

PASRR

Preadmission Screening and Resident Review

Assessments

MDS Assessment and PE

August 2017



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MDS and PASRR Key Components



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MDS and PASRR

- MDS impacts more than reimbursement and the quality measures.
- It can have a significant impact on the PASRR process as well.

This presentation will help you understand the significance of the MDS on the PASRR process.

Relationship Between MDS and PASRR



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Things we need to consider:

- accuracy of the MDS;
- MDS components related to the PASRR process; and
- significant change in status assessments and PASRR.



MDS Accuracy

MDS accuracy is important because:

- it is essential to all operations in a facility;
- inaccurate assessments deny a facility credit for the care of its residents;
- inaccurate assessments may reflect negatively on a facility's quality measures; and
- residents may not be eligible for necessary care and services if the MDS is not accurately coded.

What if the MDS is not accurate?



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When there is a question regarding MDS accuracy, the resident can be deprived of things such as:

- medical necessity;
- specialized services; and
- appropriate care planning.

What if the MDS is not accurate? - Cont'd



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Example 1:

If we mis-code activities of daily living (ADLs), there may not be enough evidence of the residents need for more assistance.

This could result in denial of medical necessity and habilitative specialized services.

What if the MDS is not accurate? - Cont'd



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Example 2:

Documenting the diagnosis incorrectly in Section I could prevent the resident from receiving necessary PASRR services.

- Always review the clinical record completely when adding the diagnosis.
- Look at history and physical information, past physician notes, hospital history, and any input from the family/responsible party.

MDS Components Related to PASRR



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MDS sections supporting medical necessity for NF admission and the potential need for PASRR specialized services include:

- Section A1500
- Section I
- A1510
- Section O
- A1550
- Section Q
- G0110



Section A1500

Section A1500: Is this resident currently considered by the State level II PASRR process to have serious mental illness and/or intellectual disability or a related condition?

- If the answer to this question is yes, complete Section A1510, designating which type of mental condition.



Section A1550

Section A1550: Conditions related to ID/DD status such as: Down Syndrome, Autism, Epilepsy, other organic conditions.

- ❑ Often conditions such as seizure disorder are not determined to originate from Epilepsy.
- ❑ This is when a complete medical review of the clinical record is necessary.



Section G0110

Section G0110: Activities of Daily Living (ADLs).

- ❑ Accurate coding of ADLs is imperative to determining the appropriate level of care for each resident.
- ❑ Undercoding a resident's abilities could demonstrate a lower level of care, preventing the resident from receiving appropriate PASRR services.



Section I

Section I: Active Diagnosis.

- ❑ Any and all diagnoses that could support the resident's need for PASSR services should be counted here.
- ❑ Do not forget to further investigate obscure diagnoses such as *"seizure disorder"*.



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Section O

Section O: Therapies and Special Treatments.

- ❑ If a resident is receiving rehabilitative therapy under Medicare Part B or Managed Care services, you will count those minutes in Section O.



Section O - Cont'd

- ❑ If residents are receiving specialized services under the PASRR program, those minutes are only counted in Section O if they meet the definition of a skilled service.
- ❑ Specialized services require a prior-authorization and a separate claim to bill.



Section Q

Section Q: Relates to discharge planning.

Section Q asks if the resident and/or responsible party wishes to talk to someone about the possibility of community discharge.

- ❑ Remember – if he or she wishes to talk to someone, this does not mean the discharge is practical or appropriate.
- ❑ This is the opportunity to talk to someone about the *possibility* of a discharge to a less restrictive environment.

Significant Change in Status



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- If a resident has a change in status meeting the "*Significant Change in Status*" criteria (as listed in the Resident Assessment Instrument [RAI] Manual), a new PASRR Level I screening might be necessary.
(If not already receiving specialized services.)

Significant Change in Status - Cont'd



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- If the resident's status has changed significantly enough from the initially reviewed status, they must have a new Level I to determine if they are now eligible for PASRR specialized services.

Significant Change in Status - Cont'd



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Example – “Maya”:

- Maya, a resident with a developmental disability, is admitted to the NF.
- She does not require specialized services; she is fairly independent.
- Maya falls - causing a fracture, increased dependence in care, and behavioral issues related to the pain and confusion.

Significant Change in Status - Cont'd

Example – “Maya”:

The fall caused a change in status.

