



Preadmission Screening Resident Review (PASRR) Level I (MA 376)

Training Transcript

Opening Slide

Welcome!

This is Ruth Anne Barnard. I work in the Office of Long-Term Living.

I am the PASRR Coordinator for Pennsylvania.

The PASRR Level I form has been updated as of July 2024. This training is a PASRR Level I training and will include any changes that were made to the form in July.

The PASRR Level I training is for Hospitals, Nursing Facilities, Aging Well/AAA, and for the Nursing Facility Field Operations Representatives in the Office of Long-Term Living. For this training, the AAA is the Area Agency on Aging.

Slide #2

This slide includes our Objectives for the day.

- Overview of the Federal (CMS) Regulations
- What does Preadmission Screening mean
- Review of the PASRR Level I Form
- PASRR Scenarios
- PASRR Criteria before and after Admission
- PASRR Letter of Determination
- Important Websites
- Who to call with questions

Handouts for this training can be found on the Pennsylvania PASRR Website where this training was posted.

Slide #3

OBRA (Omnibus Budget Reconciliation Act) is a Federal Requirement. As one of the parts of this Act, CMS (Centers for Medicare and Medicaid Services) requires that ALL individuals seeking admission to a Title 19, MA certified NF, have a preadmission screening completed, regardless of individual's payer or insurance source. The Department of Human Services Program Offices are responsible for making the final determinations regarding approval of placement in a Long-Term Care Nursing Facility and whether the individual needs specialized services if they are determined to meet the program office criteria for Mental Health, Intellectual/Developmental Disability or an Other Related Condition.

These Provisions were addressed in PA Bulletin, Volume 18 Number 52 on December 24, 1988. There are numerous parts to this ACT including the Admission Notice packet, you might hear it referred to as the MA 401. We are here to discuss the Preadmission Resident Review Screening part of the ACT today. If you have a sleepless night and need something to read to fall asleep, the regulations for the PASRR are located in the Code of Federal Regulations Sections 483.100 through 483.138.

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These requirements apply to all nursing facility applicants regardless of payer source. Per OBRA regulation, nursing facilities cannot admit individuals with diagnoses of a serious Mental Illness (MI), an Intellectual/Developmental Disability (ID/DD) or Other Related Conditions (ORC) that meet the Department of Human Services (DHS) Program Office criteria on the PASRR Level I without going through a PASRR Level II Evaluation. Failure to complete (prior to admission) the PASRR process in a timely manner will result in forfeiture of Medicaid Reimbursement to the Nursing Facility during the period of non-compliance in accordance with Federal PASRR Regulations 42 CFR §483.122.

Let me emphasize that again, it is in Federal Regulation that you cannot admit an individual if you have not done this process before admission to your nursing facility.

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Prior to entering the NF, the PASRR Level I is completed by the nursing facility, the hospital, or Aging Well/AAA no later than the day of admission. Family members may assist in this process.

But NFs are ultimately responsible to make sure the form is filled out correctly upon admission to their Nursing Facility.

If the individual has a Mental Illness, Intellectual/Developmental Disability or Other Related Condition diagnosis identified on the PASRR Level I and meets the criteria for the Department of Human Services (DHS) Program Office, the PASRR Level II Evaluation must be completed before entering the Nursing Facility. Also, a Letter of Determination must be received from the Program Office prior to being admitted to the nursing facility. In this webinar, the DHS Program Office will be referred to as the "Program Office" moving forward.

There are exceptions to having a letter prior to admission, the Nursing Facility is able to call the Program Office and find out the results of a review prior to having the Program Office Letter of Determination. The Nursing Facility is able to get a verbal approval from the Program Office which they can use to admit that person. In order to do this, the nursing facility would call the Program Office and must document who they spoke to at the Program Office and what they were told. In other words, does the individual meet criteria for the Program Office and can they be admitted to the nursing facility? If both are "yes", that person can be admitted before the receipt of the Program Office Letter. This documentation is added to the individual's chart until a Program Office Letter is received. Make sure you keep a look out for the actual letter, because that letter does need to be added to the chart for that person.

As with the previous PASRR Level I form, you do not need a new form if you need to make changes. You are to make the changes directly on this PASRR Level I form. Date and either initial or sign to indicate you made the changes to the form. Use the PASRR Level I as a worksheet. For example, if the person had a hospitalization 3 years ago, you want to make a note of that stay on the form, as this may be helpful information to someone else, so that they are aware.

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PASRR Reminders:

- The PASRR Level I must be completed prior to admission.
- Only one PASRR on the clinical record per admission, unless a new PASRR Level I generated a Program Office Letter.

- A new PASRR Level I is not to be completed when there are changes needed to the PASRR Level I form. The original PASRR form just needs to be updated to reflect the change.
- The PASRR Level I may be filled out by anyone who knows the health history of the individual.

