Pre-Admission Screening and Resident Review and Level of Care

Ammanda Ott
Facility Advisory Nurse III
Central Office Medical Review Unit

What is it and why is it important?

Preadmission Screening and Resident Review (PASRR) is a federal requirement to help ensure that individuals are not inappropriately placed in nursing homes for long term care. PASRR requires that Medicaid-certified nursing facilities:

- Evaluate all applicants for serious mental illness (SMI) and/or intellectual disability (ID)
- Offer all applicants the most appropriate setting for their needs (in the community, a nursing facility, or acute care settings)
- Provide all applicants the services they need in those settings
Pre-Admission Screening and Resident Review

What information should the facility have in the resident record related to the PASRR process?

- Initial Assessment - Social and Medical (DA 124 A/B form)
- Level One Nursing Facility Pre-Admission Screening for Mental Illness/Mental Retardation or Related Condition (DA 124 C form)
- Determination Letter (if the resident met the criteria for a Level II screening)
- PASRR Level II Evaluation Completed by Bock & Associates (if the resident met the criteria for a Level II screening)

Pre-Admission Screening and Resident Review

What should the facility do with the information contained in the assessments?

- Ensure they understand the care needs of the resident and determine ability to meet those needs, prior to admission.
- Use the care needs identified in the assessment to establish the plan of care.
- Use the Level II screening results to determine what behavioral health needs the resident has, including past trauma, to determine ability to provide lesser intensity services, and establish a plan of care.
What State Entities are involved with the PASRR process?

**COMRU**
Dept. of Health & Senior Services, Central Office Medical Review Unit
Processes Level of Care (24 Point Count)
Refers the Level II screenings to DMH

**DMH**
Dept. of Mental Health
Coordinates with Bock & Associates regarding Level II referrals, and reevaluations.

**FSD**
Dept. of Social Services, Family Support Division
Releases Medicaid Payment to the Nursing Facility once the Level of Care and/or Level II process is complete.

---

PASRR Frequently Asked Questions

Where do I submit the PASRR forms (DA 124s)?

- The application can be sent to COMRU via email: [COMRU@health.mo.gov](mailto:COMRU@health.mo.gov)
- COMRU has an automatic email that is sent to the submitter. The automatic email is updated periodically.
- If the application is missing required documentation, including the medication list or physician signature, the application is rejected and emailed to the original submitter. (typically within a day of submission)
- Please ensure the emails sent by COMRU are not going to the submitter’s junk email; as this will delay with processing.
- Review the scanned application prior to sending to COMRU to ensure it is legible and complete (all documents are attached to the email).
On the initial assessment, what forms need to be submitted to COMRU for review?

- The Initial Assessment - Social and Medical (DA 124 A/B form) and the Nursing Facility Pre-Admission Screening for Mental Illness/Mental Retardation or Related Condition (DA 124 C) forms must to be completed for all applicants seeking Medicaid Reimbursement. All three forms must be received by COMRU in order to process Level of Care and to refer individuals meeting the criteria to DMH for the Level II screening.
- If the applicant triggers for a Level II screening; the screening must be completed prior to admission.

When might COMRU need a new Pre-Admission Screening application submitted?

- If the client has been out of a nursing facility 60 days or greater;
- If Family Support Division requests the screening for an individual re-applying for Medicaid (indicate Re-applying for Medicaid on DA-124 A/B)
- If DMH requests for a re-evaluation screening (The approval letter will indicate conditional approval.)
- If the client meets criteria for a Change in Status.
- When any of the above occur, please submit a new application packet, including the Initial Assessment - Social and Medical (DA 124 A/B form) and the Nursing Facility Pre-Admission Screening for Mental Illness/Mental Retardation or Related Condition DA 124 C form to COMRU for processing.
PASRR Frequently Asked Questions

What is required when a resident transfers to another SNF?

- If COMRU has already processed the DA 124s and/or Level II screening and the resident has not been out of a Skilled Nursing Facility (SNF) greater than 60 days, a reassessment is not required.
  - COMRU does not require new DA 124s; the accepting SNF will contact and obtain the previous DA 124s and/or Level II screening from the previous SNF.
  - If you are unable to obtain a copy, email COMRU@health.mo.gov for a copy of the DA124 forms. The Level II report can be obtained by contacting records.mo@bock-associates.com.
  - If the client was admitted from the hospital, the accepting NF should identify where the client had been residing for the last 60 days. If the resident lived in a SNF, the home should obtain information from the previous SNF instead of submitting new DA 124s to COMRU.

When do I need to submit new level of care documentation for a “Change in Status” to the Central Office Medical Review Unit?

