Session Objectives

At the conclusion of this session participants will:

- be familiar with the most recent and upcoming enhancements to the PASRR program;
- know how to respond to the frequently reported issues and concerns Nursing Facilities have with the PASRR program; and
- be familiar with the requirements related to PASRR.
Pre-admission Screening and Resident Review (PASRR) is a federally mandated program that requires all states to pre-screen all individuals, regardless of payor source or age, seeking admission to a Medicaid certified nursing facility. It was created in 1987 as part of the nursing home reform, through language in the Omnibus Budget Reconciliation Act (OBRA). It has three goals:

- To identify individuals with Mental Illness (MI), Intellectual Disability (ID) or Developmental Disability (DD)/Related Conditions (RC) (this includes adults and children);
- To ensure they are placed appropriately, whether in the community or in a Nursing Facility (NF); and
- To ensure that they receive the services they require for their MI or IDD.
PASRR’s Three Goals

1. To identify individuals with Mental Illness (MI), Intellectual Disability (ID) or Developmental Disability (DD)/Related Conditions (RC) (this includes adults and children). The PL1 and the PE are used to accomplish this goal.

2. To ensure they are placed appropriately, whether in the community or in a Nursing Facility (NF). There should be an on-going discussion about the appropriate placement for the individual.

3. To ensure that they receive the services they require for their MI or IDD. Services should assist the individual to reach and maintain the highest quality of life possible.
More Information on Why

Please see the attachment entitled, “Why PASRR”.

PASRR is more than a Federal and State requirement. It’s about providing options for individuals to choose where they live, who they live with and the training and therapy they need to live as independently as possible.
My Why
What’s New?
New Enhancements

Since the completion of the July 2015 enhancement to record the results of the IDT on the portal, DADS completed a new enhancement in December 2015 to automate the PASRR Specialized Services (PSS) form on the portal.

- The PSS form records all updates to PASRR Specialized Services and is required quarterly.

- The PSS form is completed by the local intellectual and developmental disabilities authority (LIDDA) but can be viewed and printed by the NF.
New PASRR Form

DADS created Form 1013 to be used when:

- NFs need to create a positive PL1 when the current PL1 is negative but records indicate of ID, DD or MI.
- NFs need to create a new PL1 because the referring entity did not send one at the time of admission and attempts have been made and documented to obtain the PL1.
- NFs need to create a positive PL1 when the referring entity doesn’t respond to change the PL1 they submitted.
You can find the Form 1013 and the instructions at:

http://www.dads.state.tx.us/forms/1013/

DADS revised the form and the instructions in May, 2016.

DADS will review all requests and respond by fax with either an approval or denial.

NFs should keep all 1013 forms with DADS determinations on file.
Future Enhancements

Ability to update the PL1 after the PE and beyond 90 days.

- Currently, the submitter of the PL1 can only update demographic or discharge/deceased information if the PE has not been submitted and if the PL1 date of assessment is less than 90 days old.

- This future enhancement will allow the submitter (or admitting NF) of the PL1 to update most demographic information and deceased or discharged fields before a PE is submitted, and only deceased or discharged fields after a PE is submitted and removes the 90-day PL1 update restriction.

- Expected deployment by the end August 2016
Future Enhancements Continued

Another issue being addressed through an enhancement is the requirement of the NF to submit the IDT meeting information in the portal as required by rule.

- As of July 2016, DADS PASRR staff have made monthly phone calls to NFs who have not entered the IDT information in the portal. Quality Monitoring reviews found numerous issues related to IDT compliance. Providers found to be out of compliance will be referred to DADS Consumer Rights and Services for review until the new enhancement is in place.

- This new enhancement may delay the submission of your LTCMI until the IDT has been submitted.
Future Enhancements Continued

- DADS will take Change of Ownerships (CHOWS), Hospice and other situations into account when developing this enhancement.

- It’s important to note that without the IDT process, the services PASRR provides can not be initiated.

- The expected implementation will be by the end of September 2016

- IDT requirements will be discussed later in this webinar.
Training

Several new NF focused Computer Based Trainings (CBTs) related to PASRR are on the DADS website for access at any time.

