PASRR Level 1 Desk Aid

Telligen
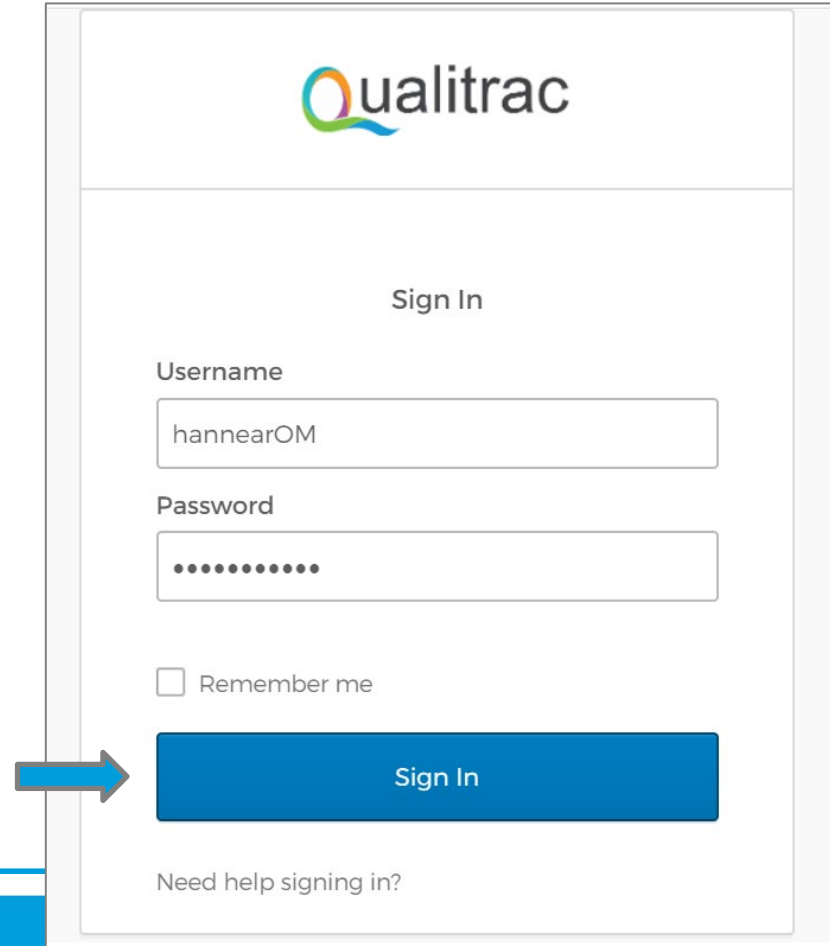
April 2023

PASRR Level 1 Qualitrac

Log-in (1 of 3)

On the sign-in page:

