

STATE OF ALASKA DEPARTMENT OF HEALTH & SOCIAL SERVICES SENIOR AND DISABILITIES SERVICES POLICY & PROCEDURE MANUAL	SECTION: Nursing Facilities	NUMBER: 13 - 2	PAGE: 1 of 6
	SUBJECT: Pre-admission screening/resident review		
	APPROVED: /s/ Duane G. Mayes Duane G. Mayes, SDS Director		DATE: 12/13/16
	/s/ Randall P. Burns Randall P. Burns, DBH Director		12/14/16

Purpose

To delineate responsibilities for nursing facility preadmission screening and resident review for mental illness and/or intellectual disabilities or related conditions.

To determine appropriate placement and services for individuals with mental illness and/or intellectual disabilities or related conditions.

Policy

Senior and Disabilities Services (SDS) is required by federal regulation to administer the Preadmission Screening and Resident Review (PASRR) program to ensure that applicants for admission to, and residents of, Medicare/Medicaid-certified nursing facilities are placed appropriately and receive all necessary services while in residence. Prior to authorizing admission or continuing stay in a nursing facility, SDS determines whether an individual, regardless of the individual's source of payment, has a diagnosis of, or indicators of suspected, serious mental illness (MI) and/or suspected intellectual disabilities or a related condition (ID/RC). SDS provides technical assistance for the PASRR program.

In recognition of the urgency implicit in authorization requests for nursing facility services, the PASRR federal regulations address timeliness. Because nursing facility admission cannot be authorized until a PASRR Level I screening of an applicant has occurred, the parties involved in the process ensure that required forms are complete and are forwarded for review, along with all required documentation. Incomplete forms and documentation cause authorization decisions to be delayed until missing information is received by SDS.

PASRR includes a Level I screening and a Level II evaluation. The Level I screening form is submitted by an individual's attending physician or hospital discharge staff for initial admission, and by nursing facility staff for resident review. The completed Level I screening form must be submitted to SDS for every individual seeking admission to a nursing facility and for residents needing further evaluation under PASRR requirements. (For Medicaid recipients only, the form is sent with the request for authorization for nursing facility services.)

Individuals with a diagnosis of, or indicators of suspected, MI or ID/RC, are referred for a PASRR Level II evaluation to either the Division of Behavioral Health or to the SDS Intellectual and Developmental Disabilities (IDD) Unit, depending on diagnosis. Level II MI evaluations are made by mental health professional clinicians who are independent of the Division of Behavioral Health. Level II ID/RC evaluations are conducted by SDS employees who are qualified intellectual disability professionals.

The PASRR Level II evaluation confirms the diagnosis, and results in recommendations as to whether nursing facility placement is appropriate and whether specialized services are needed. SDS collaborates with the nursing facility to obtain appropriate specialized services.

Following the resident review process, nursing facilities submit a level I screening to SDS who determines whether or not a Level II evaluation is needed. If the information provided by the nursing

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facility indicates a need for a Level II evaluation, SDS requests a Level II evaluation by the Division of Behavioral Health or by the SDS IDD unit.

Authority

42 USC 1396r (b)(3)(E) - (F) Preadmission screening; 42 USC 1396r (e)(7) State requirements.
42 CFR 483.20 (e) Coordination; 42 CFR 483.100 – 483.138 Preadmission screening and annual review.
7 AAC 140.500 – 140.595 Nursing facility services.

Definitions

“Applicant” means an individual, regardless of source of payment, who is requesting admission to a Medicare/Medicaid-certified nursing facility.

“ID/RC” means intellectual disabilities or related conditions, as defined in 42 CFR 483.102 (b)(3).

“Mental health professional clinician” means an individual defined in 7 AAC 70.990 (28).

“MI” means serious mental illness, as defined in 42 CFR 483.102 (b)(1).

“Qualified intellectual disability professional” means an individual defined in 7 AAC 140.640.

“Resident” means an individual who receives services in a Medicare/Medicaid-certified nursing facility.