- The training should be taken by anyone working directly with PASRR.
- The CBTs tests user knowledge and offers certificates for the completion of the CBTs.
- All NF CBTs and recorded webinars can be found: https://www.dads.state.tx.us/providers/pasrr/training/index.html#nf
PL1: Everyone!

Every individual, regardless of payment type, must have a PL1 on file in the NF’s individual records and entered in the portal.

- Review your charts to ensure compliance.
- Do not admit individuals without the PL1.
- Contact DSHS at (512) 206-5039 for problems with Referring Entities concerning compliance with PL1s.
- Use Form 1013 as a last resort when all attempts have been made to obtain the PL1.
When Is a New PL1 Needed?

- A new PL1 is required for every respite stay.
- A new PL1 is required if someone is readmitted from hospice care back to the NF.
- A new PL1 is required if someone returns from an acute care hospital for stays 30 days or more.
- A new PL1 is required for CHOWS when a new contract number is assigned to the NF.
- A new PL1 is required for every new admission to the same or another NF.
Submit the PL1 Promptly

Submitting the PL1 in a timely manner is critical because:

- Delays may cause difficulties entering the LTCMI;
- DADS interpretive guidelines state the PL1 must be submitted upon admission or 72 hours after admission at the latest;
- Submitting a PL1 months after an individual discharged or passed away with dates of assessment after the individual left could be considered fraud; and
- Late PL1 submissions could cause delays in obtaining PASRR Specialized Services.
Until a new enhancement is in place, facilities should follow the current CHOW Process.

- PL1s generated due to a CHOW are similar to NF to NF transfers. The out-going contract becomes the Referring Entity to the in-coming NF.

- Facilities should not copy the PL1 from the old contract to a new PL1.

- Facilities should review and use all information from records on file when completing the new PL1. Example: A PE for and individual should be used to help complete the new PL1. **Do not create a negative PL1 for someone already identified as PE positive and receiving services.**
Errors on the PL1

Only limited (mainly demographic) corrections/updates may be made to the PL1.

- Changes can only be made if the PE hasn’t been entered or if the PL1 date of assessment is less than 90 days old.

- Page 142 of the 2015 NF User Guide lists the corrections that can be made and provides instructions on how to make them. 
Errors on the PL1 Continued

- Facilities should review a PL1 before submission to make sure all fields are correct.
- Name spelling or the entry of the incorrect legal name are common errors.
- Demographic errors may cause delays in the submission of the LTCMI.
Discharge/Deceased

If an individual has been discharged from your facility or has passed away, the PL1 must be updated. This update can be done as long as the PE hasn’t been entered or if the PL1 is not older than 90 days.

- Example: An individual has been admitted but is expected to stay less than 30 days. They leave on day 25 but the PL1 status is set to “Awaiting PE”.

- Leaving the status of the PL1 on “Awaiting PE” gives the appearance that the individual is still in the facility.

- By entering the discharge or deceased information and date on the PL1, sections B0650 and B0655, the status will change to PL1 inactive.
NF to NF Transfers

Many individuals move from one facility to another. When this happens a new PL1 must be entered into the portal. The PASRR process should be as follows:

- The transferring facility will serve as the referring entity and complete a new **paper** copy PL1 to send with the individual to the new facility.

- If the individual is PASRR positive (receiving PASRR services, positive PE) the PL1 should be positive.

- The admission type should be Expedited/Convalescent Care.

- A IDT must be held and Specialized Services must be reviewed.
Entering a PL1 to Submit LTCMI

- An NF should be able to submit a LTCMI if a PL1 has not been entered as it should have been and the individual left the facility to move to a new NF. The LTCMI can be submitted only if the new NF entered a PL1 \textit{and} the MDS assessment date of the discharging facility is prior to the assessment date of the receiving NF’s PL1.

- It is not acceptable to submit a PL1 after the individual has moved to another facility. Submitting a PL1 would inactivate the receiving NFs PL1 and any associated PE.
PASRR and Hospice

- Individuals enrolled in hospice care under a hospice provider contracted to provide this care, are not eligible for PASRR.