1. Enter the username you were assigned.

2. Use the password you established.

3. Click **SIGN IN** to access the system.

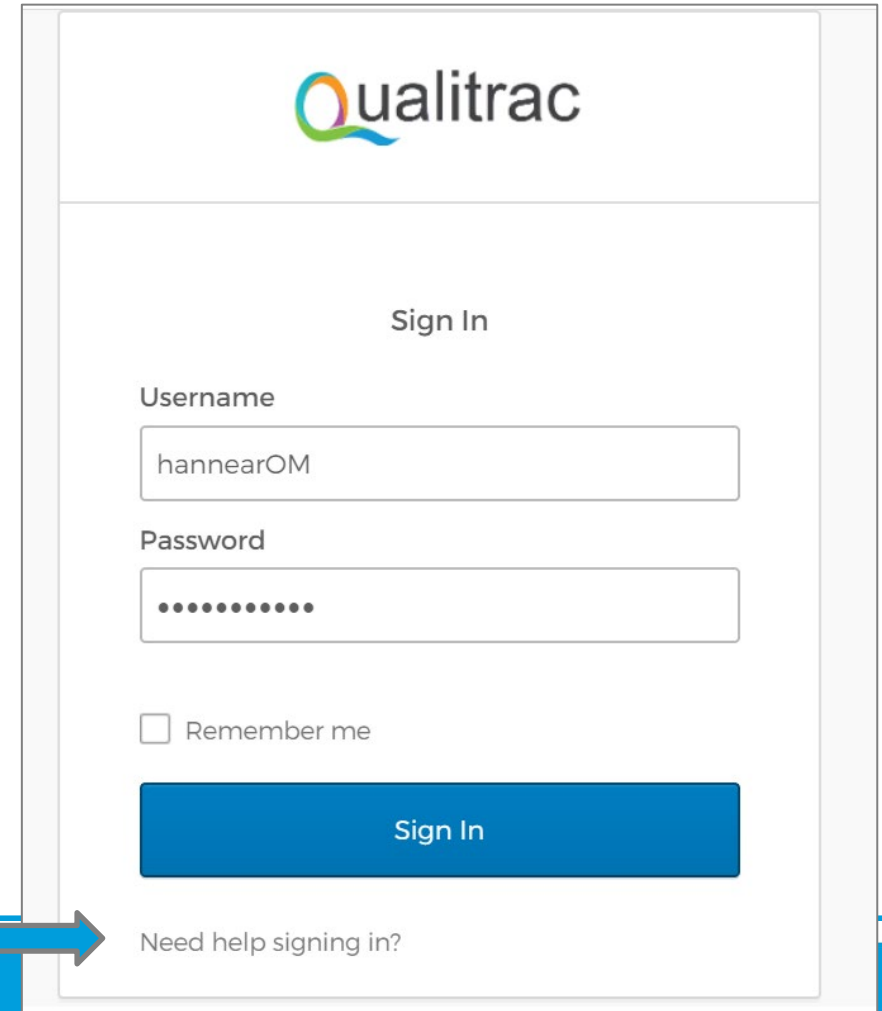# PASRR Level I Qualitrac

There is a blue "Need help signing in?" link below the sign-in button. This can be used to change/reset your password whenever needed.

Do not bookmark this page.
The security around the log-in page will cause issues the next time you log in.
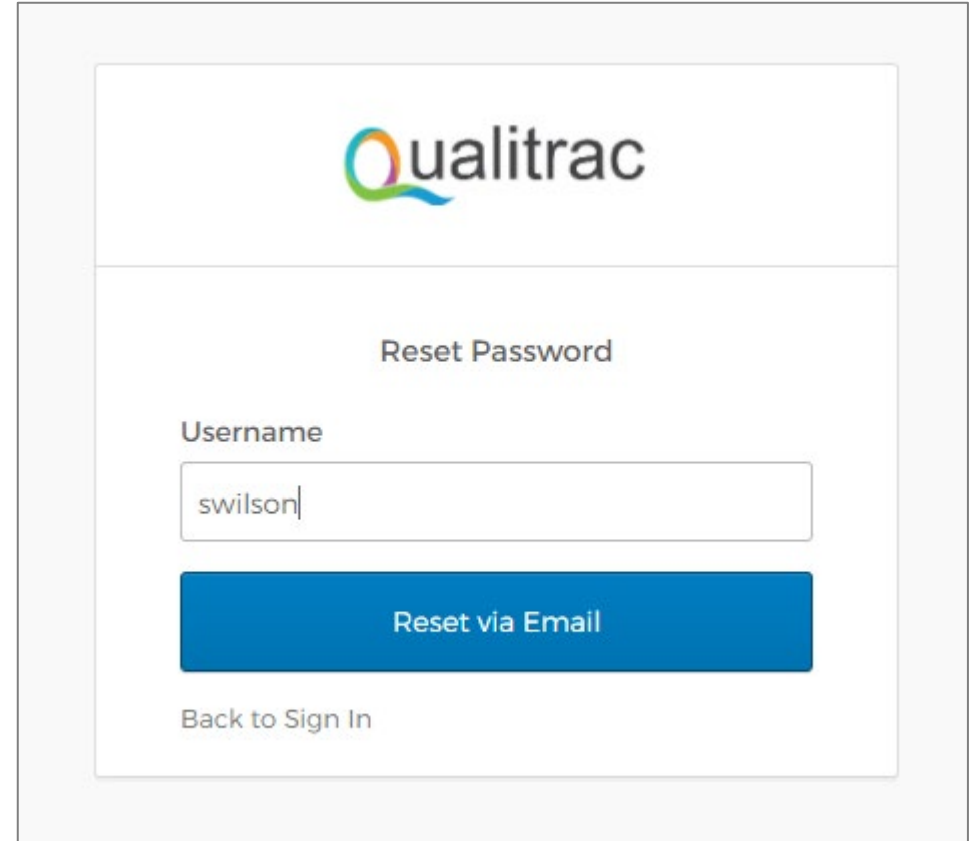
Log-In (3 of 3)

The Reset Password screen will open and ask you to enter your username you utilize to log in to the system. Do not enter your email address.

The system will recognize your user id, find the email associated to your account and send you an email with a link to reset your password.