- Maya now requires:
 - a new Level I screening to determine the need for a Level II screening; and
 - a determination on her eligibility for PASRR specialized services.



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Thank you

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Session Objective

After successful participation in the training you will be able to:

- ❑ identify key steps in the Pre-Admission Screening and Resident Review (PASRR) Evaluation Process for people with intellectual disabilities (ID), developmental disabilities (DD), and mental illness (MI); and
- ❑ summarize key factors contributing to problematic PASRR Evaluations.



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History and Compliance

- ❑ PASRR is a federally mandated program requiring all states to pre-screen all individuals, regardless of payor source or age, seeking admission to a Medicaid-certified nursing facility.
- ❑ PASRR was created in 1987 as part of nursing home reform, through language in the Omnibus Budget Reconciliation Act (OBRA).



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History and Compliance

PASRR has three goals:

- ❑ To identify individuals with MI, ID, DD/RC (this includes adults and children)
- ❑ To ensure appropriate placement, whether in the community or in a Nursing Facility (NF)
- ❑ To ensure individuals receive the required services for their MI, ID, or DD/RC



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Working Together

Collaborative and respectful relationships must be developed between all parties involved in PASRR in order to ensure the individual receives services in the most appropriate settings.



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What is the PE?

The PE=PASRR Evaluation

- ❑ An evaluation to confirm or deny the suspicion of ID, DD, or MI recorded on the PL1
- ❑ An evaluation to determine specialized services that may be beneficial to the individual if they are confirmed positive for ID, DD, or MI
- ❑ A tool used to identify the best living arrangement for the individual while honoring their preferences



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Who Completes the PE?

PASRR evaluations are completed by local authorities (LAs), which include:

- ❑ local intellectual and developmental disability authorities (LIDDAs);
- ❑ local mental health authorities (LMHAs); and
- ❑ local behavioral health authorities (LBHAs).

The term LA will be used in this training when the information pertains to all three groups.



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Who Completes the PE?

- ❑ In order to complete the IDD section of the PE, staff must be credentialed as a qualified intellectual disability professional (QIDP) or a qualified developmental disability professional (QDDP).
- ❑ In order to complete the MI section of the PE, staff must be credentialed as a qualified mental health professional (QMHP).



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The Alert

- ❑ Once the LA receives the alert from TMHP to conduct the PE, or the LA enters a positive preadmission PL1, the PE must be initiated and entered into the TMHP portal within seven days of the alert date.
- ❑ A face-to-face visit with the individual must be made within 72 hours of receiving an alert.



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The Alert

- ❑ In some cases, when the LA receives multiple alerts due to a CHOW, the LA may have requested and received an extension to the seven day timeframe.
- ❑ The LA should contact the NF to ensure the individual still resides in the facility prior to traveling to the NF to complete the PE.



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Completing the PE

- ❑ The PASRR evaluator will check any records available to determine if the individual is eligible for PASRR. This will include records located at the NF.
- ❑ The NF must allow the LA access to NF records.



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Completing the PE Cont'd

- ❑ The LA must complete a face-to-face interview with the individual.
- ❑ The NF must allow the LA access to the individual during the evaluation process.
- ❑ The LA may also need to talk to NF staff in order to complete the PE.



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Completing the PE Cont'd

Before you complete Sections B and C, you should identify the diagnoses.

- ❑ Review the medical record, if available.
- ❑ Medical record sources can include but are not limited to:
 - verbal interviews with the individual or LAR, observation, and progress notes;
 - annual physical exam, the most recent history and physical, hospital discharge summaries, or diagnosis list.



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Completing the PE Cont'd

The main focus of the PE is for the LA to review the areas identified on Section C of the PL1.

DLN _____	Individual _____
Section C	
PASRR Screen (Screener)	
C0100. Mental Illness	Is there evidence or an indicator this is an individual that has a Mental Illness? <input type="checkbox"/> 0. No 1. Yes
C0200. Intellectual Disability	Is there evidence or an indicator this is an individual that has an Intellectual Disability? <input type="checkbox"/> 0. No 1. Yes
C0300. Developmental Disability	Is there evidence or indicators that this is an individual that has a Developmental Disability (Related Condition) other than an Intellectual Disability (e.g., Autism, Cerebral Palsy, Spina Bifida)? <input type="checkbox"/> 0. No 1. Yes



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Available Records

- ❑ LAs should check the CARE system before they start the evaluation process to look for evidence of prior diagnoses and age of onset.
- ❑ Useful CARE screens include:
 - Screen 740;
 - C83;
 - 1183; and
 - 397.