- All individuals will receive a PL1 assessment, however for hospice care, the LIDDA/LMHA will note “Not eligible for PASRR” if a PE is completed.

- Individuals who are enrolled in hospice at the time of admission, will not require an IDT and are not eligible for PASRR Specialized Services.

- Individuals who are admitted to hospice care after admission will become ineligible for PASRR services.
The Interdisciplinary Team Meeting

An interdisciplinary team (IDT) is made up of NF staff, LIDDA/LMHA staff, the individual and/or the individual’s legally authorized representative (LAR).

Required members are the RN from the NF, the individual and/or the LAR and the LIDDA and/or LMHA.

The IDT must meet after the PE has determined an individual is positive for PASRR to discuss specialized services the individual may need. The IDT should also discuss the appropriate placement for the individual and the individual’s wishes concerning alternate placement.
All PASRR positive individuals who are confirmed PASRR positive by a PE, must have an IDT meeting held within 14 days of admission.**

The meeting must be documented within 3 business days of the IDT meeting in the portal (TMHP or Simple LTC).

The RN, Individual and/or LAR* and the LIDDA/LMHA are required attendees. The RN, LAR and LIDDA/LMHA may attend by phone.

*Legally Authorized Representatives (LAR) An LAR is defined as a person authorized by law to act on behalf of a person with regard to a matter described in this subchapter, and may include a parent, guardian, or managing conservator of a minor, or the guardian of an adult. LARs are required to be invited as they are for any meeting concerning the care of the individual. Family members are normally invited but are not necessarily required as long as they are not listed as the LAR.
Anytime a new PL1 is entered due to a readmission, a new PE is required and the IDT will have to be held. If an IDT was conducted before a CHOW a new IDT is not required. An IDT will be required if an IDT was not conducted prior to the CHOW. The IDT will be due no later than 12 months from the date of the last IDT conducted prior to the CHOW.

The IDT must discuss PASRR habilitative specialized services (not rehabilitative services routine to NF). The team must agree and document services beneficial to the individual on the IDT form.

When specialized services are recommended on the PE, an assessment should be ordered at the IDT to determine if the individual could benefit from the service.
Individuals with IDD or Dual (both IDD and MI) are eligible for PASRR OT, PT, Speech and DME services. Individuals with MI are not eligible for these services but are eligible for specific MI services.

The IDT meeting results should be submitted into the portal within 3 business days of holding the IDT meeting. If the date of the meeting is older than 60 days from the date the form was submitted, the IDT meeting will have to be held and entered again.

If the RN or the LIDDA/LMHA did not attend or were not invited, the IDT is not valid and must be conducted again.

Updates can be done on the IDT to make corrections as long as the LIDDA/LMHA staff have not certified their part of the IDT.
IDT Continued

Copies of the IDT should be kept in the individual’s records.

The IDT agreed upon services should be reviewed annually at a new IDT and entered into the portal (see TAC RULE §19.2704)

For more information on how to complete the IDT, please see Page 46 of the 2015 NF User Guide.
PASRR Specialized Services

PASRR Specialized Services should assist the individual to reach and maintain the highest quality of life possible.
PASRR Specialized Services Continued

PASRR provides funding above the facilities daily rate for PASRR specialized services. These services are:

**Nursing Facility Specialized Services for IDD/Dual only:**
- Physical Therapy
- Speech Therapy
- Occupational Therapy
- Customized Manual Wheelchairs
- Durable Medical Equipment*

**LIDDA Specialized Services:**
- Service Coordination, including Alternate Placement assistance,
- Employment Assistance, Supported Employment, Day Habilitation, Independent Living Skills and Behavioral Supports.

**LMHA Specialized Services:**
- Skills training, Medication training, Psychosocial rehabilitation, Case Management and Psychiatric Diagnostic Exam

*On the approved list of PASRR DMEs
PASRR funded services are habilitative services as opposed to rehabilitative services.

Someone may need rehabilitative services if they’ve broken a hip or had a stroke to regain their strength or regain a lost skill.

Habilitation Services are health care services that help a person keep, learn or improve skills and functioning for daily living.

Habilitative therapies can be approved for up to 6 months of therapy per authorization request.
Rehabilitative/Habilitative

Habilitative services should be more intense and for longer duration than rehabilitative services.

