

The Power and Possibility of PASRR Webinar Series

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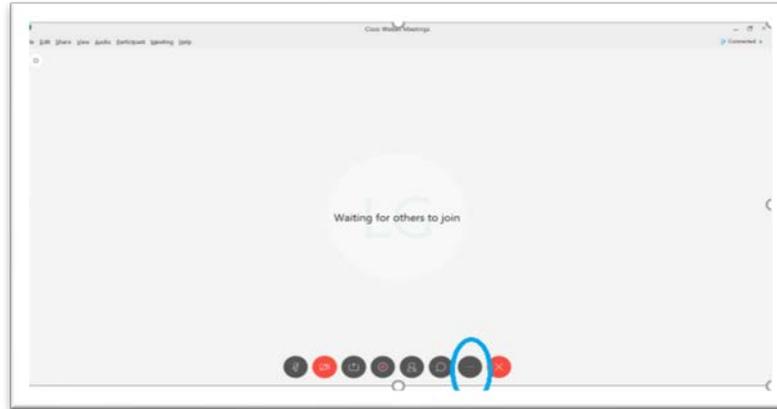
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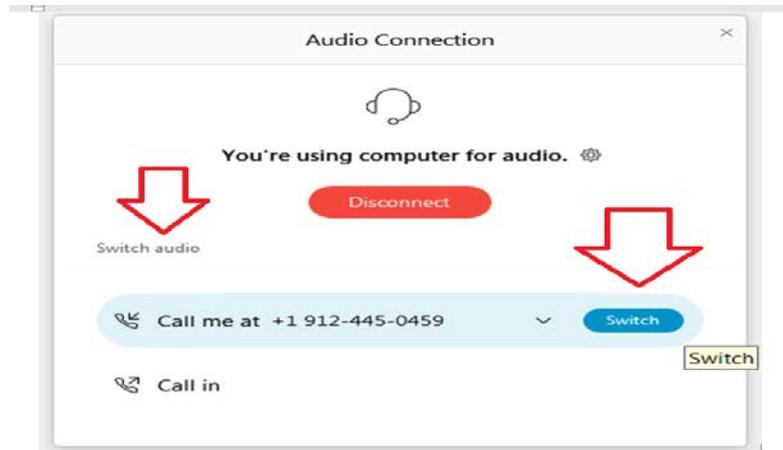
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PASRR Through a Person-Centered Lens



