Steps to Success with MDS

PASRR and the Significant Change in Status Assessment

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Objectives

• Explain how Preadmission Screening and Resident Review (PASRR) affects residents and facilities
• State the requirements before admitting an individual with serious mental illness, intellectual disability, or a related condition
• Apply codes for A1500 and A1510 accurately
• Relate requirement to refer for PASRR Resident Review upon Significant Change in Status Assessment (SCSA)
Polling Question

What is PASRR?

A. The state level of care process for Medicaid beneficiaries
B. Forms the NH fills out on behalf of Medicaid during the admission process
C. A civil rights protection against segregation by disability
D. I don’t know. Our facility does not admit individuals with serious mental illness
C. A civil rights protection against segregation by disability

Preadmission Screening and Resident Review is to assure that persons with disabilities due to serious mental illness or intellectual disability and related conditions are not kept in nursing homes with inadequate supports for the disability and away from the community.
PASRR Does Three Things

1. Identifies possible serious mental illness or intellectual disability and related conditions in all individuals who could be or are admitted to a Medicaid certified NF

2. Comprehensively evaluates identified individuals before admission to NF to determine needs and where they can be met

3. If admitted to NF, assures specialized services for the disability are provided to meet assessed need
Preadmission Screening and Resident Review

- A federal requirement in the Nursing Home Reform Act, OBRA ’87
- Each state Medicaid agency implements PASRR, along with the mental health and developmental disabilities agencies
  - Find the procedures for your state
  - If your facility is not clear on PASRR, contact the Medicaid agency, your state provider association, or search online
How PASRR Works: Level I

• Level I Preadmission Screening (PAS) is the relatively simple screen to find anyone who **could** have serious mental illness (SMI), intellectual disability (ID), or a related condition (RC) and therefore needs Level II evaluation by experts

• Always before admission (State rules vary)

• Regardless of payment source
How PASRR Works: After Level I

• A negative Level I permits admission to proceed. PASRR is over for the individual unless possible SMI/ID/RC arises later

• Be sure the Level I document is in the chart

(Note that PASRR applies to NFs or SNF/NFs. PASRR does not apply to NHs that are only certified as Medicare SNFs)
How PASRR Works: Level II

• Level II PASRR is a comprehensive evaluation by the state mental health authority for possible SMI, or the state DD agency for possible ID or RC
• Note that these clinical experts make the diagnosis, not the Level I screener
• The NH is forbidden from participating in the Level II PAS
PASRR Level II

- NH admission must wait till the Level II is complete! (Medicaid does not cover NF days before Level II is complete)

- The Level II documentation contains:
  - A determination: whether the person’s needs can be met in an NH and admission is permitted
  - A determination: whether the individual can only be admitted if Specialized Services are available for the PASRR disability, beyond what the NH provides
  - A comprehensive evaluation summary. Used in planning care
### How Does This Relate to the MDS?

<table>
<thead>
<tr>
<th>A1500. Preadmission Screening and Resident Review (PASRR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete only if A0310A = 01, 03, 04, or 05</td>
</tr>
</tbody>
</table>

**Enter Code**

Is the resident currently considered by the state level II PASRR process to have serious mental illness and/or intellectual disability ("mental retardation" in federal regulation) or a related condition?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0. No</td>
<td>Skip to A1550, Conditions Related to ID/DD Status</td>
</tr>
<tr>
<td>1. Yes</td>
<td>Continue to A1510, Level II Preadmission Screening and Resident Review (PASRR) Conditions</td>
</tr>
<tr>
<td>9. Not a Medicaid-certified unit</td>
<td>Skip to A1550, Conditions Related to ID/DD Status</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A1510. Level II Preadmission Screening and Resident Review (PASRR) Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete only if A0310A = 01, 03, 04, or 05</td>
</tr>
</tbody>
</table>

**Check all that apply**

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Serious mental illness</td>
<td></td>
</tr>
<tr>
<td>B. Intellectual Disability (&quot;mental retardation&quot; in federal regulation)</td>
<td></td>
</tr>
<tr>
<td>C. Other related conditions</td>
<td></td>
</tr>
</tbody>
</table>
Polling Question

What is A1500?

A. An indicator for facility to follow Level II recommendations in care planning
B. An indicator that the MI or DD agency will be taking care of those disability needs
C. A conclusion by staff from the assessment as to presence of these diagnoses
D. None of the above

25% 25% 25% 25%
A. Indicator for facility to follow Level II recommendations in care planning

A1500 is a flag to alert the facility that:

• This resident has particular disabilities according to the state agency experts
• There are Level II documents to be reviewed and used in planning care
A1500 PASRR

A1500 is an objective question—Have the state agencies determined that the individual has a PASRR Level II disability?

• The person either has a Level II PASRR from the state agencies, or not

• (State forms and procedures vary. Some are electronic. Search your state online, or see Resources on slide 31)
A1500 is an objective question—Have the state agencies determined that the individual has a PASRR Level II disability?

