



Client Development Evaluation Report (CDER)

Understanding
Your CDER and
Its Role in
Service Eligibility

1



What is the Client Development Evaluation Report (CDER)?

CDER is the report that contains important diagnostic and evaluation information for every person, age 3 or older, who receives Regional Center services.

- Diagnostic and evaluation information
- Age 3 and older
- Updated routinely every 1-3 years
- Information gathered during the IPP meeting
- Updated for significant changes

Never seen a CDER? You aren't alone! While some Regional Centers send the IPP and CDER yearly, others only send the IPP. Please request a copy of the CDER at every IPP meeting.

Slide 2

- 1 Delete regional center since we stated at top.
ED, 1/20/2021

How important is an accurate CDER?



VERY!!

- It will support eligibility applications to a number of important state services such as Medicaid Waiver, Social Security and IHSS .
- It will help PWCF advocate for Regional Center service eligibility for everyone with PWS!
- It informs DDS how many clients with PWS are served by California's Regional Centers and documents particular deficits they face.
- It informs the Regional Center how many people with PWS are aging up through the system and will need out of home living options and other services.

The Problem Is:

- Until recently, there was NOT a diagnosis code for PWS that could be entered on the CDER
- Important data points for individuals with PWS can't currently be pulled from the CDER because our loved ones are currently coded as:
 - Intellectual Disability (if applicable)
 - Autism (if applicable)
 - 5th category:
Q87.1 Congenital Abnormalities Predominately Associated with Short Stature (many are coded here)
 - 5th category: Unspecified (a few)



How many people with PWS does the Regional Center system even serve?

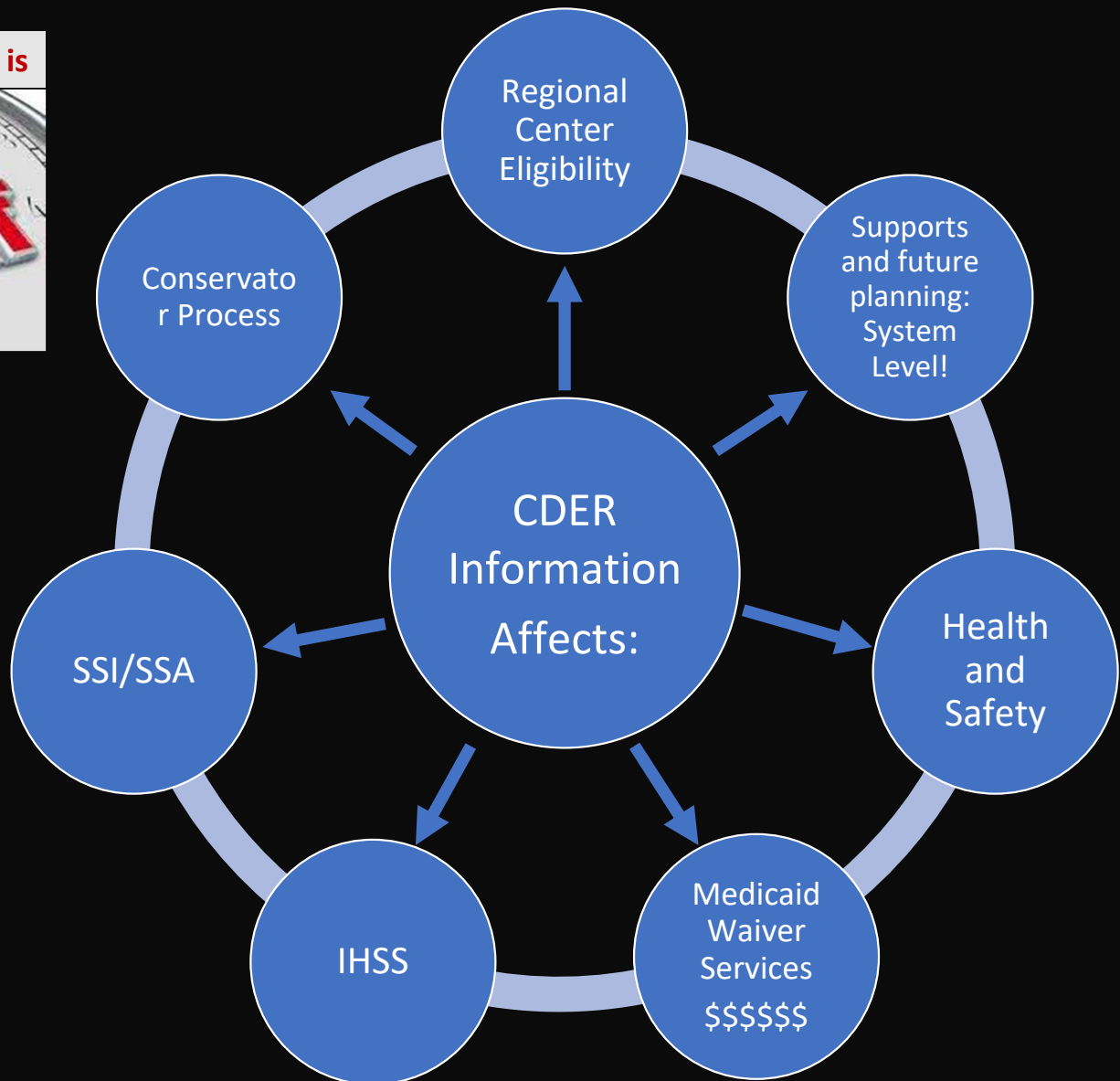
How can DDS and Regional Center look specifically at our population and their future planning needs???