How to update a PASRR Level I:

- Update diagnosis, psych stay, or additional information that affects PASRR, directly on the original PASRR Level I form (the one that is dated prior to admission to your facility).
- If a change in criteria results in a PASRR Level II Evaluation needing to be completed, page 7 of this form, will need to be updated to reflect that a PASRR Level II Evaluation now needs to be completed.
- Any updates made are expected to be initialed and dated.

Updates may be completed beside the answers assuring that it can be determined what is the new updated, different, or additional information. Or this can also be a short narrative at the end of the PASRR with the new, updated, or differing information. Whoever completes the PASRR will sign and date the PASRR. Answers should not be crossed off and marked as incorrect, but notations made when one is adding something additional or different.

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Now we will start the PASRR Level I Form review.

The website where we have posted this training contains each of the PASRR forms.

The Hospitals, Aging Well/AAA, and the Nursing Facilities have need for the PASRR Level I form.

The PASRR Level II Evaluation form is needed by the Aging Well/AAA offices and Nursing Facility Field Operations, as they are the ones that will fill out the PASRR Level II Evaluation form.

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This form was revised July 1, 2024.

The PASRR Level I is found on a resident's chart when an individual is in the nursing facility.

The PASRR Level I Forms are reviewed by Field Operations and can also be reviewed when the NF has a Department of Health survey or a Federal audit.

The Date the form is completed is the date the PASRR Level I form is actually completed and should be dated prior to admission, no later than the day of admission. If the PASRR Level I is positive, the PASRR Level II Evaluation must be also completed prior to admission. I want to mention here, that the date of the PASRR Level II, must be the same date or after the date of the PASRR Level I.

The date in this section is the date that Field Operations looks at to make sure the PASRR is completed timely. Field Operations also looks to make sure you are using the latest version of the PASRR Level I form as well.

Name is the last name first and then first name. Social Security number should be all 9 digits, not just the last 4. The name and just the last 4 digits of the Social Security number are entered at the top of the page. Be careful if you print the PASRR in paper form and then scan it to an electronic record system

that the whole page shows including the name and last 4 digits of the Social Security number at the top of each page.

The Communication question is asked to see if the individual needs something additional to communicate with you. It may be any of the following items: communication board, interpreter, sign language, note cards with pictures, etc. This question is not what we could provide to someone with Dementia to help them communicate with you. Because no matter what we provide to that individual, they will not necessarily be able to use anything additional to communicate with you at any given time.

This question needs to be completed when completing the PASRR Level I form.

Nursing facilities are responsible that all questions are filled out when they admit an individual. Use any admission paperwork you receive to see if something else needs to be added to this form.

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Section II, is where you note a Neurocognitive Disorder. A Neurocognitive Disorder includes dementia, Alzheimer's disease, Traumatic Brain Injury, Huntington's, Parkinson's, etc.

Neurocognitive disorders can affect memory, attention, learning, language, perception and social cognition.

A diagnosis of mild Neurocognitive disorder, such as Parkinson's Disease, where the person is currently not having any symptoms, will not automatically exclude an individual from needing to have a PASRR Level II Evaluation. Whether a PASRR Level II Evaluation will need to be completed will depend on the responses on the rest of the form, to see if the individual will meet the criteria for one of the Program Offices.

If there is a Neurocognitive Disorder, even though there might not be any deficits, this section needs to be completed. We want the diagnosis and date, if known, entered at #1.

All questions in this section do need to be completed if there is a Neurocognitive Disorder. If there is no Neurocognitive Disorder, you must still answer #1 and then you may skip to the Mental Health Section of the form.

Neurocognitive stays in the hospital that are because of behaviors due to the Neurocognitive disorder, such as, for example, Dementia behaviors, would not be a reason to have a PASRR Level II Evaluation completed if the individual does not meet any of the other Program Office criteria.

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Section III – Mental Health

Slide #11

Note the Serious Mental Illness Diagnoses are listed at the beginning of this section on the form. These diagnoses are ones that may lead to a chronic mental health disability.

For question 1, you will list on the line, the mental health condition or suspected mental health condition, other than Dementia, that may lead to a chronic disability. We continue to note on this line as well, simple depression and anxiety. However, these diagnoses do not generally lead to a Chronic Disability and generally would not meet criteria further on in the Mental Health section. But work the form through to make that determination. Also pay attention here when you are looking at the hospital

History and Physical and if the individual is on a medication for a Mental Health diagnosis, but you list none. That should be red flag, to do some research as to why the individual is on a Mental Health medication.

We will go through some scenarios for when someone goes to the hospital for a psych stay and what to do before or after they come back to the nursing facility a little later in this presentation.

For Substance Related Disorder, we are concerned with the last two year time period. History would only come into play if the individual actually had used the substance within the past 2 years and may not be currently using it now. The substances, for example, include Alcohol, Cannabis, Hallucinogens, Inhalants, Opioids, Sedative-hypnotic, Stimulants, Tobacco, and others.