“SDS IDD Unit” means the unit of SDS responsible for waiver services programs for individuals experiencing intellectual and developmental disabilities.

“Significant change” means a decline or improvement in a resident’s status that 1) will not be resolved without intervention, or is not self-limiting; 2) impacts more than one area of the resident’s health status; and 3) requires interdisciplinary review and possibly, revision of the care plan.

“Specialized Services” means services which, when combined with nursing facility services or those of other providers, provide a continuum of care that for mental illness, meets the requirements for a continuous and aggressive implementation of an individual plan of care, 42 CFR 483.120 (a)(1); and for intellectual disability and related conditions, meets the requirements for active treatment, 42 CFR 483.440 (a)(1).

Responsibilities

A. **SDS long term care authorization staff are** responsible for:

1. reviewing Level I screening materials;
2. referring applicants/residents for Level II evaluations;
3. notifying applicants/residents and the nursing facility, of Level II referrals;
4. reviewing evaluation reports and determination notices;
5. authorizing nursing facility placement or continuing stay; and
6. monitoring the PASRR process.

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- B. The **attending physician or delegated staff** is responsible for completing the PASRR Level I screening form for applicants seeking admission from non-acute care settings.
- C. The **acute care facility** is responsible for submitting, or working with the nursing facility to submit, the Level I screening form and required documentation to SDS.
- D. The **nursing facility** is responsible for:
 1. submitting the Level I screening form and review materials after resident review;
 2. reviewing Level II evaluation reports and determination notices; and
 3. incorporating Level II evaluation recommendations in care plans.
- E. The **Division of Behavioral Health** is responsible for:
 1. referring individuals with a diagnosis of, or indicators of, MI for a Level II evaluation;
 2. making placement and service determinations based on the Level II evaluation;
 3. submitting evaluation reports and determination notices to SDS; and
 4. collaborating with SDS to ensure that individuals receive specialized services for MI, if determined to be necessary by a Level II evaluation;
- F. The **SDS IDD unit** is responsible for:
 1. conducting Level II evaluations for those with a diagnosis of, or suspected, ID/RC;
 2. making placement and service determinations based on the Level II evaluation;
 3. submitting evaluation reports and determination notices; and
 4. collaborating with SDS long term care authorization staff to ensure that individuals receive specialized services for ID/RC, if the Level II evaluation determines they are necessary.

Procedures

- A. Timeframes.
 1. Upon receipt of a complete Level I screening form indicating a diagnosis of, or suspected, MI or ID/RC, SDS refers the applicant/recipient to the Division of Behavioral Health (DBH) or to the IDD unit.
 2. Upon receipt of a referral from SDS,
 - a. DBH forwards the referral to the appropriate regional office for assignment to a contracted community provider for a Level II MI evaluation; and
 - b. the IDD unit assigns the referral to a qualified intellectual disability professional for a Level II ID/RC evaluation.
 3. After receipt of a complete referral from SDS long term care authorization staff, DBH and/or the IDD unit conducts the Level II evaluation, and submits the Level II evaluation report and determination notice to the SDS long term care authorization staff. This process should be completed by DBH or the IDD Unit within an annual average of seven to nine days per referral.
 4. Upon receipt of the report, SDS notifies the nursing facility and/or acute care facility of the authorization decision.

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B. Level I Screening.

1. Form requirements.

- a. *Pre-admission screening for initial admission to a nursing facility:* the acute care facility or the attending physician, prior to admission submits the complete form, with required documentation, to SDS.
- b. *Resident review:* Following a resident review, the nursing facility submits a complete Level I screening form with current information if a resident
 - i. is found to have suspected MI or ID/RC that was not previously identified; or
 - ii. has MI or ID/RC, and experienced a significant change in physical or mental condition.