PASRR Level I Qualitrac
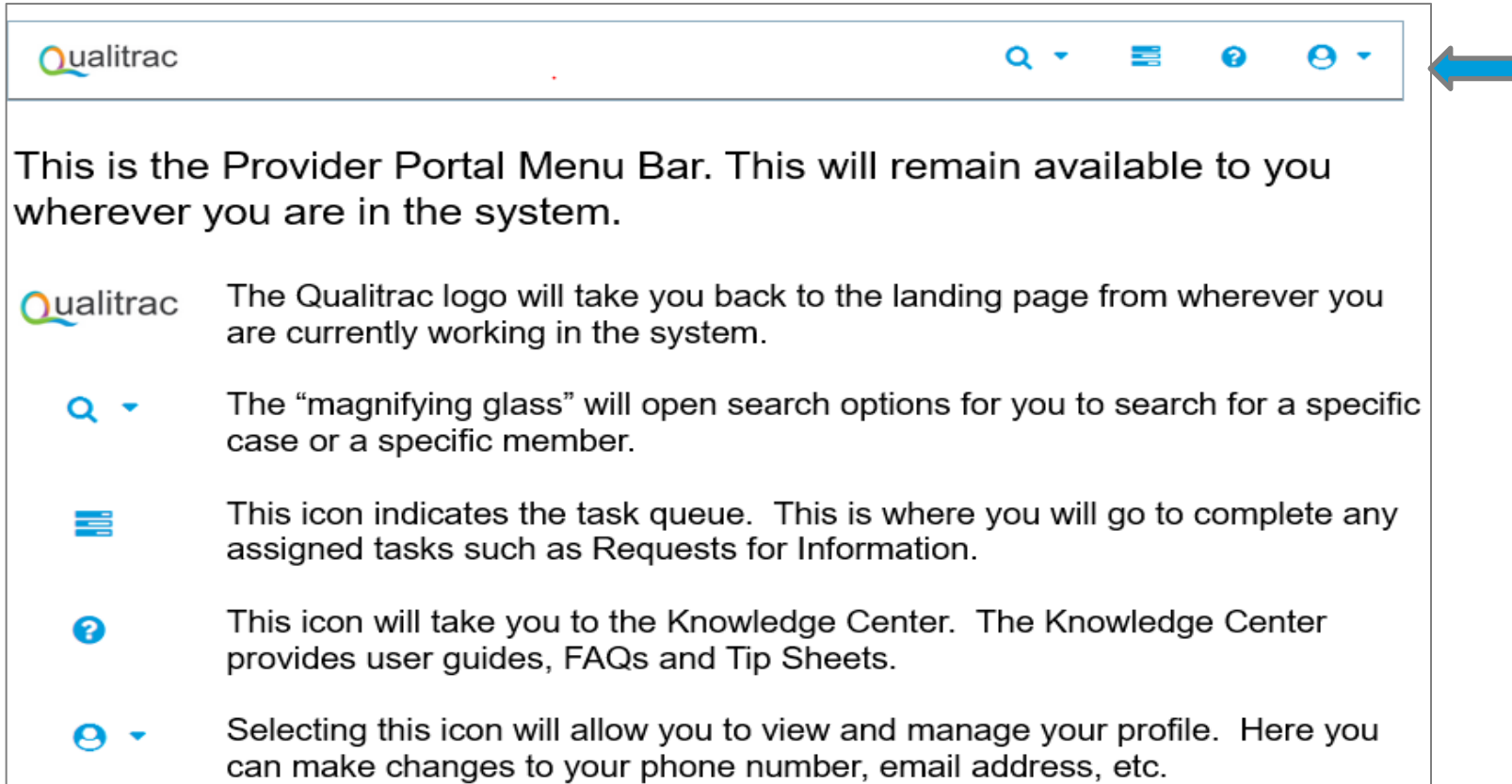
Qualitrac Landing Page
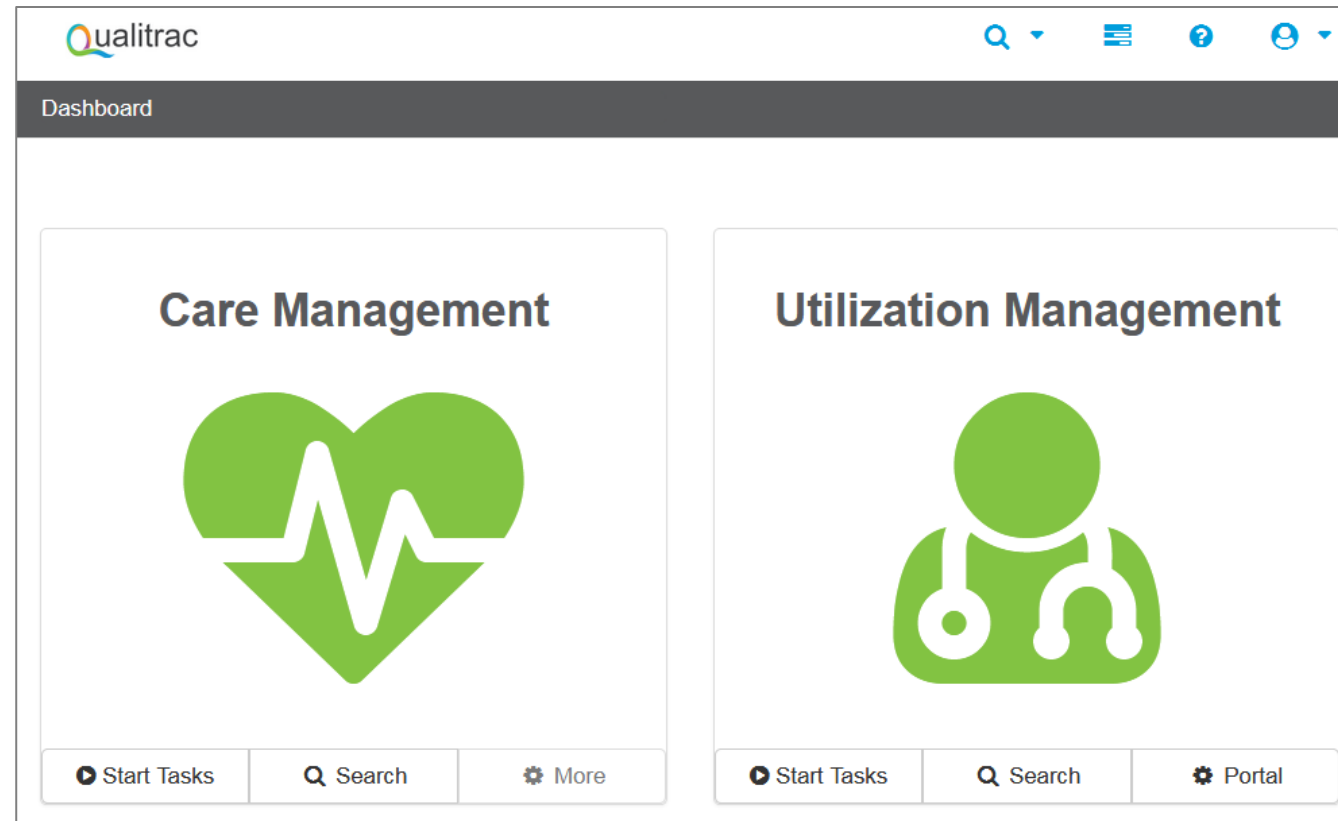
PASRR Level I Qualitrac

