

# *Colorado Pre-Admission Screening and Resident Review*

*A "Nuts and Bolts"  
Program Overview  
PASRR session  
January 2015*



Hosted by the Colorado Health Care Association



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# *PASRR History & Overview*

*PASRR is a federal requirement designed to ensure individuals are not inappropriately placed in nursing homes for long term care.*

## PASRR Requirements:

- 1) all applicants to a Medicaid-Certified nursing facility must be evaluated for mental illness and/or intellectual disability;
- 2) Individuals be offered the most appropriate setting for their needs (in the community, a nursing facility, or acute care settings);
- 3) PASRR individuals receive the services they need in those settings



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# PASRR History & Overview

- PASRR - Social Security Law
  - The preadmission screening and resident review program erected from the Omnibus Budget Reconciliation Act of 1987 (OBRA) under the Social Security Act as the governing rule.
  - Federal 'watchdog' - Department Of Justice
- PASRR - CMS
  - Today the PASRR program is managed under authority of the federal Centers for Medicare and Medicaid.
  - States that participate in Medicaid must operate the federal PASRR program as a requirement of the Medicaid state plan



# *PASRR Responsibility operations & state agency authority*

- Operations: State Medicaid Agency (SMA) – **HCPF**  
The State Medicaid Agency has ultimate responsibility for PASRR program
  - ✓ Legal Responsibility to operate a PASRR program
  - ✓ Financial Responsibility
    - ❖ Reporting
    - ❖ Tracking
- PASRR Evaluation and Determination Authority
  - ✓ Mental Illness: State Mental Health Authority (**SMHA**)
  - ✓ Intellectual Disability: State Intellectual Disability Authority (**SIDA**)
  - ✓ PASRR final approval for NF care and service determinations

**Determinations made by Level II authorities cannot be countermanded by SMA**

*PASRR In Plain English*



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# *PASRR Responsibility operations & state agency authority*

- "LEVEL I SCREEN." SMA
  - PASRR process requires that all applicants to Medicaid-certified Nursing Facilities be given a preliminary assessment to determine whether they *might* have Mental Illness or Mental Retardation (Intellectual Disability).
- "LEVEL II" SMHA/SIDA
  - Individuals who test positive at Level I are then evaluated in depth.
- DETERMINATION LETTER SMHA/SIDA
  - Outcomes of a Level II evaluation result in a determination of need, determination of appropriate setting, and a set of recommendations for services to inform the individual's person centered plan of care.



# ***PASRR Responsibility operations & state agency authority***

*State PASRR program operations must meet all CMS requirements*

- **LEVEL I EVALUATION - completed by referral source**
  - *State Medicaid Agency is responsible for Level I identification process*
- **LEVEL II EVALUATION - completed by Level II evaluators**
  - *State Mental Health Authority (**SMHA**) and State Intellectual Disability Authority (**SIDA**)*
  - ***Upon completion, Determination Letters are distributed by the SMA or designee***
- **RESIDENT REVIEW – completed by OBRA/SIDA**
  - *Nursing Facility is required by RESIDENT ASSESSMENT to Report Resident Reviews*



# PASRR Level I

## State Medicaid Agency: SMA

### FACTS about the PASRR Level I review

- The PASRR Level I is a preliminary screening tool
- *The Level I **process** should identify all individuals who are "suspected of having" a PASRR disability per 42 CFR 483.128(a).*
- Level I should be relatively quick and is supposed to be a " cursory review" to decide whether to refer for Level II.
- If CMS determines Level I 'tool' is inadequate the state might be in violation of its obligation.



# PASRR Level I

## State Medicaid Agency: SMA

- LEVEL I is **NEGATIVE** = Level I form accompanies admission
  - Nursing Facility must retain original PASRR in resident record (chart)
- LEVEL I is **Positive**= *TRIGGER*
  - Colorado PASRR refers to 'positive' as a trigger
  - A Trigger results in Clinical Review
    - PASRR 1.5 (Clinical Review)
      - When an individual has a positive TRIGGER, a State Reviewer/Clinician evaluates the record to determine if there IS or IS NOT a PASRR condition "disability"
      - OBRA Authorization signed by a qualified PASRR clinician SIDA
      - Nursing Facility must retain in record



# PASRR Level I

## State Medicaid Agency: SMA

### PREADMISSION SCREEN ADVANCED GROUP AUTHORIZATION

- PASRR Level I OBRA/SIDA Authorization Outcomes:
  - **Approved NO MI/ID** = positive trigger was reviewed and individual is determined to have no suspicion of MI/ID
  - **Approved 'TIME LIMITED'** = Individual has triggers, nursing facility can admit meeting certain time limited criteria and must be reassessed for suspicion of PASRR if individual remains in NF post time limited approval (*nursing facility responsible for follow up*).
  - **Refer for LEVEL II** = Full Level II evaluation and determination *required* prior to admitting to facility or upon status change



