

### Agenda

- 1. PASRR Process for Level II Referrals
- 2. What is a Level II?
- 3. Supporting Documentation Needs
- 4. Common Questions
- 5. Potential Outcomes
- 6. Summary of Findings Report

## **PASRR** and Process

# Structure & Purpose of PASRR

Preadmission Screening & Resident Review

Administered by CMS

• Created in 1987

Screened for SMI, ID, RC



#### 1. Does this person have a PASRR condition?

#### THE FOUR Ds OF PASRR—MI/ID/RC

- Diagnosis (or suspicion of)
- Dementia: If present, is it primary?
- If sole or primary dementia, the person is not in the PASRR population, so no Level II required
- If unsure or secondary to MI/IDD, a Level II is needed
- Duration
- Disability



#### **Possible Related Conditions**

Anoxia at birth

Arthrogryposis

Autism

Congenital Blindness

Cerebral Palsy

Congenital Deafness

Down Syndrome

Encephalitis

Fetal Alcohol Syndrome

Fredreich's Ataxia

Hemiparesis

Hemiplegia

Hydrocephaly

Klippel-Feil Syndrome

Meningitis

Multiple Sclerosis

Muscular Dystrophy

Paraparesis

Paraplegia

Polio

**PDD** 

Prader-Willi syndrome

Quadriplegia

Seizure Disorder

Spina Bifida

Spinal Cord Injury

Traumatic Brain Injury

XXY Syndrome

Diagnosis for condition prior to age 22, expected to last indefinitely

3 or more functional limitations:

Self-care | Understanding And Use Of Language | Learning | Mobility | Self-direction Capacity For Independent Living



# 2. What is the most appropriate placement for this person?

#### Least restrictive level of care

- Too acute/not acute enough
- Consider Medical Psychiatric Units, NF, or community options

#### **Plan of Care**

 NF MUST incorporate ALL PASRR identified services into care plan

#### **Services**

- Specialized Services are specific to the person to meet required needs
- Alternative Placement or Community Services

3. Might this person be a candidate for transition to the community? What supports or services would be necessary to return to the community?





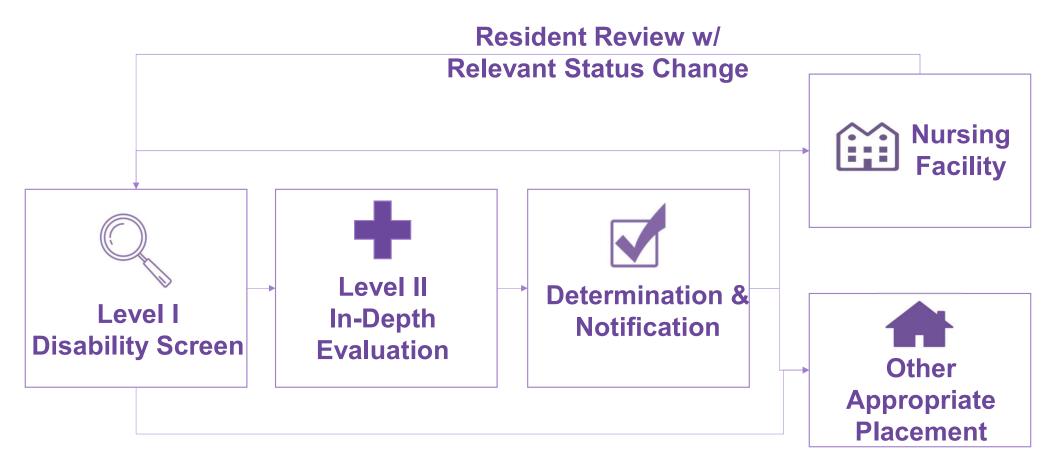






- Specialized Services
- Highest practicable physical, mental, and psychosocial wellbeing
- Any needed service/support
- Not limited to facility's existing resources

4. What unique disability supports and services are needed to ensure safety, health, and well-being?



#### Level I Determinations

#### No Level II Required

- No PASRR condition
- · Can admit to/remain in NF with no additional PASRR activity