PWCF's Regional Center Eligibility Task Force asked DDS to add PWS to the CDER (diagnostic code Q87.11)... **and they DID!**

- Regional Center Medical Directors confirmed the importance of this request
- All 21 Regional Centers were informed during ARCA meetings (Association of Regional Center Agencies) that PWS families will be requesting a CDER update to include Q87.11



Correct CDER data will help document the **LIFELONG** and **SUBSTANTIALLY DISABLING** nature of PWS



Level of Care Determinations

LOC is important to ensure that services match the health and safety needs of your loved one.

The CDER is one of the documents used to help determine LOC.

If the CDER has missing or incorrect information, the LOC could be incorrect as well.

Our Goal:

Ensure your
CDER is
accurate
and up to
date!

DIAGNOSTIC ELEMENT

EVALUATION ELEMENT

**** MEDICAID WAIVER SERVICES ****



An accurate CDER starts
with the Diagnosis!

CDER
Diagnostic Element

Q87.11: Prader-Willi Syndrome

OTHER TYPE OF DEVELOPMENTAL DISABILITY:

33. Other Disability: Yes _____

Type of Other Disability:

33a. Q871 Congenital Malformation Syndromes Predominantly Associated With Short Stature

33b. _____

Etiology:

34a. UNKNOWN

34b. _____

OTHER TYPE OF DEVELOPMENTAL DISABILITY:

33. Other Disability: Yes _____

Type of Other Disability:


33a. F88 Other Specified Neurodevelopmental Disorder

33b. _____

Etiology:

34a. Q8711 Prader Willi Syndrome

34b. _____



My child qualified for Regional Center under Intellectual Disability and/or Autism... what now?

- Adding the PWS diagnosis does not change the records for Intellectual Disability and/or Autism already on file
- All applicable diagnoses listed on the CDER provide important information about your loved one and their service needs



Chronic Major Medical Conditions Often Present with PWS

Other major medical conditions should also be coded in the diagnostic portion of the CDER. Provide a medical record of the chronic medical condition and request a CDER update, or present the medical record at the annual IPP. Use the Physician's Note!

CHRONIC MAJOR MEDICAL CONDITIONS:

54a. Condition: G4739 Other Sleep Apnea

54b. Impact: Moderate

- Anxiety Disorders
- Diabetes Type II
- Gastroparesis
- GH Deficiency
- Scoliosis | Kyphoscoliosis
- Sleep Apnea