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Preadmission Screen Advanced Group Authorization  
(OBRA or SIDD Authority use only)



PATIENT: First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

DOB \_\_\_\_\_

SS#: \_\_\_\_\_

Medicare  Medicaid  Medicaid Pending  Private Pay  Private Insurance  Hospice  PACE  Other \_\_\_\_\_

PASRR Evaluator: \_\_\_\_\_

Nursing Facility: \_\_\_\_\_

Referral Source: \_\_\_\_\_  
Hospital, skilled nursing facility, SEP, Hospice Fax number

Trigger for Preadmission Level II referral

- Serious Symptoms
- Diagnosis of MMI (and/or depression)
- Diagnosis of IDD

\_\_\_\_\_  
Current location if different than above

I. Diagnosis of Mental Illness:

- Anxiety Disorder (SEVERE Only)
- Bipolar Disorder
- Delusional Disorder NOS
- Depressive Disorder (any depressions other than major depression) (GDS Score \_\_\_\_\_)
- Major Depression
- Personality Disorder
- Psychotic Disorder NOS

- Panic Disorder
- Paranoid Disorder
- Schizoaffective Disorder
- Schizophrenia
- Somatoform Disorder
- Other: \_\_\_\_\_

# PASRR Level I

## State Medicaid Agency: SMA



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[www.colorado.gov/hcpf](http://www.colorado.gov/hcpf)

- For Our Providers
- Get Info Facts and More
- Pre-Admission Screening and Resident Review Program
- PASRR Level I Paper Form for Referral Use



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# PASRR Level I

## Post Admission Level I update: SMHA

*Intended to maintain current and accurate PASRR*

- ONE TWO-SIDED paper document
- Update as necessary for ANY change or deviation from original
- Change of Status (within 14 days)
- Retained in the residents' medical record
- Precedes Status Change Review (if warranted)
  - *Reason for update and OBRA questions must be answered*
- Must be signed and dated by NF staff



# PASRR Level I

## Post Admission Level I update: SMHA

- Resident Demographics
- New Diagnosis
  - Includes anxiety, panic disorder, somatoform, personality disorders not previously screened*
- New Discovery of Intellectual Disability
- Psychotropic medications given on a regular basis
- New or worsened symptoms
- Reason for update
- Has OBRA has been contacted



# PASRR Level I

## Post Admission Level I update: SMHA

*Reasons for Update Informs Nursing Facility Action*

- Reasons that DO NOT indicate contacting OBRA
  - Admitted without required PAS*
  - Incorrect PAS (nursing facility placement change or medication change)*
- Reasons Nursing Facility would contact OBRA
  - New or Worsened Serious Symptom
  - New Diagnosis indicated by Section I
  - Psychiatric meds for dementia not on, or over BEERS list
  - New category of psychiatric medication
  - Expiration of “time limited approval”





**Colorado PAS Review**  
**PASRR Post-Admission Level I update**  
**(For Facility Use Only)**

**Resident:** First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

**DOB:** \_\_\_\_\_ **Medicaid #:** \_\_\_\_\_ **SS#:** \_\_\_\_\_

**Is there a time limited approval? Select:**  Yes  No  
 Hospital Exemption  60-Day Convalescent  Hospice  30 day PACE Respite

**Assessor**  
(person completing form): \_\_\_\_\_

**Source of Information**  
(MDS, Care Conference, etc) \_\_\_\_\_

**I. New Diagnosis of Mental Illness:**

- |   |   |
|---|---|
| <input type="checkbox"/> Anxiety Disorder (Severe ONLY) | <input type="checkbox"/> Panic Disorder           |
| <input type="checkbox"/> Bipolar Disorder               | <input type="checkbox"/> Paranoid Disorder        |
| <input type="checkbox"/> Depression Mild or Situational | <input type="checkbox"/> Schizoaffective Disorder |
| GDS Score _____   | <input type="checkbox"/> Schizophrenia            |
| <input type="checkbox"/> Major Depression               | <input type="checkbox"/> Somatoform Disorder      |
| <input type="checkbox"/> Personality Disorder           | <input type="checkbox"/> Other: _____             |
| <input type="checkbox"/> Psychotic Disorder NOS         | <input type="checkbox"/> None                     |

**II. New Diagnosis of Dementia/Organic Condition:**

- |  |                                       |
|--|---------------------------------------|
| <input type="checkbox"/> Dementia            | <input type="checkbox"/> Unknown      |
| <input type="checkbox"/> Alzheimer's disease | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> None                |                                       |

# PASRR Level I Post Admission

## VI. Reason for Updated Level I

Section VI Reason for update must be answered

Admitted without required PAS

Incorrect or missing PAS

New or worsened Serious Symptoms

New diagnosis identified in Section I.