ED KAKO – DIRECTOR, PTAC

JULY 14, 2020



The PASRR Process in Brief

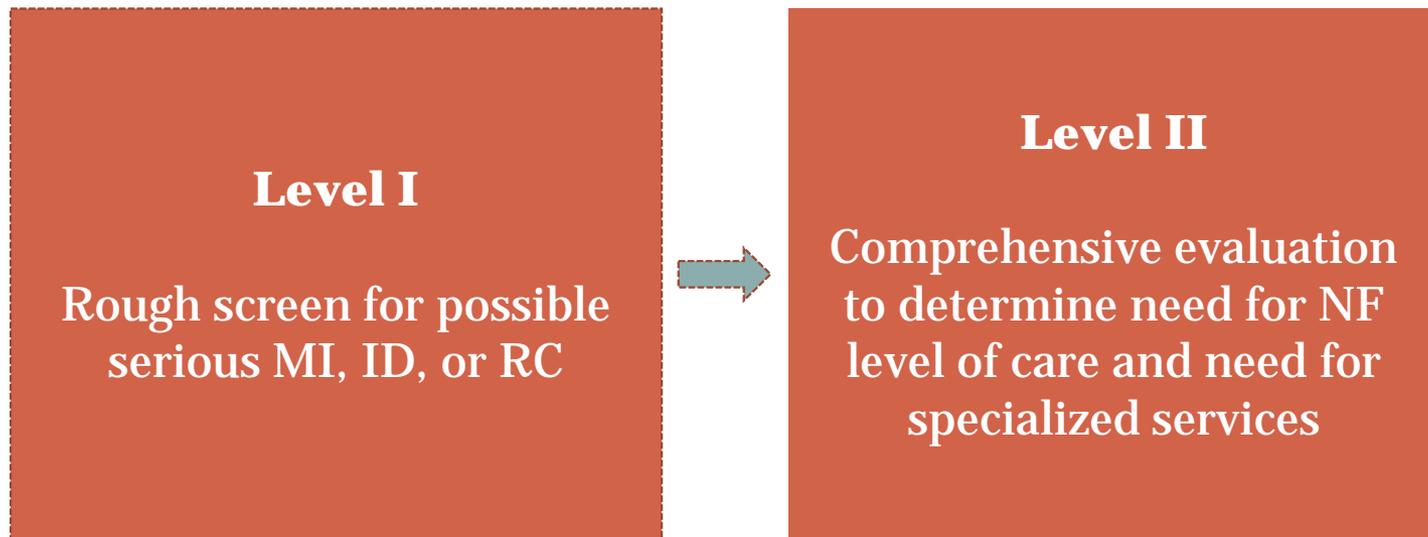


Three Purposes of PASRR

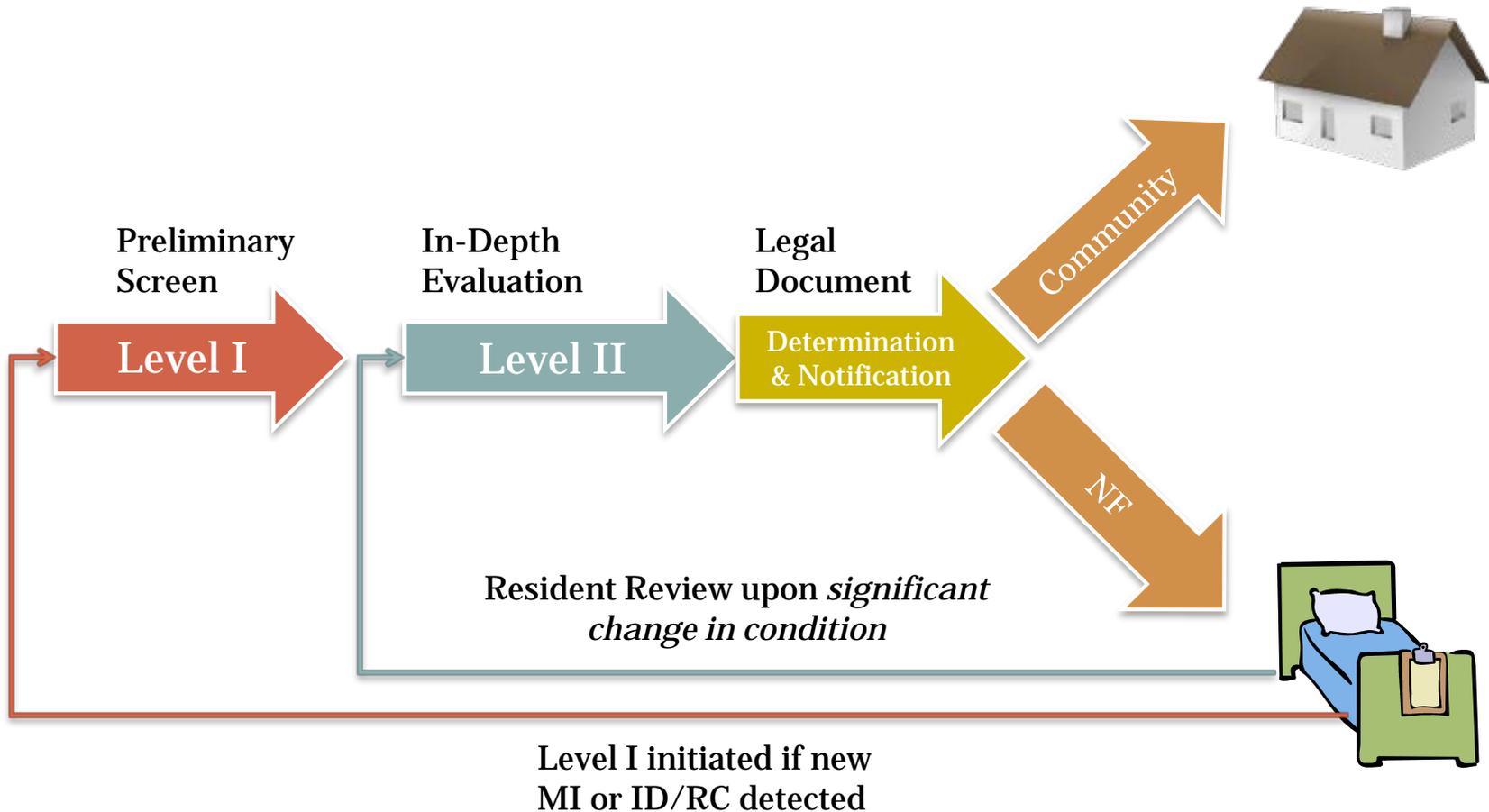
1. To ensure that individuals are evaluated for evidence of possible mental illness (MI), intellectual disability (ID), or related condition (RC).
2. To ensure that community is considered as a placement option.
3. To identify the services individuals need, wherever they are placed.