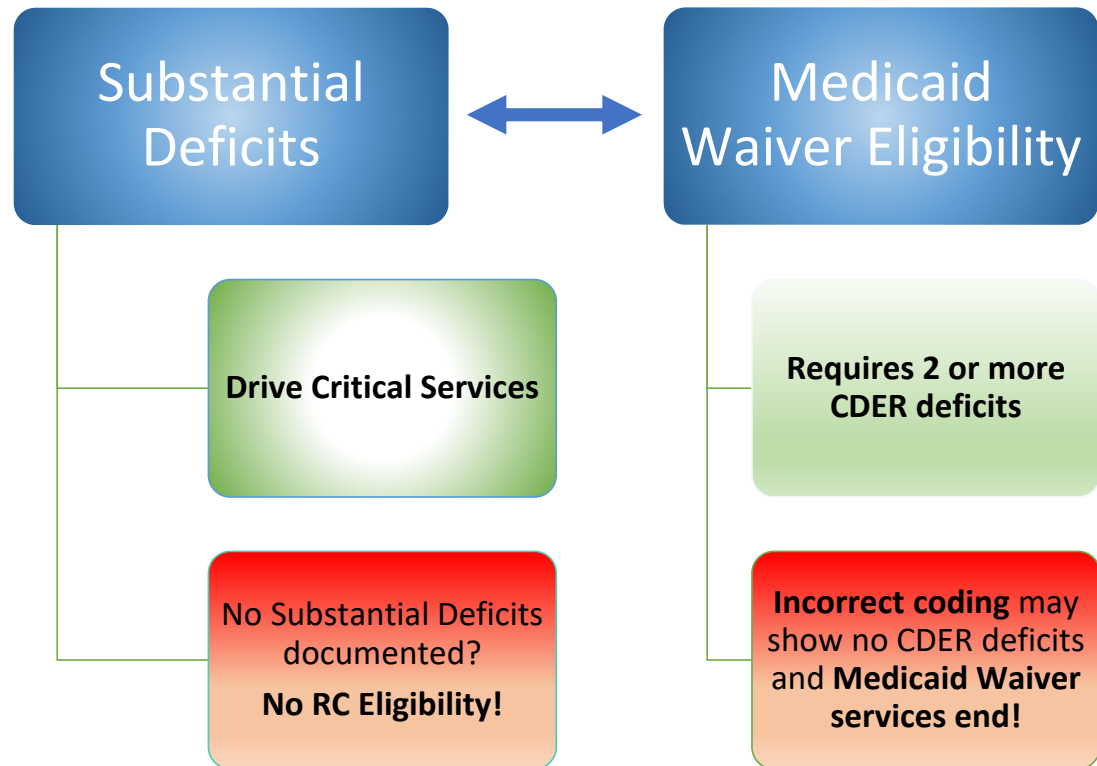
Making the request

- 1) **Contact your Regional Center Service Coordinator**, preferably by email.
 - 2) In your email subject line write, **“CDER Update Request”**
 - 3) In the body of your email write, “Please have insert name of your loved one CDER updated to reflect the diagnosis of Prader-Willi syndrome, diagnosis code Q87.11. I believe you already have a copy of the Genetics Report or Medical Record that contains the PWS diagnosis OR I have attached a copy of the Genetics Report or Medical Record that contains the PWS diagnosis. Please email me a copy of the corrected CDER. I have copied PWCF so they can help us with this process if necessary.”
 - 4) Copy PWCF info@pwcf.org with your email request so that we can follow-up and, if necessary, help you advocate.
 - 5) Inform PWCF when you receive a copy of the corrected CDER.
- *If your loved one is diagnosed with “PWS-like” use code with Q87.19

CDER: Evaluation Element



Ongoing eligibility for Regional Center Services requires that a person continue to be developmentally disabled AND present with substantial deficits in at least 3 major areas of life functioning.



**Don't
Paint a
Rosy
Picture!**

The daily challenges of PWS will lead to enough CDER deficits to show a continued need for services.

AND

Know *HOW* to answer questions in order to provide the *appropriate* information for the most comprehensive report!

What to know: 20 CDER Evaluation Elements

Next you will gain the skills to provide thorough CDER Evaluation Element updates to your Service Coordinator.

Your job is to provide all applicable information and concerns for each evaluation element.

Your service coordinator will listen to this information and select a corresponding CDER Code.

Review the CDER coding every year when you review the IPP report.

If you have concerns that a code does not accurately reflect a deficit, contact your service coordinator to discuss.