Psychiatric meds for Dementia not on or over the Beer's list

New category of psychiatric meds started for non-organic condition

Expiration of time limited approval



Tip

Nursing Facilities must contact OBRA for Any Selections that apply EXCEPT:  
Incorrect or missing PAS  
Admitted without PAS

# PASRR Level I post admission

Have you contacted your OBRA Coordinator?

- Yes. Date: \_\_\_\_\_
  - OBRA indicated no further action needed
  - OBRA has referred resident for Status Change/Level II Evaluation
- No. Provide additional information if checked:

Nursing Facility must indicate if the OBRA coordinator has been contacted as a result of this PASRR review



Nursing Facility staff signature indicates PASRR review complete



PASRR Assessors' Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# BREAK



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# PASRR Resident Review (Status Change Review)

- PASRR Level II –State Mental Health Authority
- PASRR Level II –State Intellectual Disability Authority
- Resident Review *ensures individuals' needs are met*
- SMHA/SIDA retain authority over criteria used in evaluating Resident Review
  - OBRAs conduct a 1.5 review to determine PASRR condition
- SMA oversight ensures operations are compliant
- Best Practice produces false positives



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Source: PASRR Technical Assistance Center

# PASRR Resident Review (Status Change Review)

## Intent:

- Stronger identification of PASRR triggers
- Clearly identifies date of compliance
- Incorporates all federally required diagnoses
- Triggers more closely align with those identified on the Level I update (“PAL”)



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# PASRR Resident Review (Status Change Review)

- Providing Information to the OBRA:
  - OBRA coordinator determines method for information sharing (phone, fax, secure email)
  - OBRA coordinator determines what information is necessary to conduct a Resident Review/Status Change
  - Once OBRA coordinator has all the information they required from the SNF; OBRA coordinator has 3 business to complete the review.



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# PASRR -Diagnosis and Triggers

Resident Review/Status Change (forms dated  
11/01/2014 on bottom)

## Key Points:

- OBRAAs perform a clinical review of the individual based on information received by the NF.
- An OBRA review uses clinical judgment, and any combination of signs/symptoms to assess a case.
- Doubling of antidepressant is no longer a trigger
- Psychiatric Hospitalizations have been added.



# PASRR -Diagnosis and Triggers

## Overview OBRA Training

### Diagnosis of Mental Illness

- New Diagnosis: anxiety, personality disorder, panic disorder and somatoform need to be considered through the same clinical lens.
- OBRA's job is to substantiate any changes.
- SNF job is to reconcile any differences in the medical record using information from OBRA.
  - Weeding out inconsistencies between medical record and Level I
  - Requirement that information on Level I is current & accurate

Office Of Behavioral Health  
OFFICE OF BEHAVIORAL HEALTH



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# PASRR -Diagnosis and Triggers

## Overview OBRA Training

### Diagnosis of Organic Condition

- Form provides opportunity to clarify organic conditions that impact a persons presentation

### Psychotropic Medications

- Monitoring medication is important to assessing extenuating circumstances that could be impacting the persons presentation and behaviors
  - Pay attention to the dosages of medications
  - Be sure to use diagnoses and not just list symptoms of diagnosis



# PASRR -Diagnosis and Triggers

## Overview OBRA Training

### OBRA OUTCOMES

Determination of the outcome depends on OBRA's findings.

Approved, NO MMI

No more action is required

Approved with follow up next quarter

Burden to follow up is on Nursing Facility

Status Change, Approved MMI

Previous Level II completed and NO-NEW level II at this time



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# PASRR -Diagnosis and Triggers

## Overview OBRA Training

OBRA OUTCOMES continued:

Refer for Level II

- MMI transition to primary diagnosis of dementia

NEW MMI

- Substantial change from previous Level II
- Substantial deterioration in level of functioning  
NOT due to organic or physical/medical condition



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# PASRR -Diagnosis and Triggers

## Overview OBRA Training

- Determinations of outcome depends on OBRA findings:
  - Approved, NO MMI
    - NO MORE ACTION REQUIRED
  - Approved with follow up next quarter
    - Burdon to follow up is on Nursing Facility
  - Status Change, Approved MMI
  - Previous Level II
    - No New LEVEL II required at this time



# PASRR -Diagnosis and Triggers

## Overview OBRA Training

Resident Review- OBRA indication of noncompliance

- Status Change
  - Failure of SNF to refer for status change within 14 days
  - Failure of SNF to provide necessary information (timely)
- Pre-Admission Screen (PAS)
  - Original PAS does not indicate triggers, where clearly noted
  - Person admitted without PAS



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# PASRR -Diagnosis and Triggers

## Overview OBRA Training

### OBRA review completion

- OBRA will send the signed and completed NEW Resident Review/Status Change form to the Nursing Facility to maintain in the record.
- OBRA will keep a copy for the Mental Health Center's OBRA-PASRR office.