2. Processing the complete form.

The SDS long term care authorization staff

- a. review the Level I screening form to determine whether
 - i. an applicant has an MI or ID/RC diagnosis, or indicators of suspected MI or ID/RC; or
 - ii. a resident has possible MI or ID/RC not previously identified, or a significant change in physical or mental condition; and
- b. refers the applicant or resident for Level II evaluation
 - i. to DBH, when SDS long term care authorization staff identify
 - (A) for an initial admission request, a diagnosis or indicators of MI; or
 - (B) for a current resident suspected MI not previously identified, or a significant change in physical or mental condition that needs further evaluation; or
 - ii. to the IDD waiver unit, when SDS long term care authorization staff identify
 - (A) for an initial admission request, a diagnosis or indicators of ID/RC; or
 - (B) for a current resident, suspected ID/RC not previously identified, or a significant change in physical or mental condition that needs further evaluation; or
 - iii. to both DBH and the IDD waiver unit, when the long term care staff identify
 - (A) for an initial admission request, a diagnosis or indicators of MI and ID/RC; or
 - (B) for a current resident, suspected MI and ID/RC not previously identified, or a significant change in physical or mental condition that needs further evaluation.

3. Notice.

SDS sends written notice of a Level II referral for the initial identification of suspected MI or ID/RC to an applicant/resident, his/her representative, and the nursing facility

C. Level II MI Evaluation.

1. Upon receipt of a referral from DBH, the regional office assigns the Level II evaluation to a contracted community provider of mental health services.
2. The contracted community provider
 - a. contacts the applicant/resident to confirm a diagnosis of mental illness;

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- b. prepares a Level II MI evaluation report on form provided by SDS, including recommendations for appropriate placement and for specialized services when indicated; and
- c. sends the completed report to DBH.

3. DBH

- a. reviews the report and makes two determinations:
 - i. whether the applicant/residents needs specialized services for mental illness; and
 - ii whether nursing facility placement is appropriate, based on the applicant/recipient's total needs and the capacity of that nursing facility to meet those need; and
- b. prepares and sends the evaluation report and determination notice to the SDS long term care authorization staff.

D. Level II ID/RC Evaluation.

- 1. Upon receipt of a referral from SDS long term care authorization staff, the IDD unit assigns the evaluation to a qualified intellectual disability professional.
- 2. The qualified intellectual disability professional
 - a. confirms a diagnosis of ID/RC;
 - b. makes two determinations:
 - i. whether the applicant/resident needs specialized services for ID/RC;
 - ii whether nursing facility placement is appropriate, based on the applicant/recipient's total needs and the capacity of that nursing facility to meet those need;
 - c. prepares a Level II ID/RC evaluation report on a form provided by SDS, including recommendations for appropriate placement and for specialized services when indicated; and
 - d. submits the evaluation report on a form provided by SDS and the determination notice to SDS long term care authorization staff
- 3. For an applicant/resident known to SDS, the qualified intellectual disability professional may base a diagnosis on a prior DD Eligibility Determination if validity, accuracy, and current functional status are verified.

E. Determination notices.

- 1. Content.

SDS long term care authorization staff send a determination notice that includes

 - a. a statement as to whether nursing facility placement is appropriate for the applicant/resident, and if not, information as to how, when, and by whom available placement options will be explained; and
 - b. a statement as to whether specialized services are needed and, if to be provided in the nursing facility, assurances that the services will be provided while the individual is a resident;
 - c. other options available to meet the needs of the applicant/resident; and
 - d. information on the right to appeal the determination.

2. Distribution.

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Copies of the determination notice are sent to

- a. the applicant/resident and his/her representative;
- b. the admitting or retaining facility; and
- c. the discharging acute care facility, for an initial admission.

3. All determinations notices are recorded in applicant/resident records maintained by entities receiving a copy of the notice.

F. PASRR process monitoring.

SDS long term care authorization staff

1. enter all Level I referrals and Level II determinations into the SDS database;
2. track
 - a. timeliness of referrals sent for Level II evaluation, including SDS follow-up activity; and
 - b. applicant/residents who apply for waivers until placed on waivers; and
3. monitor provider compliance with PASRR requirements.