- A change in status is only submitted for clients with Mental Illness or Intellectual Disability, when the resident did not previously meet criteria for a Level II screening, however information now supports the need for one.
  - The Nursing Facility would submit a new DA 124 A/B form, DA 124 C form and supporting documentation showing the reason why the client now is suspected to have a mental illness or an intellectual disability.
There are 5 Special Admission Categories

- Terminal Illness
- Severe Physical Illness (examples are listed on the back of the DA 124 C form)
- Respite Care (stays not more than thirty (30) days)
- Emergency Provision Admission
- Direct Transfer from a Hospital (Stays not more than thirty (30) days for the condition for which the person is currently receiving hospital care.

If the person submitting the level of care application is seeking a resident to be admitted under a Special Admission Category, this would be indicated on the DA 124 C form, Section D. The submitter would also send with the application the Special Admission Category Referral (available online).

The Special Admission request should be approved by COMRU, prior to admission, unless it is an emergency situation. In an emergency situation, a DSDS caseworker or DHSS central office will provide instruction to COMRU.

It is the responsibility of nursing facilities to notify COMRU via email or fax if the client is going to stay past the allotted timeframe approved.

State surveyors may review the following documents related to the PASRR process:

- Initial Assessment-Social and Medical (DA 124 A/B)
- Level One Nursing Facility Pre-Admission Screening for Mental Illness/Mental Retardation or Related Condition (DA 124 C)
- Determination Letter
- Level II Report Bock Report
Why is the Level II Screening Important?

The Level II report (Bock Report) is a very detailed report of the client’s physical and/or mental condition. For residents with MI or ID, their assessment and comprehensive plan of care must be coordinated with their PASARR.

The Level II report (Bock Report) is an important tool. It identifies lesser intensity services that the nursing facility should be implementing to assist the client function at their highest level.

The Level II report (Bock Report) also indicates if long-term NF Level of Services or Short term NF Level of Services is recommended.

Is there a MDS question regarding to PASRR?

A 1500  
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?
0. No  
Skip to A1550, Conditions Related to ID/DD Status.  
1. Yes  
Continue to A1510, Level II Preadmission Screening and Resident Review (PASRR) Conditions.  
Skip to A1550, Conditions Related to ID/DD Status.

A 1510  
Level II Preadmission Screening and Resident Review (PASRR) Conditions. Complete only if AD310A = 01, 03, 04, or 05.
Check all that apply.
A. Serious mental illness.  
B. Intellectual Disability (‘mental retardation’ in federal regulation).  
C. Other related conditions.

A 1550  
Conditions Related to ID/DD Status. If the resident is 22 years of age or older, complete only if AD310A = 01. If the resident is 21 years of age or younger, complete only if AD310A = 01, 03, 04, or 05.
Check all conditions that are related to ID/DD status that were manifested before age 22, and are likely to continue indefinitely.
ID/DD With Organic Condition.  
A. Down syndrome.  
B. Autism.  
C. Epilepsy.  
D. Other organic condition related to ID/DD.  
ID/DD Without Organic Condition.  
E. ID/DD with no organic condition.  
No ID/DD.  
Z. None of the above.
The Behavioral Health Crisis Hotline is staffed by mental health professionals who can respond to your crisis 24 hours per day and 7 days per week.

DMH webpage link: https://dmh.mo.gov/programs.html

COMRU Contact Information

COMRU Telephone
573-522-3092

COMRU Email Address
COMRU@health.mo.gov

COMRU webpage
https://health.mo.gov/seniors/nursinghomes/pasrr.php
PASRR
Change in Status and Resident Review
Kathy Schafer, RN, CDDN
Department of Mental Health

PASRR Technical Assistance Center
https://www.pasrrassist.org

Resident Review: A Critical Component to Achieving PASRR’s Vision

Nancy Shanley
Andrea Womack
PTAC Webinar
July 11, 2017
Objectives

- Understand Preadmission Screening and Resident Review (PASRR) and Status Change requirements
- Understand when to notify the State Mental Health Authority (DMH BH) and State Intellectual Disability Authority (IDD) of a change in status
- Understand the ways Nursing Facility (NF) residents can be assessed through PASRR

*MH - Mental Health
IDD - Intellectual and Development Disability

PASRR: The Big Picture Goal

Per PTAC, PASRR is achieving its federal purpose when:
- All NF residents with PASRR disabilities are identified,
- Their disability-related needs are evaluated,
- The full array of needed disability services and supports are detailed in written recommendations,
- Recommended services and supports are delivered to them,
- PTAC states that the Level II evaluation and report is NOT a one-and-done event.
PASRR Disability - Definition of Mental Illness

https://www.pasrrassist.org/resources/mental-illness/what-pasrr-definition-mental-illness

According to 42 CFR 483.102(b), a disorder qualifies as a mental illness (MI) for PASRR purposes if it satisfies three major criteria:

1. It appears as a major mental disorder in the Diagnostic and Statistical Manual of Mental Disorders, revised (DSM-III-R), published in 1987. This mental disorder is:
   (A) A schizophrenic, mood, paranoid, panic or other severe anxiety disorder; somatoform disorder; personality disorder; other psychotic disorder; or another mental disorder that may lead to a chronic disability; but
   (B) Not a primary diagnosis of dementia, including Alzheimer’s disease or a related disorder, or a non-primary diagnosis of dementia unless the primary diagnosis is a major mental disorder as defined in paragraph (b)(1)(i)(A) of this section.