And we need to know if the nursing facility placement is related to having this substance related disorder/diagnosis. Substance use by itself does not mean that a PASRR Level II Evaluation needs to be done, but often times we find that substance related disorders go hand in hand with a Mental Health diagnosis. We ask that you work this form through and answer all the questions.

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Section III-B # 1- Recent Treatment/History – We want to know if the individual has experienced at least one of the following in both numbers 1 and 2. And a ‘Yes’ to any question in this section means that a PASRR Level II Evaluation will need to be done and sent to the Program Office.

Treatment in an acute psychiatric hospital is a ‘yes’ if it occurred at least once in the past 2 years.

Treatment in a partial psychiatric program would be a ‘yes’ if an individual received services in a Partial Hospitalization program at least once in the past 2 years. Partial Hospitalization programs are non-residential treatment programs that include psychiatric, psychological, social and vocational elements under medical supervision. Partial hospitalization is provided on a planned and regularly scheduled basis for a minimum of 3 hours, but less than 24 hours in any single day. If you need more information on this please see PA Code Title 55, Chapter 5210 Partial Hospitalization.

An admission to a State Hospital in the past is always a ‘Yes’. It does not matter when it occurred. It could have occurred 20 years ago.

A Long-Term Structured Residence (LTSR) is a highly structured therapeutic residential mental health treatment facility designed to serve persons 18 years of age or older who are eligible for psychiatric hospitalization but who can receive adequate care in a Long-Term Structured Residence. Admission may occur voluntarily or involuntarily. One stay in the last 2 years, would be checked “yes”. If you need more information on this, please see PA Code Title 55, Chapter 5320 Requirements for Long-Term Structured Residence Licensure.

Any Electroconvulsive Therapy (ECT) for Mental Health Condition(s) in the past 2 years is a ‘Yes’.

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Section III-B, 1, f.

Does the individual have a Mental Health Case Manager or Intensive Case Manager (ICM), Blended or Targeted Case Manager, Resource Coordinator (RC), Community Treatment Team (CTT) or Assertive Community Treatment (ACT)? A note here says “this **does not** include psychiatrist, therapist or other mental health practitioners that provide mental health treatment”. And this question is only marked if

they have one of these persons working with them for the Mental Health diagnosis. This would not be an Intellectual Disability Case Manager or Administrative or Financial Case Manager.

Section III – B #2 is looking at a Significant Life disruption due to a Mental Health Condition in the last 2 years.

We want to know if there was a suicide attempt or ideation with a plan in the last 2 years due to the Mental Health Condition. If so, mark this a “yes”.

Was there a Legal or Law intervention of some kind that occurred due to the Mental Health Condition? If so, mark this a “yes”.

Was there a loss of housing or other life changes (such as maybe being kicked out of housing) due to the Mental Health Condition? Or the Family may just not be able to care for the individual anymore due to the Mental Health Condition? If so, mark this a “yes”.

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Section III-C Level of Impairment

If an individual has a mental disorder that has resulted in functional limitations in major life activities that are not appropriate for the individual’s developmental stage, you would, check the box next to the type of functioning the individual has a problem in.

Interpersonal Functioning
Concentration, persistence and pace
And Adaptation to change.

The grey box NOTE indicates the criteria when a PASRR Level II Evaluation would need done because the individual meets the criteria for a Mental Health Program Office review.

The note indicates that a PASRR Level II Evaluation needs to be done if the individual has a ‘yes’ in any of Section III-B and/or Section III-C, as a result of, a confirmed or suspected Mental Health Condition.

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Section IV – Intellectual Disability/Developmental Disability (ID/DD)

Slide #16

An individual is considered to have evidence of an Intellectual/Developmental Disability if he/she has a diagnosis of Intellectual/Developmental Disability and/or has received services from an Intellectual/Developmental Disability agency in the past. Any level of Intellectual Disability needs to be listed here and then screened on this form.

We ask at IV-A if the individual has current evidence of an Intellectual Disability/Developmental Disability or a diagnosis of one, and if “yes”, you need to list the diagnosis. If you do not have a diagnosis, is there evidence that there might be an Intellectual Disability? You would list that here.

Did the condition occur prior to age 18? This is the age that the Federal government uses as the developmental age for Intellectual Disability/Developmental Disability. And for the Functional Limitations for Intellectual/Developmental Disability, they also have to have occurred prior to age 18.

At IV-C, we want to know if there is a history of a severe, chronic disability that is attributable to a condition other than mental illness that could result in impairment of functioning in general intellectual and adaptive behavior prior to age 18. If this is “yes” we want to know what levels of functioning have been impaired. You would check the level where functioning was impaired. These limitations need to be prior to age 18.

