

PASRR Technical Assistance Center

www.pasrrassist.org



Request Assistance:

- Online: www.pasrrassist.org/resources/request-assistance
- Ed Kako: ekako@mission-ag.com
- Mason Smith: msmith@mission-ag.com

*Please note that you **must** attend the entirety (90 minutes) of this webinar if you wish to receive Continuing Education credits.*

- For webinar-related assistance, contact Claris Chang: cchang@mission-ag.com



PASRR LEVEL I:
BEST PRACTICES &
DATA FOR REVIEW IN 2014
NATIONAL REPORT

January
14, 2014

Ed Kako, PASRR Technical Assistance Center
Dan Timmel, Centers for Medicare and Medicaid Services

Announcements

National Mental Health & Aging and PASRR Conference

March 24-25, 2014 | Indianapolis, Indiana



<http://tinyurl.com/NHMA-PASRRconference>

Basis of Some Ideas in This Presentation

- Draft of paper by Nancy Shanley:
 - ▣ PTAC Consultant
 - ▣ VP of Consulting and Public Policy Analysis, Ascend Management Innovations
 - ▣ National Association of PASRR Professionals
- Final version of paper will be posted to PTAC website in the coming weeks.

Overview of Talk

- (Quick!) review of basic PASRR
- Requirements and goals of Level I from Final Rule
- Components of a strong Level I system
 1. Strategic intelligence gathering
 2. Compatibility of Level I content with Level II processes
 3. Clear interface between Level I and Level II
 4. Robust quality monitoring
- PTAC evaluation of state Level I tools
 - ▣ Criteria
 - ▣ Process

What We Won't Cover in Detail



- The hospital discharge exemption
- Categorical determinations

Goals of PASRR

1. To evaluate all applicants to Medicaid-certified nursing facilities (NFs) for evidence of a mental illness (MI), an intellectual disability (ID), or a related condition (RC).
2. To ensure that individuals with MI/ID/RC are evaluated for placement in the community (the most integrated, least restrictive setting).
3. To identify their disability-specific needs to help develop a service plan (community) or plan of care (NF).

Level I and Level II

□ Level I

- ▣ Preliminary screen

- ▣ To identify individuals who *might* have MI, ID, or RC

□ Level II

- ▣ In depth *evaluation*

- ▣ To determine whether individuals who “test positive” at Level I do, in fact, have MI, ID, or RC *for the purposes of PASRR.*

Notes on the PASRR Rule

- Electronic version:
 - ▣ <http://bit.ly/PASRR-rule>
 - ▣ Can be searched in browser (Ctrl-F); very handy!
- Full version of 1992 Final Rule:
 - ▣ <http://www.pasrrassist.org/resources/1992-pasrr-final-rule>
 - ▣ Contains Rule and Preamble.
 - ▣ Preamble has no regulatory force, but does provide useful history and context.

