

Preadmission and Resident Review (PASRR) Overview

Preadmission Screening and Resident Review (PASRR)

- PASRR is a federally mandated process Medicaid agencies must oversee and administer in conjunction with the state Developmental Disability authority and the state Mental Health authority
- Federal and State PASRR regulations require that individuals are screened for indications of a serious mental illness and/or developmental disability before being admitted to a Medicaid-certified nursing facility (NF) and on a systematic basis following a significant change in their condition
- PASRR regulations apply to all applicants and residents of Ohio Medicaid certified nursing facilities, regardless of the individual's method of payment (payer source)

PASRR Goals

- PASRR works to ensure that individuals with a serious mental illness (SMI) and/or developmental disability (DD) are not inappropriately institutionalized
 - » By identifying individuals with mental illness and/or intellectual disability
 - » Ensure that the individual is Identified(in community or NF)
 - » Ensure that the individual receive the services they require for their mental illness and/or developmental disability (wherever they are admitted)



PASRR Statutes and Regulations



■ Federal Statutes

- §1919(e)(7) of the Social Security Act
- 42 CFR §483.100 - §483.138

■ State Regulations

- OAC 5160-3-15 Preadmission screening and resident review definitions
- OAC 5160-3-15.1 Preadmission screening requirements
- OAC 5160-3-15.2 Resident review requirements
- OAC 5123:2-14-01 Developmental disabilities
- OAC 5122-21-03 Serious mental illness

PASRR State Primary Roles

Ohio
Department of Medicaid



Ultimate oversight of the PASRR process and Level I screen

Ohio | Department of
Aging



Provides ODM with Level I Preadmission Screen (PAS) support and manages PASRR IT system

Ohio MHAS
Promoting wellness and recovery
MENTAL HEALTH & ADDICTION SERVICES



Responsible for Level II evaluations for Serious Mental Illness (SMI)

Ohio | Department of
Developmental Disabilities



Responsible for Level II evaluations for Developmental Disability (DD) and Related Condition (RC)

PASRR Secondary Roles



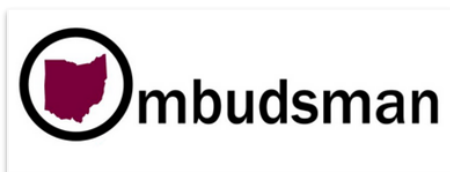
**Completes in-person Level II
assessment for OhioMHAS**