2. It has resulted in functional impairments in major life activities in the last 3-6 months, including interpersonal functioning, concentration, and adaptation to change; and the individual has a recent history of treatment, which means at least one of the following:
   (A) Psychiatric treatment more intensive than outpatient care more than once in the past 2 years (e.g., partial hospitalization or inpatient hospitalization);
   (B) Or within the last 2 years, due to the mental disorder, experienced an episode of significant disruption to the normal living situation, for which supportive services were required to maintain functioning at home, or in a residential treatment environment, or which resulted in intervention by housing or law enforcement officials.
PASRR Disability - Definition of Intellectual Disability

(3) An individual is considered to have intellectual disability (ID) if he or she has:
   (i) A level of retardation (mild, moderate, severe or profound) described in the American Association on Intellectual Disability's Manual on Classification in Intellectual Disability (1983). Incorporation by reference of the 1983 edition of the American Association on Intellectual Disability's Manual on Classification in Intellectual Disability was approved by the Director of the Federal Register in accordance with 5 U.S.C. 552(a) and 1 CFR part 51 that govern the use of incorporations by reference; or
   (ii) A related condition as defined by §435.1010 of this chapter.

PASRR - Definition of a Related Condition

A related condition, which is defined by 42 CFR 435.1010 as a disability that:
- a) Is attributable to:
  - i) Cerebral palsy or epilepsy; or
  - ii) Any other condition, other than mental illness, found to be closely related to intellectual disability because it impairs intellectual functioning or would require services normally delivered to an individual with impaired intellectual functioning;
- b) Manifests before the age of 22;
- c) Is likely to continue indefinitely; and
- d) Results in substantial functional limitations in three or more of the following life activities:
  - i) Self-care;
  - ii) Understanding and use of language;
  - iii) Learning;
  - iv) Mobility;
  - v) Self-direction; or
  - vi) Capacity for independent living
Resident Review and Status Change Regulations

- §483.104 State plan requirement. As a condition of approval of the State plan, the State must operate a preadmission screening and annual resident review program that meets the requirements of §483.100 through 438.138.

- §483.106 Basic rule. (a) Requirement. (3) At least annual review, as of April 1, 1990, of all residents with mental illness or mental retardation, regardless of whether they were first screened under the preadmission screening or annual resident review requirements.

- §483.106 Basic rule. (c) Purpose. The preadmission screening and annual resident review process must result in determinations based on a physical and mental evaluation of each individual with mental illness or mental retardation, that are described in §483.112 and 483.114.

Resident Review and Status Change Regulations

The 1996 Nursing Home Facility Resident Act, P.L. 104-315 amended Title XIX of the Social Security Act, repealing the mandate to do annual Resident Reviews for every PASRR identified resident.

Section 1919(e)(7)(B)(iii) of the Social Security Act (iii) REVIEW REQUIRED UPON CHANGE IN RESIDENT’S CONDITION - A resident review and determination under clause (i) or (ii) must be conducted promptly after a nursing facility has notified the State mental health authority or State intellectual or developmental disability authority, as applicable, under subsection (b)(3)(E) with respect to a resident with mental illness or IDD, that there has been a significant change in the resident’s physical or mental condition.
Resident Review and Status Change Regulations

- ii) Resident review.—The nursing facility must examine each resident no less frequently than once every 3 months and, as appropriate, revise the resident’s assessment to assure the continuing accuracy of the assessment.

- (D) Use.—The results of such an assessment shall be used in developing, reviewing, and revising the resident’s plan of care under paragraph (2).

- (E) Coordination.—Such assessments shall be coordinated with any State-required preadmission screening program to the maximum extent practicable in order to avoid duplicative testing and effort. In addition, a nursing facility shall notify the State mental health authority or State mental retardation or developmental disability authority, as applicable, promptly after a significant change in the physical or mental condition of a resident who is mentally ill or mentally retarded.

---

Resident Review and Status Change Regulations

The Final Rule was published in November 2016 (80 FR 42168). Under this rule, nursing facilities (NFs) must notify the state mental health authority (SMHA) or state intellectual disability authority (SIDA) promptly after a resident experiences a significant change in status of any kind [CFR 483.20(k)(4)].