Navigation Tools

PASRR Level I Qualitrac

Utilization Management Module

Start Tasks will take you to the task queue to view tasks that have been assigned to you, such as requests for additional information.
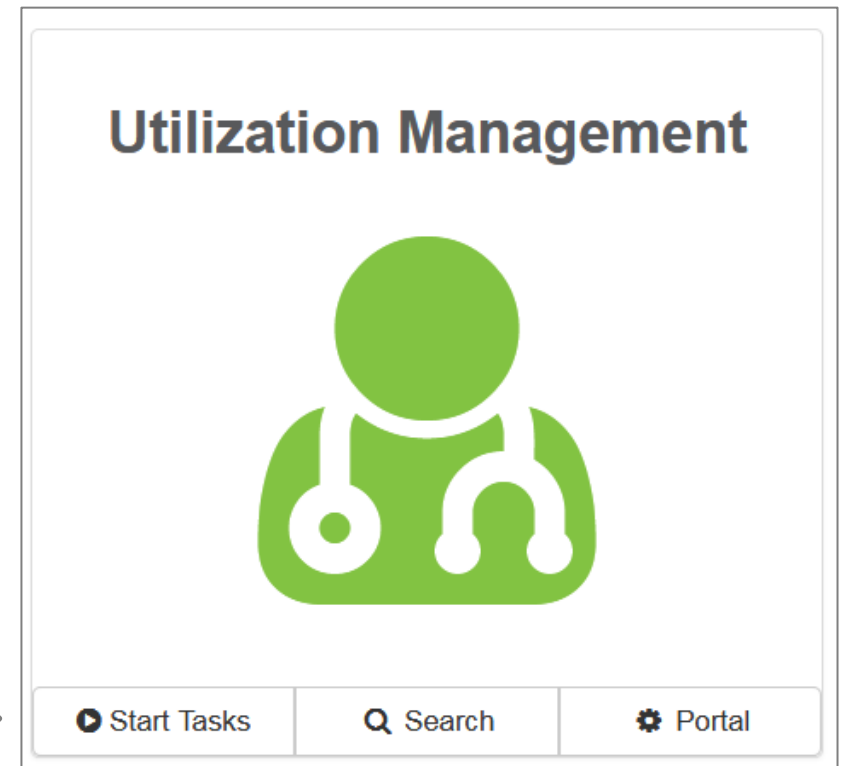
PASRR Level I Qualitrac

