

POLICY AND PROCEDURE

DEPARTMENT: Medical Management	DOCUMENT NAME: PASRR Level II Evaluations
PAGE: 1 of 9	REFERENCE NUMBER: LA.CM.33
APPROVAL DATE: 5/14/19	REPLACES DOCUMENT:
EFFECTIVE DATE: 5/14/19	RETIRED DATE:
PRODUCT TYPE: Medicaid	REVIEW/REVISED DATE: <u>2/20/2020</u>

SCOPE:

This policy applies to Louisiana Healthceare Connections ([Plan LHCC](#)) [Medical Management Behavioral Health Department](#) employees.

PURPOSE:

The purpose of this policy is to outline the State guidelines for [The Plan's LHCC's](#) oversight of Pre-Admission Screening and Resident Review (PASRR) evaluations and to develop a process on how Licensed Mental Health Professionals (LMHP) will perform PASRR Level II evaluations to assess the need for nursing facility placement and services.

POLICY: [AD1][TDW2][AD3]

1. Training and Staffing

- [The Plan LHCC](#) will provide [licensed mental health professionals](#) (LMHPs) to perform PASRR Level II evaluations [for adult mental health rehabilitation services](#). [Whether through subcontract or direct employment](#), [Plan LHCC](#) shall maintain appropriate levels of LMHP staff to assure adequate local geographic coverage for in field face-to-face contact with members. LMHP staff must be trained to determine the medical necessity criteria as established by the State LMHPs will be certified in administering the Level of Care Utilization System (LOCUS). (Emergency Contract 4.3.10)
- [The Plan](#) will provide LMHPs to perform PASRR Level II evaluations upon referrals from OBH to assess the appropriateness of nursing facility placement and the need for facilitation of behavioral health services. PASRR Level II evaluations must be performed by an LMHP independent of OBH and not delegated to a nursing facility or an entity that has a direct or indirect affiliation or relationship with a nursing facility as per 42 CFR 483.106. [Whether through subcontract or direct employment](#), the Plan shall maintain appropriate levels of LMHP staff to assure adequate local geographic coverage for in field face-to-face contact with members in need of such evaluations. These staff must be administratively separate from staff performing utilization review but may be the same staff as listed under 4.3.10 (Emergency Contract 4.3.11)

POLICY AND PROCEDURE

DEPARTMENT: Medical Management	DOCUMENT NAME: PASRR Level II Evaluations
PAGE: 2 of 9	REFERENCE NUMBER: LA.CM.33
APPROVAL DATE: 5/14/19	REPLACES DOCUMENT:
EFFECTIVE DATE: 5/14/19	RETIRED DATE:
PRODUCT TYPE: Medicaid	REVIEW/REVISED DATE: <u>2/20/2020</u>

- upon referrals from Office of Behavioral Health (OBH) to assess the appropriateness of nursing facility placement and the need for, and facilitation of, behavioral health services [AD4] [TDW5] [AD6].
- PASRR Level II evaluations must be performed by an LMHP independent of OBH and not delegated to a nursing facility or an entity that has a direct or indirect affiliation or relationship with a nursing facility as per 42 C.F.R. §483.106.
- Whether through subcontract or direct employment, LHCC will maintain appropriate levels of LMHP staff to ensure adequate local geographic coverage for in field face to face contact with enrollees in need of such evaluations. These staff must be administratively separate from staff performing utilization review but may be the same staff as listed under
 - the “LMHP” additional staff requirement.
 - The Plan LHCC will provide training to key staff and subcontractors to perform Pre-Admission Screening and Resident Review (Emergency Contract 4.6.8.1.7).
 - The Plan shall comply with the terms of the Louisiana Department of Justice (DOJ) Agreement (Case 3:18-cv-00608, Middle District of Louisiana) as directed by LDH (Emergency Contract 6.1.16).

2. Tracking and Reporting [AD7] [TDW8] [AD9]

- The Plan LHCC will track enrollees residing in a nursing facility who went through the PASRR process, those identified with Serious Mental Illness (SMI) and those receiving specialized services as per 42 C.F.R. §483.130 (Emergency Contract 6.39.7.2).
- The Plan shall submit case management reports monthly to LDH including the number of members identified with special healthcare need by the PASRR Level II authority (6.41.)
- LDH reserves the right to request additional reports as deemed necessary. LDH will notify the Plan of additional required reports no less than sixty (60) days prior to due date of those reports (Emergency Contract 6.41.6).
- The Plan LHCC will utilize the Louisiana Department of Health (LDH)- issued reporting template to report utilization of the PASRR process (Emergency Contract 6.39.7.1).