Resident care plans must include Specialized Services or Specialized Rehabilitative Services that the NF will provide as a result of the Level II recommendations made by PASRR. If the NF disagrees, it must indicate its rationale for disagreeing in the resident’s medical record [CFR 483.21(a)].
Electronic Code of Federal Regulations

(e) Coordination. A facility must coordinate assessments with the preadmission screening and resident review (PASRR) program under Medicaid in subpart C of this part to the maximum extent practicable to avoid duplicative testing and effort. Coordination includes:

1. Incorporating the recommendations from the PASRR Level II determination and the PASRR evaluation report into a resident's assessment, care planning, and transitions of care.

2. Referring all Level II residents and all residents with newly evident or possible serious mental disorder, intellectual disability, or a related condition for Level II resident review upon a significant change in status assessment.

The 1996 Nursing Home Facility Resident Act, Public Law 104-315

The amendment requires nursing facilities to promptly notify the designated PASRR entity whenever any resident may require a new or additional PASRR Level II evaluation.

NFs’ responsibility to report status changes has always been part of PASRR. With the repeal of mandatory annual resident reviews (RR), states’ compliance with PASRR relies very heavily on NF compliance with status change reporting.
Referral for Level II Resident Review Evaluations are Required for Individuals Previously Identified by PASRR to Have Mental Illness, Intellectual Disability, or a Related Condition

- A resident who demonstrates increased behavioral, psychiatric, or mood-related symptoms.
- A resident with behavioral, psychiatric, or mood related symptoms that have not responded to ongoing treatment.
- A resident who experiences an improved medical condition—such that the resident’s plan of care or placement recommendations may require modifications.
- A resident whose significant change is physical, but with behavioral, psychiatric, or mood-related symptoms, or cognitive abilities, that may influence adjustment to an altered pattern of daily living.
- A resident who indicates a preference (may be communicated verbally or through other forms of communication, including behavior) to leave the facility.
- A resident whose condition or treatment is or will be significantly different than described in the resident’s most recent PASRR Level II evaluation and determination. (Note that a referral for a possible new Level II PASRR evaluation is required whenever such a disparity is discovered, whether or not associated with a SCSA.)

Reference: CMS’s RAI Version 3.0 Manual - Note: this is not an exhaustive list

Referral for Level II Resident Review Evaluations Required for Individuals Not Previously Identified by PASRR to Have Mental Illness, Intellectual Disability, or a Related Condition*

A resident who exhibits behavioral, psychiatric, or mood related symptoms suggesting the presence of a diagnosis of mental illness as defined under 42 CFR 483.100 (where dementia is not the primary diagnosis).

- A resident whose intellectual disability as defined under 42 CFR 483.100, or related condition as defined under 42 CFR 435.1010 was not previously identified and evaluated through PASRR.
- A resident transferred, admitted, or readmitted to a NF following an inpatient psychiatric stay or equally intensive treatment.

Note: this is not an exhaustive list
Additional Potential Indicators of Need for Status Change Referral

- Addition of, or continued increase in, antipsychotic medications to the treatment regimen.

- Addition of, or significant or continuing increases in, psychotropic medications to the treatment regimen.

- Red flags indicated by the MDS Resident Assessment Protocol related to:
  - Behavior or mood, mental health or IDD diagnoses and/or a decline in functioning in a PASRR Level II resident.

NF Reported Change of Status Evaluations

PTAC’s 2016 National PASRR Report indicates large numbers of NF residents have significant indicators of PASRR conditions but no evidence of a PASRR Level II completed.

NFs are required to refer any resident experiencing a significant status change indicating or impacting disability needs to the designated PASRR entity for possible Level II activity.

The PASRR entity or designee reviews the referral and determines if a Level II evaluation must occur.
How does the Nursing Facility notify the State Mental Health Authority?

Via email: Kathy.Schafer@dmh.mo.gov
Include the name of the individual, the DOB, the Medicaid DCN number, a summary of the change, how it affects the individual’s ID/MI condition, and note if a new Level I (DA124 c form) has been submitted to DHSS.

Via telephone: 573-751-8070
Department of Mental Health can discuss cases and provide technical assistance to Nursing Facilities to determine if a resident review is required.

Via mail: 1706 East Elm Street, P.O. Box 687 Jefferson City, Mo 65102
Include the name of the individual, the DOB, the Medicaid DCN number, a summary of the change, how it affects the individual’s ID/MI condition, and note if a new Level I (DA124 c form) has been submitted to DHSS.

Summary

- Nursing Facilities are required to promptly notify the designated PASRR entity whenever any resident may require a new or additional PASRR Level II evaluation.

- The NFs’ responsibility to report status changes has always been part of PASRR. With the repeal of mandatory annual resident reviews (RR), states’ compliance with PASRR relies very heavily on NF compliance with status change reporting.

- It is the State Medicaid Authority’s responsibility to ensure NFs request status change evaluations as required.
Questions??