CCMHS - PROXY HEALTH MEASURES

Please answer the following questions about the person receiving services.

NAME:_____ DATE:_____ MCO #_____

Hearing – Ability to hear (with hearing appliance normally used)

- Adequate No difficulty in normal conversation, social interaction, listening to TV.
- Minimal difficulty Difficulty in some environments (e.g., when a person speaks softly or is more than 6 feet away).
- Moderate difficulty Problem hearing normal conversation, requires quiet setting to hear well.
- Severe difficulty Difficulty in all situations (e.g., speaker must talk loudly or speak very slowly; or person reports that all speech is mumbled.)
- No hearing

Hearing Aid Used – Yes No

Vision – Ability to see in adequate light (with glasses or with other visual appliance normally used)

- Adequate Sees fine detail, including regular print in newspapers/books or small items in pictures.
- Minimal difficulty Sees large print, but not regular print in newspapers/books. Can identify large objects in pictures.
- Moderate difficulty Limited vision; not able to see newspaper headlines or items in pictures but can identify objects in his/her environment.
- Severe difficulty Object identification in question, but person's eyes appear to follow objects, or the person sees only light, colors, shapes.
- No vision eyes do not appear to follow objects, absence of sight.

Visual Appliance Used – Yes No (e.g., glasses, contact lenses)

Indicate the presence of each of the following health conditions as reported by the individual, a health care professional or family member.

Pneumonia - including aspiration pneumonia (2 or more times within the past 12 months)

- Never present or treated only one time within the past 12 months.
- History of condition treated 2 or more times in past, BUT NOT TREATED MORE THAN ONCE within the past 12 months.
- Treated for the condition 2 or more times within the past 12 months.
- Information unavailable

Asthma

- Never present.
- History of condition, but not treated for the condition within the past 12 months.
- Treated for the condition within the past 12 months.
- Information unavailable

PLEASE CONTINUE ON PAGE 2

Upper Respiratory Infections – (3 or more times within past 12 months)

- Never present or treated less than 3 times within the past 12 months.
- History of condition, but not treated for the condition within the past 12 months.
- Treated 3 or more times for the condition within the past 12 months.
- Information unavailable

Gastroesophageal Reflux or GERD

- Never present.
- History of condition, but not treated for the condition within the past 12 months.
- Treated for the condition within the past 12 months.
- Information unavailable

Chronic Bowel Impactions (not constipation)

- Never present.
- History of condition, but not treated for the condition within the past 12 months.
- Treated for the condition within the past 12 months.
- Information unavailable

Seizure Disorder or Epilepsy

- Never present.
- History of condition, but not treated for the condition within the past 12 months.
- Treated for the condition within the past 12 months and seizure free.
- Treated for the condition within the past 12 months, but still experience occasional seizures (less than 1 per month)
- Treated for the condition within the past 12 months, but still experience frequent seizures.
- Information unavailable

Progressive Neurological Disease, e.g., Alzheimer's, Parkinson's, Dementia

- Not present.
- Treated for the condition within the past 12 months.
- Information unavailable

Diabetes

- Never present.
- History of condition, but not treated for the condition within the past 12 months.
- Treated for the condition within the past 12 months.
- Information unavailable

Hypertension

- Never present.
- History of condition, but not treated for the condition within the past 12 months.
- Treated for the condition within the past 12 months and blood pressure is stable.
- Treated for the condition within the past 12 months, but blood pressure remains high or unstable.
- Information unavailable

Obesity

- Never present.
- Medical diagnosis of obesity or Body Mass Index (BMI) > 30