POLICY AND PROCEDURE

DEPARTMENT: Medical Management	DOCUMENT NAME: PASRR Level II Evaluations
PAGE: 3 of 9	REFERENCE NUMBER: LA.CM.33
APPROVAL DATE: 5/14/19	REPLACES DOCUMENT:
EFFECTIVE DATE: 5/14/19	RETIRED DATE:
PRODUCT TYPE: Medicaid	REVIEW/REVISED DATE: 2/20/2020

- The Plan LHCC shall track and report quarterly to the Office of Behavioral Health (OBH) Louisiana Department of Health (LDH) the delivery of all PASRR specialized behavioral health services as defined and required under 42 C.F.R. §483.120 (Emergency Contract 6.39.7.3). . and the Department of Justice (DOJ) Agreement.
- Quarterly Deliverables shall be submitted by April 30, July 30, October 30, and January 30, for the calendar quarter immediately preceding the due date (Emergency Contract 18.9.3.2).
- Unless otherwise specified in the contract, LHCC will meet deadlines for submitting deliverables quarterly by April 30, July 30, October 30, and January 30, for the calendar quarter immediately preceding the due date.
Failure to comply with the requirements and performance standards set forth in this contract may result in the assessment of a monetary penalty per incident of non-compliance.
- Determinations of non-compliance may be based on findings from a review of deliverables, enrollee or provider complaints, or any other reliable source.
- If a due date falls on a weekend or State-recognized holiday, deliverables will be due the next business day (Emergency Contract 18.9.3.4).
- The Plan shall report to LDH indicators relative to individual evaluation on a monthly basis with information available by region, type of placement, results of recommendations, location of individuals and referral sources as outlined in the LDH-Issued reporting template (Emergency Contract 18.13.1).
- The Plan will advise OBH and Medicaid on any barriers to completing the PASRR evaluations or tracking process (Emergency Contract 6.39.7.4).
- Records shall be retained for 10 years in order to support OBH determinations, and to protect the individual's appeal rights as per 42 CFR 483.30 (Emergency Contract 6.39.7.5).

3. Services to comply with LDH requirements for enrollees receiving PASRR evaluations[AD10] and Services for Special Populations (Emergency Contract 6.19).[TDW11][AD12]

POLICY AND PROCEDURE

DEPARTMENT: Medical Management	DOCUMENT NAME: PASRR Level II Evaluations
PAGE: 4 of 9	REFERENCE NUMBER: LA.CM.33
APPROVAL DATE: 5/14/19	REPLACES DOCUMENT:
EFFECTIVE DATE: 5/14/19	RETIRED DATE:
PRODUCT TYPE: Medicaid	REVIEW/REVISED DATE: <u>2/20/2020</u>

Special Health Care Needs (SHCN) population is defined as individuals of any age with mental disability, physical disability, or other circumstances that place their health and ability to fully function in society at risk, requiring individualized health care approaches.
Individuals with special health care needs include Nursing facility residents approved for specialized behavioral health services recommended as a result of PASRR Level II determination (Emergency Contract 6.19.1. and Emergency contract 6.19.1.6)

- The Plan shall identify members with special health care needs within ninety (90) days of receiving the member's historical claims data (if available). LDH may also identify special healthcare members and provide that information to the Plan. The LMHP or PCP can identify members as having special needs at any time the member presents with those needs. The MCO must assess those members within ninety (90) days of identification, with the exception of individuals referred for PASRR Level II, who shall be evaluated within federally required timelines as per Section 6.38. The assessment must be done by appropriate healthcare professionals. Assessments that determine a course of treatment or regular care monitoring as appropriate shall result in a referral for case management (Emergency Contract 6.19.2).

3.

- The Plan LHCC will be responsible for conducting or subcontracting to conduct PASRR Level II evaluations of enrollees upon referral from OBHLDH[AD13][TDW14][AD15]. Referrals shall be based upon the need for an independent evaluation to determine the need for nursing facility services and/or the need for specialized services to address mental health issues while the enrollee is in a nursing facility (Emergency Contract 6.39.5.1). This evaluation does not include individuals with an Office for Citizens with Developmental Disabilities (OCDD) Statement of Approval; there is a separate determination process outside of this contract for these evaluations.
- In conducting the evaluation, The Plan LHCC will follow the criteria set forth in 42 C.F.R. Part 483, Subpart C and shall utilize the PASRR Level II standardized evaluation form provided by LDH (Emergency Contract 6.39.5.2).
- Evaluators may use relevant evaluative data, obtained prior to initiation of PASRR, if the data are considered valid and accurate and