Note, that if you see an individual that likely has an Intellectual/Developmental Disability, but that person has lived at home, never received services, never married or went to school, you should mark a “Yes” at IV-A. AND, you would write the evidence of this on the lines provided. In the past there were individuals that lived at home and never went to school and family would take care of them, but now the parents are getting older and there is no one to care for these individuals, we often see these individuals. If we can provide services and support to these individuals now, that is the goal of PASRR.

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IV-D, E, and F ask if the individual has been registered with the county or another state for Intellectual/Developmental Disability services and/or received services from an Intellectual/Developmental Disability provider. We want to know who provided the services and where. If you are unsure, you would reach out to their County ID office for verification.

Was the individual referred for placement by an agency that serves persons with Intellectual/Developmental Disability?

IV-F says “Has the individual ever been a resident of a state facility for Intellectual Disability including a state operated Intermediate Care Facility for Intellectual Disability (ICF/ID) or a center”?

Grey box NOTE section for the Intellectual/Developmental Disability talks about what criteria is needed to require a PASRR Level II Evaluation.

For the Intellectual/Developmental Disabilities Program Office, you are to do a PASRR Level II Evaluation, if the individual has evidence of an Intellectual Disability or an Intellectual/Developmental Disability diagnosis and has a ‘Yes’ or “cannot determine” in IV-B and has a ‘Yes’ in IV-C with at least one functional limitation, or the individual has a ‘Yes’ in IV-D, or E or F.

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Section V – Other Related Conditions (ORC)

Slide #19

There are examples of possible diagnoses for an Other Related Condition at the top of this section. Remember that this is not an inclusive list. There may be other diagnoses that could be considered.

For an Other Related Condition for PASRR, the condition must have manifested prior to the age of 22. All Other Related Conditions diagnoses at V-A, that have manifested before the age of 22, should be listed on the diagnosis line and worked through on this form.

No PASRR Level II Evaluation is needed if there is only a diagnosis and no Functional Limitations prior to age 22, such as would be the case with epilepsy or Multiple Sclerosis that one would have developed after the age of 22.

Autism is an Other Related Condition and that would be entered here and not under Intellectual Disability.

I want to note here, that sometimes Attention-deficit/Hyperactivity Disorder (ADHD) is listed as a Mental Health diagnosis, and also can potentially be an Other Related Condition diagnosis for PASRR. This diagnosis must meet the Program Office criteria in the Section of the form entered, including the functional limitations prior to age of 22, if it is considered to be an Other Related Condition diagnosis.

You do not need to write the diagnosis of an Other Related Condition on the line if it did not occur before the age of 22, such as a seizure diagnosis or head injury that occurred at age 30.

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At V-B, we want to know the substantial functional limitations that were present prior to age 22 that were directly the result of the Other Related Condition.

In order, to check the box here, the functional limitation must have been present before the individual was 22 and in order to meet criteria for the Other Related Condition Program Office, you would need to have functional limitations prior to the age of 22.

The grey box NOTE at the end of the Other Related Conditions Section, indicates that a PASRR Level II Evaluation needs to be done when the individual has an Other Related Condition diagnosis prior to the age of 22 and at least one box is checked in V-B for substantial functional limitations.

Remember the functional limitations have to have been present prior to age 22 and were directly the result of the Other Related Condition.

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Section VI: is the Home and Community question. If individuals want to stay in the community, we want them to be able to do so.

There is no right or wrong response here. The PASRR process is a process to make sure an individual is placed in the most appropriate setting. If an individual is interested in going back home and not staying in a nursing facility, they should be able to do that and there are supports and services to help individuals to do that.

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Section VII – Exceptional Admission

Slide #23

Remember, if you think you have an Exceptional admission the individual must also meet at least one of the Program Office criteria on one of the prior pages to have a PASRR Level II Evaluation done and in order to be an Exceptional Admission, these individuals cannot be a danger to themselves or others. The Exceptional Admission process is filled out only if you are requesting an Exceptional Admission for one of these admission types on this page.

If you do not have an individual that meets the exceptional admission criteria, you only need to answer the first question at the top of the page with a “No” response.

If you have a “Yes” response for the first question, you must then put a check next to the exceptional admission type that you are using for the individual to enter the nursing facility without having the PASRR Level II Evaluation done.

If you mark “yes” you are saying that you know that this individual needs to have a PASRR Level II Evaluation done, but, because they meet one of the following criteria on this page, they may be admitted to a nursing facility without the PASRR Level II Evaluation being done because they will be leaving the nursing facility within a certain time period as designated by the type of Exceptional Admission you check below.

The documentation to support the Exceptional Admission needs to be prior to the admission to a nursing facility.

Notice the NOTE: near the top of the page, “It is the responsibility of the NF to verify that all criteria of the exception are met prior to admission.”

NFs are the ones that may get into trouble if the rules are not followed. Nursing Facilities are the ones that are held accountable for ensuring the proper documentation is provided by the referral source and the nursing facility must have this documentation prior to admitting the individual.

