

PASRR LEVEL I INSTRUCTIONS FOR OHCA FORM LTC-300A

PLEASE READ THE FOLLOWING INSTRUCTIONS THOROUGHLY. IF YOU HAVE ANY QUESTIONS OR IF ANY PART IS NOT UNDERSTOOD, PLEASE CONTACT OHCA/LOCEU.

PURPOSE

The LTC-300A is used to meet Federal requirements for PASRR (Pre-Admission Screening and Resident Review). This form is used to screen all new applicants (regardless of their method of payment) seeking admission to a Medicaid certified nursing facility. The LTC-300A must be completed **prior to admission** to screen for any indication of mental illness, mental retardation or a related condition. It is also used to review resident status upon interfacility transfer, and is used to screen an existing resident who was not identified as having MI or MR at the time of admission, but was subsequently found to have mental illness, mental retardation or a related condition.

Completion of a new LTC300A form is required for **all admissions** to a nursing facility, **including residents transferring from another nursing facility**. Nursing facilities should also complete and submit a new LTC-300A when a significant change occurs in a person's mental status. It does not apply to readmission to a nursing facility of an individual who, after being admitted to the nursing facility, was transferred for *non-psychiatric care* in a hospital. **Payment will not be made for individuals who were admitted to the nursing facility prior to the signature date in Section I. Also, payment will not be made for individuals who were inappropriately admitted to the nursing facility prior to a Level II screen.**

PREPARATION

SECTION I

Section I consists of six questions used to determine whether a PASRR Level II assessment is required. It must be completed by an authorized official of DHS, the hospital, the nursing facility, or by a physician. An authorized official is defined as:

- The nursing facility administrator or co-administrator;
- A licensed nurse from DHS, the nursing facility, hospital, or physician's office;
- A social worker from DHS, the nursing facility, or the hospital.

All questions must be answered and the form must be signed and dated on or before the day the individual is admitted to the nursing facility.

Information provided in this section must agree with information provided on the individual's initial Minimum Data Set (MDS). For example, diagnoses should agree.

If the patient does not remain in the facility long enough for the MDS to be completed, note the date of discharge on LTC-300A (upper right hand corner of form) in order to prevent the form being returned to you for correction/completion.

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SECTION II (For Nursing Facility Only)

The nursing facility must evaluate the completed LTC-300A, the MDS and all other available medical and social information, to determine if there is any current or past history of mental illness, mental retardation or a related condition. The Level I PASRR screen is used to determine whether a Level II Assessment is necessary prior to allowing the individual to be admitted.

The nursing facility is responsible for determining from the evaluation referenced above whether or not the individual can be admitted/transferred to the facility. If there is any doubt concerning whether an admission should be granted, the nursing facility must contact an analyst at the Oklahoma Health Care Authority (OHCA) Level of Care Evaluation Unit.

Individual can be admitted. Any one of the following circumstances will allow an individual to enter the nursing facility without a Level II PASRR assessment:

- There are no current indications or history of mental illness, mental retardation or a related condition.
- The individual does not have a diagnosis of mental retardation or a related condition but has a primary diagnosis of dementia (including dementia of the Alzheimer's type) documented in writing by a physician.
- The individual does not have a diagnosis of mental retardation or a related condition and the primary diagnosis is not a serious mental illness with a non-primary diagnosis of dementia (including dementia of the Alzheimer's type) documented in writing by a physician.
- An individual with indications of mental illness, mental retardation or a related condition, is not a danger to self or others and is being admitted from an acute medical care hospital as an **Exempted Hospital Discharge**. The individual must meet three conditions:
 1. The individual must be admitted to the NF directly from a hospital after receiving acute inpatient care at the hospital; and
 2. The individual must require NF services for the condition for which he/she received care in the hospital;
 3. The attending physician must have certified that the individual is likely to require less than 30 days of NF services.

If an individual who enters a nursing facility with an exempted hospital discharge is later found to require more than 30 days of NF care, the State mental health or mental retardation authority must conduct a Level II assessment within 40 calendar days of admission. The nursing facility is responsible for ensuring that the patient is either discharged by the 30th day or a Level II assessment has been requested and is in progress. Payment cannot be made past the 30th day unless a Level II assessment has been requested. In no case can payment be made past the 40th day unless the State mental health or mental retardation authority has made a Level II determination and, if appropriate, the DHS Nurse has made a NF level of care determination.

