APPENDIX I

		FFICE OF LONG-TERM
ISSUE DATE December 15, 2015	EFFECTIVE DATE January 1, 2016	NUMBER 01-15-04, 03-15-04, 07-15-04, 55-15-04
SUBJECT: Revised Pennsylvania Preadmission Screening Resident Review Identification (Level I) Form (MA 376)		Junia Courts Jennifer Burnett, Deputy Secretary Office of Long-Term Living

PURPOSE:

The purpose of this bulletin is to issue a revised Pennsylvania Preadmission Screening Resident Review Identification (Level I) form (PA-PASRR-ID). The revised PA-PASRR-ID replaces the PA-PASRR-ID (Bulletin 01-14-13, 03-14-10, 07-14-01, 55-14-01) dated March 1, 2014.

SCOPE:

This bulletin applies to all entities that perform preadmission screenings for individuals prior to entering a nursing facility enrolled in the Medical Assistance (MA) Program.

BACKGROUND:

In 1987, Congress enacted major nursing home reform legislation that affected all nursing facilities participating in the Medicare and MA Program as part of the Omnibus Budget Reconciliation Act of 1987 (OBRA '87). OBRA '87, among other things, required the implementation of a preadmission screening program, applicable to all persons seeking admission to an MA certified nursing facility, regardless of payor source. The purpose of the preadmission screening is to determine whether an individual with mental illness (MI), intellectual disability (ID) or other related conditions (ORC) requires nursing facility services and, if the individual does, whether that individual meets certain program office criteria and requires specialized services for their condition. See 42 CFR §§ 483.100 - 483.138. An MA certified nursing facility may not admit any new resident with MI, ID, or ORC unless the Department of Human Services (Department) has determined and notified the nursing facility in a letter that the individual requires nursing facility services and, if the individual does, whether that individual meets program office criteria and requires specialized services for MI, ID or ORC. Modifications to the PA-PASRR-ID were made based on recommended changes from the Centers for Medicare and Medicaid Services (CMS) and the Department's program offices. There have been significant changes to the form which is provided in this bulletin.

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO: Ruth Anne Barnard PA Dept. of Human Services OLTL/Forum Place 6th Floor Bureau of Quality and Provider Management P.O. Box 8025 Harrisburg, PA 17105-8025 (717) 772-2570

PROCEDURES:

Beginning January 1, 2016, the revised PA-PASRR-ID must be completed, prior to or no later than the day of admission, for individuals seeking admission to an MA certified nursing facility regardless of the individual's payment source. If the applicant/resident is unable to answer the questions, another person who is knowledgeable about the applicant's/resident's medical condition and history (for example: family member, legal representative or member of the health care team) may help to complete the form. Nursing facilities are responsible for assuring the accuracy of information reported on the PA-PASRR-ID form. For a new resident entering the nursing facility, the nursing facility must make corrections to the PA-PASRR-ID on the resident's chart when new or missed information becomes available (for example, information provided by the family or doctor). Do not complete a new PA-PASRR-ID for residents readmitted from an acute care hospital. If the individual has a change in condition that affects program office criteria, a PA-PASRR-EV (Level II) will need to be completed. Nursing facilities will communicate the need to have a PA-PASRR-EV done by notifying the Department's Office of Long-Term Living, Bureau of Quality and Provider Management, Division of Nursing Facility Field Operations Team via the MA 408 form. Nursing facilities are to advise applicants/residents of their rights to know how the PA-PASRR-ID form will be used. how to obtain a copy of this form, and the procedure to appeal the results of a decision by the Department's program office.

If the applicant meets program office criteria and is not an exceptional admission, the individual's PA-PASRR-ID form, along with other required documents, must be forwarded to the appropriate agency who will complete a Level II assessment to determine the level of care prior to an individual's admission to the nursing facility.

Failure to complete the PA-PASRR-ID and, when applicable, the PA-PASRR-EV prior to admission or on the day of admission will result in forfeiture of MA reimbursement to the nursing facility during the period of non-compliance in accordance with Federal PASRR Regulations at 42 CFR § 483.122.

Instructions for completing the revised PA-PASRR-ID are included in the form and the instructional webinar can be found at: http://www.dhs.pa.gov/provider/longtermcarecasemixinformation/obratraininginformation/index.htm.

The revised PA-PASRR-ID (Level I) form (MA 376 1/16) may be printed at the following website: <u>http://www.dhs.pa.gov/dhsassets/maforms/index.htm</u>.

The revised PA-PASRR-ID form (MA 376 1/16) will be required for admissions on January 1, 2016 and thereafter. Previous versions of the PA-PASRR-ID form are not acceptable for new admissions on January 1, 2016 and thereafter.