Role of Level I in Meeting Federal Requirements

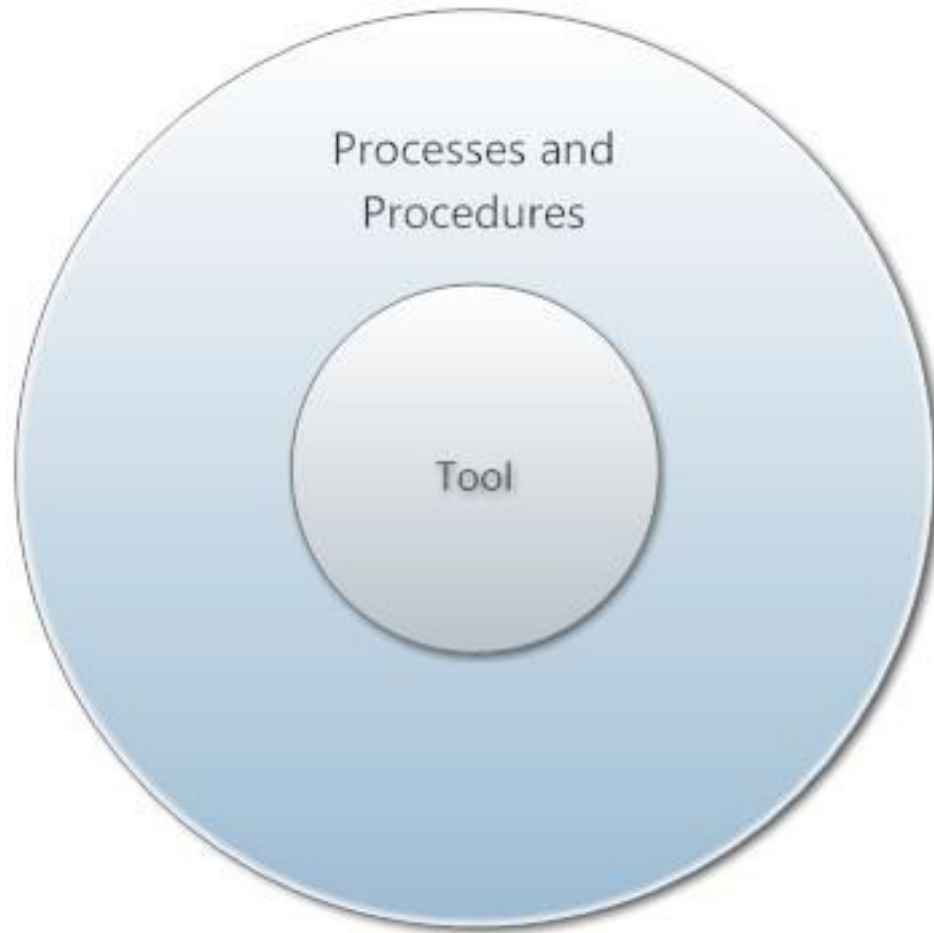
- “The State's PASARR program must identify all individuals who are suspected of having MI or ID as defined in §483.102. This identification function is termed Level I.” [§483.128(a)]
- May not seem like much BUT if Level I is inadequate, the PASRR system will not work properly, and the state will be in violation of its obligations under Medicaid.