**Completes in-person Level II
assessments for DODD and arranges
for supports/services**

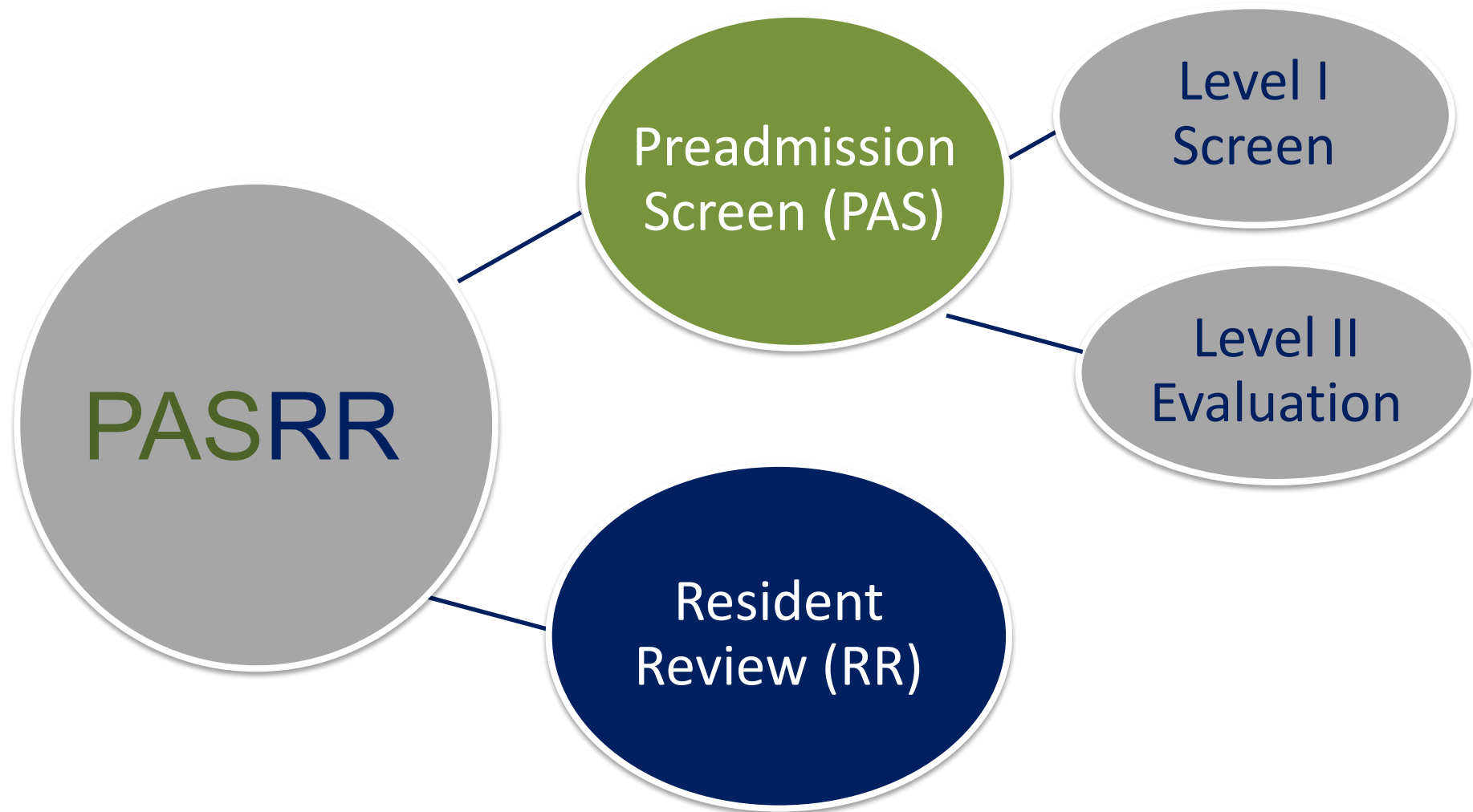


**Regulates Ohio-licensed nursing
facilities**



**Advocates for admission of individuals
to the most integrated setting**

The Pieces of PASRR



Preadmission Screening (PAS)

Level I Screening

- Refers to the screening used to identify whether a person has or is suspected of having a SMI and/or DD
- Usually completed by hospital discharge planners or NF social workers



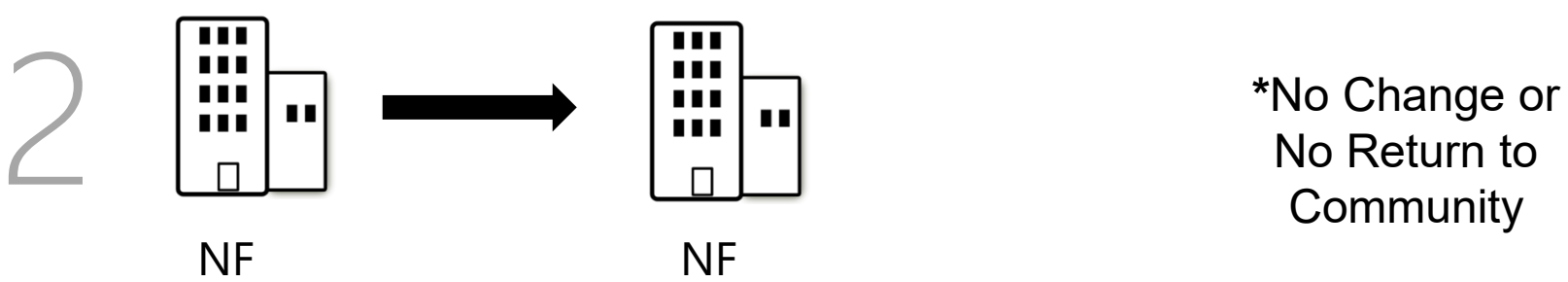
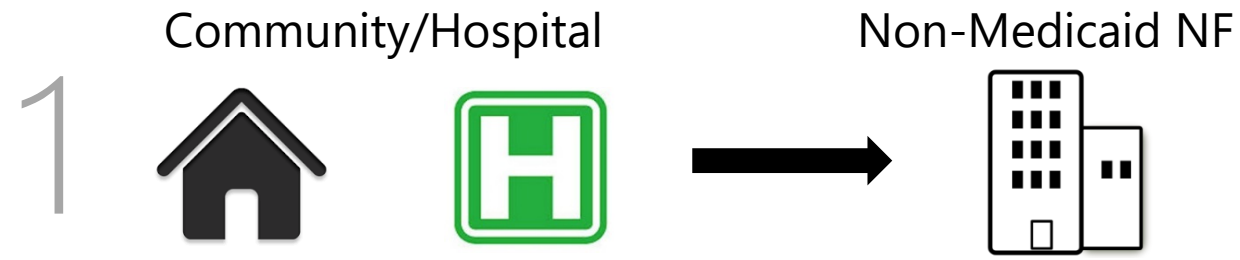
Level II Evaluation

- When initial screening yields a positive result a comprehensive and individualized evaluation is conducted
- Confirms or disconfirms a PASRR condition
- Conducted by Ascend for MHAS and the County Boards of DD for DoDD

