



COLORADO

Department of Health Care Policy & Financing

Pre-Admission Screening and Resident Review Level 1 Submissions May 2023



Welcome!

Welcome and Introduction

Overview of Registering for Qualitrac

Demonstration: entering a new client and submitting the new Level 1

Questions?

Additional training time will be available







Who's Who

State Contacts PASRR Administrator / SIDA SMHA

Telligen Contacts Contract Manager MI Lead Assessor I/DD Lead Assessor/Administrator Level 1 Lead Reviewer Level 1 Reviewer/Level 2 QA

Colorado Support Center(Telligen)

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Purpose

PASRR = Pre-Admission Screening and Resident Review

PASRR was created by Centers for Medicare and Medicaid Services (CMS) in 1987 out of concerns that individuals with disabilities were at risk for institutionalization in restrictive environments.

A federal requirement to help ensure that individuals are not inappropriately placed in nursing homes for long term care.

Purpose



- Known or suspected condition must trigger evaluation
- To ensure appropriateness of NF placement
- To ensure receipt of needed services

Individuals are offered the most appropriate setting for their needs (community, nursing facility, acute care)

Provide all individuals the services they need in those settings

Each state has the freedom to implement PASRR regulations to go above and beyond as they see fit to best fit their state.







PASRR Roles & Responsibilities





Responsibilities for Level I Screen Submission

Level I Screen



PASRR Process



Steps to Complete PASRR

Level 1
submitted by
hospital/CMA

Telligen review completed within 6 business hours If Level 2 needed Telligen team will reach out to Hospital/CMA within 1 day of L2 being completed Level 2 Evaluator will complete psycho-social and gather collateral information and complete the evaluation, within 3-5 days Completed evaluation will be reviewed by Telligen and State. Final approval by State. NOD attached to case within 1-2 days

Submitter (hospital or CMA) retrieve NOD, Level 2 Evaluation from case in Qualitrac.

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The complete PASRR packet is needed prior to admission includes the Level 1 Outcome Letter, and if applicable, PASRR Level 2 evaluation and NOD

PAS vs RR





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Qualitrac Access Overview

The Telligen Provider Portal is a web application that allows healthcare providers to submit review requests.

The Registration Process starts with the identification of the key individuals in your organization: The **Provider Executive**, i.e., the duly authorized representative permitted to bind your organization, agrees to the terms and conditions of the Provider Portal Agreement.

The Provider Executive designates one or more Authorized Officials(AO) for your organization.

The AO is who will set up accounts. This role **DOES NOT** set up accounts.

The Authorized Official(s) (AO). This user is given the authority to grant access to others within your organization.

This user can add and deactivate users, reset passwords.

If more than one AO is designated, a separate online registration must be completed for each one. Organizations are limited to the number of AO's they can have.

The Provider Portal User (PPU). This person has access to the provider portal to submit requests.



Qualitrac-Provider Portal Security



The Provider Portal is a web application that allows health care providers to submit requests for authorization of services

The Provider Portal utilizes a delegated security model.

A delegated security model requires an organizational executive (Provider Executive) to "delegate" administrative rights to one or more individuals within their organization (Authorized Official).

There should be at least one Authorized Official (AO) per facility. The Authorized Official (AO) will:

Be the point of contact for the organization

Add, remove or edit Provider Users accounts

Reset Passwords, obtain forgotten user-names, and provide log in assistance

PLEASE NOTE - HIPAA compliance requires all staff entering reviews or accessing the portal MUST have their own log-in and password. Do not create generic log-ins.





PLEASE NOTE: USE ONLY If you need to obtain access to Qualitrac and do not yet have an identified Authorized Official (or if you need to update the AO identified for your facility), there is a link on the main CO PASRR web page pictured here...

> https://hcpf.colorado.gov/pre -admission-screening-andresident-review-program



*Please note it takes 5-7 Business days to set up an account





Qualitrac Access: What is next?