Guidance from the Preamble

- “If a State's system results in incorrect Level I findings, we believe it is the State's responsibility to remedy any shortcomings in the process. States have an incentive to do so because they share in the funding of the process and ultimately pay for its inefficiencies.”

Level I: Tool and Process

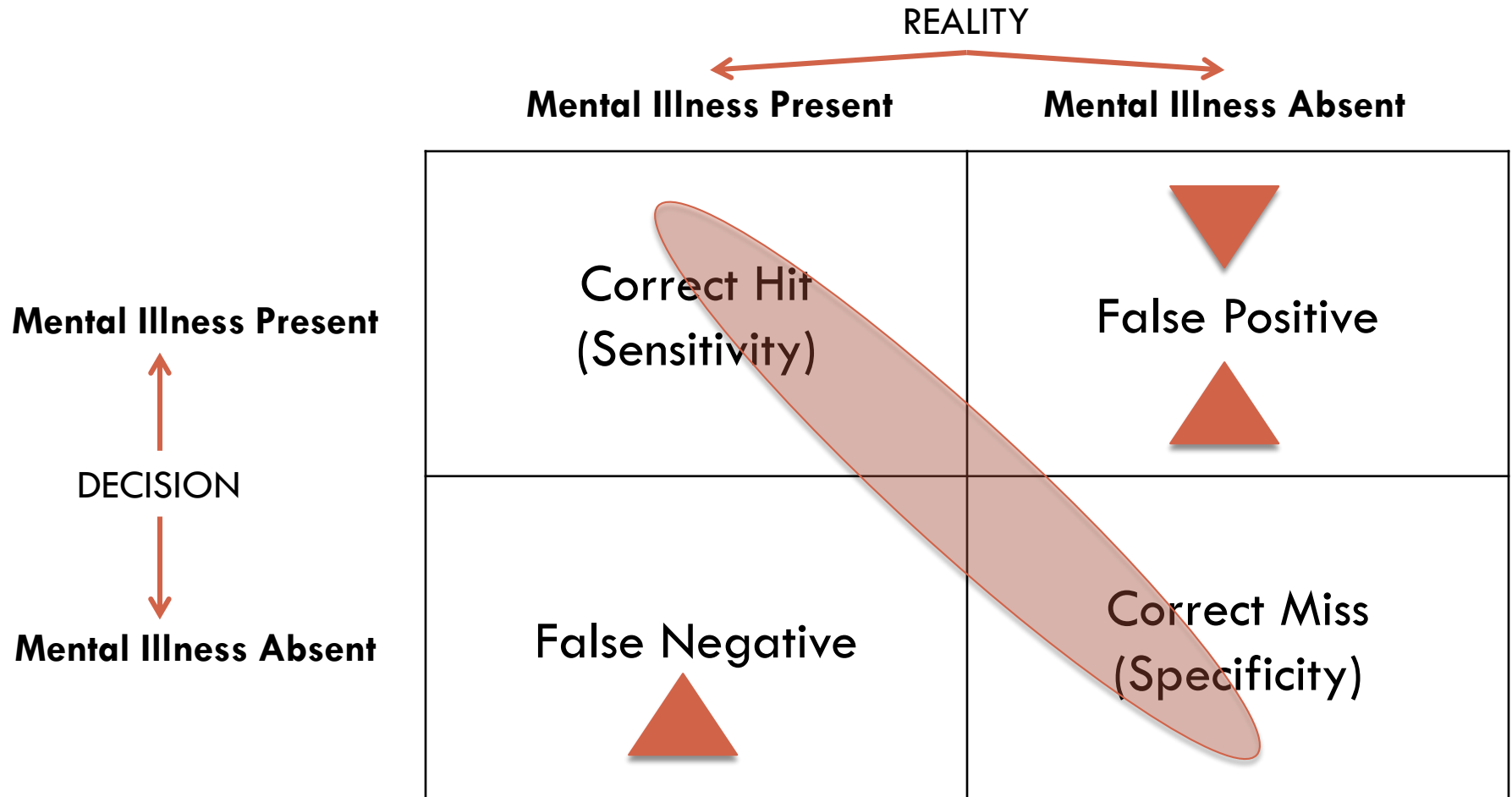
Tools are
always
embedded in
processes
and
procedures





