Related Conditions Checklist
DHS – Disability Services Division

Instructions: This checklist is an instrument for county agency use in determining whether all criteria have been considered for determining eligibility for case management for a person with a condition related to developmental disability. This checklist must be completed annually to redetermine eligibility and kept on file by the lead agency. The checklist reflects the criteria for related conditions as required by state law (see page 3). To answer the questions, use information from all sources required for diagnosis, including:

- Social history
- Medical evaluation
- Tests of intellectual functioning
- Assessments of adaptive behavior
- School records (Individual Education Plan) – if applicable
- Treatments
- Other information which supports or contradicts the assertion that the person has a related condition

Persons are to be qualified or disqualified based on their assessments of intellectual functioning, adaptive behavior, history, level of functioning and treatment needs. This form should only be used to assist the county in that purpose. See Minnesota Rules, part 9525.0016, subparts 2 to 6 and Minnesota Statutes, section 252.27, subdivision 1a for requirements and definitions.

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- Name of person along with birth date, county of financial responsibility and the date completed
- Name, title, phone/fax numbers of person completing form
- Diagnosis/conditions – Add all pertaining to the person
- Date of last medical evaluation and social history - Note state law requires a medical evaluation and social history be performed no more than 12 months before the date of application for case management for the initial eligibility determination. The medical evaluation must be prepared by a licensed physician and must note the person’s general physical health, including vision, hearing and any physical or neurological disorders. Case managers must request that the evaluation include the physician’s comments on the person’s mental health and emotional well being.
- Specific Information and Documentation area - Add comments to substantiate answers and/or provide the required information

- IQ Test/Adaptive Skills Assessment - Standardized tests of intellectual functioning and assessments of adaptive behavior, adaptive skills, and developmental functioning must be normed for persons of similar chronological age and be administered by a person who is trained and experienced in administration of these tests. Specifically, this includes:
  - Licensed psychologists
  - Certified school psychologists or
  - Certified psychometrist working under technical supervision of a licensed psychologist

Testing methods must be modified to accommodate persons whose background, culture or language differs from the original population from which specific tests were standardized.

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There are 10 questions to be answered. Answer each question by indicating “Yes” or “No” in the column provided. In order to be found eligible for case management as a person with a condition related to developmental disability, questions 4 through 9 must be answered with a “YES” and question 10 must indicate that a person has at least three substantial functional limitations (out of the six areas of life activities referenced). If information regarding a particular question is lacking or is inconsistent, schedule additional testing or assessments before making a determination.

Question 1

If the person you are assessing is under the age of 22, skip this question and proceed to question 2.

Minnesota Statutes, Section 245.462, Subd. 20. (a) “Mental Illness” means an organic disorder of the brain or a clinically significant disorder of thought, mood, perception, orientation, memory, or behavior that is listed in the clinical manual of the International Classification of Diseases (ICD-9), current edition, code range 290.0 to 302.99 or 306.0 to 316.0 or the corresponding code in the American Psychiatric Associations Diagnostic and Statistical Manual of Mental Disorders (DSM-MD), current edition, Axes I, II, or III, and that seriously limits a person’s capacity to function in primary aspects of daily living such as personal relations, living arrangements, work, and recreation.
Question 2
If the person you are assessing is 22 or older, skip this question and go to question 3 if applicable.

Minnesota Statutes, Section 245.4871, subd.15. “Emotional disturbance” means an organic disorder of the brain or a clinically significant disorder of thought, mood, perception, orientation, memory, or behavior that: (1) is listed in the clinical manual of the International Classification of Diseases (ICD-9-CM), current edition, code range 290.0 to 302.99 or 306.0 to 316.0 or the corresponding code in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-MD), current edition, Axes I, II, or III; and (2) seriously limits a child's capacity to function in primary aspects of daily living such as personal relations, living arrangements, work, school, and recreation. “Emotional disturbance” is a generic term and is intended to reflect all categories of disorder described in DSM-MD, current edition as “usually first evident in childhood or adolescence.”

Question 3
Skip this question if you answered “No” to questions 1 and 2.

If you answered “YES” to question 1 or 2, determine if the person's current deficits in intellectual functioning and/or adaptive skills are the result of the person's mental illness/emotional disturbance. If these deficits are clearly related to mental illness/emotional disturbance, do not continue. The person is not eligible. If the etiology of the deficits is not clear, schedule additional testing and assessments. Continue only after additional information becomes known.

