
User's Guide

**Miscellaneous Category**

- **Duplicate (525)**  
The individual has multiple records in CSIL and the records have been merged into one. The additional records are closed using this code.
- **Opened in Error (623)**  
The individual was placed on the interest list for the wrong program/services. **OR**  
The individual was placed on the interest list for a program he is already receiving. Code may also be used if the individual should not have been placed in CSIL.
- **Other (534)**  
Use this code only when there is no other option. A specific reason must be included in the comment section when this code is used.
- **Transfer to Another Region's List Within This Program (647)**  
Individual has moved to a new area or is requesting the same program/service in another region.

NOTE: When using this code notify new region of the transfer.

## **Section II. Automated Codes**

### **Service Authorization System (SAS)**

- **Client Receiving the Service (606)**  
This automated SAS code will not be available for manual use. This closure code is generated when a match is found between CSIL and SAS records.
- **Client Certified to Receive Waiver Services (607)**  
This automated SAS code will not be available for manual use.

NOTE: This code may generate a closure in Title XX programs if an individual is enrolled in a waiver program.

### **Community Services Interest List (CSIL)**

- **Aged Out Of Program (572)**  
This automated CSIL code closes individuals who no longer meet the age requirements for program/services. Please use code 539, *ineligible age*, when closing an individual that does not meet age requirements.

Community Services Interest List (CSIL)  
User's Guide

### Section III. Closure Code Tables

#### Existing Closure Codes

CLOSURE CODE	EXPLANATION OF CLOSURE CODE	CLASS	DBMD	MDCP	CBA	ICM	STAR+PLUS	AFC	DAHS	ERS	FC	HDM	IHFS	RC	SSPD
419	Certified to Enter Program	x	x	x	x	x	x	x	x	x	x	x	x	x	x
420	Death	x	x	x	x	x	x	x	x	x	x	x	x	x	x
425	Does Not Reside in Service Area		x		x	x	x	x	x			x		x	x
426	Does Not Meet Medical Necessity			x	x	x	x								
427	Does Not Meet Risk Criteria				x	x	x								
429	Exceeds Cost Ceiling	x	x	x	x	x	x								
431	Not Financially Eligible	x	x	x	x	x	x	x	x	x	x	x	x	x	x
525	Duplicate	x	x	x	x	x	x	x	x	x	x	x	x	x	x
526	No response to Contact/Monitoring Letter	x	x	x	x	x	x	x	x	x	x	x	x	x	x
527	Released from list/No response to Letter	x	x	x	x	x	x	x	x	x	x	x	x	x	x
529	Needs Met Through Class Waiver Services		x	x	x	x	x	x	x	x	x	x	x	x	x
530	Needs Met Through CBA Waiver Services	x	x			x	x	x	x	x	x	x	x	x	x
532	Needs Met Through HCS Waiver Services	x	x	x	x	x	x	x	x	x	x	x	x	x	x
533	Needs Met Through Non-Waiver Services	x	x	x	x	x	x	x	x	x	x	x	x	x	x
534	Other	x	x	x	x	x	x	x	x	x	x	x	x	x	x
535	Needs Met Through MDCP Waiver Services	x	x					x	x	x	x	x		x	x
536	Not Functionally Eligible	x	x					x		x	x	x	x	x	x
537	No Unmet Need							x	x	x	x	x		x	
539	Ineligible Age		x	x	x	x	x	x	x	x	x	x	x	x	x
542	Withdrew To Bottom	x	x	x	x	x	x	x	x	x	x	x	x	x	x
545	Person refused due to MERP provisions	x	x		x	x	x								
623	Opened in Error	x	x	x	x	x	x	x	x	x	x	x	x	x	x