Level I Screening

- Broad screening designed to identify the suspicion or diagnosis of an SMI and/or DD
- Must be submitted via Healthcare Electronic Notification Systems (HENS) for every individual seeking admission to a Medicaid certified NF before admission to the NF
- Applies to every admission to every Medicaid certified NF
- The level I screen should yield a positive result if the individual has indications or a diagnosis of an SMI and/or DD
- Usually administered by:
 - Hospital Discharge Planners or
 - Nursing facility social workers

Level I - Not Required



Level I Results

- Level I results determine whether an individual is subject to a level II evaluation
- Individuals with:
 - » **No** indications of SMI and/or DD are not subject to further review
 - » Indications of **SMI** are subject to further review by OhioMHAS
 - » Indications of **DD** are subject to further review by DODD
 - » Indications of **SMI and DD** are subject to further review by **both** OhioMHAS and DODD
 - » Individuals over the age of 22 who have previously been ruled out by DODD are not subject to further review

PASRR Categorical Determinations

Determination which may be made for an individual with SMI and/or DD without a full Level II evaluation when there is sufficient documentation that the individual meets one of the criteria below:

Emergency Nursing Facility Stay

Admission of an individual to a nursing facility for a period not to exceed seven (7) days. The definition for this criteria has been revised in 5160-3-15.0

Respite Nursing Facility Stay

Admission of an individual to a nursing facility for a maximum of fourteen (14) days in order to provide respite to in-home caregivers to whom the individual is expected to return following the brief respite stay

- A level I screening is required for categorical determinations
- An individual requesting a categorical determination **MUST NOT** be admitted into the NF, until the NF receives a determination from the appropriate level II entity
- Time limited- A NF stay longer than the specified time limit for the category requires a RR in order to continue to meet PASRR requirements

Hospital Exemption

- Only exemption that bypasses the federal and state PASRR requirement that requires that a PAS be conducted prior to a NF admission
- Time limited – 30 calendar days
- Applies when the:

Individual is admitted to NF directly from an Ohio hospital (non-psychiatric) after receiving acute inpatient care

or

Ohio resident is admitted to NF directly from out-of-state hospital (non-psychiatric) after receiving acute inpatient care



The individual requires level of services provided by a nursing facility **for the condition for which they were treated in the hospital**



The attending physician provides written certification that individual is likely to require the level of services provided by a nursing facility for **less than thirty (30) days**

Resident Review

- NFs are prohibited from retaining residents with SMI or DD unless a thorough evaluation indicates that such an admission is appropriate and adequate services can be provided
- A resident review is required when there is a significant change in condition to ensure that NF residents total needs are met
- Resident reviews are required to identify changes in LTSS needs; recommend community alternatives to continued stays in NFs; and coordinate transition planning back to the community

Resident Review

- The NF is required to initiate a resident review for those individuals who are:
 - » Admitted under the Hospital Exemption criteria and **found to require more than 30 days of service in the facility**
 - » Transferring to a new facility or being readmitted to the same nursing facility after an intervening hospital stay for psychiatric treatment
 - » Experiencing a **significant change in condition**
 - » Admitted under a categorical determination (emergency or respite stay) and **is found to require a stay in the nursing facility longer than the specified time limit for that category**
 - » Received a level II or level II resident review determination for a specified period and **has since been found to require a stay in a nursing facility exceeding the period**

PASRR Unspecified and Specified Determinations

- OhioMHAS and DODD may approve a determination for an **unspecified** or **specified** period
 - » A specified period may not exceed 180 days

- If an individual was admitted for a specified time and it's determined that they will require longer stay than the specified time period, an extension request to the original **specified** period can be requested
 - » Extensions shall not exceed 90 days
 - » Nursing facilities shall initiate a resident review in HENS at least 30 days prior to the expiration of the determination in order to receive consideration for an extension

Timeframe for PASRR

- Level II preadmission evaluations must be completed within an annual average of 7 to 9 working days of referral by the entity that performs the level I identification screen
- PASRR is a recurrent process while the resident is in a nursing facility
- The definitive end point for the PASRR process is when the individual is discharged from the facility

Federal Financial Participation (FFP)

- Federal regulations states that when a preadmission screening (PAS) has not been performed prior to admission, FFP is available only for services furnished after the screening or review has been performed
- The NF is responsible for ensuring every resident has met and continues to meet PASRR requirements to avoid post payment recoupment

Helpful Contacts

- Direct any PASRR and level of care policy and procedure questions or compliance issues to ODM at PASRR@medicaid.ohio.gov
- Nursing Facilities should direct **HENS system** questions to the PASSPORT Administrative Agencies (PAAs)
- Technical issues with HENS should be directed to ODA_ISD_Helpdesk@age.ohio.gov

PASRR Resources

- HENS User Guides:

<https://www.hens.age.ohio.gov/Tutorials.aspx>

- Nursing Facility Admissions: Most Common Scenarios for Preadmission Screening and Resident Review (PASRR) and Level of Care (LOC) Reference Sheet:

<https://medicaid.ohio.gov/static/Providers/ProviderTypes/LongTermCare/IICF/MostCommonScenarios.pdf>

