

**COMMUNITY SERVICES INTEREST
LIST (CSIL)**

CLOSURE CODE USER'S GUIDE

SEPTEMBER 2025

Community Services Interest List (CSIL)
User's Guide

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Section I. Closure Codes by Category

Eligibility Category

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

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Death Category

- **Death (420)**
HHSC has received notification that a person is deceased.

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Not Eligible Category

Choose the most appropriate code below to describe why the person did not meet eligibility for the program.

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

STAR+PLUS

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

CLASS, DBMD, STAR Kids, HCBS, ICMW and DAHS

HHSC has determined and provided documentation that shows the person cannot be served safely in the community.

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

CLASS and DBMD

The person'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.

DAHS

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

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

Person does not meet medical necessity.

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

Person 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 HHSC to provide foster care or residential services.

DAHS, ERS, FC, HDM 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, STAR Kids, HCBS, ICMW and STAR+PLUS

The person lives in an institution and does not choose to return to the community.

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(Not Eligible Category continued)

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

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

Note: If the person 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 person does not live 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 person does not meet the age requirement for the program.

- **No Medical Approval (651)**

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

- **No Unmet Need (537)**

The person 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, people on the list who do not have a Texas address should be removed from the list and told they must be a resident of Texas to be on an interest list.

- **Not Financially Eligible (431)**

CLASS, DBMD, STAR Kids HCBS, ICMW and STAR+PLUS
The person has been denied Medicaid.

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

The person's income and resources are not within limits established by program rules.

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(Not Eligible Category continued)

- **Not Functionally Eligible (536)**

CLASS and DBMD

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

AFC, ERS, FC, HDM, RC and SSPD

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

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Could Not Locate Category

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 person.

- **Mail Undeliverable or No Working Phone Number (645)**

Code to be used if letter has been returned as undeliverable in any attempt to contact or to make an offer to a person on the interest list **and** there is no working phone number.

- **No Response to Contact or Monitoring Letter (526)**

During routine interest list contacts, staff made unsuccessful attempts at contact using all known addresses and phone numbers available.

Note: If mail is returned as undeliverable, use code 645, *mail undeliverable or no working phone number*.

- **Released From List and No Response to Letter (527)**

An offer for program or services has been mailed to the person and no response has been received within the 30-day time frame. Added attempts to contact the person were not successful.

Note: If the letter has been returned as undeliverable, use code 645, *mail undeliverable or no working phone number*.

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Voluntary Withdrawal Category

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

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

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

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

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

Person did not file or follow through with Medicaid application **or** did not participate as required in the development of the service plan. Person 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 person has informed them they are no longer interested in services.

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

Person has been informed of the provision of MERP and has chosen to have their name removed from the interest list.

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

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

Person has received offer to begin eligibility determination process and has informed HHSC staff they are no longer interested in pursuing eligibility and has requested name be removed from the interest list. Person must be in release status to use this code.

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

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(Voluntary Withdrawal category continued)

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

Person has informed HHSC staff they are no longer interested in having their name remain on the interest list and has requested name be removed from the interest list.

Note: Use this code only when the person is in **open** status.

- **Withdrew to Bottom (542)**

Person has informed HHSC staff they would like their name placed at the bottom of the interest list because services are not needed at this time. If the person requests their name be moved to the bottom of the interest list because other services are meeting their needs at this time, use appropriate code from voluntary withdrawal category.

Note: If the person is in release or assign status, this code should be used along with documented in CSIL when adding person back to the bottom of the interest list.

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Needs Met Through Other Services Category

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

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

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Miscellaneous Category

- **Duplicate (525)**
The person 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 person was placed on the interest list for the wrong program or services. **Or** the person was placed on the interest list for a program they are already receiving. Code may also be used if the person 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)** Person has moved to a new area or is requesting the same program or 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 a person is enrolled in a waiver program.

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- **Aged Out Of Program (572)**

This automated CSIL code closes people who no longer meet the age requirements for program or services. Use code 539, *ineligible age*, when closing a person who does not meet age requirements.

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Section III. Closure Code Tables

Existing Closure Codes

CLOSURE CODE	EXPLANATION OF CLOSURE CODE	CLASS	DBMD	STAR Kids MDCP	HCBS	ICM	STAR+PLUS	AFC	DAHS	ERS	FC	HDM	RC	SSPD
419	Certified to Enter Program	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
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
525	Duplicate	X	X	X	X	X	X	X	X	X	X	X	X	X
526	No response to Contact or Monitoring Letter	X	X	X	X	X	X	X	X	X	X	X	X	X
527	Released from list or No response to Letter	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
530	Needs Met Through CBA Waiver Services	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
533	Needs Met Through Non-Waiver Services	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
535	Needs Met Through STAR Kids MDCP Waiver Services	X	X					X	X	X	X	X	X	X
536	Not Functionally Eligible	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
542	Withdrew To Bottom	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

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New Closure Codes

CLOSURE CODE	EXPLANATION OF CLOSURE CODE	CLASS	DBMD	STAR Kids	CBA	ICM	STAR+PLUS	AFC	DAHS	ERS	FC	HDM		RC	SSPD
637	Not a Texas resident	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
639	Does Not Meet Diagnostic Requirements	X	X												
640	Needs Met Through DBMD Waiver Services	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
642	Needs Met Through ICMW Services	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
644	Released from List/Offer Refused	X	X	X	X	X	X	X	X	X	X	X		X	X
645	Mail Undeliverable or No Working Telephone Number	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
647	Transfer to Another Region's List within this Program				X		X	X	X	X	X	X		X	X
648	Cannot be Served Safely in the Community	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
650	Needs Met Through TxHmL Waiver Program	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

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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
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 or 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/HCBS/CLASS/DBMD Services
624	Transferred to STAR+PLUS
636	Transferred to ICMW

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Section IV. Acronym Guide

AAA	Area Agency on Aging
ABL	Adaptive Behavior Level
AFC	Adult Foster Care
CCP	Comprehensive Care Program
CLASS	Community Living Assistance and Support Services
CSIL	Community Services Interest List
CWP	Consolidated Waiver Program
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
HCBS	Home and Community Based Services
ICF/MR	Intermediate Care Facility for Persons with Mental Retardation
ICMW	Integrated Care Management Waiver
IPC	Individual Plan of Care
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 Kids	STAR Kids MDCP
STAR+PLUS	State of Texas Access Reform Plus