CARE ASSESSMENTS/LEVEL II PASRR

There are changes with the CARE Level I assessments beginning January 1, 2013 due to system-wide restructuring. The Area Agencies on Aging are also now known as Aging and Disability Resource Centers (ADRC’s) and have been answering their phones in this manner since they began their function on November 2012. You should continue to contact your local ADRC/AAA for Level I Care assessments. The current system has not changed for residents who will be admitted to a Medicaid certified nursing home. The resident must have a CARE Level I assessment completed prior to admission. The resident may still be a “30 day provisional” or an “emergency admission.”

If the CARE Level I assessment is completed by qualified hospital staff, the assessment must be faxed to the Kansas Department for Aging and Disability Services (KDADS) at (785) 291-3427.

Provisional Stay

A **provisional stay** is for 30 days or less for the purposes of rehabilitation or respite. The stay must be authorized in writing by the individual’s physician.

- Prior to admission, the NF must obtain a dated, signed statement from the customer’s physician that states the reason for the admission is either for respite care or rehabilitation, and the stay is expected to be for 30 days or less.
- A form from the discharging hospital should accompany the resident upon admission with the resident identification information and PASSR completed to allow the admitting nursing home to verify its ability to meet the resident needs (per CMS). If for some reason this is not available, the NF’s CARE assessor or director of nursing (DON) must complete sections A and B of the Level I assessment. **This partial assessment must be kept as part of the individual’s medical record as well as faxed to KDADS at 785-291-3427.** This does not replace the physician statement of 30 day stay: it is in addition to it.
- If the individual is discharged within 30 days, no other action is necessary. However, if on day “20” it appears that the stay is going to exceed 30 days, the NF must contact the local ADRC and arrange for the completion of a full CARE Level I assessment.

Emergency Admission

An **emergency admission** is an urgent condition or a situation that places the individual’s health and/or welfare in jeopardy. Examples of an emergency admission include, but are not limited to, the following: 1) An admission by Adult Protective Services; 2) The occurrence of a natural disaster; 3) The primary caregiver becomes unavailable due a situation beyond the caregiver’s control (accident/illness, etc.); 4) A physician orders immediate admission due to the individual’s condition; or 5) An admission from out-of–state to an NF that is beyond the individual’s control, (admitted from their place of residence in another state on a weekend when an ADRC CARE assessor is not available.)

When an individual is admitted to the NF because of an emergency, a full CARE Level I assessment must be completed on or before the seventh (7th) day after admission.

- The NF’s CARE assessor or DON, must complete Sections A and B of the Level I assessment. **(The NF must contact the ADRC within one (1) working day after admission.)**
• The NF must send sections A and B along with the emergency fax memo to the ADRC. The emergency fax memo must contain the reason for the admission in the comments section.

Please remember: PASRR is a requirement for ALL nursing home admissions regardless of payer source, however, Medicaid cannot pay for an individual’s NF care if they do not have valid proof of PASRR. If an individual is admitted as a provisional stay or as an emergency admission, the NF must contact the ADRC within the established timeframes or risk nonpayment by Medicaid. If a Medicaid eligible customer is admitted to an NF and PASRR has not been completed, the customer is not liable for their NF care. It is the NF’s responsibility to ensure PASRR compliance has been met. Please keep all fax verification paperwork and document all telephone interactions regarding PASRR.

Terminal Illness Letters

A Terminal Illness Letter may be issued as “proof of PASRR” when an individual has been diagnosed with one of the following conditions and the diagnosis is based upon information documented in the individual’s medical record and maintained by a hospital, NF, LTCU, or physician’s office:

a. Terminally ill, as defined in 42 CFR 418.3 as necessary to qualify for hospice services, which includes a medical prognosis of a life expectancy of six months or less; or

b. Coma or persistent vegetative state.

Under both (a) and (b) above, documentation must be sent to the KDADS CARE Staff for processing and generation of a categorical determination, which shall be maintained in the customer’s medical record with the supporting documentation. Fax number (785) 291-3427

CARE Level II/PASRR Assessment

As of January 1, 2013 Medicaid-certified nursing homes admitting any resident with issues related to Mental Illness, Intellectual Disability or Developmental Disability that are discovered after admission will need to contact the Kansas Department for Aging and Disability Services (KDADS) CARE unit for a Level II assessment. You will be requested to forward and verify needed information timely to KDADS CARE staff. If the Level II manager confirms that a Level II is needed then an assessment packet will be compiled and forwarded to our contractor for assignment to a Level II assessor. After the assessment is completed it is returned to KDADS for a determination letter. This Level II Determination Letter serves as “proof of PASRR” for Level II residents. Residents admitting from a hospital or behavioral health unit will continue to have the Level II process completed prior to admission to your nursing home. Please be aware that the Level II process takes from 7-9 days to complete. Level II assessors have 5 calendar days in which to complete their assessment and KDADS has 2 working days to complete their determination after receiving a complete Level II screen. Complete Level II screens must include a current History and Physical, all current diagnosis and medications as well as paperwork verifying legal authorities in place for the resident.

You may review the requirements of these categories and locate forms at the KDADS Provider Information Resource Site at: http://www.aging.ks.gov/Manuals/Care/Level1/CARELevel1Manual2010.pdf

If you have further question regarding the Level II PASRR process you may contact Sue Schuster, LMSW, at 785-368-7323 or KDADS at 782-296-4986 and ask for CARE Level II staff.