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Provisional Admission for Short-term Stays may be granted prior to admission under the following conditions by contacting OHCA/LOCEU for approval with documentation of validity as long as the person is not a danger to self or others (homicidal or suicidal):

- **Provisional Admission for Delirium:** Any person with mental illness, mental retardation or related condition, may be admitted to the nursing facility if the individual is experiencing delirium due to effects of anesthesia, medication, unfamiliar environment, severity of illness, or electrolyte imbalance. A Level II PASRR assessment must be completed as soon as the delirium clears. **Written documentation by a physician must be submitted to and approved by OHCA prior to admission.**
- **Provisional Admission for Emergency:** Any person with mental illness, mental retardation or related condition, as long as that person is not a danger to self and/or others, may be admitted to the nursing facility for a period not to exceed seven days pending further assessment in emergency situations requiring protective services. **Written documentation by Adult Protective Services is required and must be approved by OHCA prior to the admission.** The request for a Level II is made immediately upon admission if a longer stay is anticipated.
- **Respite Care Admission:** Any person with mental illness, mental retardation or a related condition, as long as that person is not a danger to self and/or others, may be admitted to the nursing facility to provide respite to in-home caregivers to whom the individual is expected to return following the brief NF stay. Respite care may be granted for up to 15 consecutive days per stay, not to exceed 30 days per calendar year. **Written documentation must be provided to and approved by OHCA prior to the respite admission.**

Note: Provisional Admission for Delirium, Emergency or Respite Care can neither be extended nor payment made for NF care beyond the stated limits unless a permanent determination of NF level of care is made.

Individual cannot be admitted. If the individual has current indications or a history of mental illness, mental retardation or a related conditions he/she cannot be admitted until LOCEU is contacted to determine the necessity for a Level II PASRR assessment.

A request for a Level II assessment must be telephoned to an LOCEU analyst who will notify the State mental health or mental retardation authority. OHCA will issue a written notice to the individual and his or her legal representative that he/she is being referred for a Level II assessment.

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DEFINITIONS

SERIOUS MENTAL ILLNESS: An individual may be considered to have a serious mental illness if he/she has a major mental disorder diagnosable under the Diagnostic and Statistical Manual of Mental Disorders, 3rd edition revised in 1987. A major mental disorder is:

A schizophrenic, mood, paranoid, panic or other severe anxiety disorder, somatoform disorder, personality disorder, other psychotic disorder or another mental disorder that may lead to a chronic disability.

A major mental disorder is **not** a primary diagnosis of dementia, including Alzheimer's disease or a related disorder, or a non-primary diagnosis of dementia unless the primary diagnosis is a major mental disorder.

MENTAL RETARDATION OR RELATED CONDITION: An individual is considered to be mentally retarded if he/she has a level of retardation (mild, moderate, severe or profound) as described in the American Association of Mental Deficiency's Manual on *Classification in Mental Retardation* (1983), page 1. Mental retardation refers to significantly sub-average general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period.

Related Conditions: (42 CFR 435.1009) "Persons with related conditions means individuals who have a severe, chronic disability" attributable to:

1. Cerebral palsy, epilepsy, autism, or debilitating injury (onset prior to age 22);
2. Any other chronic condition other than mental illness with an onset prior to age 22 closely related to mental retardation because this condition results in impairment of general intellectual functioning **or** adaptive behavior, and requires treatment or services similar to those for persons with mental retardation (e.g. hydrocephalus, spina bifida, Down syndrome, seizure disorder, quadriplegia, anoxia, muscular dystrophy etc.).

DEMENTIA: An individual is considered to have dementia if he/she has a diagnosis of dementia as described in the *Diagnostic and Statistical Manual of Mental Disorders*, 3rd edition Revised 1987(DSM-III-R).

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SUBMISSION OF FORM

Forward the **original and one copy** of the LTC-300A, including supporting documentation, **and a photocopy of the individual's Minimum Data Set** to the Oklahoma Health Care Authority, Level of Care Evaluation Unit, 4545 N. Lincoln Blvd., Suite 124 Oklahoma City, OK 73105. **Information must be received by OHCA within 30 calendar days after date of admission.**

A copy of the LTC-300A should be retained in the nursing facility until the original document is returned. Oklahoma Health Care Authority staff will review the form and complete the box in the upper corner. The original copy of the LTC-300A will be returned to the nursing facility where it and all supporting documentation must become a permanent part of the patient record.

When an interfacility transfer of a resident with mental illness or mental Retardation, or a related condition occurs, the **transferring facility is responsible** for ensuring that copies of the resident's most recent PASRR LEVEL I SCREEN—LTC-300A (and PASRR Level II Evaluation and OHCA notification letter, if applicable) accompany the transferring resident. The **receiving facility is responsible for submitting a new LTC-300A to the Oklahoma Health Care Authority indicating the interfacility transfer. and identifying the transferring NF facility.**

THE LTC-300A DOCUMENT IS SUBJECT TO INSPECTION BY BOTH FEDERAL AND STATE REVIEWERS.

A BLANK COPY OF THE LTC-300A AND INSTRUCTIONS CAN ONLY BE OBTAINED FROM THE OHCA WEB SITE AT WWW.OHCA.STATE.OK.US.