#### Level II Negative, No Status Change

- No PASRR condition
- · Can remain in NF with no additional screen

#### Level II Positive, No Status Change

- PASRR condition that does not require a new Level II
- · Can remain in NF with no additional Screen

#### Refer for Level II

- Has/suspected PASRR condition
- Requires Level II

#### Withdrawn or Cancelled

Person is not going to/remaining in NF



## Intent of Categorical Options

- Opportunity for a person to go to NF without full Level II
- Person cannot participate in assessment or services/supports
- Person won't be in NF long enough to receive services/supports

Remember: Not designed to be a shortcut around a Level II assessment



- Must have a known/suspected PASRR condition
- Must be psych stable and NOT a danger to self or others
- Each outcome has specific criteria

### Basic Requirements for Application of Categorical Determinations

maximus

# Exemption & Categoricals

## Primary Dementia/Secondary Mental Illness

- Level I must include documentation that supports dementia as primary diagnosis
- Cannot occur unless sufficient evidence confirms the progression of dementia as primary

#### **Exempted Hospital Discharge (30 days)**

- Requires current history & physical, psych consult, if completed
- The resident has been hospitalized for acute inpatient care
- The resident requires NF services for the condition for which care was received in the hospital
- The attending physician certifies before admission to the facility that the resident is expected to require fewer than 30 days of NF services

IN PASRR - Being ready for a Level II: Questions and Information Needed from Providers

#### Convalescent

- The person will be in the NF for 60 days or less, as verified by physician
- Admitting to a NF from a hospital medical unit for treatment of the same condition for which the person was in the hospital.
- Emergency Room and Observation NOT included
- Like EHD, except 60-day time limit

#### **Documentation requirements:**

Nothing additional beyond the typical (e.g., H&P, MAR, LOC)

## Categoricals

#### Provisional Emergency

Sudden, unexpected & urgent need for placement

A lower level of care is not available

Up to 7 calendar days

#### Respite Care

Individuals admitted to an NF from community for short-term respite care

Must be an expressed intention of leaving the NF by the expiration of the approved respite time period.

Up to 30 days per calendar quarter, with 30 calendar days between stays of 15 calendar days or more

#### **Terminal Illness**

Individual has documented support of end stage illness

Life expectancy of 6 months or less

This categorical is not time limited

#### Documentation requirements:

Physician's documentation of life expectancy <6 months.

LOC/Medical necessity standards ARE applied as part of the categorical decision-making process

H&P



# What is a PASRR Level II?

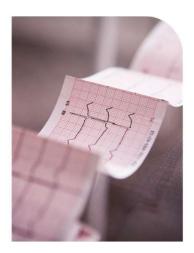
#### X

## Level II Importance

- In-depth assessment
- Tells who the person is
- State and Federally required











#### X Level II Process

#### Refer for Level II Contact Referral Source Contact Legal Guardian Requests Signature on Attestation Form and Supports •Assign to a Maximus assessor Assessor schedules interview •As appropriate •Returns signed form to •Obtain ROI as needed Maximus Contact identified supports/family **Completes Assessment** •Obtain ROI, if needed Review Medical Records Interview the person form •May contact you again for clarification Maximus writes

II: Questions and Ir.

Submits to Maximus for

review

summary of findings and

•Available in AssessmentPro

generates outcome

maximus

#### What happens if I Don't Return Contact with Maximus?

#### The Level II can be cancelled

- If we don't have enough information or too many inconsistencies, we can't make a determination or identify supports and services.
- Making something up to fill in the gaps is considered fraud
- We can make the wrong determination for the person, including:
  - A denial of placement
  - Inaccurate service identification
  - Potential for identification of more intensive treatment needs prior to NF placement
- There can be a delay in determination
  - The faster we receive the needed information, the faster we can complete the process
- The person might discharge to a less restrictive environment before completion
  - · This negates all the work done and the process must start over

# Supporting Information

# What Questions Will You Have for Me?

Million Dollar Question: What do they need from the NF that they can't get elsewhere?