# PASRR -Diagnosis and Triggers Overview OBRA Training

## *Severe Anxiety* –

- Added to list of triggers in early 2014
- If diagnosis captured and screened on PAS, no need for review\*
- If not captured on PAS, needs reviewed for severity & need for treatment. \*



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**PASRR Resident Review/Status Change**  
**(Authorized CMHC Use Only)**

**PATIENT:** First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

**DOB** \_\_\_\_\_ **Medicaid # (or PP)** \_\_\_\_\_ **SS#:** \_\_\_\_\_

**Payment Method:**  Medicaid  Medicaid Pending  Other (PP/Medicare)  Hospice  PACE  30 day PACE Respite

**PASRR Evaluator:** \_\_\_\_\_

**Nursing Facility:** \_\_\_\_\_

**Source of Information:** \_\_\_\_\_

MDS, Routine Assessment, etc.

**Trigger for Status Change**

- |   |   |
|---|---|
| <input type="checkbox"/> New or worsened Serious Symptoms                   | <input type="checkbox"/> New category of psychiatric medication started |
| <input type="checkbox"/> New diagnosis of MMI (and/or depression)           | <input type="checkbox"/> Significant improvement in condition           |
| <input type="checkbox"/> Psychiatric meds for Dementia over the Beer's list | <input type="checkbox"/> Expiration of time limited approval            |

**I. Diagnosis of Mental Illness:**

- |  |  |
|--|--|
| <input type="checkbox"/> Anxiety Disorder (SEVERE Only)                                    | <input type="checkbox"/> Panic Disorder                  |
| <input type="checkbox"/> <b>Bipolar Disorder</b>   | <input type="checkbox"/> <b>Paranoid Disorder</b>        |
| <input type="checkbox"/> <b>Delusional Disorder NOS</b>                                    | <input type="checkbox"/> <b>Schizoaffective Disorder</b> |
| <input type="checkbox"/> Depressive Disorder (any depressions other than major depression) | <input type="checkbox"/> <b>Schizophrenia</b>            |
|  | <input type="checkbox"/> Somatoform Disorder             |

# PASRR Resident Review/Status Change

**OUTCOME:**

- Approved, no MMI (no Level II required)
- Approved with follow up next quarter (does not require Level II)
- Status Change, Approved MMI (does not require new Level II)
- Refer for Level II (Level II attached to this document)

← OBRA review will determine OUTCOME

**REASON FOR OUTCOME AND ANY IDENTIFIED NON-COMPLIANCE:**



**SEPs – If OBRA indicates COMPLIANCE the date used for PASRR approval is the date of the original Level I**

- OBRA INDICATED COMPLIANCE
- OBRA INDICATED NON-COMPLIANCE DUE TO:     Status Change     PAS

If non-compliant, PASRR Compliance/Effective Date: \_\_\_\_\_

← If non-compliance is indicated the EFFECTIVE DATE OBRA fills in is the date of PASRR approval

CMHC/PASRR Evaluator: \_\_\_\_\_

↑  
**OBRA MUST SIGN**

Date: \_\_\_\_\_



# BREAK



# *Colorado PASRR FACTS*

## *Questions and Answers Session*

1. Nursing Home bears final responsibility for Level I **accuracy**
2. “Emergency” admits are not exempted from preadmission screening (*emergency means immediate placement for life safety*)
3. OIG recognizes hospital discharge planners /NF to conduct PAS
  1. Parties need to cooperate at the local community level to achieve smooth PAS process
4. Readmissions within 30days are subject to a Resident Review
  1. Level I update is appropriate for completion
5. Nursing Facility transfers with or without hospitalization are subject to Resident Review
  - Includes facility specific Level II Determination Letters



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# *Colorado PASRR FACTS*

## *Questions and Answers Session*

1. Hospital Exemption is the only true PASRR exemption
2. Time Limited categories are not exemptions
  1. Nursing Facility is responsible to contact OBRA timely for expirations of PASRR
3. HCBS respite DOES NOT REQUIRE PASRR (not a NF admission)
4. PACE RESPITE to LTC requires contacting OBRA for RR if applicable
5. HCBS respite to LTC requires Level I completion by SEP



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# *Colorado PASRR FACTS*

## *Questions and Answers Session*

1. PASRR Resident Review: The state must periodically review the MI/ID status of NF residents. (MDS)
2. Resident Reviews/Status Change must be referred when there is a change or suspected change as indicated by  
*Post Admission Level I update (PAL)*
  1. SEPs may require NF to contact OBRA for RR prior to approval
  1. Resident Reviews/Status Change must be completed by a state approved reviewer (Colorado OBRA or OBRA coordinator/SIDA)
  2. Nursing facility to Nursing facility transfer only needs a Post-Admission Level I (new Triggers?: send to OBRA)