Design and Implications of PASRR

- Required before admission to a Medicaid-certified nursing facility (NF), regardless of insurance.



The PASRR Process: A Basic Sketch



Summary of PASRR Process

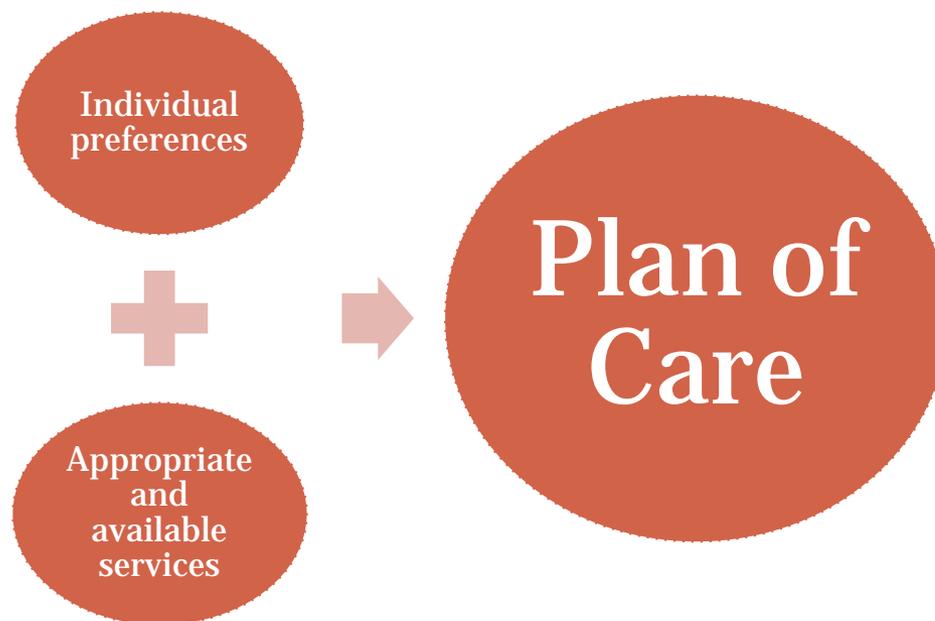
- **Level I preliminary screen**
- **Level II evaluation + determination**
 - Level II includes determination of placement (nursing home, community) and Specialized Services
- **Once a resident, after change in condition, new Level II (Resident Review) to evaluate placement and services**

Person-Centered Thinking and Planning



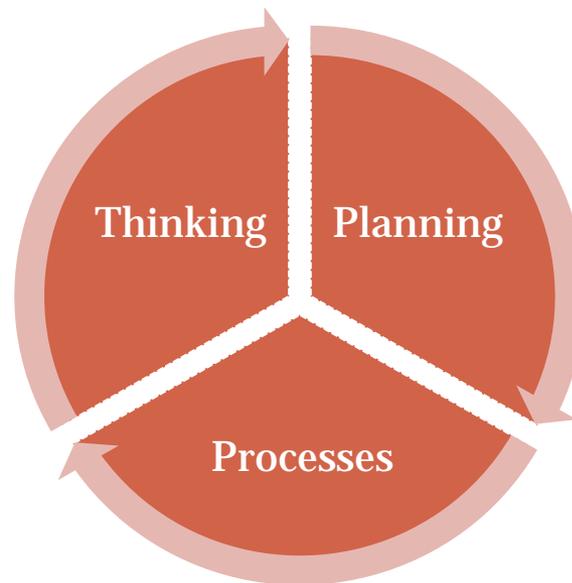
What is Person-Centered Planning (PCP)?