Strategic Intelligence Gathering

Level I and Decisions



Guidance from the Preamble

- The Level I screener should not just rely on “known diagnosis” but should “use discretion in reviewing client data and look behind diagnostic labels...for any presenting evidence of MI.”
- “[R]eliance on known diagnosis would cause the process to miss individuals whose mental illness or intellectual disability...had not been specifically identified either through lack of physician care (when the individual is proposed for admission by his or her family without prior consultation with a physician or mental health professional) or when a physician has avoided articulating the diagnosis out of consideration for the individual or the family.”

Links Between Tool and Screener Requirements

- Some states use a handful of questions, such as “Does the individual have known or suspected mental illness, intellectual or developmental disabilities, and/or primary dementia?”
- This places the burden on the screeners themselves.

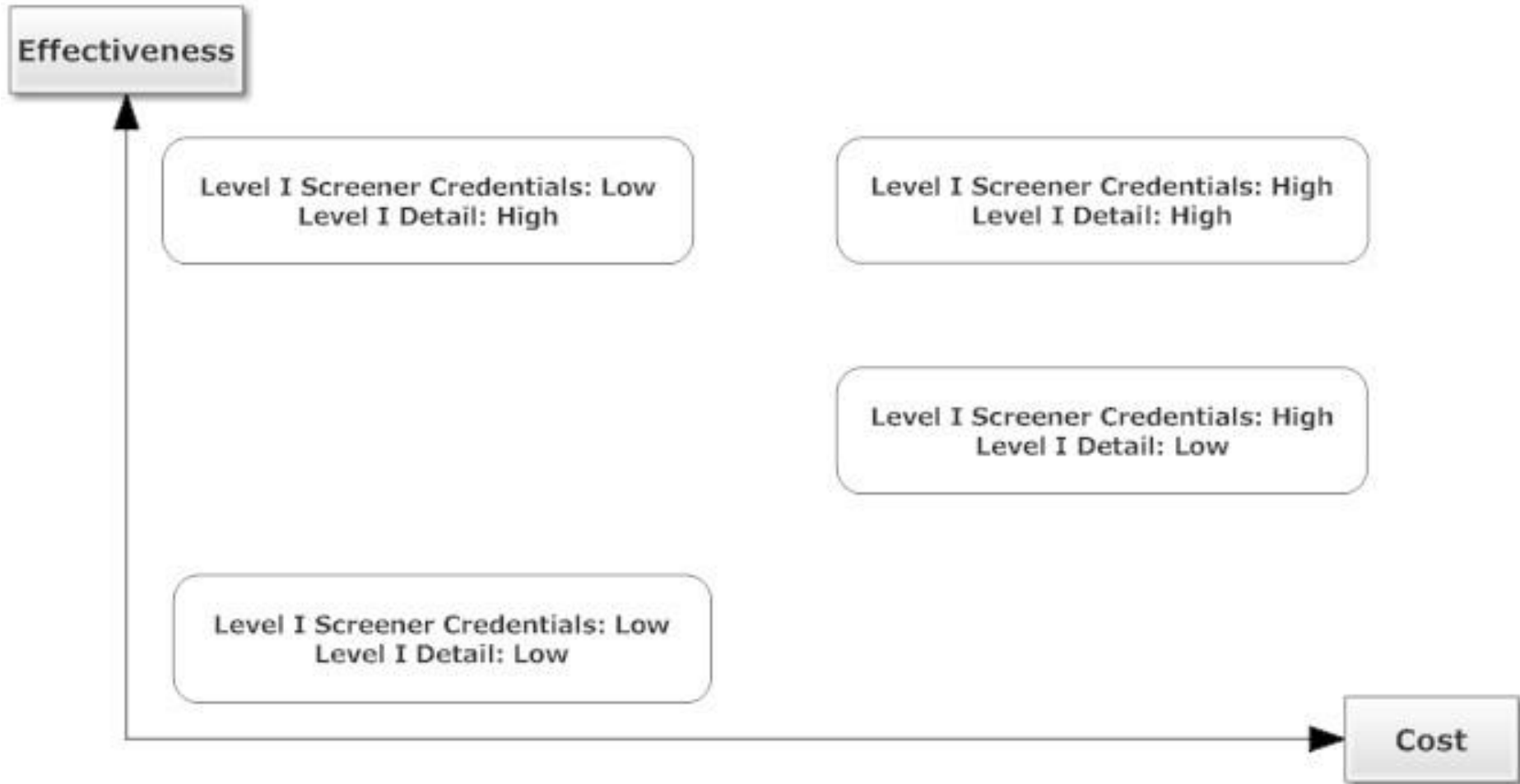
When Level I is Simple, Screeners Must Have:

- Knowledge of the indicators of MI, ID/RC
- Knowledge of the subtle signs, symptoms, and behavioral indicators of undiagnosed disabilities
- Ability to differentiate between dementia and depression, and methods of determining which condition is primary
- A thorough understanding of the requirements and intent of PASRR regulations
- *But this is rarely the case.*

Most Common Strategies

- To conduct a Level II evaluation on anyone with a symptom, diagnosis, or behavior that may indicate the presence of a PASRR-relevant disability
- To have qualified, trained disability experts either complete or review Level I screening information to assess the presence of PASRR-relevant disabilities. Sometimes called a *Level 1.5*

Cost and Effectiveness: Tradeoffs





Compatibility of Level I Content & Level II Processes

Experience, Training, and Program Structure

- Screener experience:
 - ▣ Tool helps non-experts identify appropriate symptoms
OR
 - ▣ Tool requires significant disability-related experience
- Screener training: Screeners are equipped to use tool and understand related processes.
- Program structure: Tool and experience of screener are well-matched; considerations include who is best able to make final Level I decisions.



Clear Interface Between Level I & Level II

Contact with Level II at Several Points

- Written notice of positive Level I to individuals (and their legal representatives)
- Notice of positive Level I to the state mental health authority (SMHA) or state intellectual disability authority (SIDA)
- Effective integration with PASRR hospital discharge exemption and categorical determination activities: Only the SMHA or SIDA can make determinations.
- Tracking of individuals with hospital discharge exemptions/categorical determinations.
- Status changes and Resident Review: If an individual undergoes a significant change in condition, the SMHA/SIDA must be informed.

Important Note about Level II for NF Residents

- A Level I is *not* required for individuals who experience a significant change in status.

From the Preamble

- “Both RAs [Resident Assessments, in MDS] and ARR[s] [Annual Resident Reviews]...are required to be performed more frequently than annually if a significant change in the resident's condition occurs. We envision that an earlier RA (i.e., one which is performed between annual RAs in response to a significant change in the resident's condition) should trigger a similarly expedited ARR. In such cases, the RA should function actively as a Level I to identify residents with new or newly discovered conditions of MI or MR [ID/RC].”