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# Colorado PASRR FACTS

## Questions and Answers Session

1. What will SEPs do if there is a discrepancy?
  1. SEPs will refer NF to OBRA and follow RR/SC form
2. Is a new Level I needed if meds change before discharge?
  1. A Level I update after admission is appropriate in this case.
  2. OBRA will need to be contacted only if indicated by Reason for Update
  3. Notify state Medicaid Agency if there is a recurrent issue.
3. Does a follow up next quarter outcome require RR/SC
  1. Yes- follow up next quarter is a time limited approval



# PASRR Quality Monitoring

- Quality Monitoring in PASRR is coming...
  - Improves outcomes for individuals
    - Placement options and review of services for Level II
  - Supports effective and efficient process
    - Identifies non-compliance or needed improvement
  - Likely to follow NF(QIS) and HCBS(QIS)
  - Some states already using MDS data to shape their monitoring program and required reporting



# PASRR Quality Monitoring

## Quality Monitoring in PASRR–Data elements

- Informative Examples
- Level I – Number of completed Level I
- Level I -- # and percent of positives
- Level II -- # and percent of positives that result in Level II
- Level II -- # and percent of positive Level II
- Resident Review – Number of Resident Reviews
- Average length of time in days to complete reviews
- Number and percent of PASRR placements in the community



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# PASRR Quality Monitoring

- Quality Monitoring in PASRR is coming...
  - Improves outcomes for individuals
    - Placement options and review of services for Level II
  - Supports effective and efficient process
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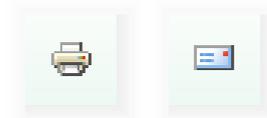
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Subject / Topic




Resource	Type	Published
<a href="#">What is considered a "significant change in condition?"</a>	FAQ	July 23, 2013
<a href="#">Can nursing facilities perform a level II pre-admission screen or resident review?</a>	FAQ	August 10, 2011
<a href="#">How quickly must resident reviews be completed?</a>	FAQ	August 10, 2011
<a href="#">If the answer to MDS 3.0 Question A1500 is "yes," and the individual has undergone a significant change in condition, should the nursing home always contact the SMHA/SIDA?</a>	FAQ	January 25, 2011
<a href="#">What is the relationship between PASRR and MDS 3.0?</a>	FAQ	January 25, 2011
<a href="#">Must PASRR be completed each year for M/ID residents, as originally specified in 42 CFR 483.100-138?</a>	FAQ	June 15, 2010