- “At the core of this policy lies an individual’s vision for their own future. The goal of person-centered planning is to support an individual with disabilities in creating the future of their dreams. A tutor or team then decides on necessary supports based on individual goals.”
(<https://independentfutures.com/person-centered-planning/>)



Person-Centered Thinking Informs Person-Centered Planning

- **Person-centered thinking** is a set of values, skills, and tools used in person-centered planning
- **Person-centered planning** is a set of approaches designed to assist people, including individuals with disabilities, to plan his or her own life and supports



How Person-Centered Planning is Different



Traditional Approach

Person-Centered Approach

Person	<ul style="list-style-type: none">• Patient/client	<ul style="list-style-type: none">• Person/individual
“In charge”	<ul style="list-style-type: none">• The professional	<ul style="list-style-type: none">• The individual
Focus	<ul style="list-style-type: none">• The person’s “impairment”	<ul style="list-style-type: none">• Optimize life satisfaction
Solution	<ul style="list-style-type: none">• Professional intervention	<ul style="list-style-type: none">• Remove barriers
Defining Results	<ul style="list-style-type: none">• Maximize functioning as defined by professional	<ul style="list-style-type: none">• Live optimally and in control of your life

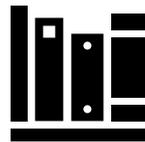
Applying a Person-Centered Lens to PASRR



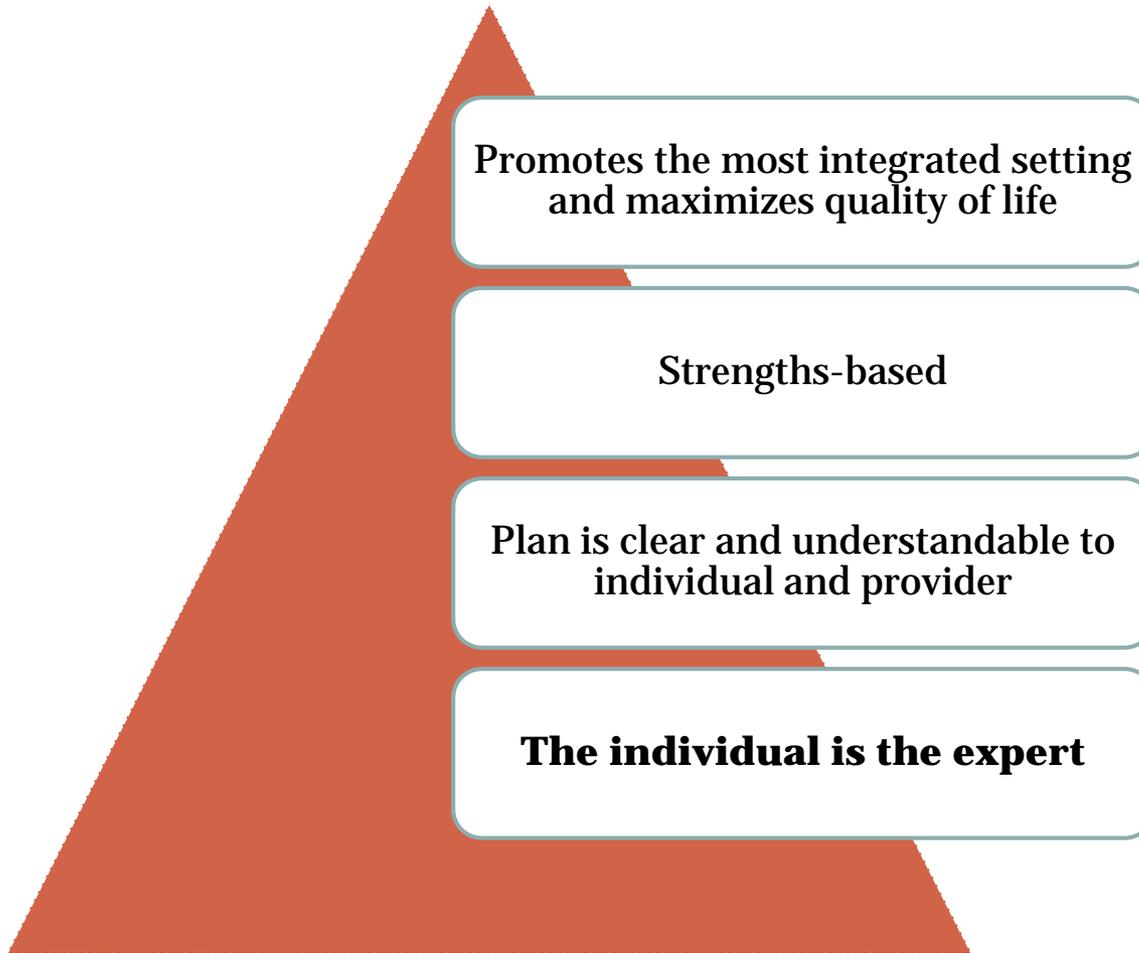
Legal Requirements in PASRR

Requirements specified in:

- **1915(c) Waiver, 1915(i) State Plan Option, and 1915(k) Community First Choice Option**
 - Requires a person-centered plan for each individual receiving Medicaid HCBS (§483.21)¹
- **Affordable Care Act Section 2402(a)**
- **Managed Care**



Importance of Person-Centered Thinking in PASRR



Overall Goals

- Help the caregiver see the **total person** and his or her service and support needs
- Engage service providers as partners to support individuals' choices and ability to take some risks in trying new things



(The information given in a PASRR presentation regarding person-centered practices lie outside the PASRR regulations and should not be considered as formal compliance guidance.)