- If you do not have an account- contact your Authorized Official(AO) to set up the account
- If you have an account but do not remember your user-name- contact your Authorized Official(AO) to look up your user-name
- If you have forgotten your password a user can do one of 2 things-
 - Go to the Qualitrac Log in and click the link to reset password
 - Contact your AO to send you a link to reset your password





PASRR Level | Screen

Cassie Winters Level 1 Reviewer, Level 2 QA Reviewer

Beth Elbe Lead PASRR Level I Reviewer

Demonstration

Entering of a new individual into Qualitrac

Submitting a Request

PASRR Level 1 Screen

Reminder: No paper forms will be accepted for PASRR. All cases must be submitted into Qualitrac.

Timing

When creating the PASRR in Qualitrac, you will select either Concurrent or Prospective timing.

- Prospective The person has yet to admit to the nursing facility = PAS
- Concurrent The person is already admitted to the nursing facility = RR

Date Request Received		Review Type *		Place of Service *		Type of Service *	
08/19/2020 04:38 pm	611	PASRR Level 1	~	Nursing Facility	~	Long Term Care	
		le this Roquest Urgent?					
	~	Is this Request Urgent?					





Selecting Providers

- Types of Providers
 - Treating Physician physician treating individual in hospital or community
 - Treating Facility accepting nursing facility
 - Ordering Provider submitters hospital or CMA
 - Additional providers add if considering multiple SNFs
- Use Correct NPI Use the NPI the SNF used to register for Qualitrac use
- Put SNF in as Treating Facility add visibility
- If SNF changes, put in as Additional Provider







PASRR Level I Screen





Reason for submitting PASRR Level I Screen

Reason For PASRR 1 Submitte	
	Reporting status change/ Other reason for submitting level I *
Reporting status change (P	Pre-admission
C Manifest without Tr	Admitted without PASRR
C Meaning Meaning	Missing documentation
Contraction of the second	Existing Level 2 no longer represents individual's current condition or new diagnosis/diagnoses found after admission
C Recent C	MH diagnosis clarification – (EXAMPLE: Conflicting diagnosis)
C Transfer from 10	O Recent in-patient psychiatric hospitalization, or emergency department evaluation (without admission) including suicidal/homicidal ideation
Citizer manner for man	 Discovery of possible I/DD condition not previously known
Reason for change in constru-	Transfer from NF to NF
Chev Dagester	○ Other reason for submitting Level 1
Chev Medicator	
C Significant improvement related to pre-	Assaly deritified FI-SRR Condition

- Despicies that a previously identified organic conditionitiements is now primary
- Other masors for charge in condition

Other mason for change in condition *





Submission Tips – Sections A, B, and C

Dropdowns -	- complete	all required
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Is the individual on antipsychotic, mood stabilizing, or antidepressant medication?*

Yes

 \bigcirc No







Submission Tips – Sections A, B, and C

Read each item and respond to all items in each section

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?*

O Yes

⊖ No

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

O 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?*

O Yes

⊖ No

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

Yes

⊖ No

Submission Tips – Respite

Section C – "Respite stays of up to 30 days to provide respite to in-home caregivers" Answer yes if:

Hospice - Up to a 5-day nursing facility admission as respite for in-home caregiver relief Medicare Hospice benefit

Qualifies under PASRR Categorical Determination/Provisional Admission for terminal illness

HCBS Respite – Up to 30 calendar days per Medicaid certification period as respite for inhome caregiver

Home and Community Based Services (HCBS) – CMA case manager will need to coordinate & verify respite benefit under the individual's specific waiver

Qualifies under PASRR Categorial Determination/Provisional Admission for HCBS respite and plan must be for individual to return to community/home following brief stay







PASRR Level I Screen





Avoiding Requests for Information - RFI

Include requested documentation at submission

1) Include elements of a recent physical exam in the clinical documentation:

A clinical note (H&P, review or systems, etc.) that indicates a physical exam was completed within the last 3-6 months. Include a face sheet from EHR if available.

2) Include a current medication list:

A copy of the current prescribed medications. Include the medication name, dosage, indication/reason, frequency, and start date. This is typically submitted as an orders list.

3) Please <u>utilize fields</u> in the Level I Screen and include as much information in fields as possible. Some fields are required.