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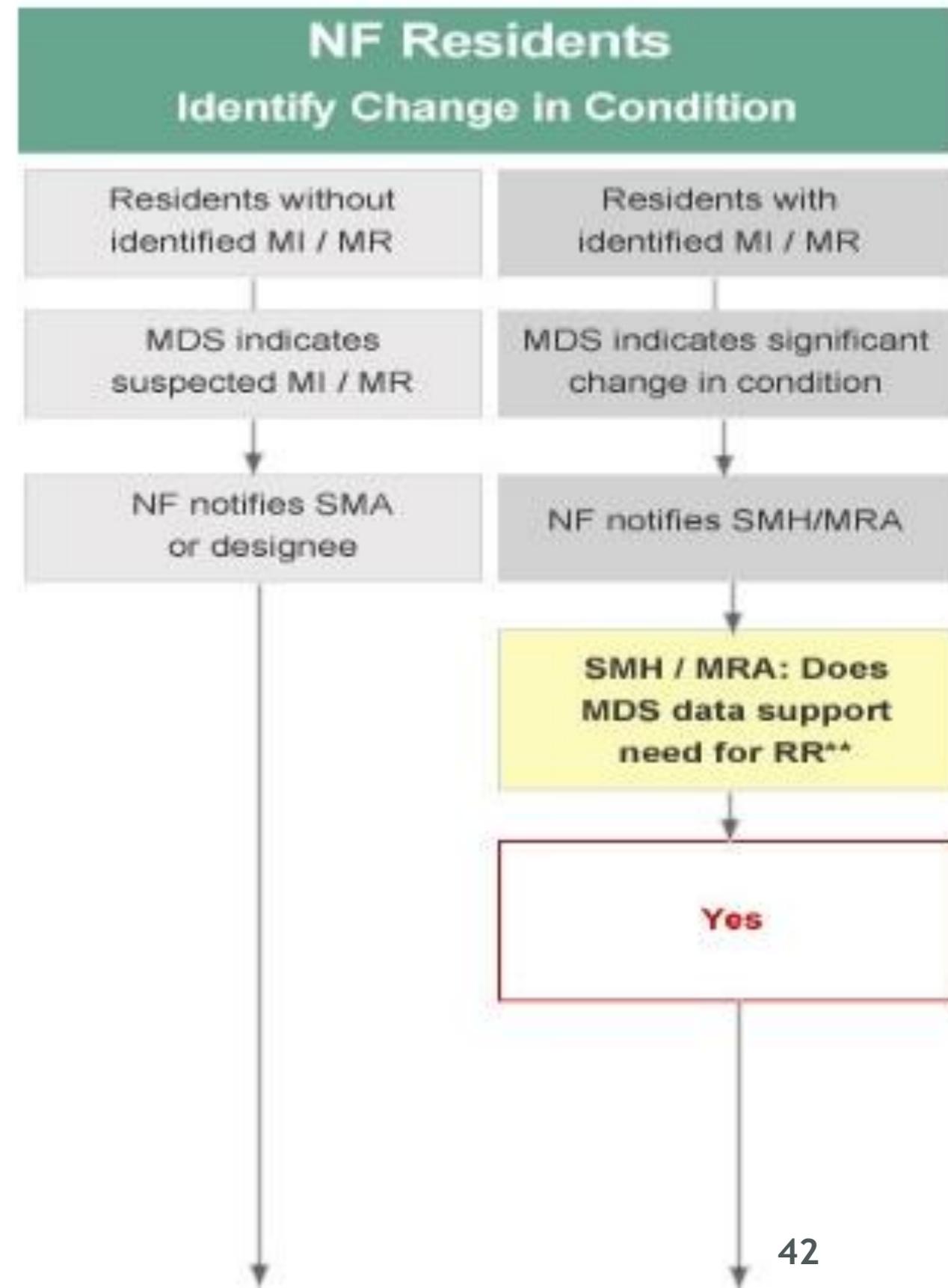
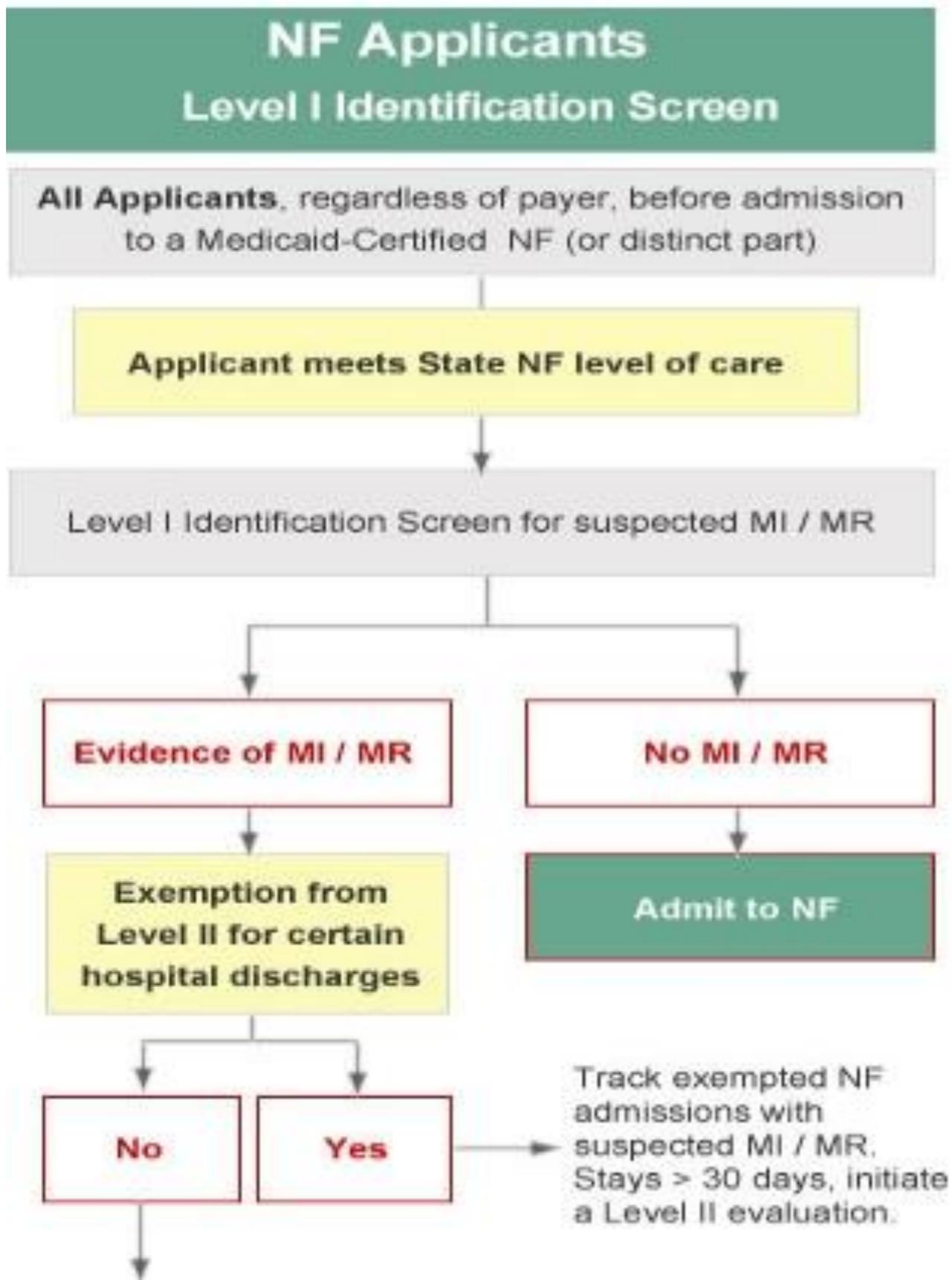
**UPCOMING: Innovations from Ohio: Recovery Requires a Community**  
[Webinar](#) June 10, 2014

