Transition to Community Living Initiative Diversion Process PASRR Manual for Adult Care Homes Licensed Under GS 131D – 2.4

Presenters: Johnnie McManus, PASRR Coordinator
Pre-Admission Screening and Resident Review (PASRR) became effective January 1989 as a result of the Omnibus Budget Reconciliation Act (OBRA) or 1987 (P.L. 100-203).

This section of OBRA was enacted to assure that individuals with Serious Mental Illness or Severe and Persistent Mental Illness (SMI/SPMI), Intellectual or Developmental Disabilities (I/DD), and/or Conditions Related (RC) to Developmental Disabilities entering or residing in Medicaid-certified nursing facilities receive appropriate placement and services.

North Carolina chose the Medicaid Uniform Screening Tool (MUST) to conduct Level I PASRR screenings for admission to adult care homes as a result of the US Department of Justice (DOJ) Settlement in 2012.
The State of North Carolina entered into an agreement with the United States Department of Justice (USDOJ) on August 23, 2012. The agreement is known as the Transition to Community Living (TCL) Initiative. The purpose of this agreement is to assure that individuals with serious mental illness are presented with the full range of options available to reside within their communities in the least restrictive settings of their choice. The agreement is the end result of over a year of negotiations between the State and the USDOJ. The action was initiated by Disability Rights of North Carolina in 2010, and again in a findings letter from USDOJ on July 28, 2011. Part of the agreement requires that individuals seeking admission to Adult Care Homes (ACHs) must first complete a pre-admission screening to determine if the individual has a Serious Mental Illness (SMI) or a Severe and Persistent Mental Illness (SPMI). The settlement agreement specifically states:

“Beginning January 1, 2013, the State will refine and implement tools and training to ensure that when any individual is being considered for admission to an adult care home, the State shall arrange for a determination, by an independent screener, of whether the individual has SMI.”
Background

• In order to comply with the settlement regarding pre-admission screening, the Division of Medical Assistance (DMA) revised Clinical Coverage Policy 3L – Personal Care Services to read:

• “Effective January 1, 2013, all Medicaid beneficiaries referred to or seeking admission to Adult Care Homes licensed under G.S. 131D-2.4 must be screened through the Pre-admission Screening and Resident Review (PASRR). Adult Care Home providers licensed under G.S. 131D-2.4 shall not receive PCS (Personal Care Services) prior approval without verification of an ACH PASRR number.”

• Adult Care Homes are residences for the aged and disabled adults who require twenty-four (24) hour supervision and assistance with personal care needs.
Important Changes in the PASRR Process Effective March 8, 2015

• Beginning on March 8, 2015, there are several new changes that affect PASRR determinations for Medicaid-eligible individuals with Serious Mental Illness (SMI) or Severe and Persistent Mental Illness (SPMI) seeking admission to family care homes or adult care homes licensed under GS § 131D-2.4. The following changes will take place:

• As part of the Level II Assessment process, the evaluators will be providing Community Living Options Counseling and completing the Community Integration Plan.

• A substance abuse assessment has been incorporated into the comprehensive clinical assessment (CCA).

• A person’s PASRR number does not expire as long as there is no change in the person’s status.

• Two new codes have been added:
  – T – Terminal: This is a time-limited code that expires after six (6) months which is used for individuals who are terminally ill. If continued support is needed after six (6) months, the person has to be re-certified through the PASRR process.
  – P – Private Pay: This code identifies that the individual is not Medicaid-eligible and does not need to go through the PASRR determination process.
The ACH/PASRR Process Overview

The ACH PASRR is potentially a two-step process for all Medicaid-eligible individuals who request admission to a licensed ACH.

The first step is the completion of the Level I PASRR Screen designed to quickly identify (“pre-screen”) for indicators of SMI/SPMI.

When indicators are found, the second step is to complete the Level II Assessment process to determine level of care, diagnoses, service eligibility, and other clinical needs. If no indicators of SMI or SPMI are found as a result of the Level I PASRR, the individual will receive a PASRR number and is free to choose admission to an ACH, without moving to step two, the Level II Assessment. No further evaluation is needed.
The ACH/PASRR Process Overview

Level I Preadmission Screening and Resident Review (PASRR) Process

Who Is Subject to Level I PASRR Screens?

- All Medicaid-eligible individuals wishing to be admitted to an Adult Care Home licensed under G.S. 131D-2.4, must be screened through the Level I PASRR process.

- If the admission was before January 1, 2013, no PASRR is required, even if the individual subsequently becomes Medicaid-eligible and remains in the same ACH setting; however, if there is a change in status or if the individual moves to another facility or requires Personal Care Services, a PASRR will be required.

