PASRR MODERNIZATION

Presented By: Vanessa Convard

PASRR Manager, Division of Aging
The purpose of this presentation is to give a high-level overview of the PASRR system.

For more detailed information, please refer to the resources offered at the end of the presentation.
What We Will Review

- Overview of the PASRR Process
- Assessments
- Possible Outcomes
- Provider Roles & Expectations
- Common Issues & Resolutions
- Addressing Peer Questions
- Contact Information
- Resources
Overview of Process
PASRR was created in 1987 through language in the Omnibus Budget Reconciliation Act (OBRA). It has three goals:

1. to identify individuals with mental illness (MI) and/or intellectual disability (ID)
2. to ensure they are placed appropriately, whether in the community or in a NF; and
3. to ensure that they receive the services they require for their MI or ID (wherever they are placed).

Purpose of Modernization

• The goal is to create a more person-centered, conflict-free system
• This newer system increases the accuracy of assessments for PASRR
• It also decreases the risk of a person becoming institutionalized
The most appropriate services
At the most appropriate place
At the most appropriate time.
Assessments

• Level 1
• Level 2
• Level of Care
The purpose of a Level I screen, given to all NF applicants, is to determine whether an individual might have MI and/or ID. This screen should yield a positive result if the individual might have MI and/or ID (i.e., it should produce no false negatives).
Level 2

• The Level II evaluation is meant to "look behind" the diagnosis of record.
• If an individual “tests positive” at Level I, the subsequent Level II screen will:
  – Confirm or disconfirm the results of the Level I screen, and
  – For individuals who have MI or ID, determine where they should be placed - whether in a NF or in the community - and identify the set of services they require to maintain and improve their functioning.
  – to enumerate the MI/ID services the individual needs, including services the NF can provide under its per diem and services that must be arranged separately (so-called "specialized services").

http://www.pasrrassist.org/resources/federal-regulations/pasrr-plain-english
Level of Care (LOC)

• The LOC screen is an evaluation to determine the most appropriate setting to meet an individual’s medical & behavioral needs. The LOC screen identifies whether or not a person requires the level of care provided in a skilled or intermediate nursing facility, and if appropriate for NF admission, how much time the individual is expected to need.

• Only required for residents who have (or who will have) Medicaid as a payer.
Exemptions to Level 2

Exempted Hospital Discharge
- This exemption is limited to stays of up to 30 days. It is allowed only when all the following circumstances exist:
  - 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.

Dementia Exemption
- Applies to 1) people with a sole diagnosis of dementia, or 2) people with dementia & MI diagnosis
  - Level 1 must include documentation that supports dementia as primary diagnosis.
  - Cannot occur unless sufficient evidence confirms the progression of dementia as primary.
Level 2 Categorical Decisions

Provisional Emergency Situations
- Sudden, unexpected & urgent need for placement
- Individual meets APS or DCS criteria
- A lower level of care is not available
- Up to 7 calendar days

Respite Care
- Respite care concerns individuals admitted to an NF from home for short-term respite care. To qualify for respite care, on admission, there 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 15 days or more in-between stays
Possible Outcomes

• Level 1
• Level 2
• Level of Care
Possible Outcomes of Level 1

- No Level 2 Required
- Level 2 Negative, No Status Change
- Level 2 Positive, No Status Change
- Exempted Hospital Discharge
- Emergency Categorical
- Respite Categorical
- Refer for Level 2 Onsite
- Withdrawn
- Cancelled
Possible Outcomes of LOC & Level 2

• Approved for Short-Term Skilled Nursing Facility (30, 60, 90, or 120 calendar days)
• Approved for Short-Term Intermediate Nursing Facility (30, 60, 90, or 120 calendar days)
• Approved for Long-Term Skilled Nursing Facility (120+days)
• Approved for Long-Term Intermediate Nursing Facility (120+days)
• Denied for Nursing Facility (referred to AAA for onsite assessment)
Important Note

Please be aware that at times, when both the LOC & L2 are completed, their dates may be somewhat different. The shorter stay of the two is always the default, unless otherwise instructed by the PASRR Manager at Division of Aging (Vanessa Convard) & Director of Client Services at the Bureau of Developmental Disability Services (Holly Wimsatt).
As of September 5, 2017

Anyone referred for an IDD (intellectual or developmental disability) Level 2 evaluation will have their L2 outcome accessible within AssessmentPro

~This does not affect the L2 process for MI (mental illness) assessments, only IDD~
Provider Roles in New System

- Hospitals
- Nursing Facilities
- Area Agencies on Aging
INDIANA PASRR LEVEL I & LOC PROCESS OVERVIEW FOR PROVIDERS
(helpful infographic)
### Scenario: Individual seeking nursing facility admission from hospital (80%)

<table>
<thead>
<tr>
<th>Submitting Entity:</th>
<th>Complete in AssessmentPro:</th>
<th>Upload* to AssessmentPro:</th>
<th>Process Changes:</th>
</tr>
</thead>
</table>
| Hospital           | PASRR Level I Complete for all | Required:  
- H&P  
- MAR | No 450B  
No submission to AAA  
No paper to pass on to nursing facility  
Data entry by discharge planner  
Quicker turnaround times |
| Hospital           | LOC Short Form Complete for Medicaid recipients (and anyone who triggers a PASRR Level II) | If Applicable:  
- Psychiatric Evaluation  
- Cognitive Testing | |
| Nursing Facility   | PASRR Level I Complete for change in status, emergency admits, & out of states | Required:  
- H&P  
- MAR  
- MDS (Resident Review Only) | No 450B  
No submission to AAA  
Less paper to maintain  
No e-450B system needed  
Data entry in system by nursing facility staff  
Quicker turnaround times  
No LOC decision required for non-Medicaid stays unless a Level II is triggered |
| Nursing Facility   | LOC Long Form Complete for Medicaid recipients | Helpful if Available:  
- Psychiatric Evaluation  
- Cognitive Testing  
- Nursing/Progress Notes | |
| Nursing Facility   | PathTracker Complete for notice of admission and transfer to another nursing facility | | |

