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EXECUTIVE SUMMARY

The Client Assessment, Referral and Evaluation (CARE) Program is administered by the Commission on Aging and Disability Community Services and Programs at the Kansas Department for Aging and Disability Services (KDADS). The CARE program’s purpose is to provide a pre-admission screening and resident review (PASRR) on individuals seeking or receiving nursing facility care to ensure that individuals with mental illness, intellectual disability and/or developmental disability (IDD/DD) are not moved into or continue to stay in a nursing facility if they can be better served in a less restrictive environment.

The CARE Program meets the federal requirements for PASRR 42 CFR 483.100 through 483.138. PASRR is federal law that requires governing states to complete a screen prior to an individual entering a Medicaid-certified nursing facility.

When a Level I CARE assessor identifies individuals with a mental illness, intellectual disability and/or developmental disability, a PASRR Level II assessment will be requested. A Level II PASRR assessor, a qualified mental health professional (QMHP) and/or a qualified intellectual disability professional (QIDP), will complete an in-depth assessment and will forward the results of the assessment to KDADS’ CARE Program. Once reviewed by the CARE Program, a PASRR determination letter is drafted and sent to the individual and/or guardian. Federal regulations state that a preadmission screening needs to be performed prior to an individual entering a nursing facility as payment is available only for services furnished after the screening or review is performed.

_Pre-admission Screening and Resident Review (PASRR) is a screen that is required by federal law to be completed before a person enters a Medicaid-certified nursing facility._

LEVEL I CARE Assessment and PASSR

The Level I CARE Assessment tool has the PASRR screen imbedded as Section B PASRR. The Level I CARE Assessment tool meets the federal requirements for PASRR for nursing facility placement. A Level I CARE assessment is required to be completed before an individual is admitted to a Medicaid-certified nursing facility, regardless of the payer source.

Level I CARE assessments are completed by Area Agencies on Aging (AAAs) and licensed and trained hospital staff such as a nurse or social worker. The AAAs complete assessments
in the person’s home, hospital, psychiatric hospital, jail, prison or within the community. Hospital assessors complete Level I CARE assessments on patients wanting to discharge to a nursing facility.

In Fiscal Year 2020, there were 12,236 assessments completed with 10,878 being the first time Level I was completed within the fiscal year; 11,024 by AAA assessors and 1,212 by hospital assessors. Possibly due to the coronavirus pandemic, the number of Level I and Level II assessments completed in 2020 slightly decreased from the number of Level I and Level II assessments completed in 2019. The Level I CARE assessment is valid for 365 days from the date of the assessment. If an individual does not enter a nursing facility in that timeframe a new Level I CARE assessment needs to be completed. A level I CARE assessment is valid indefinitely for individuals who continue to reside in the nursing facility or move between nursing home/hospital settings without a significant change in condition or a return to the community for more than 6 months. If an individual has been in the community for more than six months, a new Level I CARE assessment must be completed.

Below is a graph that shows the Level I assessments completed in 2019 vs 2020
The graph below represents the age range of individuals who have received Level I CARE assessments starting at 16 years of age, which is the youngest age that may enter a nursing facility in the state of Kansas, through ages 90 and above. The largest age group for assessments is 80-90 years.

**Special Admissions**

Admissions to a nursing facility when the Level I CARE assessment could not be completed prior to the person entering the nursing facility are known as special admissions. The facility accepts a special admission by completing Section A and B of the Level I CARE assessment (PASRR) and completing the Special Admission Fax Memo, then submitting the proper documentation to PASRR. The KDADS CARE Program offers webinar training once a month to all nursing facilities in the State to provide education on completing these admissions. The CARE Program sends out monthly e-mail correspondence to state nursing facilities to provide updates on the CARE process. The CARE Manual, found on the KDADS website, also provides instruction. The five special admissions are:

1. **Emergency Admission**: When a person is unexpectedly admitted to the nursing facility. Examples include: a caregiver becoming ill or passing away; a physician’s office recommending a person be admitted to a nursing facility and the physician is opposed to sending the person home.; or a person’s home is destroyed by tornado or fire. These types of admissions happen suddenly and unexpectedly and there is not time to complete a Level I CARE assessment prior to admission. Nursing facilities are trained to follow the KDADS procedures to receive approval for an emergency admit, and the nursing facility is responsible for calling the local AAA to complete the Level I CARE assessment before day 7 of the admit.
2. **Less Than 30-Day, also known as Exempted Hospital Discharge.** As authorized by CFR 483.106, an individual is admitted to any nursing facility directly from a hospital after receiving acute inpatient care at the hospital. The individual must require nursing services for the condition for which he or she received care in the hospital. And whose attending physician has certified before admission to the facility that the individual is likely to require less than 30 days’ nursing facility services. If the person stays more than 30 days, it is the nursing facility’s responsibility to call the AAA before day 30 of the signed order to obtain the Level I CARE assessment.