- If an individual was admitted to an ACH as private pay after January 1, 2013 (the effective date of the USDOJ Settlement) and then becomes Medicaid-eligible, a PASRR is required in order for the ACH to receive an authorization to provide Personal Care Services.
Who Is Not Subject to Level I PASRR Screens?

- Individuals who were admitted to an ACH prior to January 1, 2013 and who do not meet one of the criteria above in the section, “Who Is Subject to Level I PASRR Screens.”
- Individuals who have private insurance or are private pay.
- Individuals who have had a previous PASRR for an ACH and enter a medical or psychiatric hospital, an acute or sub-acute rehabilitation facility, or a long term acute care hospital for medical or psychiatric treatment and who returns to the ACH after treatment. These individuals do not need an additional PASRR unless there has been a significant change in mental or medical status for an individual with SMI/SPMI.
The ACH/PASRR Process Overview

- Individuals requesting admission to an ACH within a Continuing Care Retirement Community (CCRC).
- Individuals who have requested to transfer from one ACH to another AND already have an ACH PASRR can transfer if they are medically and psychiatrically stable.

*If an individual transfers to a new ACH, the receiving facility is required to submit a NC Adult Care Tracking Form to DMH/DD/SAS.
What Is the Level I PASRR Screen?

The Level I or “identification screen” includes specific diagnostic, medical, functional, and behavioral health questions about an individual in order to identify persons who are potentially SMI/SPMI.
All referring agencies must ensure that a Level I PASRR screening is completed for any Medicaid-eligible individual requesting admission to an Adult Care Home licensed under G.S. 131D-2.4.

The following documents must be completed:

• DMA Adult Care Home FL-2 completed within 90 days
• Current history and physical within 90 days

The information outlined in the following section is obtained as part of the Level I PASRR screen.
A Level I PASRR screening form. The PASRR screen can be completed through the online NC Medicaid Uniform Screening Tool (NCMUST) [http://www.ncmust.com](http://www.ncmust.com). If a referral source has access, the PASRR screen may also be completed through Provider Link.

Neither the ACH provider nor any of its affiliates may complete the Level I PASRR screen; however, an ACH provider may utilize an independent screener to complete the Level I PASRR screen, including the designated personnel identified.

*Designated personnel are identified in slide 16 of this presentation.

After the independent screener has completed a manual copy of the Level I PASRR screening tool, the tool can be uploaded directly into NCMUST by the independent screener, by the ACH or sent to the designated staff at DMH/DD/SAS along with the supporting documentation to upload into NCMUST.
Information for Referring Agencies

After the independent screener has completed a manual copy of the Level I PASRR screening tool, the tool can be uploaded directly into NCMUST by the independent screener, by the ACH or sent to the designated staff at DMH/DD/SAS along with the supporting documentation to upload into NCMUST.
Who May Complete a Level I PASRR Screen?

- The Level I screen must be completed by an independent screener. An independent screener is someone who is not a legal representative of the individual and not employed or paid by, or affiliated with a licensed adult care home. Level I PASRR screens may be completed by:
  - Physicians
  - Physician Assistants
  - Family Nurse Practitioners, and other mid-level practitioners
  - RNs and LPNs
  - Medical/Clinical and non-licensed Social Workers
  - Qualified Mental Health Professionals
  - Psychologists
  - Pharmacists
Who May Not Complete a Level I PASRR Screen?

- Any person who is a legal representative for the individual requesting admission to an ACH
- Any person employed or paid by, or affiliated with any licensed adult care home

Getting Assistance with a Level I PASRR Screen

NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS) staff have been identified as Level I PASRR screeners, to assist in locating other Level I PASRR screeners and to provide technical assistance to screeners or physician’s offices with registering to become a screener. The following staff persons are available to assist:

- Barbara Flood – EAST – 919-218-3872, barbara.flood@dhhs.nc.gov
- Patricia McNear – CENTRAL – 919-218-3272, patricia.mcnear@dhhs.nc.gov
- Bill Joyce – WEST – 336-312-0212, bill.joyce@dhhs.nc.gov
The Level I screening is an online request which is completed once all the documentation listed below has been obtained.

The basic documentation needed for review by a Level I screener is:

- Signed Release of Information for the individual Level I screener and the DMA contractor
- Name, Email Address, and Phone Number of the person providing the information
- FL-2 completed within 90 days
- Physical Examination performed within 90 days
- Medication Administration Record (MAR) if the individual is in a licensed facility/list of medications if the individual is at home.
- Psychiatric Evaluation performed within 90 days (if available)
Level I Outcomes

A Level I determination can have one of two outcomes: “Negative for SMI/SPMI,” or “Referral for a face-to-face Level II Assessment.