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More Records

- ❑ Look for the NF's latest MDS assessment to check for diagnosis of ID, DD, or MI.
- ❑ Look for any school records.
- ❑ Check admission records.
- ❑ Talk to the family about any history of ID, DD, or MI.



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Section B

DLN _____

Individual _____

Section B

TO BE COMPLETED FOR INDIVIDUALS SUSPECTED OF HAVING INTELLECTUAL DISABILITY OR DEVELOPMENT DISABILITIES

B0050. I am completing the IDD section

Determination for PASRR Eligibility (IDD)

B0100. To your knowledge, does the individual have an Intellectual Disability which manifested before the age of 18? (e.g. Mental Retardation) 0. No
1. Yes

B0200. To your knowledge, does the individual have a Developmental Disability other than an Intellectual Disability that manifested before the age of 22? (e.g. autism, cerebral palsy, spina bifida) 0. No
1. Yes

B0300. Has the individual experienced intervention by law enforcement, protective services agencies or other housing officials in the last two years? (i.e. evicted, arrested, charged or convicted of a crime) 0. No
1. Yes
2. Unknown

If Type of Assessment is IDD and MI and the answer to B0100 and B0200 is No, skip to Section C.

Section B

- ❑ If conditions in Sections C0200 and/or C0300 of the PL1 have been identified, the LIDDA will look for evidence of the age of onset and any diagnosis in the records to help confirm the diagnosis of ID or DD and complete section B of the PE.
- ❑ As mentioned before, interview family, review NF and school records, as well as information in CARE.
- ❑ The age of onset of ID is before the age of 18.
- ❑ The age of onset for DD is before the age of 22.



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Section B

The LIDDA will review the list of IDD conditions to make sure the criteria is met for confirming a developmental disability. The link below provides a list of diagnoses and criteria to be considered:

<https://hhs.texas.gov/sites/default/files/documents/laws-regulations/handbooks/dbmd/res/icd10-codes-1.pdf>



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Requesting a DID

- ❑ The LIDDA may be unable to confirm a diagnosis of IDD but has some indication the individual may be PASRR eligible.
- ❑ In this case, mark the PE as negative and request a Determination of Intellectual Disability (DID) evaluation.
- ❑ If the DID confirms the diagnosis of IDD, the LIDDA will complete a new PE.
- ❑ For more information refer to the LA contract, Attachment G.



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Determining Services

PASRR specialized services can be identified during:

- ❑ your meeting with the individual;
- ❑ a review of MDS records and any past records available during previous placements; or
- ❑ interviews with family and NF staff.

The PE is critical because it is the first identification of services an individual needs.



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Specialized Services - IDD



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Specialized Services Determination/Recommendations	
B0400. Does this individual need assistance in any of the following areas? Check all that apply:	
B0400A. Self-monitoring of nutritional support	<input type="checkbox"/>
B0400B. Self-monitoring and coordinating medical treatments	<input type="checkbox"/>
B0400C. Self-help with ADLs such as toileting, grooming, dressing and eating	<input type="checkbox"/>
B0400D. Sensorimotor development with ambulation, positioning, transferring, or hand eye coordination to the extent that a prosthetic, orthotic, corrective or mechanical support devices could improve independent functioning	<input type="checkbox"/>
B0400E. Social development to include social/recreational activities or relationships with others	<input type="checkbox"/>
B0400F. Academic/educational development, including functional learning skills	<input type="checkbox"/>
B0400G. Expressing interests, emotions, making judgments, or making independent decisions	<input type="checkbox"/>
B0400H. Independent living skills such as cleaning, shopping in the community, money management, laundry, accessibility within the community	<input type="checkbox"/>
B0400I. Vocational development, including current vocational skills	<input type="checkbox"/>
B0400J. Additional adaptive medical equipment or adaptive aids to improve independent functioning	<input type="checkbox"/>
B0400K. Speech and language (communication) development, such as expressive language (verbal and nonverbal), receptive language (verbal and nonverbal)	<input type="checkbox"/>
B0400L. Other	<input type="checkbox"/>
B0400M. Other areas	<input type="checkbox"/>

Mapping Services - IDD

- ❑ Section B0400 of the PL1 provides a section for the LIDDA to recommend possible specialized services the individual may need or desire.
- ❑ Sections B0500 and B0600 provide a list of specialized services.
- ❑ These sections also identify whether the NF or the LIDDA provide the recommended services.