Individual Search (1 of 4)

Search will allow you to search for a member or a case, just like the magnifying glass at the top of the page.
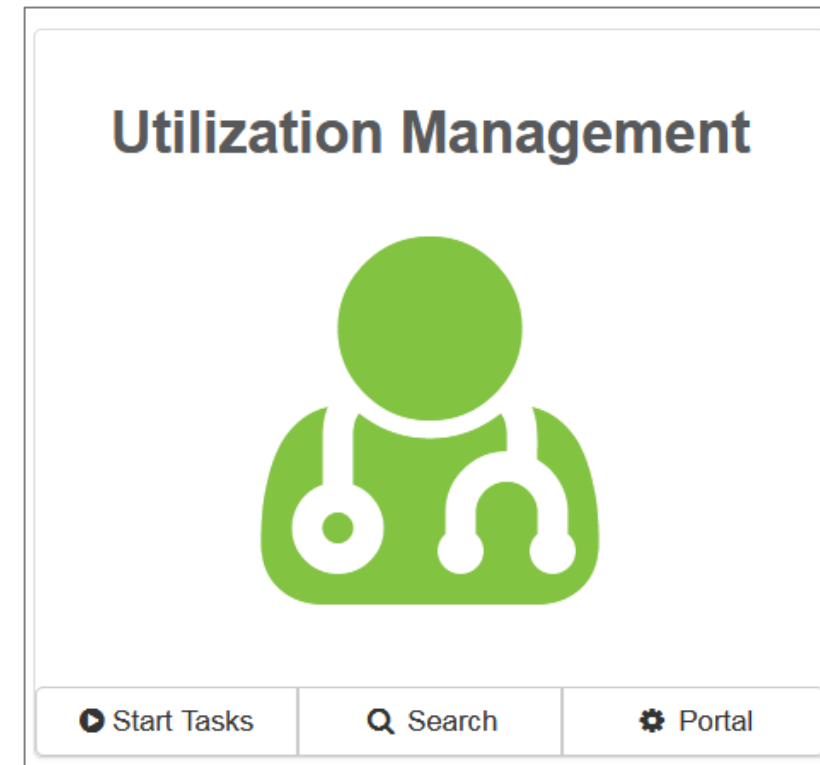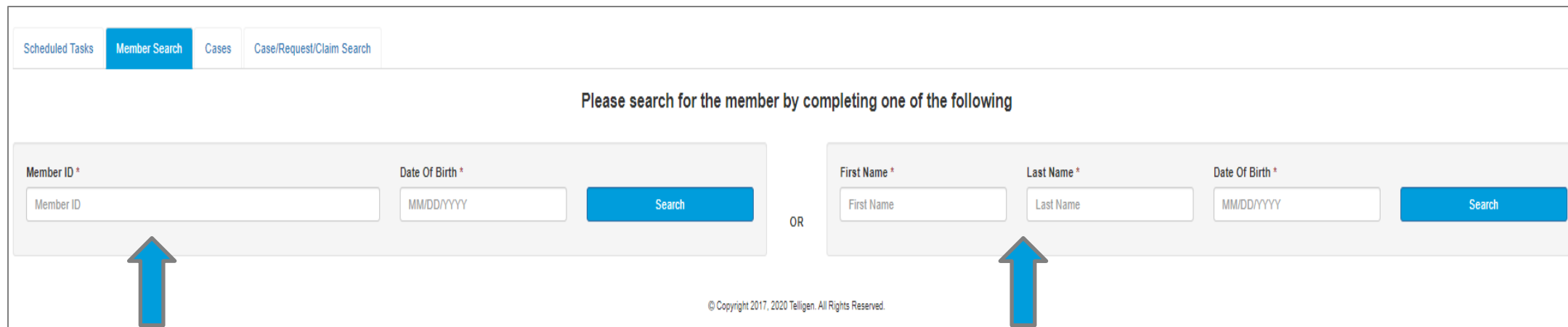
PASRR Level I Qualitrac

There are two ways to find an individual in Qualitrac:

Enter the **Member ID** and **Date Of Birth**

Enter the **Member First Name, Last Name** and **Date of Birth**

PASRR Level I Qualitrac

Enter the **Member ID** and **Date Of Birth** and then click **Search.**

The Member ID and the Date of Birth must match the member data in the system. If it does not match, please confirm the member information and try again.

PASRR Level I Qualitrac

Enter the member's **First Name**, **Last Name** and **Date of Birth** and then click **Search.**

The information must match the member data in our system. Many first names have various versions i.e., James, Jim, Jimmy. If it does not match, please confirm and try again.