- The person either has a Level II PASRR from the state agencies, or not
- Code 1. Yes, when there is a PASRR Level II determination that the individual has SMI, ID or RC for PASRR purposes
- Note the Level II could be a PAS, or an RR after admission
Code 0., No, when:

- A current negative Level I form is in the record
- A current Level I form indicates that the state’s 30-day hospital discharge exemption applies
- A Level II PAS determines no SMI, ID or RC for PASRR purposes
- If Level I is missing and no Level II, code No, but investigate
Coding A1500 – Not a NF

Code 9., Not a Medicaid-certified unit when:

- The nursing home or distinct part does not hold a Medicaid certificate and cannot bill Medicaid

Determined by certificates the facility holds, not whether Medicaid is currently being billed, or any residents are Medicaid beneficiaries
This question only applies if A1500 was 1, Yes, which means there is a Level II record available. That Level II determination states which of these three conditions the individual has, for PASRR purposes:

- Code one or more, as determined in the Level II form
- Do not code conditions absent from the Level II form (Refer for a new Level II Resident Review if other diagnosis suspected)
Coding

• That’s it for coding! A1500 simply asks about the individual’s PASRR status, not your assessment
• But . . .
A1500/1510 Implications for Staff

• The state Level II records, the MDS, and the care plan must all line up

• What to do if there is no Level I? Or a positive Level I and no Level II?
  – Facility should not have admitted
  – If facility did admit, immediately do the Level I and if Level II is needed, refer to the appropriate agency
  – Coding would be 0, No

• What to do if A1500 is No, but there is evidence of possible PASRR diagnosis?
  – Refer for Resident Review (more on that below)
When to Admit a Resident with a PASRR Disability

• After the facility reviews the Level II documentation and decides that:
  – The facility can meet the individual’s needs as described
  – Any Specialized Services recommended in the Level II documentation are available and can be arranged for by the facility

• NH admission must wait till the Level II is complete! (Risk of deficiency. Also, Medicaid does not cover NF days before a needed Level II is complete)
• The care plan must account for the Level II recommendations
  – Clinicians prescribe intensity, frequency, etc., of Specialized Services, taking into account assessed need and the individual’s goals and preferences
  – If clinician assessment differs from the Level II, document why. If the difference is significant, also refer for the Level II to be done again
PASRR Resident Review (RR)

- **Resident Review** is the RR in PASRR. It is a Level II evaluation and determination for NF residents.
- RR is the same Level II process as for Preadmission Screening (PAS) but for NF residents.
- The facility provides records for the RR but does not evaluate.
Polling Question

For a PASRR resident (A1500 = Yes), the facility must refer for a Level II RR when:

A. Ordered by the physician
B. An MDS Significant Change in Status Assessment is needed
C. The resident’s behaviors are disruptive or a danger to self or others
D. The MH or DD agency schedules them

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For a PASRR resident (A1500 = Yes), the facility must refer for a Level II RR when:

B. An MDS Significant Change in Status Assessment is needed

When A1500 = Yes, and the resident requires an MDS Significant Change in Status Assessment (for any reason), the facility should contact the Level II agency per state procedure. The agency will decide if Level II should be redone. (See RAI Manual pages A-18–A-19)
Also Refer for RR as Required

• As with any condition, if need is urgent, immediately refer for RR and/or services
  – E.g., acute change in affect or behavior that does not call for hospitalization but needs evaluation and change in plan

• Upon any evidence of possible, but previously unrecognized or unreported SMI, ID, or a RC
Example: an improved medical condition, such that the resident’s plan of care or placement recommendations may require modifications:

Mr. L has a diagnosis of serious mental illness, but his primary reason for admission was rehabilitation following a hip fracture. Once the hip fracture resolves and he becomes ambulatory, even if other conditions exist for which Mr. L receives medical care, he should be referred for a PASRR evaluation to determine whether a change in his placement or services is needed.
SCSA Example: Prior Level II No Longer Matches Need

Example: condition or treatment significantly different than described in the resident’s most recent PASRR Level II evaluation and determination:

Ms. K has an intellectual disability. She is normally cooperative, but after she sustains a fall requiring a cast, she has become agitated and combative with the physical therapist and with staff who try to clean the area. She does not understand why her normal routine has changed and why staff need to touch a painful area of her body.
Why PASRR Matters to the NF

• NFs by law may not admit a person who needs a PASRR Level II evaluation until the state issues the PASRR determinations
• Admission before a required PASRR Level II is complete is a survey deficiency
• No Medicaid funding for any days prior to PASRR completion (CMS has recouped)
• A1500 helps facilities avoid compliance problems and improve care
Importance for Residents

- Between 10–25% of NF residents have serious MI, ID, or a related condition
- Historically these individuals have been inappropriately placed and underserved
- PASRR is a powerful tool for diversion or transition to the most appropriate service setting. PASRR helps states comply with Olmstead requirements
- PASRR recommends Specialized Services to meet the unique needs of residents
Resources

- PASRR page on Medicaid.gov
  https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Delivery-Systems/Institutional-Care/Preadmission-Screening-and-Resident-Review-PASRR.html
  - Basic PASRR information
  - Link to PASRR Technical Assistance Center website

- RAI Manual
  - Chapter 3 coding instructions
  - Chapter 2, Section 2.6, on significant change in status, includes discussion on PASRR
Questions