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# **PASRR: What You Need to Know Now - 2019**

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**HHS PASRR Staff**

# Session Objectives

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**At the conclusion of this session participants will:**

- Be familiar with recent and upcoming PASRR enhancements
- Know how to respond to frequently reported nursing facility PASRR program issues and concerns



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# History and Compliance

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- 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.
- PASRR was created in 1987 as part of the Omnibus Budget Reconciliation Act (OBRA).



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# History and Compliance

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PASRR has three goals:

- To identify individuals with Mental Illness (MI), Intellectual Disability (ID) or Developmental Disability (DD)/Related Conditions (RC)
- To ensure appropriate placement, whether in the community or in a Nursing Facility (NF)
- To ensure individuals receive the needed services for their MI, ID or DD.



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# What's New?



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# Habilitation Coordinator

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- A new role for local intellectual and developmental disability authorities (LIDDAs) will start July 7, 2019. NFs need to be aware of this important change.
- Habilitation Coordinators will be working with NFs to assist with the coordination of services for every eligible individual in the NF with IDD.
- An overview of this change was presented in a webinar on February 12, 2019:

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



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# New Enhancements

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PASRR Comprehensive Service Plan (PCSP) form changes are being made:

- Removes the requirement that attests habilitative therapies were discussed for MI only cases;
- Allows both the LIDDA and local mental health authority/local behavior health authority (LMHA/LBHA) to confirm the initial and annual IDT on the PCSP form;
- Increases comment box sizes;



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# New Enhancements Continued

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- Removes the requirement to address all services on PCSP form when not needed;

Example: Individual is MI only. The form will no longer require you to check a disposition for LIDDA and NF services.

- Adds Qualified Intellectual Disability Professional (QIDP) and Habilitation Coordinator to form; and
- Adds more MI services that can be selected.

The expected release date is August 2019.



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# Recent Changes

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## PASRR Comprehensive Service Plan

This new combined form documents both the NFs interdisciplinary team (IDT) and the LIDDAs service planning team (SPT) meetings. This enhancement was released on January 26, 2019.



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# Recent Changes Continued

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Individuals enrolled in hospice must have IDT/SPT meetings.

Effective date of this change was February 1, 2019.

See IL Letter No. 19-03  
<https://apps.hhs.texas.gov/providers/communications/2019/letters/IL2019-03.pdf>



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# Concerns with PCSP

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- LAs are submitting PCSP forms as quarterly reviews when the meeting type should have been indicated as an annual or initial meeting.
- NFs are trying to submit annuals after a quarterly when the annual is not due yet. The system will not accept these.



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# Concerns with PCSP

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- The NF's initial/annual IDT and the LA's initial/annual SPT meeting dates must be aligned.
- The initial IDT continues to serve as the starting point for planning between LA and NF.
- The LA must not submit their own form. The NF is responsible for submitting the agreed on information into the portal.
- The initial and annual IDTs and the LAs initial SPT are both recorded on one form, the PCSP.



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# Communication - IDT/SPT Meetings

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Communication is Key!

- At the start of the meeting identify what type of meeting is needed.
- Discuss who will enter the form information into the portal.
- Work together to schedule meetings.



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# Hot Topics

# Errors on the PASRR Level 1 Evaluation (PL1)

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- Review the PL1 before submission to make sure all fields are correct
- Confirm spelling of names and use legal name spellings.
- Confirm date of birth, SSN and Medicaid numbers.
- Demographic errors will cause delays in the submission of the LTCMI.



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# Discharge/Deceased

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- If an individual has been discharged from your facility or is deceased, the PL1 must be updated to inactive status.
- Enter the discharge or deceased information and date on PL1 Sections B0650 and B0655. Entering this information will inactivate the PL1.



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# Preadmission

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Any admission from the community that is not expedited or exempted (i.e.: psychiatric hospital, home, group home, assisted living, jail)



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# Preadmission PL1 Determination

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## Positive PL1:

- Individual has a Mental Illness or IDD Diagnosis.
- Individual has both a Mental Illness and Dementia diagnosis.

## Negative PL1:

- Individual has Dementia only diagnosis – depression, psychosis, behaviors are caused by their dementia – no Mental Illness diagnosis before the Dementia diagnosis.