POLICY AND PROCEDURE

DEPARTMENT: Medical Management	DOCUMENT NAME: PASRR Level II Evaluations
PAGE: 5 of 9	REFERENCE NUMBER: LA.CM.33
APPROVAL DATE: 5/14/19	REPLACES DOCUMENT:
EFFECTIVE DATE: 5/14/19	RETIRED DATE:
PRODUCT TYPE: Medicaid	REVIEW/REVISED DATE: <u>2/20/2020</u>

reflect the current functional status of the individual. However, if necessary to supplement and verify the currency and accuracy of existing data, the evaluator shall gather additional information necessary to assess proper placement and treatment (Emergency Contract 6.39.5.3).

- For those individuals without sufficient documentation to establish the validity of a primary dementia diagnosis, this may include authorizing additional professional evaluation to ensure appropriate diagnosis and differentiation.
- In conducting Level II evaluations, The Plan LHCC will ensure that the recommendations focus on ensuring the least restrictive setting appropriate with the appropriate services, including case management services as described in the contract. (Emergency Contract 6.39.5.5) LHCC will ensure that these recommended services are offered to the enrollee.
- In order to comply with federally mandated timelines, The Plan LHCC will submit the completed Level II evaluation report to OBH within four (4) working business[AD16][TDW17][AD18]-days of receipt of the referral from LDH or incur a penalty of 5,000.00 per month when MCO performance for this indicator is below 95% of the total within that month (Emergency Contract 6.39.5.4 & Emergency Contract 20.3.3).
- When LDH OBH determines that nursing facility services are not appropriate, The Plan LHCC will assist eligible members enrollees[AD19][TDW20][AD21][TDW22]-to obtain appropriate alternative behavioral health services available under this contract (Emergency Contract 6.39.5.6).
- LHCC will offer case management to all enrollees with Special Healthcare Needs (SHCN) regardless of information gathered through this comprehensive assessment, the Health Needs Assessment (HNA), or predictive modeling[AD23][TDW24][AD25]
- LHCC will have three (3) levels of case management and transitional care management for individuals as they move between care settings.
- Level II evaluation recommendations shall focus on ensuring the least restrictive setting appropriate with the appropriate eservices (emergency contract 6.39.5.5).

POLICY AND PROCEDURE

DEPARTMENT: Medical Management	DOCUMENT NAME: PASRR Level II Evaluations
PAGE: 6 of 9	REFERENCE NUMBER: LA.CM.33
APPROVAL DATE: 5/14/19	REPLACES DOCUMENT:
EFFECTIVE DATE: 5/14/19	RETIRED DATE:
PRODUCT TYPE: Medicaid	REVIEW/REVISED DATE: <u>2/20/2020</u>

- Upon request, the MCO shall provide the PASRR Level II authority (OBH) with documentation supporting appropriate limits on a service on the bases of medical necessity for individuals determined by the PASRR Level II authority to need specialized behavioral health services (Emergency Contract 8.1.2.0).
- If at any time the Plan should become aware that a member residing in a nursing home who has an SMI has not received a Level II determination, the Plan shall notify OBH (Emergency Contract 6.39.5.7).
- The Plan shall notify OBH as outlined in the LDH-issued reporting template of any problems or issues with the PASRR process (Emergency Contract 6.39.5.8).

Case Management for Members Receiving Nursing Facility Care

- The Plan will ensure that members who are identified by OBH as needing specialized services for behavioral health while in a nursing facility have access to such services as required under 42 CFR 483.120 and Determined by OBH (Emergency Contract 6.39.6.1).
- For Individuals denied nursing facility placement, The Plan will ensure member have access to medically necessary covered services needed to maintain them in the community (Emergency Contract 6.39.6.1)
- Service authorizations for specialized behavioral health services must be in place within 15 days following the receipt of the specialized behavioral health service recommendations as a result of the PASRR Level II determination or admission to the nursing facility, whichever is later (Emergency Contract 6.39.6.2).
- The Plan will inform OBH of any changes in condition of member residing in a nursing facility that would require a resident review as noted in section 1919(e)(7)(B)(iii) of the social security act (Emergency Contract 6.39.6.3).
- The plan will comply with provisions of the contract. The plan agrees that Failure to comply with the requirements and performance standards set forth in the contract may result in the assessment of a monetary penalty, sanctions and/or termination of the contract in whole or in part, as set forth in the contact (Emergency Contract 25.18)