Here’s one example of the difference between rehabilitative and habilitative services using speech reading skills:

A person who is deaf would receive habilitative services to learn compensatory strategies given they never were able to hear to begin with. A person who has acquired a hearing loss would receive rehabilitative services given they no longer are able to hear.
More on Habilitative PASRR Services

This link provides information about how to request PASRR specialized services:

https://www.dads.state.tx.us/providers/pasrr/RequestAuthorization.html

You can provide both rehabilitative and habilitative services at the same time.

The IDT meeting is where the discussion of habilitative services should be documented as well as in your comprehensive care plan.
MEDICARE/MEDICAID REQUESTS FOR PT/OT/SPEECH

Medicare Only

- Medicare Only: ID/DD
  - IDT held (note on IDT resident is Medicare only)
  - Specialized Services identified and alternate funding sources are discussed
  - No Medicaid Service Coordination
  - No SPT

Medicare with Medicaid Pending

- Medicare with Medicaid Pending: ID/DD
  - IDT held (note on IDT resident is awaiting Medicaid)
  - TMHP issues alert when resident’s Medicaid # is assigned
  - Service Coordinator convenes SPT to discuss initiation of Medicaid PASRR habilitation services once full eligibility is verified by contacting PASRR@dads.state.tx.us.

Medicare/Medicaid - Dual Eligible (Full)

- Medicare/Medicaid Dual-Eligible (Full)
  - IDT for new admissions/ SPT for current residents
  - Rehabilitative Services through Medicare
  - NF requests PASRR Habilitation OT/PT/ST (Medicaid)
  - Service Coordinator monitors initiation/delivery of all services
Managed Care Organizations (MCOs) do not approve any PASRR Specialist Services Requests. PASRR is carved out of the MCO approval process. All PASRR Specialized Service requests are approved by DADS.
Coordinate with LIDDA/LMHA

The PASRR process takes a coordinated effort between the NF and the LIDDA/LMHA.

- All positive active PL1s should have a PE conducted by the LIDDA/LMHA on file in the NF’s individual records and entered in the portal. Check your records for compliance.

- Work with the LIDDA/LMHA to obtain any PEs that are missing. Record any efforts to obtain needed evaluations. In some cases CHOWS extensions were granted to give LIDDA/LMHA staff more time to complete the PE. In the case of a CHOW, keep the previous PE on file until the new evaluation is done.
Coordinate with LIDDA/LMHA Continued

- Invite LIDDA/LMHA staff to meetings such as IDT and other meetings where Specialized Services will be reviewed.
- Inform DADS PASRR of any concerns: PASRR@dads.state.tx.us
Seeking Admission

PL1

PE

IDT

SS
NF Requirements
NF PASRR Requirements

Nursing Facility PASRR Responsibility Checklist:

- Ensure that all individuals in the facility have a PL1 on file and in the portal.
- Data enter Expedited Admission, Exempted Hospital Discharge and Negative PL1s to LTC Online Portal.
- Enter discharge/deceased information on the PL1 when an individual leaves or passes away.
- Communicate with the LIDDA/LIDDA to make sure that all active positive PL1s have a completed PE and that all PEs are in the individual’s file.

- Monitor the LTC Online Portal daily for alerts and status changes.
**NF PASRR Requirements continued**

- Review the recommended Specialized Services on the PE when an alert is received.

- **Certify the ability to meet the individuals needs on the PL1 no later than 7 calendar days after the PE is entered into the LTC portal.**

- Invite LIDDA/LMHA to IDT Plan meeting and hold the IDT no later than 14 calendar days after the admission date and annually thereafter.

- Enter the results of the IDT into the portal within 3 business days after the meeting.
NF PASRR Requirements continued

- Document Specialized Services to be delivered by the NF and LA/LMHA in the residents comprehensive care plan.
- Initiate nursing facility specialized services within 30 days after the date that the services are agreed to in the IDT meeting.
- Provide a copy of the resident’s comprehensive care plan to the LA/LMHA.
NF PASRR Requirements continued

- Assist the LIDDA/LMHA with monthly service coordination visits and monthly medical reviews.
- Actively participate in quarterly service planning team and transition planning meetings.
- Collaborate with the LA to assist in the individual transitioning to alternate placement as applicable.
NF PASRR Requirements continued

- Allow representatives of the state and Disability Rights Texas to inform and counsel residents of PASRR rights and options.