When an answer to a PASRR Level I screen is indicated as "Yes" additional fields will be visible to accept more information.

**Please submit any 27-65 certification documents if applicable, with other documentation.

PASRR Process



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Detailed Process for Level 2 contact and collateral

Completed evaluation will be reviewed by Telligen for quality and accuracy

contacts for collateral

→ to SMHA or SIDA for approval and NOD CM will retrieve the Level 2 Evaluation and NOD

A completed PASRR includes: Level 1 Screen, Level 1 Outcome Letter When applicable - Level 2 NOD, PASRR Level 2 Evaluation



MI, IDD/RC or "Dual"

Individuals will be assessed for MI and/or IDD PASRR conditions.

Some people will be assessed for MI and IDD/Related Conditions, referred to as "Dual" when there is information indicating that both conditions may exist.

Level II referrals confirmed as Duals are completed with an independently licensed MH clinician, along with a deep dive consult with one of Telligen's IDD assessors before the write-up and recommendations are finalized.

Completed evaluations should indicate the names of both professionals.

Recommendations may include both MI and IDD services warranted.

SNFs should have a complete PASRR packet with completed L2 and NOD BEFORE the individual is admitted to the facility.





View Status and Outcomes (1 of 3)

After a review has been submitted, you can find the review by clicking on the magnifying glass and completing either a Member Search or a Case Search.











View Status and Outcomes (2 of 3)

Case Search

If you are searching by Case ID, simply enter the Case ID in the box and click **Search**.

Click on any blue link to be directed to that specific review.

▼ Client:	Method Search By Case ID Search By Authorization ID Search By Claim Number Search By Request ID	Case ID 24443			Q Search
Show 10 v entries					Search:
Case ID	 Request ID 	Review Type	• Timing	Case Status	Date Request Received
24443	24455	PASRR Level 1	Prospective	Not Submitted	03/21/2023 09:57 am









View Status and Outcomes (3 of 3)

Member Search

- If searching by using the Member Search function, you will be directed to the Member Hub.
- Go to the Utilization Management Panel and find the case
- Click on the ellipsis (...) to the right of the request you are searching for.
- Click on View Request to see the status and details of that review.
- If the request has not yet been reviewed by our clinical team, users also have the option to delete the request.

Status	Case ID	Request Review Type	timing	Treating Prov./Phys.	Treating Facility	Req. Red Start End	A. I Outcome Action
Request Is Complete	24445 2	4457 PASRR Level 1	Prospective	AZAR, COLLEEN	ORCHARD PARK HEALTH CARE CENTE	03/31/2023	Approved View Request
							İ





Confirming Treating Facility

NOD will be issued to the Treating Facility – this should be the SNF accepting the individual.

Follow-up will go to the Treating Facility – need the accepting SNF (Treating Facility) to complete the follow-up to track services implemented.

When changing the Treating Facility, use the NPI number the facility used to register for Qualitrac.

If/when the SNF changes during or after the PASRR process: Access the case in Qualitrac. Use "Action" button and select "Edit" the case.

Authorization Reque	st				Actions -
Case Id 24715	Request ID 24727	Date Request Received 04/28/2023 03:46 pm	Review Type PASRR Level 1	Place of Service Nursing Facility	Type Delete Edit
Timing Prospective					

Confirming Treating Facility

Remove the facility listed in the Treating Facility.

Add the new Treating Facility (accepting SNF).

**Use the NPI the SNF used when registering for Qualitrac when searching for the facility to add to Treating Facility

Туре	Name	NPI	Address	Phone	Primary Taxor	omy PPO Redirect Reason	Comments	Action
Treating Physician	A HUNTER, HEATHER	1992325872	4141 E Dickenson Pl Denver, CO, 80222	(303) 504- 6500	Case Manager/C Coordinator	Care	▶	
Treating Facility	SUNNY ACRES HEALTHCARE	1164945010	2501 E 104th Ave Thornton, CO, 80233	(303) 255- 4100	Respite Care			
Ordering Provider	SKY RIDGE MEDICAL CENTER	1427250976	10101 Ridgegate Pkwy Lone Tree, CO, 80124	(720) 225- 1981	General Acute C	are Hospital	Delete	
						Confirmation Needed		
						Are you sure you want to delete this provider	?	
								No





Confirming Treating Facility

Attest and add comments, then Submit

User Attestation

A I certify...