POLICY AND PROCEDURE

DEPARTMENT: Medical Management	DOCUMENT NAME: PASRR Level II Evaluations
PAGE: 7 of 9	REFERENCE NUMBER: LA.CM.33
APPROVAL DATE: 5/14/19	REPLACES DOCUMENT:
EFFECTIVE DATE: 5/14/19	RETIRED DATE:
PRODUCT TYPE: Medicaid	REVIEW/REVISED DATE: 2/20/2020

PROCEDURES:

- PASRR evaluation requests will be received from OBH in the form of a secure email titled “OBH PASRR”. **The Plan LHCC** staff will follow internal work processes for verifying eligibility, contacting the NF to schedule PASRR appointments, and for conducting PASRR assessments.
- **The Plan LHCC** will conduct PASRR assessments using LDH PASRR Level II Standardized Evaluation form provided by LDH for members being evaluated for nursing facility placement. Completed evaluations and supplemental documents are then submitted to OBH for a determination within (4) working business**[AD26]****[TDW27]****[AD28]**-days of referral receipt from OBH.
- **The Plan LHCC** will ensure that the Level II PASRR assessment and recommendations are made on consistent analysis of the data and as indicated in 42 C.F.R. Part 483, Subpart C.
- **The Plan LHCC** will ensure that the supplemental documents are obtained to support clinical assessment and diagnosis, and that evaluation recommendations are focused on ensuring the least restrictive setting appropriate.
- If OBH determines that the enrollee is ineligible for the nursing facility placement, and alternate community based services are recommended, or if the enrollee refuses nursing facility placement, **The Plan LHCC** will ensure the enrollee has access to the recommended services and access to medically necessary covered services in which they agree to and require to maintain in the community. assist
- **The Plan** will ensure that an enrollee who has met clinical criteria for recommended services, receive authorizations for special health care needs. in securing recommended services. **[AD29]****[TDW30]****[AD31]**

OBH will be notified of any problems or issues that may occur with PASRR

POLICY AND PROCEDURE

DEPARTMENT: Medical Management	DOCUMENT NAME: PASRR Level II Evaluations
PAGE: 8 of 9	REFERENCE NUMBER: LA.CM.33
APPROVAL DATE: 5/14/19	REPLACES DOCUMENT:
EFFECTIVE DATE: 5/14/19	RETIRED DATE:
PRODUCT TYPE: Medicaid	REVIEW/REVISED DATE: <u>2/20/2020</u>

[processes](#). [AD32][TDW33][AD34]

ATTACHMENTS:

PASRR Level II Behavioral Health Comprehensive Evaluation Form



PASRR Level II Level II Evaluation - Behavioral Health CFinal Updated 01.17

MCO Unable to Conduct Form



OBH PASRR II
Unable to Conduct

Level of Care Utilization Form



Locus-Score-Sheet. Code of Federal
pdf Regulation 483 Sub

LOCUS Instrument Instructions



LOCUS Instrument
Version 20.pdf

REFERENCES:

DEFINITIONS:

REVISION LOG

REVISION	DATE
<u>Removed attachment named: Code of Federal Regulation 483. Code of Federal Regulation 483. Removed attachment named: PASRR Level II Behavioral Health Care.</u>	<u>2/20/20</u>
<u>Changes added to reflect emergency contract items</u>	<u>2/12/20</u>
<u>Removed PASRR Level II evaluation form and Added OBH Revised PASRR Level II form.</u>	<u>2/12/20</u>

POLICY AND PROCEDURE

DEPARTMENT: Medical Management	DOCUMENT NAME: PASRR Level II Evaluations
PAGE: 9 of 9	REFERENCE NUMBER: LA.CM.33
APPROVAL DATE: 5/14/19	REPLACES DOCUMENT:
EFFECTIVE DATE: 5/14/19	RETIRED DATE:
PRODUCT TYPE: Medicaid	REVIEW/REVISED DATE: <u>2/20/2020</u>

<u>Changed where stated LHCC to The Plan</u>	
<u>Revised per OBH recommendations</u>	<u>4/16/20</u>

POLICY AND PROCEDURE APPROVAL

The electronic approval retained in RSA Archer, the Company's P&P management software, is considered equivalent to a signature.

VP, Medical ManagementSr. VP, Population Health Management: Electronic Approval on File

Sr. VP, Medical AffairsChief Medical Officer: Electronic Approval on File