Negative for SMI/SPMI

- There is no indication that the person has Severe Mental Illness or Severe and Persistent Mental Illness.
- A valid PASRR number will be assigned to the individual seeking admission, and all required notifications will be generated.
- This ends the screening process, and the individual may be admitted to an ACH if he or she chooses.

Referral for a Level II Evaluation

- There are indicators that the individual has SMI or SPMI and is being referred for a Comprehensive Clinical Assessment (CCA), and Community Integration Planning.
- The DMA contractor completes the CA process at the individual’s location.
Licensed Adult Care Home providers that want to proceed with the admission of a Medicaid-eligible individual should register with NCMUST in order to be able to check the status of a Level I PASRR screening for that individual.
PASRR Screening for an individual requesting admission to an ACH is accomplished through the online Medicaid Uniform Screening Tool (NCMUST). ACH providers who are not currently registered with NCMUST to review the status of a PASRR shall follow the steps below. Remember, no one employed by or affiliated with an ACH may complete a PASRR screen, but an ACH provider needs to be able to check the status of a screen for a potential resident.

To inquire about using the DHHS free web-based tool or for assistance in getting started, please refer to the NCMUST Getting Started page.

Representatives of an Adult Care Home who want to register in order to check the PASRR status of a person requesting admission may do so here: http://www.ncmust.com.
Level II Process

The Level II process includes all elements of the assessment needed to meet state guidelines for determining eligibility for mental health, intellectual/developmental disability and substance use services. It includes: a comprehensive clinical assessment (CCA), and completion of a community integration plan (CIP), each of which is described below.

The DMA contractor sends an evaluator to perform the Level II Assessment at the location where the individual is at the time of the referral.

If the individual is referred for a Comprehensive Clinical Assessment and Community Integration Planning, that documentation, which includes documentation that community living options counseling was provided, will need to be uploaded into NCMUST.
• The PASRR final determination is made by the DMH/DD/SAS Medical Director, including situations where the individual is found to be either medically or psychiatrically unstable. A letter of notification of the decision is generated by DMH/DD/SAS to reflect the final determination.

• When available documentation does not include evidence of which diagnosis is primary and/or a physician certification is not available, documentation may be requested and a record review will be conducted by DMH/DD/SAS.
When a PASRR number is generated, a corresponding authorization code is affixed.

The authorization code which appends the PASRR number denotes the level of care for which the applicant is approved.

<table>
<thead>
<tr>
<th>Codes for ACH</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>G</td>
<td>Dementia Primary (requires documentation see above)</td>
</tr>
<tr>
<td>K</td>
<td>Level II: Referral Notifications</td>
</tr>
<tr>
<td></td>
<td>Level II: Positive evidence of SMI/SPMI individual is medically and psychiatrically stable. This individual is being referred to the LME-MCO for community housing options and care coordination/informed choice. The individual may be served in several community settings.</td>
</tr>
<tr>
<td>U</td>
<td>Level II: Medically unstable – Individual has SMI/SPMI and is medically unstable; medical needs cannot be met in the ACH.</td>
</tr>
<tr>
<td>R</td>
<td>Level II: Psychiatrically unstable – Individual has SMI/SPMI and is psychiatrically unstable; behavioral health needs cannot be met in the ACH.</td>
</tr>
<tr>
<td>T</td>
<td>Time-Limited : 6 Months – Individual has terminal illness (requires MD Certification)</td>
</tr>
<tr>
<td>O</td>
<td>Level II: No evidence of SMI/SPMI after the evaluation</td>
</tr>
<tr>
<td>P</td>
<td>Cancelled : Private Pay</td>
</tr>
<tr>
<td>X</td>
<td>Cancelled (No longer seeking placement/Consent not granted)</td>
</tr>
</tbody>
</table>

A PASRR number will not have an expiration date unless there is a change in status.
How Long Is a PASRR Number Valid?

- Effective March 8, 2015, for individuals with no evidence or diagnosis of SMI/SPMI, the PASRR number remains valid with no expiration unless there is a change in the individual’s psychiatric or medical status. A change in status shall require a new PASRR.

- For individuals with a SMI/SPMI diagnosis who have chosen to live in an ACH, the PASRR number remains valid with no expiration, unless there is a change in psychiatric or medical status. Residents of ACHs who exhibit a significant change in mental health or medical symptoms or needs must be rescreened through the Level I process as a Status Change. A change in status can occur for individuals with newly-discovered diagnoses or symptoms of SMI or SPMI as well as those known to have a SMI or SPMI and whose related treatment or medical needs may have changed significantly.
Upcoming: Transition to Community Living Initiative Diversion Process PASRR Manual for Adult Care HomesLicensed Under GS 131D – 2.4