Goals for the Individual

The individual should:

- Live in the **least restrictive, most inclusive** setting for his/her needs
- **Transition** to the community as soon as practicable
- Have a **clear, understandable, and strengths-based** care plan
- Attain and maintain **strong quality of life**

Key Responsibilities and Competencies of Support Providers

Responsibilities

- Provide information and guidance to people receiving or seeking services
- Facilitating planning meetings
- Suggesting creative strategies to address the individual's needs and desires
- Monitoring the effectiveness of the person-centered planning process and service implementation

Core Competencies

- Philosophy of PCP
- Relational and communication skills
- Knowledge of existing resources/services
- Policy and regulatory context

Level I Screen

Purpose: The CFR at 42 [CFR 483.128\(a\)](#) provides guidance on the purpose of the Level I process:

- a) *Level I: Identification of individuals with MI or ID.* The State's PASRR program must identify all individuals who are suspected of having MI or ID as defined in [§483.102](#). This identification function is termed Level I.



Question to Ask about Person-Centeredness of Level I

Level I Effectiveness

- Does it identify individuals who are suspected of having a PASRR disability?
- Does it screen out individuals with no signs of PASRR disability?
- Is it usable by screeners without clinical experience?
- Is it accurate and free of errors?
- Will it capture information to inform the Level II evaluation?

Level I Person-Centeredness

- Do evaluators approach the screen with a person-centered approach?
- Are the right people involved in the interviews?
- Are accommodations in place to promote the individual's participation?



Level II Evaluation

- **483.102(a): A Level II evaluation must be completed for all such applicants who:**
 - Meet NF level of care requirements
 - Who have been identified as having suspected mental illness (MI) and/or intellectual disability (ID) by the Level I preadmission screening process
- **Level II evaluations must also be conducted on NF residents with MI and/or ID any time there is a significant change in condition (Section 1919(e)(7)(B)(iii) of the Social Security Act)**
- **Exempted Hospital Discharge and Categorical Determinations:**
 - Exempted Hospital Discharges - 483.106(b)
 - Advance Group Determinations (abbreviated Level II required) – 483.130(c)



Role of Person-Centered Planning in Evaluations

- 483.128 Social History, Strengths, Needs
 - *Value strengths and capabilities*
- 483.128 Medical & Disability History
 - *Help caregiver see the total person*
- 483.135 Functional Supports
 - *Least restrictive, most inclusive setting*
- 483.128 Disability-Specific Services
 - *All services and supports important to and for the person*
- 483.128 Rationale
 - *Individualized*
- Facility-Specific Considerations
 - *Ensure all services and supports are delivered*



Roadmap
to care



Level I

Pre-Admission Level II

Resident Review

Questions to Ask about the Person-Centeredness of Preadmission Level II

Level II Effectiveness

- Does it accurately determine the need for NF services?
- Does it accurately identify appropriate specialized services?

Level II Person-Centeredness

- Does the evaluation identify individualized services and support?
- Does it engage the individual as an equal and valued contributor?
- Is the report individualized and detailed?
- Did the evaluation ask the right questions to know what is important TO and important FOR the client?

Level I

Pre-Admission Level II

Resident Review

Trigger for a Resident Review

- **Section 1919(e)(7)(B)(iii) of the Social Security Act (iii)**
 - REVIEW REQUIRED UPON CHANGE IN RESIDENT'S CONDITION -- A 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” typically refers to Level II evaluations for NF residents that are triggered by predetermined state criteria**
 - NFs must notify SMHA or SIDA promptly after significant change in status – 483.20(k)(4)



Questions to Ask About Person-Centeredness of Resident Review

Resident Review Effectiveness

- Does the review assess what change has occurred and how it impacts the individual's overall and disability-related functioning?
- What services and supports has the NF implemented?
- Has the NF collaborated with prior treating professionals?