PASRR Level I Qualitrac

Individual Selection

If the individual exists in the system, click on any of the data fields in blue to access the information or to start a new review.

PASRR Level I Qualitrac

Adding an Individual (1 of 2)

If the individual does NOT exist in the system, the **Member Not Found** alert will appear and you will have the option to **Add Member.**

PASRR Level I Qualitrac

Adding an Individual (2 of 2)

Fields without the red asterisk are optional.

When all required fields are complete, click **Submit.**

PASRR Level I Qualitrac

Member Hub

When the member has been found or created, you will be directed to the Member Hub.

The Member Hub organizes the request workflow and the member information into several panels.

PASRR Level I Request

Creating a Request – Utilization Management Panel

The Utilization Management Panel will display information related to any UM review requests previously submitted for the member, including PASRR.

Use the **Add** button to start a new request.

PASRR Level I Request

Request Details

The Authorization Request panel will be the first screen to be completed and results in an automatic time and date stamp from the system.

PASRR Level I Request

Review Type

Review Type: Select PASRR Level I.

PASRR Level I Screen Shots

Place and Type of Service

Place of Service is where the care is provided. The Place of Service will default to Nursing Facility. Do not change the system defaults.

Type of Service is what type of care is being provided. The Type of Service will default to Long Term Care. Do not change the system defaults.

PASRR Level I Request

Timing

Timing indicates when you are notifying us of the request.

Concurrent – The member is already admitted to the nursing facility.

Prospective – The member has yet to admit to the nursing facility.

PASRR Level I Request

Completing Authorization Request Panel

When all the selections are complete, click **Add New Request**.

You can select **Cancel** if the request has been made in error.

PASRR Level I Request

Admission and Discharge Panel

Next, you will provide admission information. Indicate the:

Admission Date – for prospective timings, this will be the projected admission date.

Admission Type-

Admission Source (not required)

PASRR Level I Request

Coverage Panel – Individual without Medicaid

Telligen does not check insurance eligibility for PASRR.

There are two required fields on this screen. Leave the provided wording and add "NA" in the required **Eligibility Comments** field.

PASRR Level I Request

Providers Panel (1 of 2)

Click the **Add** button on each line to provide the necessary information.

The **Treating Provider** is the entity that will be providing the nursing home care.

The **Ordering Provider** is the provider that is referring the member (may be the same as Treating Facility).

PASRR Level I Request

Providers Panel (2 of 2)

Up to 5 additional providers can be added to the PASRR request.

SEP or CMA NPIs can be added here so they can be allowed visibility.

If there are multiple SNFs being targeted for placement from a hospital or community setting when submitting the Level I, they may all be entered (per authorized PHI releases).

Edit/remove/add providers at anytime during the review, even after closure.

Additional Provider	Not Supplied	+ Add
Additional Provider	Not Supplied	+ Add
Additional Provider	Not Supplied	+ Add
Additional Provider	Not Supplied	+ Add
Additional Provider	Not Supplied	+ Add

PASRR Level I Request

Provider Search (1 of 4)

Clicking **Add** will open a search box. You can search for providers by entering an NPI or by filling in any of the information boxes provided.

> **Other ID Number** field can be used to search by Medicaid ID as opposed to NPI.

> HELPFUL TIP: entering just the NPI or Other ID renders the quickest results.

When you have entered the necessary information, click **Search** to locate the physician or facility.

Provider Search (2 of 4)

Clicking **Search** will return any results that meet the criteria you entered.

Use the green plus box to the left of the name to select the provider/facility you need for the review.

Be sure to select the correct listing, as some NPIs may have multiple listings

PASRR Level I Request

If the Ordering Provider and the Treating Provider are the same, you can select **Copy Treating Provider to Ordering Provider** and the system will prepopulate the information for you. This is helpful for PASRRs with Concurrent timing.

Providers *

Type	Name	NPI	Address	Phone	Primary Taxonomy	PPO Redirect Reason	Comments	Action
Treating Facility	⑦ BILLINGS CLINIC TCU, BILLINGS CLINIC TCU	1023222494	2800 10th Ave North Billings, MT, 59101	(406) 247-6920		Member Declined		🗑 Remove
Ordering Provider *				Not Supplied				➕ Add ▾

Provider Organization Visibility ❓

➕ Add New

📋 Copy Treating Facility to Ordering Provider

PASRR Level I Request

Treating Provider and the Ordering Provider information is populated in the Providers panel.

Using the **Remove** button will delete the provider if chosen in error.