**Webinar Assistance and FAQs**  
[Webinar](#) May 13, 2014

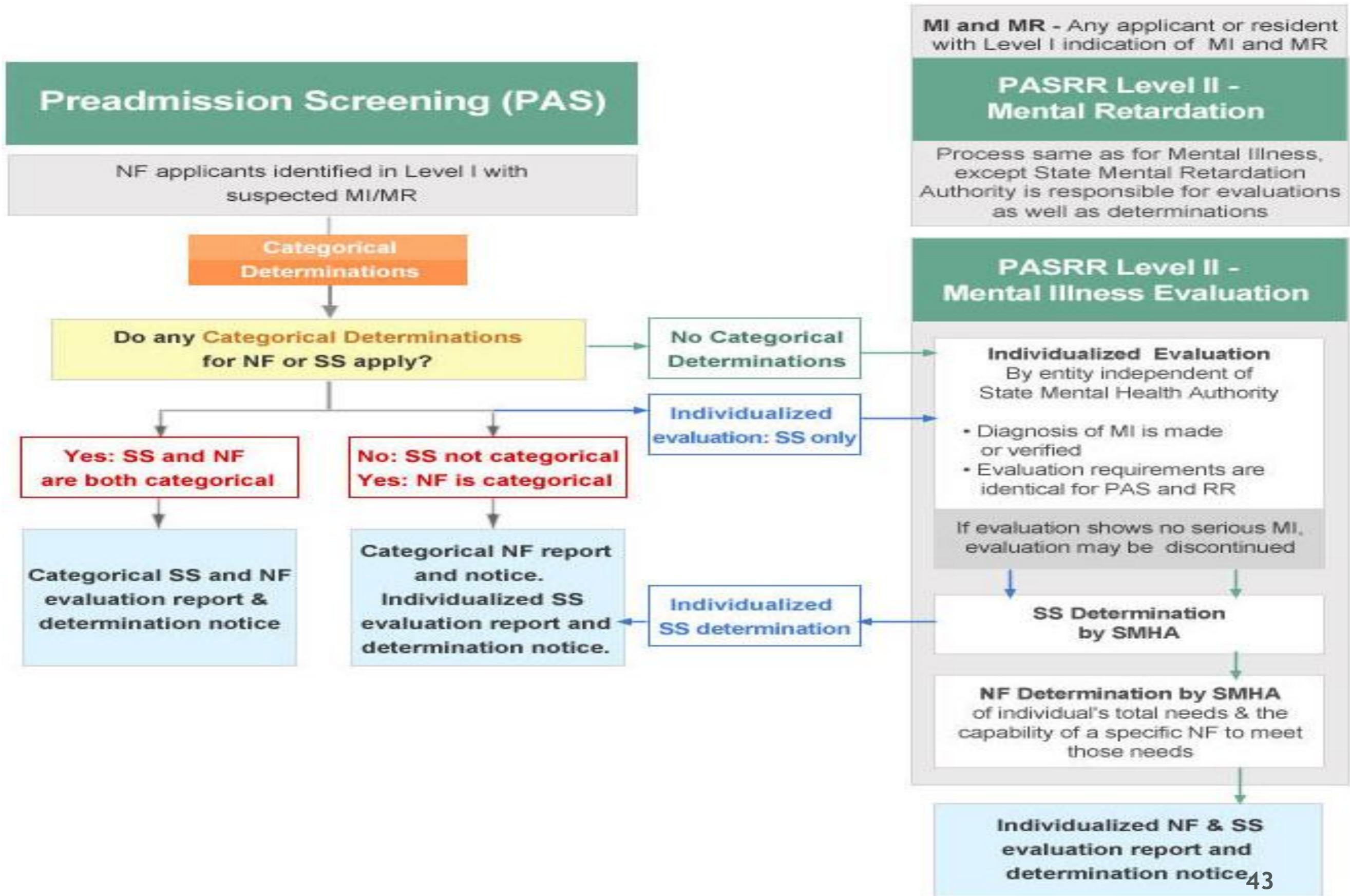
**Canceled: May 2014 PASRR Webinar**  
[Webinar](#) May 13, 2014