Nursing Facilities, if you receive an Exceptional Admission, you must fill out the MA 408 and send it to your Field Operations Representative/Office.

Now, let’s go a bit more into depth with each Exceptional Admission:

Section VII-A is the Exceptional Hospital Discharge. The individual must meet all the following prior to NF Admission and have a known Mental Illness, Intellectual Disability/Developmental Disability, or Other Related Condition.

The Admission to the nursing facility is directly from the Acute Hospital after receiving **ACUTE inpatient medical care**. Note the word, ACUTE. This stay cannot be from an emergency room, observational hospital stay, rehabilitation unit or rehabilitation hospital, Long-term acute care hospital (LTACH), inpatient psych, Behavioral Health Unit, or from a hospice unit. **AND** these individuals require Nursing Facility services for the medical condition for which they are receiving care in the acute care hospital. You must specify the condition on the line provided **AND** the hospital physician needs to document on the medical record that the **individual will require less than 30 calendar days of NF service and the individual’s symptoms or behaviors are stable**. The medical record that the physician documents that the person meets this criteria, must be forwarded to the Nursing Facility prior to admission. **AND** you **must** write the physician’s name on the line provided in this section.

The physician is certifying in their note that the person meets all of the criteria for admission as is stated on this page. And the physician must sign this note. Hospitals need to make sure that this physician’s note in hard copy is sent along when the individual is discharge to the nursing facility. This note can also be faxed to the Nursing Facility before the individual’s admission. The note is a PASRR Federal Rule requirement. Nursing Facilities should keep the note with the PASRR Level I in the resident’s active chart.

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Section VII-B is an exceptional for respite care. An individual that meets the criteria for Mental Health, Intellectual/Developmental Disability, or Other Related Condition on the prior pages of this form may be admitted for respite care for a period of up to 14 days without needing to have the PASRR Level II

Evaluation done. The Nursing Facility will expect to see a note from the family physician and/or a script indicating the individual needs 24-hour nursing facility services and supervision. This type of Exceptional Admission can be admitted from a community setting. Supportive documentation is completed by the referral source and the nursing facility must have this information prior to admitting the individual.

Section VII-C, The Emergency Placement Exceptional Admission is for individuals that meet criteria for Mental Health, Intellectual/Developmental Disability, or Other Related Condition on one of the prior pages of this form. The individual may be admitted for an emergency placement for a period of up to 7 days. This individual does not need to have the PASRR Level II Evaluation done, if, the County Protective Services and their physician say that such a placement is needed. This is for persons that are in immediate harm or jeopardy to stay in the community setting that they are currently in. Once the Protective Services agency releases the person from their care within that 7-day timeframe, the individual will need to have a PASRR Level II Evaluation done if the person continues to stay in the nursing facility. This kind of exceptional admission can be admitted from an emergency room or community setting. You also must have supporting documentation from your referral source as to why, the Emergency Placement is needed. The Nursing Facility is to send a MA 408 requesting the PASRR Level II Evaluation to be done to Field Operations if the individual will be staying longer than 7 days in the long-term care nursing facility. Who will do the PASRR Level II Evaluation will depend on if Medical Assistance is needed. If Medical Assistance is needed, then AgingWell/AAA will do the PASRR Level II Evaluation, if that is not the case then the PASRR Level II Evaluation will be done by Field Operations.

Section VII-D is for an individual with a serious Mental Health, Intellectual/Developmental Disability, or Other Related Condition in a coma or functioning at brain stem level. These individuals may receive nursing facility services without having the PASRR Level II Evaluation done, if certified by the referring or attending physician as being in a coma or functioning at a brainstem level. The condition must require intense 24-hour nursing facility services and supervision and their condition must be so extreme that the individual cannot focus upon, participate in, or benefit from specialized services. I want to mention here that a coma is not the same as someone in a permanent vegetative state. Persons in a permanent vegetative state appear to be awake, but do not show awareness of their surroundings. They may open their eyes, make sounds, or move, but do not respond to the outside world. A person in a coma is completely unconscious and appears to be asleep with closed eyes and no response to stimuli.

This would not be someone that could feed themselves obviously. Believe it or not, we have seen such as that. This is the only exception that is NOT time limited. The Coma Exceptional Admission would end when the individual comes out of the coma. For this Exceptional Admission, you also need documentation from your referral source that the individual you are admitting, has a diagnosis of brain stem level of functioning or is in a coma.

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FOR A CHANGE IN EXCEPTIONAL STATUS, note at the bottom of the page.

This is used when one of the Exceptional Admissions noted above changes status. This is a section for nursing facility staff to use when the individual needs to stay longer than the days that are allowed in the Exceptional Admission stay.

If the individual's condition changes where they will be in residence for more than the allotted days, the Department must be notified by the nursing facility on the MA 408, the PASRR Positive Reporting form.