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# Preadmission – Negative PL1

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If the PL1 screening form is negative:

- Referring Entity (RE) sends PL1 to NF with individual.
- NF admits individual and submits PL1 into the LTC Portal.



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# Preadmission – Positive PL1

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If the PL1 screening is positive:

- RE faxes PL1 to Local Authority (LA) – this starts the 72 hour timer for the LA to meet face to face with the individual.
- LA submits the PL1 into the LTC Portal.



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# Preadmission – Positive PL1

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- LA completes and submits the PE into the LTC portal within 7 days.
- NF reviews PASRR Evaluation (PE) and certifies on the PL1 if they are “Able” or “Unable” to serve individual before the individual is admitted



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# Medical Necessity and Preadmission PEs

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## Medical Necessity (MN) Determination Process for Preadmission PEs:

- After PE is entered, LA must check after submission to confirm MN was approved.
- When reviewing the PE, the NF should also check the history section to see if MN is approved or “Pending Review”.



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# Medical Necessity and Preadmission PEs

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- If the criteria is met then the status of PE is set to “MN Approved”.
- If the criteria is not met, the status will be “Pending Review” and the Texas Medicaid and Healthcare Partnership (TMHP) nurse has five days to review the PE and either approve or status set to “Pending Denial”.



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# Medical Necessity and Preadmission PEs

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- LA must check PE regularly to see if MN approved or more information is needed by TMHP nurse.
- LA must add more information as requested – LA may ask admitting NF for assistance with wording.
- If MN is still denied, the PE is then reviewed by a physician, who approves or denies MN.
- If process is ignored, a new PE may be needed.



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# Form 1012 Reminders

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Purpose of Form 1012, Mental Illness/Dementia Resident Review:

- Assists NFs in determining if a current negative PL1 should be changed to positive by confirming if an individual:
  - Meets the CFR definition of Mental Illness,
  - Has a dementia diagnosis, and
  - If dementia is the primary diagnosis.
- Provides NFs documentation to place in the medical record as to why a new positive PL1 was not completed.



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# Form 1012 – Reminders

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## Section B - Mental Illness Review:

- Review the definition of MI.
- Determine if the individual has a diagnosis that meets this definition.



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# Form 1012 Reminders

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If Yes, the NF must:

- Indicate if this is or is not a new diagnosis
- If new diagnosis, document diagnosis and date of diagnosis
- Proceed to Section C

If No:

- Physician signs and dates form
- No new PL1 is needed
- NF complete Section E



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# Form 1012 Reminders

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Section C - Dementia Review:  
Determine if individual has a primary diagnosis of Dementia.

If No (there is no diagnosis of Dementia or Dementia is not primary):

- Physician signs and dates form,
- NF enters positive PL1,
- NF completes Section E, and
- Local Mental Health Authority/Local Behavioral Health Authority (LMHA/LBHA) conducts PE.



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# Form 1012 Reminders

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If Yes (the individual does have a primary of dementia):

- Physician signs and dates form,
- NF faxes form and supporting documentation to the LMHA/LBHA for review.



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# Coordinate with LIDDA/LMHA/LBHA

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

- All positive active PL1s should have a PE completed on file in the NF's individual records and entered in the portal.
- Work with the LIDDA/LMHA/LBHA to obtain any PEs that are missing.



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# Coordinate with LIDDA/LMHA/LBHA

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- Record any efforts to obtain needed evaluations.
- CHOW and Form 1012 extensions may have been granted to give LIDDA/LMHA/LBHA 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.



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# Coordinate with LIDDA/LMHA/LBHA

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- Invite LIDDA/LMHA/LBHA staff to IDTs and other meetings where Specialized Services will be reviewed.
- Inform PASRR of any concerns at:  
[PASRR.Support@hhsc.state.tx.us](mailto:PASRR.Support@hhsc.state.tx.us)



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# Training

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Please see SimpleLTC for additional recorded webinars, handouts and Q&A as well as other PASRR related information:

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



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# HHSC PASRR Contact Information

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PASRR Hotline: 1(855)435-7180

or

[PASRR.Support@hhsc.state.tx.us](mailto:PASRR.Support@hhsc.state.tx.us)



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# Thank you

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**The PASRR Unit**