**NEW: Promising PASRR Practices: Arkansas and Indiana**  
[Webinar](#) April 8, 2014

# Level I flowchart PTAC

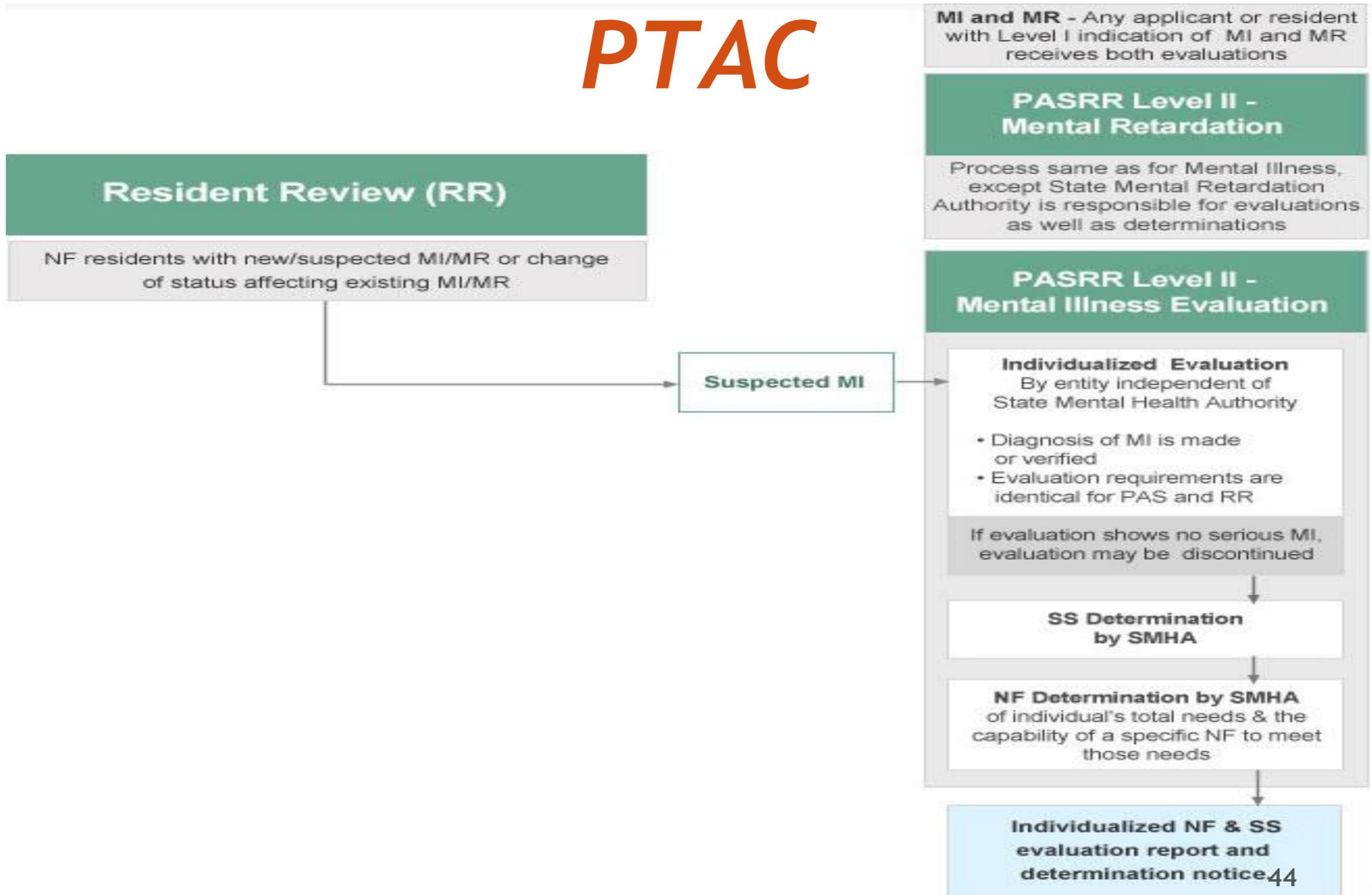


# Level II Flowchart PTAC



# Resident Review Flowchart

## PTAC



# PASRR Contacts

- State Program Authorities

- **Casey Dills O'Donnell**

State PASRR program administrator

303-866-2148/ [Casey.Dills@state.co.us](mailto:Casey.Dills@state.co.us)

- **Ann Seanor**

State Mental Health Authority

303-866-7143/303-895-0790 [Ann.Seanor@state.co.us](mailto:Ann.Seanor@state.co.us)

- **Barb Rydell**

State Intellectual Disability Authority

303-866-5157 [Barbara.Rydell@state.co.us](mailto:Barbara.Rydell@state.co.us)

[pasrr@state.co.us](mailto:pasrr@state.co.us)



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# *Questions or Concerns?*



*Thank You!*



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