Resident Review Person-Centeredness

- Does the evaluation identify individualized services and support?
- Does it engage the individual as an equal and valued expert?
- Is the report individualized and detailed?



Summary of Level I, Level II, and Resident Review

- **Level I**
 - **Narrow CFR requirements**
 - **Identification of any person “suspected” to have a PASRR condition**

- **Level II and Resident Review**
 - **Extensive CFR requirements**
 - **Individualized evaluation that considers the appropriate setting and unique treatment needs of the person**

- **Common Person-Centered Goal: The right services in the right location – person-centered treatment!**

The Use of Telehealth

- Evaluations can be conducted via telehealth.
- Use case for telehealth: Evaluations via live videoconferencing under conditions of:
 - Geographical distances
 - Resource limitations
 - Other circumstances that might prevent timely completion of the determination
- When telehealth is being used to replace a face-to-face contact, it should be done via videoconferencing whenever possible. Videoconferencing is more person-centered and a better stand-in for face-to-face interactions than email, texting or telephone.

Considerations for Using Telehealth

- Telehealth is already an option for state Medicaid agencies.
- States need not submit a State Plan Amendment or request permission from CMS to use telehealth in PASRR.
- If states require additional funding to set up videoconferencing systems for use in PASRR evaluations, they can claim at least a portion of their expenses under the enhanced 75% administrative match for PASRR.
- Additional resources can be found on Medicaid.gov:
<https://www.medicaid.gov/medicaid/benefits/telemedicine/index.html>
- Additional CMS guidance here:
<https://www.medicaid.gov/medicaid/benefits/downloads/medicaid-telehealth-services.pdf>

Person-Centered Processes in Practice



Strengths and Challenges of Person-Centered PASRR



Strengths

- Ability to develop more sensitive Level I screening instruments
- Focus on the whole person
- No “one size fits all” care plans
- Better matching of individuals to specialized services
- Better engagement with caregivers and stakeholders

Challenges

- Takes effort to review and refine PASRR tools
- Takes time to train staff and promote person-centered skills
- Screenings and evaluations may take longer in early stages
- May identify service gaps in state’s current system that prove difficult to fill

Example Person-Centered Questions: Social History



For Individuals

- What relationships are most important to you?
- What's the best way to talk to you?
- Where do you want to live?
- What kind of community would you like to be in?
- What are your hobbies?
- What helps you feel supported?

For Family and Caregivers

- How does she best communicate?
- What frustrates him?
- What makes a good day?

Example Questions: Disability History



For Individuals

- Tell me about your condition.
- What medications have worked best for you?
- What services have you used before?
- What does a typical day look like for you?
- What services or supports would help you feel better now?

For Family and Caregivers

- How do you know when his condition is about to get worse?
- Has she ever had to go to the hospital for his condition?
- What providers and services have worked best for him?

Example Questions: Functional/Community Supports



For Individuals

- Where do you want to live?
- What kinds of mobility aids help you most?
- What kinds of medical assistance would be most helpful to you?

For Family and Caregivers

- What support would help her live where she wants to live?
- What kinds of behavioral health needs does he have when living at home?

Person-Centered Plan: MI Example

- **Following the suicide of her husband, a woman with a history of chronic depression and anxiety has trouble managing her emotions and frequently engages in aggressive behavior against staff. A Level II evaluation leads to the following recommendations for Specialized Services:**
 - A mechanism for the NF to develop a behavioral care plan with mental health professionals
 - Ongoing medication management by a psychiatrist
 - Grief counseling by a trained mental health specialist
- **In this case, the Level II evaluation also recommends a suite of Specialized Rehabilitative Services, including services necessary to improve her engagement in activities of daily living. Unlike Specialized Services, these services are provided under the NF's daily rate.**

Person-Centered Plan: ID Example

- A 19-year old man with an intellectual disability has a history of cerebral palsy and epilepsy. He is cooperative and likes people, but does not usually verbalize his needs. A Level II evaluation leads to the following recommendations for Specialized Services:
 - Communication skills – specifically, a communication aid such as a picture board
 - Feeding devices
 - Mobility aids
 - A transition support specialist to help Tommy return home, where he can live with his mother.
- In this case, the Level II evaluation also recommends a suite a Specialized Rehabilitative Services, including occupational therapy, physical therapy, and restorative nursing. Unlike Specialized Services, these services are provided under the NF's daily rate.

QUESTIONS



THANK YOU!

PASRR Technical Assistance Center

www.pasrrassist.org