### Scenario: Individual seeking nursing facility admission from home

<table>
<thead>
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<th>Submitting Entity:</th>
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<th>Upload* to AssessmentPro:</th>
<th>Process Changes:</th>
</tr>
</thead>
</table>
| Area Agency on Aging (AAA) | PASRR Level I Complete for all | Required:  
- H&P  
- MAR | New LOC tool  
Standardized definition of options counseling that should be part of an at-home PASRR screening  
No paper to pass on to nursing facility |
| Area Agency on Aging (AAA) | LOC Long Form Complete for all | If Applicable:  
- Psychiatric Evaluation  
- Cognitive Testing | |
Common Issues & Resolutions

• Incomplete Information
• Transfer/Discharge
• Retrospective Reviews
Incomplete Information

We frequently find that key information hasn’t been submitted.

• This includes:
  – Assessments (L1, LOC)
  – Demographic Information
  – Pathtracker Admit/Transfer/Discharge Dates

• This delays us from entering information into Core and can cause issues for other facilities, including delay payment.

• Please be sure all appropriate assessments, accurate demographics, and Pathtracker dates are entered in a timely manner
Transfer/Discharge

Sometimes facilities will click “discharge” instead of transfer, which triggers us to end their LOC prematurely.

• Click “Transfer” When:
  – Person is going into a hospital
  – Person is going into another nursing facility

• Click “Discharge” When:
  – Person is being discharged to a community setting, such as home
Retrospective Reviews

The guideline for submitting a LOC is 6-months after the admission date

- Ascend is required to auto-deny anything after 6-months
- To resolve:
  - Email PASRR@fssa.in.gov
    - Subj.: Retrospective Review Exception Request
  - Explain why the LOC is being submitted past 6-months
  - Wait for further instruction on how to get an exception approved OR explanation on why it will be denied
- Please be aware: We cannot guarantee approval. Only those with a reasonable explanation will be approved.
Answers to Your Questions

These questions have been asked by your peers and may be similar to issues you have experienced.
Q & A

1. If someone chooses not to participate, is there a one year penalty just like with previous process?
   
   A: This is one of the differences between the previous process and the new one: You cannot opt out of PASRR. It is a federal requirement. You cannot admit to a nursing facility without going through PASRR and cannot have Medicaid pay without an approved Level of Care.

2. When LOC's are withdrawn by Ascend what do we do? Ex: Social Services filled out, but Ascend denied with reason "private pay".

   A: There are several reasons Ascend may withdraw a LOC. One is if the person is not using, and there isn’t notation that in the future they may be using, Medicaid. If a person isn’t using Medicaid, the LOC is unnecessary. If they are using Medicaid, but the LOC was still withdrawn, then we encourage you to reach out to Ascend, the PASRR Help Desk, or the PASRR Manager, and ask them to resolve the issue.
3. Ascend says in compliance, but we have no LOC. How do we resolve?

**A:** Compliance speaks to PASRR, not LOC. A LOC only has to be completed when Medicaid is the payer. If Medicaid isn’t the payer, a person could be in compliance without having a LOC completed. If Medicaid is the payer, a LOC needs to be submitted as soon as possible.

4. Having issues getting Level 1 and LOC because previous facility has not discharged resident. Resolution?

**A:** This has been an ongoing issue and is part of why we encourage facilities to enter information into Pathtracker immediately. You will need to contact the previous facility and demand they discharge the client with an accurate discharge date. If you would like support in ensuring the previous facility fulfills their responsibility, you may contact us.
5. When they have been in previously, but no Ascend processed, how can new facility correct?

A: If you are speaking to PASRR they need proof of original 4B. If they have not had a completed PASRR in Ascend Path tracker will throw a soft warning of noncompliance. They are instructed to disregard the warning if they have a historical copy. This will become less of an issue over time because of the AssessmentPro system.

6. As in the old process, there was a 5 day grace period. Is that still in effect?

A: Same answer as question 1; There is no longer a grace period as a person can no longer opt out. PASRR must be completed prior to admission.
Q & A

7. When someone admits and we do not have a Level 1 from hospital, are we in compliance? Who is responsible to correct?

A: First, a person should not be submitted to a nursing facility without a Level 1 being completed. If that person is coming from a hospital, then it is the hospital’s responsibility to complete the Level 1. The NF has the right to refuse a resident until that is completed. If you have a current resident who does not have a Level 1, you may complete the Level 1 to maintain compliance, but please make us aware that it was not completed by the hospital. If the person is coming from a community setting, this is the responsibility of the AAA. The NF is only responsible if the person has a status change that triggers the need to complete a new Level 1.
Contact Information

• Vanessa Convard
  – 317-232-4355
  – Vanessa.Convard@fssa.in.gov

• PASRR Help Desk
  – PASRR@fssa.in.gov
Resources

- Indiana PASRR User Tools from Ascend
  - [https://www.ascendami.com/ami/Providers/YourState/IndianaPASRRUserTools.aspx](https://www.ascendami.com/ami/Providers/YourState/IndianaPASRRUserTools.aspx)
  - Manual, Training, FAQ, and Infographics found here

- Introduction to PASRR

- PASRR in Plain English

- Indiana PASRR Provider Manual
  - Version 9/19/2016

- Indiana Medicaid Website
Thank you