Type	Name	NPI	Address	Phone	Primary Taxonomy	PPO Redirect Reason	Comments	Action
Providers								
Treating Facility	⊘ BILLINGS CLINIC TCU, BILLINGS CLINIC TCU	1023222494	2800 10th Ave North Billings, MT, 59101	(406) 247-6920		Member Declined		🗑 Remove
Ordering Provider	⊘ BILLINGS CLINIC TCU, BILLINGS CLINIC TCU	1023222494	2800 10th Ave North Billings, MT, 59101	(406) 247-6920				🗑 Remove

PASRR Level I Request

Provider Organization Visibility

Select the organization or facility in this panel which will need access to this individual's case. This can be repeated for all providers needing access.

PASRR Level I Request

Diagnosis Panel (1 of 5)

Use the **Add** button to add a new diagnosis to the panel.

PASRR Level I Request

You can search by Code or by Term. Searching by code will let you enter a code directly and search for it as shown in the example below.

PASRR Level I Request

The system will then provide a list of results to select from. Select the one you want added to the review by clicking on the radio button to the left of the code.

PASRR Level I Request

After selecting the diagnosis, choose:

Submit will add the diagnosis to the review.

Submit and Add Another will allow you to submit the diagnosis to the review and re-open the window where you can repeat the process and search for another diagnosis.

PASRR Level I Request

If more than one diagnosis is entered, there is ability to drag and drop to reorder them.

You can use the **trash can** icon to the right of the diagnosis to delete anything entered incorrectly in this panel.

PASRR Level I Request

Procedure Panel

The Procedures panel will default to PASRR Level I Screen which requires no further action.

PASRR Level I Screen

Reason for PASRR 1 Submission

Each of the reasons may have additional specific boxes where further details can be added.

Reason For PASRR 1 Submission

Reporting status change/ Other reason for submitting level I *

- ◉ Pre-admission
- ○ Admitted without PASRR
- ○ Missing documentation
- ○ Existing Level 2 no longer represents individual's current condition or new diagnosis/diagnoses found after admission
- ○ MH diagnosis clarification – (EXAMPLE: Conflicting diagnosis)
- ○ Recent in-patient psychiatric hospitalization, or emergency department evaluation (without admission) including suicidal/homicidal ideation or increase in psychotic behavior – within the last 3 months
- ○ Discovery of possible I/DD condition not previously known
- ○ Transfer from NF to NF
- ○ Other reason for submitting Level 1

PASRR Level I Screen

BIMS & PHQ-9 Scores

These are considered optional but are helpful when reviewing cases which depression or dementia symptoms are being gauged. The **Add** button allows for additional scores.

**If the medical record indicates a neurocognitive disorder or depression, we will RFI for more information. Providing scores when submitting may save time and avoid RFIs.

PASRR Level I Screen

Section A Questions

Indicating "No" to any questions in this section will result in no further details being requested.

If selecting "Yes", additional information will be requested.

If ICD-10 Code is unknown, please indicate "unknown" in the text space.

Add information about signs and symptoms in the box.

Add medications and related diagnoses. Use the "Add" button to include additional medications.

Section A: PASRR Condition indicators – Mental Illness

Does the individual have a known or suspected diagnosis of a major mental illness? *
- ○ Yes
- ◉ No

Does the individual have any signs and/or symptoms of a major mental illness? *
- ○ Yes
- ◉ No

Is the individual on antipsychotic, mood stabilizing, or antidepressant medication? *
- ○ Yes
- ◉ No

Section A Questions Tips

If the individual is on a 27-65 mental health hold, short term/long term certification or court order medication, this can be noted here.

List all medications in these categories along with the corresponding diagnosis

Does the individual have any signs and/or symptoms of a major mental illness? *

◉ Yes

○ No

Describe other symptoms *

[text box]

Is the individual on antipsychotic, mood stabilizing, or antidepressant medication? *

○ Yes

◉ No

PASRR Level I Screen

Section B Questions

COLORADO
Department of Health Care
Policy & Financing

Indicating "Yes" in Section B may cause boxes to appear for additional information.

NOTE: New questions have been added to this section. Please read carefully

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Section B: PASRR Condition Indicators – Intellectual or Developmental Disabilities, or Related Conditions

Does the individual have a documented or suspected Diagnosis of Intellectual or Developmental Disability? *

○ Yes

○ No

Does the individual have a diagnosis of a neurological condition such as Cerebral Palsy, Autism, etc.? *

○ Yes

○ No

Has the individual ever received services from, or been referred to, an agency serving persons with an intellectual or development disability? *

○ Yes

○ No

Did the individual sustain a brain injury or receive a Seizure Disorder and/or Epilepsy Diagnosis prior to the age of 22? *

○ Yes

○ No

PASRR Level I Screen

Section B Tips

COLORADO
Department of Health Care
Policy & Financing

A seizure and/or epilepsy diagnoses prior to age 22 indicates a suspected IDD condition. If the seizure disorder or epilepsy diagnosis is after the age of 22, an IDD condition would not exist.