This form needs to be sent to the Field Operations Team within **48 hours** indicating to them that a PASRR Level II Evaluation needs to be completed.

The timeframe stated here, is when the Federal Regulations says the Exceptional Admissions needs to have the PASRR Level II Evaluation completed by.

If you are a Nursing Facility and you know the resident will be staying longer, than the Exceptional time-limit as noted on the PASRR Level I form, you **MUST** send the MA 408 as soon as you know this, to allow the PASRR Level II Evaluation be completed timely.

When you have a Change in Exceptional status, do not complete a new PASRR Level I form; just update the current form with why the individual needs to stay longer next to the Exceptional Admission Section that is checked "Yes" on this page. Initial and date the reason for the longer stay.

And then at the bottom of the page, you need to enter your full signature and date to indicate that there is a change in Exceptional Status for this individual. The date is the date that you sent the MA 408 to notify Field Operations of this change. This is only signed and dated if there is a change in criteria/status for the Exceptional Admission, otherwise this would not be filled out.

You would also need to make a change to the "Screening Outcome" on page 7. Where you would check the box indicating the individual has a positive screen and needs to have a PASRR Level II Evaluation completed now. This is the second check box on page 7. Also, you would need to add a date that you checked this box, indicating that they were no longer an Exceptional Admission.

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Section VIII – PASRR Level I Screening Outcome

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At Section VIII, we want to know what the screening outcome is.

Did the individual have a negative screen for all Program Offices, and no further evaluation is necessary, if so, check the first box.

Did the individual have a positive screen for one of the Program Offices and needs a PASRR Level II Evaluation done? You will put a check in the second box. And you must notify the individual that they must have a further evaluation, a PASRR Level II done. The last page is what you will give to the individual and or family to notify them of the further evaluation.

We need you to write in the name of the individual or legal representative who has received this notification page, page 8 of the PASRR form. We also ask for that person's signature there as well. If the person is unable to sign the form, state that here. Then the person who is filling out the PASRR Level I form, also needs to print their name and sign the PASRR Level I form.

The third box is checked if an individual has a positive screen and needs to have a PASRR Level II Evaluation done, but, meets the criteria for Exceptional Admission in Section VII.

Remember if there is a change in Exceptional Status on page 6 of this form, you will add a date and your initials near the second checkbox, indicating the Exceptional status has changed and that the person now needs a PASRR Level II Evaluation. You need to obtain the signature of the individual or responsible party

and give the individual the last page to notify them of the further review. After doing that, you would indicate with your name, that you had notified the individual of needing to have a PASRR Level II Evaluation completed.

Remember, nursing facilities must report Exceptional Admissions and changes to an Exceptional Admission on the PASRR Positive Resident Reporting Form or MA 408, the MA 408 is then sent to the Field Operations office.

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Section IX is where the person completing the form signs.

Note, the attestation statement prior to signing. You are indicating that with your name below that you are certifying the information provided is accurate to the best of your knowledge and understand that knowingly submitting inaccurate, incomplete, or misleading information constitutes Medicaid fraud.

What do you do if you receive a PASRR Level I from another entity such as a hospital or doctor's office that it is not signed? Remember, it is the nursing facilities responsibility to make sure that all parts of the PASRR Level I are filled out. If you have received one that is not filled out, note that you received it as unsigned, but that you have reviewed it and then you would sign and date it.

If you complete the PASRR Level I, you need to print your name, sign your name, enter the date and facility name and telephone number where you can be reached for questions. If you receive a PASRR Level I form and it is unsigned in this section, please note that you received it and that it was unsigned. Then we expect you to sign here, indicating that you have reviewed the PASRR Level I Form and it is accurate as far as you are able to tell. Remember, the Nursing Facility is to make sure that the form has been filled out correctly when they receive these forms from a referral source.

The next block is kept empty. This is where the Field Operations signs when they review the nursing facility admissions.

Notice that there is some white space at the bottom of this page for notes if needed to support any changes that need to be made.

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This is the final page of the PASRR Level I form. This is the page that will be given to the individual when the individual needs to have PASRR Level II Evaluation completed.

The first paragraph says that all persons considering admission to a nursing facility must have a Preadmission Screening Resident Review, meaning a PASRR Level I done to determine if the individual has a Mental Illness, Intellectual Disability/Developmental Disability, or other related condition. If the individual does have one of these conditions, then a further evaluation must be done with a PASRR Level II.

The second paragraph identifies the individual as a person that needs to have this evaluation done. Note: This back page is only given to the individual if they need to have the PASRR Level II Evaluation completed. Otherwise, this page remains attached and is not given to the person you are assessing.

If you are signing the "For the Change in Exceptional Status" section at the bottom of Page 6, you are the person that would be responsible to notify the resident that they need to have a PASRR Level II

Evaluation completed. You would print this last page off and give it to the resident and/responsible party. And don't forget to document your change on page 7, initial and date it.