- · that the submitted information is true, accurate and complete to the best of my knowledge.
- · that the submitted information is supported within the patient's medical record.
- · that I understand that any deliberate misrepresentation of any information in this medical review may subject me to liability under civil and criminal laws.
- · that I understand an approval of a medical authorization request by Telligen does not guarantee payment for services.
- I agree to notify all involved parties of the outcome of this authorization request.

Acknowledging User *

pvalvanoppu



Submit Review	×	
omments		
Comments	//	
Cancel Submit		





View Assessments



Assessment	
Show 10 v entries	
Name	
PASRR II Evaluation	







View Level I Outcome Letter

Scroll to the Correspondence Panel to view the outcome letter.

Click on the **blue letter link** to open it.

Clicking on the **box and arrow** icon will allow you to download and print the letter as well.







Closing – Questions and Answers



Please make sure you are on the distribution list for Tuesday Stakeholder Calls!

 <u>https://visitor.r20.constantcontact.com/manage/optin?v=001HfxrbpGNWZ0lZnPp6t3PG2s9XPNl8ZvgFdjsKv</u> <u>Snhly8z9JmHyp6DeoLJ3saT6x0SeqRR1ub149uoXxe1ok4jTzfMSQ0BN7S5vcLiRO7gdY%3D&,id=preview</u>



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Sign Up For HCPF's Email Lists

Pre-Admission Screening and Resident Review (PASRR) Program Stakeholders

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Questions??

Closing

Contacts & Resources

State Contacts

Margaret Anderson, SIDA and PASRR Administrator <u>Margaret.Anderson@state.co.us</u> 303-866-5605

Michelle Voss, SMHA Michelle.Voss@state.co.us 720-646-2881

Telligen Contacts

Qualitrac Support Team
 Email: <u>ColoradoSupport@telligen.com</u>
 Phone: 1-833-610-1052
 Hours of Operation: 6 AM – 6 PM MST, Email 24 hours (do not include PHI)





Additional Resources

Previous training and resources available on HCPF web site, PASRR page

https://hcpf.colorado.gov/preadmission-screening-and-residentreview-program

Forms & Templates

- PASRR Level II Serious Mental Illness Missing Docume
- <u>PASRR Quarterly Psych Census Template</u> Updated Septe
 <u>Note</u>: Ensure emails containing PHI or PII are sent encry
 - The PASRR quarterly psych census report is a requi than 16 beds that is primarily engaged in providing medical attention, nursing care, and related servic ensuring that they meet the assurance that their f minimum are at serious risk of losing Medicaid dol
 - Send reports by quarter. Reports
 - Quarter 1
 - Quarter 2
 - Quarter 3

Ouarter 4

Memos & Guidance

- Operational Memo OM 23-015 PASRR COVID-19 Update March 7, 2023
- Operational Memo OM 21-016 New PASRR Vendor February 2, 2021
- Operational Memo OM 20-043 PASRR COVID-19 Update 2.5 April 22, 2020
- Operational Memo OM 19-44 PASRR Updates September 26, 2019
- PASRR Contact Guide September 2019





Training Materials

PASRR Introduction Presentation - February 9, 2021

- PASRR Introduction Q&A February 9, 2021
- <u>PASRR Training Video Playlist</u>

PASSR Level 1 - Part 1 Presentation - February 16, 2021

- PASRR Level 1 Part 1 Q&A February 16, 2021
- PASRR Training Video Playlist

PASRR Level 1 - Part 2 Presentation - February 23, 2021

- <u>PASRR Level 1 Part 2 Q&A</u> February 23, 2021
- <u>PASRR Level 1 Screenshots</u> February 23, 2021
- <u>PASRR Training Video Playlist</u>