#### MI:

- Social supports
- Medications: effectiveness and interactions
- Hospitalizations
- Impact on functioning
- Age of onset
- Neurocognitive disorder and impact

#### ID/RC:

- Age of onset
- History of service receipt
- Confirmation of condition: IQ testing or participation in waiver services
- Types of support needed
- Impact on functioning

IN PASRR - Being ready for a Level II: Questions and Information Needed from Providers



#### **Documentation Needs**

- H&P
- Psych notes/evals
- Hospital info (med or psych)
- OT/PT
- Nursing
- MAR

- Documentation of behavioral health diagnosis
- MDS or something that informs the LOC
- Mental status/neurocognitive exam findings
- Guardianship documentation



## Outcomes and Services

#### Level II Outcomes

- Level II Approved, No Specialized Services
- Level II Approved No Specialized Services Short Term
- Level II Approved Specialized Services
- Level II Denied NF Appropriateness
- Level II Denied Requires Inpatient Psychiatric Services
- Level II Excluded From PASRR No Diagnosis
- Level II Excluded From PASRR Primary Neurocognitive Disorder

Providers maximus

#### **Summary of Findings Report**

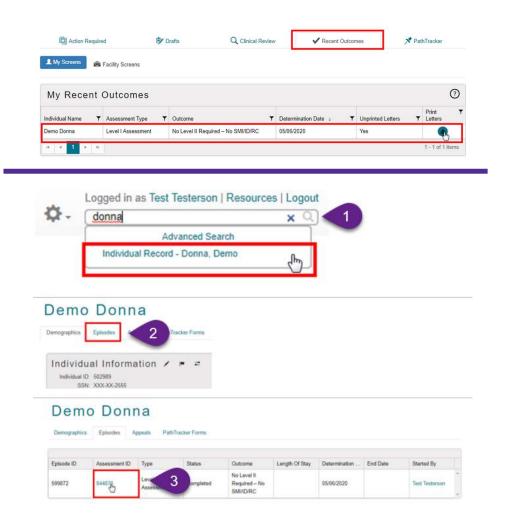
1. Is the choice of care in a Nursing Facility setting appropriate for you now?

- 2. Why did this Pre-admission Screening And Resident Review [PASRR] (the evaluation) occur?
- What did the evaluation identify as important for a provider to know about your symptoms, diagnosis(es), behaviors or other needs and history?

- 4. What did the evaluation find about your mental health, intellectual, of developmental disability service history?
- 5. What did the evaluation find to be important to you and for you?
- 6. What was learned about your medical and functional needs?

- 7. Is Nursing Facility an appropriate option for you to choose?
- 8. If you are admitted to a
  Medicaid Certified Nursing
  Facility, what services and
  supports are Nursing Facility
  staff required to provide for you?
- 9. Diagnoses, location, and outcome

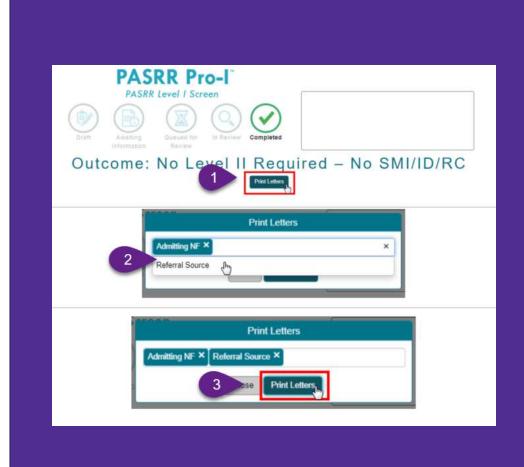
#### **Print Outcomes in AssessmentPro: Hospitals and Community**





#### **Print Outcomes in AssessmentPro: Nursing Facilities**





# Services and Planning

### Addressing Services in the Plan of Care

- All PASRR-identified services MUST be addressed in the person's NF care plan
  - Document engagement and declines
- Any changes needed to the care plan related to PASRR services should result in a status change assessment
  - Submit a new Level I and LOC
  - Will likely result in a new Level II with new PASRRidentified services

Providers maximus