Slide #30

PASRR Scenarios and what to do in these situations?

1. Nothing needs to be done for a medical hospitalization, this would be a readmit and the original PASRR would continue to be used. And the PASRR would not need to be updated if it was a medical reason for the hospital stay only. The original PASRR has the date prior to the readmission date. The nursing facility needs to make sure the PASRR is still accurate and reflects the resident. The nursing facility needs to make sure the PASRR accurately reflects the resident upon return from the hospital.
2. A resident goes from your nursing facility to the hospital for a **medical stay** and then goes to another nursing facility - can this PASRR Level I be used in the next nursing facility? Yes, it can. If the new nursing facility does not have the PASRR from the previous nursing facility, reach out to them to obtain it. Once you receive it, you would be expected to make sure it was complete, initial and date it that you have reviewed it for your nursing facility. If you would receive the PASRR from the hospital because they got it from the prior nursing facility, you can also use that. Just make sure the PASRR Level I that you receive reflects that individual at the time you are admitting them to your nursing facility, and it is complete, initial and date it that you have reviewed it.
3. If a resident is admitted to the nursing facility with a short-term (180 days or less) letter, the resident goes out to the hospital for a psych stay, and the letter expires during the hospital stay, the resident can return to the Nursing Facility once psychiatrically stable. Upon return from the hospital, the Nursing Facility needs to make a note on the PASRR Level I form where the psych stay was, initial, and date to indicate the change/update on this form. The hospital would not need to reach out to the Aging Well/AAA as the resident had already been a resident in the nursing facility and is returning to the same nursing facility when they are stable. NOTE: If an individual was admitted to the nursing facility with a PO letter valid for 180 days, goes out to the hospital for a psych stay, and the letter expires during the hospital stay, the individual can return to the nursing facility once psychiatrically stable. Upon return from the hospital, the nursing facility can send in information to the Mental Health Program Office for an extension, if needed. If the nursing facility denies taking the resident back, in that case, the hospital may need to reach out to Aging Well/AAA to do a PASRR Level II Evaluation before discharging to another nursing facility. **AND Nursing Facilities, it is always good to send a copy of the Program Office letter to the hospital with the resident. Most of the time, the hospital is not aware of the existence of a letter, and they automatically reach out to Aging Well/AAA for the PASRR Level II Evaluation to be completed.**
4. If an individual is admitted to a nursing facility and does not have a Program Office Letter or had a Program Office negative letter, and then goes out to the hospital for a psych stay, same as mentioned above, the resident can return to the same nursing facility once psychiatrically stable. Upon return from the hospital, the nursing facility needs to make a note where the psych stay was, initial, and date to indicate that you made the note on the PASRR Level I form. The hospital would not need to reach out to AgingWell/AAA as the individual had already been a resident in the nursing facility and is going back to the nursing facility once they are stable. The nursing facility would send a MA 408 form to the Field Operation after receiving the resident back, indicating the change of condition for Mental Health. The process for doing the PASRR Level II Evaluation by Field Operations, in this situation, would be done after the individual has returned to the nursing facility.

5. If a resident is admitted to a nursing facility without a Program Office letter, goes out for a psych hospital stay, and the nursing facility cannot take the resident back, the hospital may need to reach out to AgingWell/AAA to do a PASRR Level II Evaluation if the individual is going to a different nursing facility.
6. If an individual is admitted to a nursing facility with a Program Office Negative Letter, goes out to the hospital for a psych stay, and the nursing facility cannot take the individual back, the hospital may call the Mental Health Program Office to find out if the letter is still valid to use prior to the individual's discharge to another nursing facility.

When in doubt, the hospital and or nursing facility may call the program office to find out if the existing letter is still valid to use and document this conversation.

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What do we mean by the words, meeting PO Criteria on the PASRR Level I? These are those greyed out boxes at the end of each of the Program Office sections on the PASRR Level I form.

BEFORE ADMISSION:

PASRR Level II Evaluation must be completed by Aging Well/AAA.

After the PASRR Level II Evaluation is completed, a Program Office Letter of Determination must be received before you can admit an individual to a nursing facility.

The Aging Well/AAA that you are to call is determined based on what county you are currently in. Not where the individual lives.

For example, if you are a hospital in York County, you would call York County. If you were working with a consumer that lives in Erie County, and that person is still in their home, you would call Erie County. If you are a hospital in Philadelphia and the individual lives in Montgomery County, you would call the Philadelphia county office, not Montgomery County, because the individual is currently in the hospital in Philadelphia. It is based on where the individual is right now.

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AFTER ADMISSION

And there has been a change for that Resident that affects PASRR, what is that process?

The nursing facility needs to document the change that is now requiring the need for a PASRR Level II Evaluation and sign and date their note. The process of giving the resident the notification and having them sign the PASRR Level I on page 7 indicates that a PASRR Level II Evaluation needs to be completed.