3. **Respite Stay.** When a caregiver needs a break and chooses a nursing facility to care for their loved one, but the stay cannot be longer than 30 days at one time. The nursing facility is responsible for calling the AAA and requesting a Level I CARE assessment if the individual decides they no longer wish to return home but instead prefers to reside in a nursing facility.

4. **Terminal Illness:** This is when an individual is on hospice, palliative care or has a terminal illness and has a planned admission to a nursing facility. If the individual currently has a Level I CARE assessment it is not necessary to conduct the terminal illness admission. However, if there is no Level I CARE assessment, a terminal illness admission covers a person for six months. If the individual continues residing in the nursing facility after six months, the nursing facility is responsible for calling the AAA before the six-month PASRR expires for completion of the Level I CARE assessment.

5. **Out-of-State PASRR.** When a person is coming to a Kansas nursing facility from an out-of-state hospital or an out-of-state nursing facility. The person brings their initiating state's PASRR documentation with them and gives it to the receiving nursing facility in Kansas. The state of Kansas accepts all other states’ PASRRs.

The breakdown for all five special admissions is as follows: **13,469** Less Than 30 Day, **812** Emergency, **591** Terminal Illness, **609** Out-of-State and **443** Respite Stay. Below is a graph showing 2019 vs 2020:
LEVEL II PASRR Assessment

The CARE Level II PASRR assessment process fulfills the federal mandate that individuals with IDD/DD or mental illness will not be admitted into a nursing facility if they can be served in a less restrictive setting in the community. Individuals entering a nursing facility must demonstrate a need for nursing facility level of care. An individual receiving a Level II PASRR assessment may enter any Kansas nursing facility assuming the nursing facility can meet the recommendations outlined in the Level II PASRR determination letter. Individuals are identified with a level I or level II PASRR, meaning individuals may go to any nursing facility of their choosing. Individuals identified with an active Level II MI assessment are the only ones permitted to enter one of the 10 nursing facilities for mental health (NFMH).

A Resident Review PASRR assessment is performed when an individual is residing in a nursing facility and has a serious condition related to mental illness or IDD/DD that was unknown prior to admission but becomes evident during the nursing facility stay. A Resident Review Level II PASRR assessment is also performed when a Level II PASRR determination letter has ended. PASRR determination letters are intended to be temporary. Each individual with a temporary PASRR determination letter needs to be reassessed to ensure they are meeting goals in the nursing facility and to assess if returning to the community with a smooth transition is an option.
During state Fiscal Year 2020, there were a total of 627 Level II PASRR assessments performed by trained Level II assessors contracted through Healthsource Integrated Solutions (HIS). Of these assessments, 285 were reviewed for mental illness and 47 for intellectual disability/developmental disability. As noted above, when a CARE individual receives a PASRR determination letter allowing for a temporary stay in a nursing facility and the individual has not progressed to returning to a community placement by the end of the temporary stay, a Resident Review assessment will be conducted. This is done to allow the additional time needed for determining appropriate placement and a more efficient discharge plan. At this time a letter is issued allowing the individual to remain in the nursing facility until an appropriate discharge plan is finalized. If at any time the individual’s status changes, appropriate placement can then be arranged for a transition safely and successfully back to a community setting. The Level II PASRR determination letter does not state a person must remain in a nursing facility, it simply allows for the stay to be authorized.

In state Fiscal Year 2020 there were 279 Resident Reviews for mental illness and 16 for ID/DD. Below is a graph shows level II PASRR 2019 vs 2020. A canceled screen is when KDADS canceled the assessment because the request did not meet the code of federal regulation, or it was canceled because the individual or their guardian refused to do the assessment.

Only a person that has a valid PASRR for mental illness may enter one of the 10 nursing facilities for mental health.
Area Agencies on Aging (AAAs)

The KDADS CARE Program partners with the AAAs to complete the Level I CARE Assessments. There are 11 AAAs across the state covering all 105 counties. The AAAs provide information to families and individuals looking for nursing facility placement. The AAAs are trained on, have knowledge of, or provide community-based programs in their counties that may be beneficial to divert individuals from nursing facility admissions. As such, when a AAA assessor obtains information to conduct a Level I CARE assessment and is aware of other community-based programs, the assessor directs or assist’s the individual in applying for the community-based waiver programs or any other programs, such as the Senior Care Act or the Older Americans Act.

Below is a graph showing the number of Level I CARE assessments completed by each AAA 2019 vs 2020.