Question 4
“Severe” means serious or grave, giving cause for concern and having a significant affect on most, if not all of the person’s life.

Question 5
“Chronic” means long or drawn out, applied to a disease or condition that is not acute.

Question 6
The American Association on Mental Retardation (AAMR) defines Adaptive Behavior in the following way:

“Adaptive behavior is the collection of conceptual, social, and practical skills that people have learned so they can function in their everyday lives. Significant limitations in adaptive behavior impact a person's daily life and affect the ability to respond to a particular situation or to the environment.”

The AAMR provides the following examples of Adaptive Behavior Skills:

**Conceptual Skills**
- Receptive and expressive language
- Reading and writing
- Money concepts
- Self-direction

**Social Skills**
- Interpersonal
- Responsibility
- Self-esteem
- Gullibility (likelihood of being tricked or manipulated)
- Naïveté
- Follows rules
- Obey laws
- Avoids victimization

**Practical Skills**
- Personal activities of daily living such as eating, dressing, mobility and toileting
- Instrumental activities of daily living such as preparing meals, taking medication, using the telephone, managing money, using transportation and doing housekeeping activities
- Occupational skills
- Maintaining a safe environment (AAMR, 2004)

The existence of limitations and strengths in adaptive skills must be documented within the context of community environments typical of the person’s age peers, and tied to the person’s individualized needs for supports. It is important to consider adaptive behavior as both the ability to fit into a given niche as well as the ability to change one's behavior to suit the demands of a situation.

Not all adaptive behavior deficits result in a person having adaptive behavior similar to that of a person with developmental disability.

Minnesota Rules, part 9525.0016, subp. 2C “Deficits in adaptive behavior” means a significant limitation in an individual's effectiveness in meeting the standards of maturation, learning, personal independence, and social responsibility expected for the individual's age level and cultural group, as determined by clinical assessment and, generally, standardized scales.
Question 7
Key questions to be considered when answering this question include:

1) Does the person have a need for a combination and/or sequence of special services, interdisciplinary supports and services of varying intensity?
2) Does the person need these services over a sustained period to provide training and habilitation across environments?
3) Are there deficits in cognitive and adaptive skill development in areas such as: self-care, understanding and use of language, community living skills, leisure, recreation skills, behavior management, socialization, community orientation, emotional development, cognitive development, motor development and work?

Question 8
“Manifested before the age of 22” means the condition must have been displayed or revealed itself earlier than the person’s 22nd birthday.

Question 9
“Indefinitely” means lacking precise time limits yet expected to go on for an extended period of time.

Question 10
A person must be documented as having at least three substantial functional limitations (in the six areas of life activities referenced) that are considered to be long-term in nature, in order to be determined eligible for case management.

“Functional limitations” means the effect of specific impairments on the person’s ability to perform the skill at an age appropriate level.

“Substantial functional limitations” is characterized by considerable difficulty in carrying out essential major activities of daily living.

Minnesota Rules, part 9525.0016, subpart 2E.

“Substantial Functional Limitations” means the long-term inability to significantly perform an activity or task.

Bottom of page – Place for signature and date of the person completing form.

Eligibility must be determined based on reliable informational sources. If information is lacking or is inconsistent, schedule additional testing or assessment before making a determination.

Related Conditions Statutory Definition
Minnesota Statutes, section 252.27, subdivision 1a:

Definition:
Related condition: For purpose of the DD Waiver, Rule 185 case management, and admission to an ICF/MR, a person must have a condition related to developmental disability that meets required criteria. Examples of possible related conditions include, but are not limited to, cerebral palsy, epilepsy, autism, fetal alcohol spectrum disorder and Prader-Willi syndrome.

Required criteria:
1. Is severe and chronic
2. Results in impairment of general intellectual functioning or adaptive behavior similar to that of persons with developmental disabilities.
3. Requires treatment or services similar to those required for persons with developmental disabilities.
4. Is not attributable to mental illness or an emotional disturbance. Mental illness does not include autism or other pervasive developmental disorders.
5. Is manifested before the person reaches 22 years of age.
6. Is likely to continue indefinitely.
7. Result in substantial limitations in three or more of the following areas of major life activity:
   • Capacity for independent living
   • Learning
   • Mobility
   • Self-care
   • Self-direction
   • Understanding and use of language