Robust Quality Monitoring

Quality Monitoring

- Total # of Level I screens completed compared to total number of NF admissions reported.
- # of screens administered to beneficiaries by insurance type.
- Evidence that NF admissions do not occur unless Level I was completed.
- % of screens leading to use of categorical determination (by determination type).
- By disability: % of Level I screens that lead to Level II evaluations.
- By disability: % of Level II evaluations that lead to determinations of PASRR-relevant disability.

Additional Quality Monitoring

- Fidelity assessments:
 - ▣ Fidelity of Level I **submissions**: Do Level I screens collect complete and accurate information?
 - ▣ Fidelity of Level I **outcomes**: Of a random selection of negative Level I screens, how many *should have been* positive?
- Additional quality assurance:
 - ▣ Identify providers who may be under-reporting rates of PASRR disabilities.
 - ▣ Assess % of hospital discharge exemptions and categorical determinations leading to individuals exceeding length of stay.

Framework for Quality Monitoring

- Revised rule for PASRR will definitely include quality monitoring measures.
- CMS & PTAC will introduce a pilot (voluntary) program for data reporting in the **March 2014 webinar**.



PTAC Review of Level I Tools

Data Elements in Level I Review

- Questions to assist in identifying previously unreported MI:
 - ▣ Diagnosis
 - ▣ Evidence of substance-related disorder
- Question to assist in identifying previously unreported ID/RC:
 - ▣ ID diagnosis & age of onset
 - ▣ RC diagnosis & age of onset
 - ▣ Receipt of services

Data Elements in Level I Review (cont)

- Captures key symptoms or behavioral indicators (MI):
 - ▣ Interpersonal symptoms
 - ▣ Completing tasks
 - ▣ Adapting to change
- Captures key symptoms or behavioral indicators (ID/RC):
 - ▣ Evidence of undiagnosed condition
 - ▣ Functional limitations

Data Elements in Level I Review (cont)

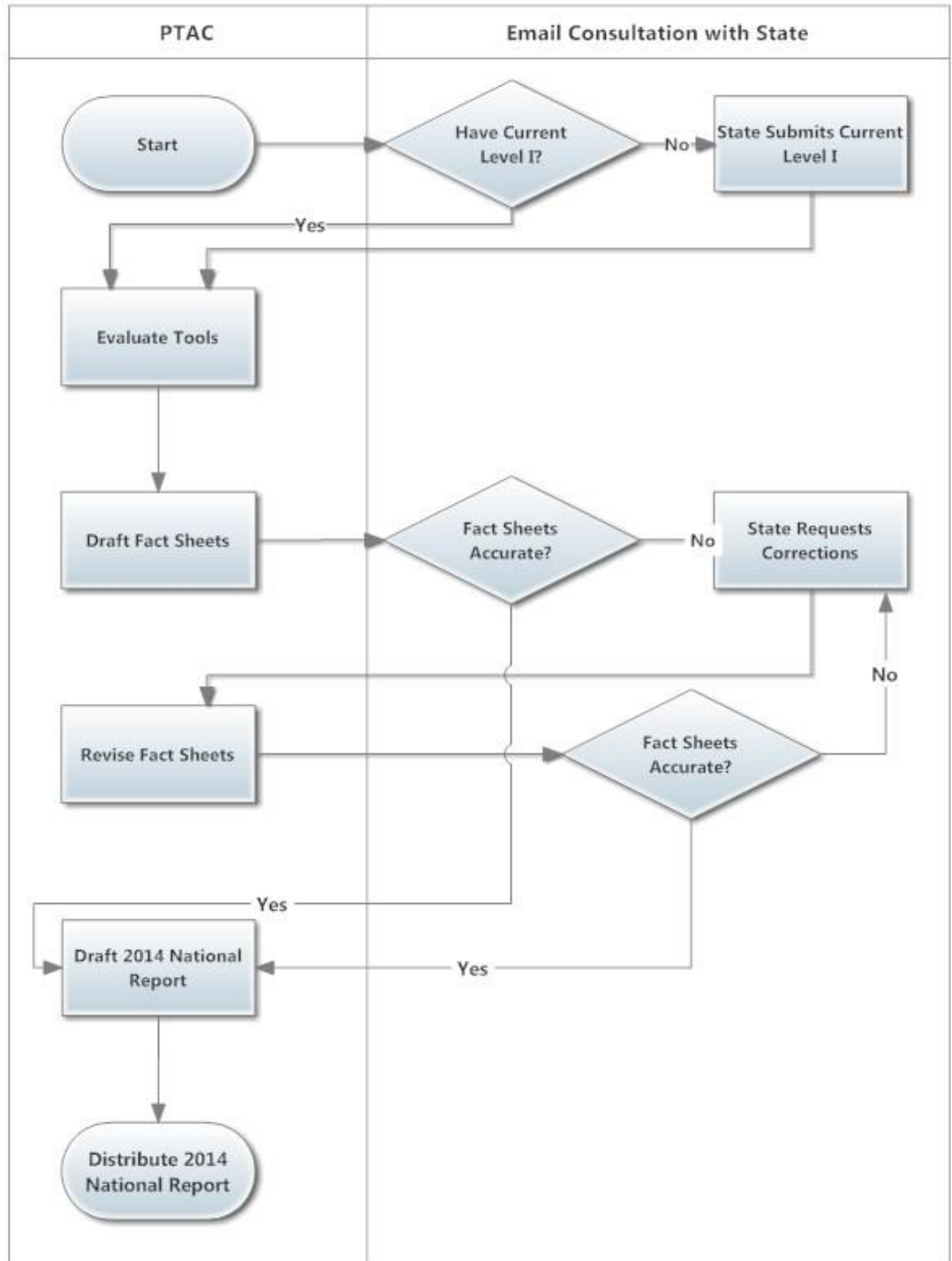
- When co-morbid dementia and mental illness are present, captures presenting and collateral information to determine:
 - ▣ Whether dementia is primary
 - ▣ Evidence to support primacy of dementia
- Unavailable evidence: Does the tool allow screeners to indicate that the answer is sometimes “unknown” or evidence is unavailable?