The Nursing Facility needs to indicate to Field Operations that there has been a change by sending the MA 408 to their Field Operations office. In the comments section on the MA 408, indicate any new information that has been recently obtained such as finding out that an individual had an Intensive Case Manager.

PASRR Level II Evaluation will be completed by either the Aging Well/AAA or Nursing Facility Field Operations.

NF Field Operations only does the PASRR Level II Evaluations if the individual is already in the nursing facility and only if the individual does not need assessed for Medical Assistance.

After the PASRR Level II Evaluation is completed, the Program Office makes their determination, a Program Office Letter of Determination is issued, and the letter should be received by the nursing facility.

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What is a Program Office letter of Determination?

This can also be referred to as the PASRR Determination Notice.

The Program Office will indicate three things on a Program Office Letter of determination:

- Whether the individual meets criteria for their Program Office.
- Is the individual eligible for a stay in the Nursing Facility, is the individual Nursing Facility Clinically Eligible. Also, the letter will indicate any time limits on the individual stay in the nursing facility, such as 180-day time limited stay.
- And does the individual need or are recommended to have Specialized Services to help them with their condition.

Specialized Services are above and beyond the services that a NF *typically* provides or is required to provide. Specialized services are to be included in an individualized plan of care that is developed and supervised by an interdisciplinary team consisting of a physician, qualified mental health professionals and/or other health professionals as appropriate. These services are designed to diagnose and reduce the resident's behavioral symptoms, improve, or maintain his or her level of independent functioning and achieve a functioning level that permits reduction in the intensity of services. Specialized Services are of a higher intensity and frequency than other services provided by the nursing facility.

Examples of these are: Targeted Mental health Case Management, Psycho-Social Rehabilitation, Peer Support Services, Psychiatric Outpatient Clinic, Service Coordination, Assistive Technology, or help with Transportation to access services or activities.

Psychiatrist visits for medication management are considered specialized rehabilitative services that a NF must provide, psychiatric visits alone would not be considered a Mental Health Specialized Service.

If an individual has Medical Assistance (MA) in the nursing facility and has one of the Community Health Choices Managed Care Organizations (MCO) that are offered by our Department, the nursing facility should reach out to the MCO to help with these Specialized Services. If the individual is not MA, the nursing facility would reach out to the county MH/ID office for assistance with Specialized Services.

NOTE: Program Office letters may not be used from a prior stay in a nursing facility where the individual had been discharged to the community unless approval is obtained from the Program Office. If this individual's prior letter was a time-limited stay, you need to find out from the program office if that letter can still be used and when does the time-limited stay start (from the date of admission or does it continue from the date on the letter)? The nursing facility needs to document the time of the time-limited stay on the actual letter or if the Program Office has said that the letter can be used again. Document who you spoke to at the Program Office that gave you approval to use the letter. Also, initial and date when you spoke to the Program Office. This is all documentation that Field Operations will be looking for.

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On this page we have important websites.

- The Pennsylvania PASRR Process Website
<https://www.pa.gov/en/agencies/dhs/resources/for-providers/ltc-providers/pasrr-process.html>
- The Out of State Process for PASRR
<https://www.pa.gov/en/agencies/dhs/resources/for-providers/ltc-providers/out-of-state-seeking-ltc.html>
- The Long-Term Care For Provider website. This is where you would find Case Mix information, Rate information, Resident Data Reporting Manual, and many more items.
<https://www.pa.gov/en/agencies/dhs/resources/for-providers/ltc-providers/long-term-nursing-facilities.html>
- And the website for the MA Forms. This is the website that you would go to download and print the PASRR Level I and PASRR Level II forms. The Admission Notice (MA 401) packet and the Nursing Facility PASRR Positive Reporting Information Form (MA 408) is also available at this site.
<https://www.pa.gov/en/agencies/dhs/resources/for-providers/ma-for-providers/medical-assistance-provider-forms.html>

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This is what is on the PASRR Website on the right-hand side of the page.

The PASRR Forms: PASRR Level I, PASRR Level II, and the MA 408.

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On the right-hand side of the page, further down, we have the PASRR Bulletins for the PASRR Level I, PASRR Level II, and the MA 408.

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Here are the Additional PASRR Resources on the right-hand side of the page:

- The PASRR Clarification and Frequently Asked Questions Document
- Handouts for Trainings
- PASRR Training Webinars will be posted here.
- PASRR Contact Information for Field Operations and the Program Offices.
- The State PASRR Coordinator's phone number.

As these resources change routinely, please use the PASRR Website main web page (on slide 34, first bullet) for the updated links for the resources on this slide.

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I want to thank you for listening to today's presentation.

Remember PASRR is about honoring a person's choice.

A nursing facility may not be their choice and we should be mindful of that.

If you have questions regarding what you have heard, please do not hesitate to reach out to me regarding those questions.