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How Mapping Works

- ❑ Services checked in B0400 will auto map to the actual services recommended by either the LIDDA or the NF.
- ❑ Example: if checked, B0400F will auto populate Independent Living Skills for the LIDDA on Section B0500.
- ❑ There is no mapping of C0900 MI services at this time or CMWC (Wheelchairs).



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Specialized Services Reviewed – IDT Meeting

- ❑ All PASRR services mapped to Sections B0500, B0600, and C01000 need to be discussed at the IDT meeting.
- ❑ All services agreed to by the IDT must be implemented and have an assessment completed.
- ❑ An assessment is also needed if it is determined services would not benefit the individual.



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Section C

If the answer to C0100 is “yes,” the individual will not be PASRR positive for MI due to the primary diagnosis of dementia.



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C0050. I am completing the MI section	<input type="checkbox"/>
Determination for PASRR Eligibility (MI)	
C0100. Primary Diagnosis of Dementia Does this individual have a PRIMARY diagnosis of Dementia?	<input type="text"/> 0. No 1. Yes 2. Unknown
C0200. Severe Dementia Symptoms Are the individual's Dementia symptoms so severe that they cannot be expected to benefit from PASRR Specialized Services?	<input type="text"/> 0. No 1. Yes

Section C - Cont'd

The LMHA/LBHA will review records for any diagnosis of MI and look for the following:

C0300. Mental Illness Check all that apply:

C0300A. Schizophrenia	<input type="checkbox"/>
C0300B. Mood Disorder (Bipolar Disorder, Major Depression or other mood disorder)	<input type="checkbox"/>
C0300C. Paranoid Disorder	<input type="checkbox"/>
C0300D. Somatoform Disorder	<input type="checkbox"/>
C0300E. Other Psychotic Disorder	<input type="checkbox"/>
C0300F. Schizoaffective Disorder	<input type="checkbox"/>
C0300G. Panic or Other Severe Anxiety Disorder	<input type="checkbox"/>
C0300H. Personality Disorder	<input type="checkbox"/>
C0300I. Any other disorder that may lead to a chronic disability diagnosable under the current DSM	<input type="checkbox"/>
C0300J. None of the above apply	<input type="checkbox"/>



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Section C - Cont'd

Functional Limitations:

The LMHA/LBHA will identify any functional limitations impacting the individual on section C0400 of the PE.

C0400. Functional Limitation Check all that apply:	
C0400A. Appetite Disturbance	<input type="checkbox"/>
C0400B. Sleep Disturbance	<input type="checkbox"/>
C0400C. Personal Hygiene	<input type="checkbox"/>
C0400D. Impaired Social Interaction	<input type="checkbox"/>
C0400E. Threatening or Aggressive Behavior	<input type="checkbox"/>
C0400F. Danger to Self or Others	<input type="checkbox"/>
C0400G. Employment Difficulties	<input type="checkbox"/>
C0400H. Housing Difficulties	<input type="checkbox"/>
C0400I. Co-Occurring Substance Abuse	<input type="checkbox"/>
C0400J. Criminal Justice Involvement	<input type="checkbox"/>
C0400K. None of the above apply	<input type="checkbox"/>



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Section C - Cont'd

- ❑ Sections C0500, C0600, and C0700 are critical sections of the eligibility process for individuals suspected of having MI.
- ❑ If the answer to all three questions is "No," then the individual, despite a diagnosis of MI, will be negative for PASRR.
- ❑ If the answer to one of the three questions is "Yes," Section C0800 will automatically populate as "Yes."



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Section C - Cont'd

Recent Occurrences

C0500. Inpatient Psychiatric Treatment

Has this individual experienced a psychiatric treatment more intensive than outpatient care more than once in the past 2 years?