Community Services Interest List (CSIL)  
User's Guide

**New Closure Codes**

CLOSURE CODE	EXPLANATION OF CLOSURE CODE	CLASS	DBMD	MDCP	CBA	ICM	STAR+PLUS	AFC	DAHS	ERS	FC	HDM	IHFS	RC	SSPD
637	Not a Texas resident	X	X	X	X	X	X	X	X	X	X	X	X	X	X
638	Does Not Reside in an Allowable Residential Setting	X	X	X	X	X	X	X	X	X	X	X	X	X	X
639	Does Not Meet Diagnostic Requirements	X	X										X		
640	Needs Met Through DBMD Waiver Services	X		X	X	X	X	X	X	X	X	X	X	X	X
641	Needs Met Through STAR+PLUS Services	X	X		X	X		X	X	X	X	X	X	X	X
642	Needs Met Through ICMW Services	X	X		X		X	X	X	X	X	X	X	X	X
643	Determined Eligible/Offer Refused	X	X	X	X	X	X	X	X	X	X	X	X	X	X
644	Released from List/Offer Refused	X	X	X	X	X	X	X	X	X	X	X	X	X	X
645	Mail Undeliverable/No Working Telephone Number	X	X	X	X	X	X	X	X	X	X	X	X	X	X
646	Request Removal from Interest List	X	X	X	X	X	X	X	X	X	X	X	X	X	X
647	Transfer to Another Region's List within this Program				X		X	X	X	X	X	X	X	X	X
648	Cannot be Served Safely in the Community	X	X	X	X	X	X		X				X		
649	Did Not Complete Application/Service Plan Process	X	X	X	X	X	X	X	X	X	X	X	X	X	X
650	Needs Met Through TxHmL Waiver Program	X	X	X	X	X	X	X	X	X	X	X	X	X	X
651	No Medical Approval								X						
652	HMO Reports Could Not Locate					X	X								
653	HMO Reports Consumer Does Not Want Services					X	X								
654	Needs Met Through CWP Waiver Services	X	X	X	X	X	X	X	X	X	X	X	X	X	X



Community Services Interest List (CSIL)  
User's Guide

**Discontinued Closure Codes**

CLOSURE CODE	EXPLANATION OF CLOSURE CODE
421	Could Not Locate
422	Voluntary Withdrawal
423	Voluntary Withdrawal No Explanation
424	Admitted To Nursing Facility
428	Does Not Meet Medical Necessity And Risk Criteria
524	ISP Effective Date
531	Receiving IHFSP Services
538	MHMR Diagnosis
540	Ineligible Resources
541	Service Break
543	Ineligible
562	Used Voucher
564	Did Not Qualify For Voucher Under HUD Criteria
565	Refused Voucher Service
566	Refused/Not Eligible For Community Services
568	Moved to Community without Using Voucher
569	Not Willing To Move To Area Where Voucher Could Be Used
572	Aged Out of Program
573	Waiver Offered and Refused
606	Client Receiving the Service
607	Client Certified to Receive CWP/CBA/CLASS/DBMD Services
624	Transferred to STAR+PLUS
636	Transferred to ICMW

Community Services Interest List (CSIL)  
User's Guide

**Section IV. Acronym Guide**

AAA	Area Agency on Aging
ABL	Adaptive Behavior Level
AFC	Adult Foster Care
CBA	Community Based Alternatives
CCP	Comprehensive Care Program
CLASS	Community Living Assistance and Support Services
CSIL	Community Services Interest List
CWP	Consolidated Waiver Program
DADS	Department of Aging and Disability Services
DAHS	Day Activity and Health Services
DBMD	Deaf-blind with Multiple Disabilities
ERS	Emergency Response Services
FC	Family Care
HDM	Home Delivered Meals
HMO	Health Maintenance Organization
ICF/MR	Intermediate Care Facility for Persons with Mental Retardation
ICMW	Integrated Care Management Waiver
IHFSP	In-Home and Family Support Program
IPC	Individual Plan of Care
MDCP	Medically Dependent Children Program
MERP	Medicaid Estate Recovery Program
MR/RC	Mental Retardation/Related Conditions Assessment
PACE	Program of All-inclusive Care for the Elderly
PCS	Primary Care Services
RC	Related Condition
RC	Residential Care
SSPD	Special Services to Persons with Disabilities
STAR+PLUS	State of Texas Access Reform Plus