Excerpt from Level I Evaluation Tool

#	Data Element	Example Question	Example Keywords	Level of Detail	Justification	Document	Page Number(s)	Notes
The State's PASARR program must identify all individuals who are suspected of having MI or ID as defined in Sec. 483.102. Level I processes must consider information beyond that which is reported in the record.								
Contains questions to assist in identifying previously unreported disabilities (MI)								
1.1	Mental illness diagnosis	Does the individual have a diagnosis of serious mental illness or mental disorder?	diagnosis; serious mental illness (schizophrenia, schizoaffective disorder, major depression, psychotic/delusional disorder, bipolar disorder, paranoid disorder); mental disorder (personality disorder, anxiety disorder, panic disorder, depression)					
1.2	Substance related disorder	Does the individual have a substance related disorder?	substance use					
Contains questions to assist in identifying previously unreported disabilities (ID/DD)								
2.1	ID/DD diagnosis	Does the individual have a diagnosis of intellectual disability (ID) or developmental disability (DD)?	diagnosis; intellectual disability; developmental disability; mental retardation					
2.2	ID/DD age of onset	Is there evidence of a cognitive or developmental impairment that occurred prior to age 18?	age of onset; evidence					
2.3	Related condition diagnosis	Does the individual have a diagnosis of a condition that affects intellectual or adaptive functioning?	autism, epilepsy, blindness, cerebral palsy, closed head injury, deaf					
2.4	Related condition age of onset	Did the related condition develop before the individual reached age 22?	age of onset; evidence					
2.5	Receipt of services	Has the individual ever been referred to or received services from an agency that serves people with ID/DD?	agency serving individuals with ID/DD					

DRAFT

Process for Evaluating Level I Tools and Disseminating Findings



Looking for Technical Assistance with Your Level I?

- PTAC can help!
- Our consultants have expertise in developing effective Level I tools, often in several states.
- To request TA:
 - ▣ Submit a request on the PTAC website:
www.PASRRassist.org
 - ▣ Email directly:
 - ekako@mission-ag.com
 - msmith@mission-ag.com

Networking with NAPP

(National Association of PASRR Professionals)

<http://www.pasrr.org/about.aspx>

- Networking with NAPP is a follow up discussion on the webinar.
- The next Networking with NAPP session is:
 - ▣ Tuesday, January 28th, 2014
 - ▣ 1 PM EST
 - ▣ Call 1-866-906-0040
 - ▣ Passcode: 5042759



Questions / Comments