0. No
1. Yes
2. Unknown

C0600. Disruption to normal living situation

Has this individual experienced a significant disruption to their normal living situation requiring supportive services (e.g. residential or respite services) in the last two years due to mental illness?

0. No
1. Yes
2. Unknown

C0700. Intervention by law enforcement

Has this individual experienced intervention by law enforcement, protective services agencies or other housing officials in the last two years due to mental illness? (i.e., evicted, arrested, charged or convicted of a crime)

0. No
1. Yes
2. Unknown

C0800. Based on the QMHP assessment, does this individual meet the PASRR definition of mental illness?

0. No
1. Yes



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Section C - Cont'd

- ❑ C0900 provides an opportunity for the LMHA/LBHA to list any recommended services the individual may need.
- ❑ C01000 provides a section for the LMHA/LBHA to list all services they will provide the individual.



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Determining Services

PASRR specialized services can be identified during:

- ❑ your meeting with the individual;
- ❑ a review of MDS records and any past records available during previous placements; and/or
- ❑ interviews with family and NF staff.

The PE is critical because it is the first identification of services an individual needs.



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Sections D and E

Sections D and E review some of the same areas covered on the NF Minimum Data Set (MDS).

- ❑ Some of these sections are used to confirm Medical Necessity (MN) for NF care on a positive preadmission.
- ❑ LA staff need access to all available records to complete these sections.



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Meeting MN/Diversion

- ❑ When completing sections D and E of the PE, consideration must be given for how the individual would respond if he or she were already in the NF.
- ❑ This would include his or her ability to take medications, eat independently, and ambulate.
- ❑ All medications must be listed.



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Section F

Section F identifies and reviews:

- ❑ the individual's placement wishes;
- ❑ barriers to alternate placement;
- ❑ past placements; and
- ❑ where the individual is best served.

PASRR is about providing options, addressing and working on barriers using the specialized services available to individuals in the PASRR population.



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Section F - Cont'd

- ❑ Section F is also used to record any referrals made in support of the individual's interest in community living and service options.
- ❑ DID referrals must be noted under "Other."
- ❑ Evaluators must have knowledge of all community options in order to explain them to individuals during the PE process.



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Case Studies

IDD

MI



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Training

New PASRR NF-focused web-based trainings (WBTs) are on the HHS website.

- Anyone working directly with PASRR should take the trainings.
- The trainings can be accessed at any time.
- The WBTs test user knowledge and offer certificates upon completion.



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Training - Cont'd

PASRR training including WBTs can be found at:

<https://hhs.texas.gov/doing-business-hhs/provider-portals/resources/preadmission-screening-resident-review-pasrr/pasrr-training>

Specialized Services Training:

<https://attendee.gotowebinar.com/recording/8706031307509441538>



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More Training

- ❑ SimpleLTC maintains several recorded webinars about PASRR.
- ❑ The information posted includes handouts, Q&A, slides, and minutes of any NF meetings or trainings.

<https://www.simpleltc.com/texas-pasrr-resources/>



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Webinars for NFs

HHS PASRR will conduct webinars to discuss various topics important to NFs.

- ❑ **April 11 and June 15 session:** slides, minutes, and Q&A posted on SimpleLTC website

 - ❑ **Next sessions:**
 - ❑ October 10
 - ❑ December 12
- All sessions are from 10:30-11:30



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Working Together

Collaborative and respectful relationships must be developed between all parties involved in PASRR in order to ensure the individual receives services in the most appropriate settings.



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Resources

- ❑ PASRR rules pertaining to NFs:

[http://texreg.sos.state.tx.us/public/readtac\\$xt.ViewTAC?tac_view=5&ti=40&pt=1&ch=19&sch=BB&rl=Y](http://texreg.sos.state.tx.us/public/readtac$xt.ViewTAC?tac_view=5&ti=40&pt=1&ch=19&sch=BB&rl=Y)

- ❑ PASRR rules pertaining to LAs:

[http://texreg.sos.state.tx.us/public/readtac\\$xt.ViewTAC?tac_view=4&ti=40&pt=1&ch=17](http://texreg.sos.state.tx.us/public/readtac$xt.ViewTAC?tac_view=4&ti=40&pt=1&ch=17)



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PASRR Contact Information

IDD PASRR

PASRR Hotline: 1 (855) 435-7180

or

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PASRR Contact Information

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