CDER Evaluation Element

#8 – Personal Care

Personal Care Codes

1 = Does not perform or assist with personal care activities

2 = Assists with personal care activities by performing helpful movements

3 = Performs personal care activities, but needs assistance

4 = Performs personal care activities independently when reminded

5 = Performs personal care activities independently without reminders

A Closer Look for PWS:

If your individual exhibits any of the following, the CDER coding should be below a 5:

- ❖ What part can they partially complete and what help is needed to finish?
 - Child/adult rubs on shampoo but can't scrub scalp or rinse thoroughly.
 - Child/adult brushes front teeth but struggles to brush inside or back molars.
- ❖ If edible or non-edible personal care supplies (toothpaste, mouthwash, shampoo, etc.) require locking.
- ❖ If child/adult cannot adjust water temperature appropriately (can't tell if water is too hot).
- ❖ If tasks can be completed BUT safety issues require assistance or supervision.

CDER Evaluation Element

#10 – Safety Awareness

Safety Awareness Codes

1= Requires constant supervision during waking hours to prevent injury/harm in all settings

2 = Requires someone nearby during waking hours to prevent injury/harm in all settings

3 = Requires constant supervision to prevent injury/harm in unfamiliar settings only

4 = Requires someone nearby to avoid injury/harm in unfamiliar settings only

5 = Does not require supervision to prevent injury/harm

A Closer Look for PWS:

- ❖ Hyperphagia: It is *critical* that your service coordinator understand how food-seeking behaviors can quickly endanger physical safety.
- ❖ Anxiety: Does safety awareness decline during times of anxiety and stress?
- ❖ Poor judgement: Does not look both ways before crossing street; believes *everything* on internet; naïve, vulnerable to ill intent of others; no awareness of “stranger danger”.
- ❖ Slower processing skills: Unable to quickly and accurately assess environment and people.
- ❖ Not able to safely manage self in an emergency situation (fire, earthquake, civil unrest).

Safety Awareness deficits are inherent in the diagnosis of PWS. Persons with PWS should be coded as a “1” or “2” in this area.

CDER Evaluation Element

#17 Self Injurious Behaviors

Self Injurious Behaviors Codes

1 = Self-injurious behavior causes injury requiring first aid or medical care almost every day

2 = Self-injurious behavior causes injury requiring first aid or medical care at least once a week, but not every day

3 = Self-injurious behavior causes injury requiring first aid or medical care at least once a month, but not every week

4 = Self-injurious behavior occurs, but no apparent injury occurs

5 = Self-injurious behavior never occurs

A Closer Look for PWS:

If your individual exhibits any of the following, the CDER coding should be below a 5:

- ❖ Skin picking, fingernail biting or pulling
- ❖ Biting, scratching, hitting self
- ❖ Head banging
- ❖ Rectal or vaginal picking
- ❖ Inserting objects into body orifices
- ❖ First Aide includes using a band-aide, bandages, wearing gloves or special clothing to prevent picking, etc.



Remember:

PWCF is here to help you live your **BEST LIFE!**

Services and supports from 3 to 99 are driven by thorough and accurate records.

Let's get your CDER updated and accurate!

Diagnosis update

Major Medical Information update

Evaluation Element

Diagnosis update:

Contact your Regional Center Service Coordinator, preferably by email and write “CDER Update Request” in the subject line. Provide (or confirm they have) a medical record with Prader-Willi Syndrome 87.11 and ask that it be used to add PWS to the CDER diagnostic information. Request an updated copy of CDER to confirm the update has been made. Notify PWCF when the diagnosis is updated or if any help is needed along the way!

*If your loved one is diagnosed with “PWS-like” use medical record with code Q87.19 for the request.

Major Medical Information update:

Email your service coordinator any medical record containing major medical updates (Anxiety Disorder, Scoliosis, Gastroparesis, Sleep Apnea, etc). Request that these conditions be added to the “Chronic Major Medical Conditions” section of the CDER.

Evaluation Element: No medical record is necessary. Simply provide a summary of applicable information to your service coordinator and request that the information be used to re-code the CDER element.

*You are not emailing “change evaluation element #8 to a 2”

*You ARE emailing “We didn’t get a chance to discuss the full picture of my son’s personal care needs. I have to provide X, Y and Z support to him and he is not independent, please update the CDER element accordingly and let me know if any further information is needed. Thank you!”

Blank copies of the CDER can be found here. Your coded CDER needs to be requested directly from your Service Coordinator

Diagnostic Element:

https://www.dds.ca.gov/wp-content/uploads/2019/02/DS3753A_DiagnosticForm.pdf

Eval Element:

https://www.dds.ca.gov/wp-content/uploads/2019/02/CDERManual_EvaluationElement.pdf