Did the individual sustain a brain injury or receive a Seizure Disorder and/or Epilepsy Diagnosis prior to the age of 22? *

◉ Yes

○ No

Describe brain injury, Seizure Disorder and/or Epilepsy Diagnosis prior to age 22 *

[   ]

PASRR Level I Screen

Section C Questions

Select the most appropriate response in Section C when there is a "Yes" answer in A or B.

Section C: Provisional Admissions

Is the need for NH service regarding convalescent care due to discharge from an acute care hospital and likely will require fewer than 30 days of nursing services? *

○ Yes

○ No

Emergency stays due to emergency evacuations or protective services placements not to exceed 14 days? *

○ Yes

○ No

Individuals with delirium where the delirium prevents an accurate diagnosis at the time of entry into the nursing home but is expected to clear within 14 days? *

○ Yes

○ No

Respite stays of up to 30 consecutive days to provide respite to in-home caregivers? *

○ Yes

○ No

PASRR Level I Screen

Documents & Attestation

Acknowledge that submission of required documents by inserting your name.

Other useful documents that can be included: 27-65 paperwork, certification paperwork, court ordered medication paperwork, and/or pre-Telligen Level 2 evaluation and NOD.

Please submit all of the following:
1. The most recent History & Physical, or any medical documentation with a review of systems and vitals (actual vital data/ vital #'s are required), from within the last 6 months;
2. List of current medications
3. Comprehensive list of diagnosis (ex: SNF face sheet or hospital list)

As the PASRR Level 1 screener, I certify that I have attached the required documents. *

PASRR Level I Screen

Contact for Level 2

This information will be used to contact the facility if a Level 2 Evaluation is needed.

**This may not be the person submitting the Level 1. Be sure to include all contact information to expending scheduling a Level 2 when needed.

Please list the name and contact information for the person who will schedule the Level 2 with Telligen

Name

Email

Phone Number

(999) 999-9999

PASRR Level 1 Screen

Document Upload

Access the document section by clicking Add.

The screen (shown right) will pop up and you can add the documents, one at a time to the case.

Drag a document to the box or click the blue button to browse for your document.

Repeat this process to upload multiple documents.

ℹ File Upload Restrictions

- Extensions: pdf, gif, jpg, jpeg, png, bmp, rtf, doc, docx, xls, xlsx, txt, xps, csv
- Size: Less than or equal to 300 Mb

Drop a file here or **Click here** to Upload

File Name	Size	Remove
DUMMY DOCUMENT 4.2023.docx	12 KB	🗑

Name *
DUMMY DOCUMENT 4.2023

Category *
Clinical

Topic *
Medical & Treatment History
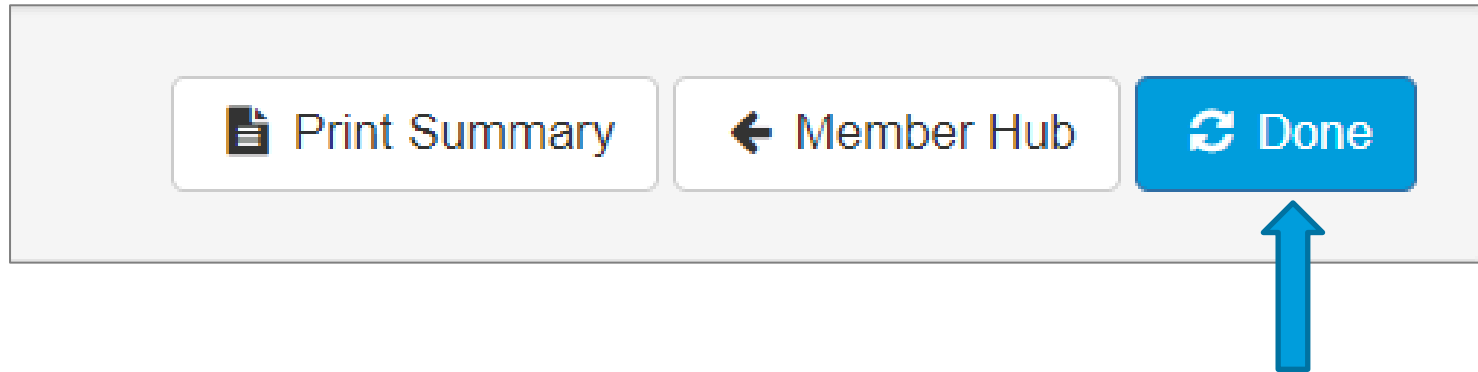
For Internal Use Only
No

Close   Upload

PASRR Level 1 Screen

Completing the Request

Once documents have been uploaded, choosing **Done** will complete the request .