- Solicit assistance from DADS/DSHS/TMHP as needed.

- Know the PASRR rules pertaining to NFs:

Pre-Admission Screening and Resident Review for Nursing Facilities

**Phase 1**

### Referring Entity (RE)

- **Process Begins**
  - Referring Entity completes the PL1 40 TAC § 17.301.
- **Is the PL1 positive or negative?**
  - **Positive**
    - Referring Entity enters the PL1 into the portal for Positive Pre-Admissions and admits the individual into the NF § 19.2704.
  - **Negative**
    - Exempted hospital discharge and expedited

### Nursing Facility (NF)

- **PL1**
  - Nursing Facility enters the Positive PL1 into the portal for Expedited Admissions and Exempted Hospital Discharges § 19.2704.
  - NF Certifies able/unable to serve in portal.
  - NF Convenes IDT meeting with resident, LAR, RN, and LA/LMHA § 19.2704.
  - NF documents IDT in the portal within 3 business days after date of IDT § 19.2704(i)(j)(5).
  - NF delivers specialized services by submitting request to DADS within 30 days after date of IDT § 19.2704(i)(j)(7)(A).

### Local Authority/LMHA PASRR Evaluation (PE)

- **PL1**
  - Authority enters the PL1 into the portal for Positive Pre-Admissions 40 TAC § 17.302.
  - Completes PE within 7 days after receiving a copy of the PL1 from the RE or notification from the portal 40 TAC § 17.302.
  - If PE is Positive, confirms participation in IDT and specialized services agreed to within 5 business days of meeting 40 TAC § 17.302(c)(3).
  - Assign a Service Coordinator, § 17.501(a) Convene a Service Planning Team Meeting (SPT) § 17.501(b)(1)(B) and develop an individual service plan (ISP) 40 TAC § 17(b)(1)(c).
  - While the resident is in the NF, the SC conducts monthly visits and facilitates the initiation of LIDDA specialized services and coordination of the resident’s specialized services with the SPT 40 TAC § 17.501(2)(B).
  - SPT develops, revises, implements, and monitors a transition plan as necessary 40 TAC § 17.503 SC conducts monthly monitoring and quarterly service planning visits w/ first year after the individual moves into a Medicaid community program 40 TAC § 17.501(1)(B)(1)(A).

**Diversion**
Family, acting as the RE, contacts the LA prior to the individual ever entering the NF.

**Abbreviations**
- IDT- Interdisciplinary Team
- LA- Local Authority
- MDS- Minimum Data Set
- NF- Nursing Facility
- PE- PASRR Evaluation
- PL1- PASRR Level 1
- SPT- Service Planning Team
- SC- Service Coordination
- TAC- Texas Administrative Code

7-1-2015
We recommend that your facility provide a generic email specifically for PASRR.

**Example:** PASRR@hillcarecenter.org

This will allow us to send information out that will reach staff who work with PASRR in your facility.
Resources

- Where to find the LIDDA/LMHA for your facility:
  
  http://www.dads.state.tx.us/providers/pasrr/contacts.html

- Code of Federal Regulations for PASRR-42 CFR 483.100-138:
  

- DADS: http://www.dads.state.tx.us/

- DSHS: http://www.dshs.state.tx.us/

- PASRR rules pertaining to NFs:
  

- PASRR rules pertaining to LIDDAs:
  
PASRR Contact Information

DADS PASRR:

PASRR Hotline: 1 (855) 435-7180

PASRR@dads.state.tx.us
PASRR Contact Information Continued

- **PASRR DSHS:**
  
  PASRR DSHS Hotline: 1 (866)-378-8440  
  PASRR DSHS Email: PASRR@dshs.state.tx.us

- **Valerie Krueger, DSHS PASRR:**
  
  Phone # (512)-838-4343  
  Fax # (512) 206-5303