

# **Delaware PASRR: Specialized Services Resource Guide**

## **Purpose**

This document aims to increase provider and stakeholder understanding of "Specialized Services" to support their timely and accurate provision. This document defines what is meant by "Specialized Services" and reviews commonly identified Specialized Services within Delaware's Preadmission Screening and Resident Review (PASRR) program.

## **Defining Specialized Services**

According to the PASRR Technical Assistance Center (PTAC), Specialized Services typically exceed the usual nursing facilities services to address specific needs related to a person's mental illness and/or intellectual disability or related condition on the basis of an individualized Level II PASRR evaluation.

Federal PASRR regulations define Specialized Services at CFR Title 42 Chapter IV Subchapter G Part 483 Subpart C § 483.120 <a href="https://www.ecfr.gov/current/title-42/chapter-lV/subchapter-G/part-483/subpart-C/section-483.120">https://www.ecfr.gov/current/title-42/chapter-lV/subchapter-G/part-483/subpart-C/section-483.120</a>

# **Understanding Specialized Services**

Although Specialized Services cannot be limited to a list, the following chart provides descriptions of those commonly identified in Delaware.

Specialized Service	Description
Psychiatric provider evaluation within 30 days of admission	<ul> <li>One-time psychiatric case consultation to evaluate response and effectiveness of psychotropic medications on target symptoms and to evaluate ongoing need for additional behavioral health services</li> <li>Performed by certified Psychiatrist, Psychiatric Nurse Practitioner, or MD</li> </ul>
Behavior Analyst Services	<ul> <li>Providing evaluation, design, and individualized protocols to improve coping/adaptive skills or decrease maladaptive behaviors</li> <li>Performed by MH professional</li> </ul>
Bimonthly Medication monitoring	<ul> <li>Twice a month monitoring of psychiatric medication</li> <li>Performed by certified Psychiatrist or Psychiatric Nurse Practitioner or MD</li> </ul>
Individual Counseling	<ul><li>1:1 therapy/counseling</li><li>Performed by MH professional</li></ul>
Residential group Home Referral	<ul> <li>Referral for a congregate living setting or care home residence model</li> <li>Process should be started within 1<sup>st</sup> 30 days</li> </ul>
Services Related to Arts and Crafts	<ul> <li>A variety of activities involving making things with one owns hands to create something tangible</li> </ul>



Music Therapy *Note: This is different than the Music and Memory program	<ul> <li>Clinical use of music to accomplish individual goals including but not limited to stress reduction, self-expression, coping, mood improvement, etc.</li> <li>Performed by a board-certified music therapist</li> </ul>
PROMISE Program Referral (Promoting Optimal Mental Health for Individuals through Supports and Empowerment)	<ul> <li>Referral for the PROMISE Program which supports community living for qualified individuals with behavioral health needs and a history of institutionalization</li> <li>Aims to improve clinical and recovery outcomes and reduce unnecessary institutional care through personcentered, recovery-oriented, care coordination and other Home and Community Based Services</li> </ul>
Behaviorally Based Treatment Plan	<ul> <li>Development of a written plan to reduce/eliminate unhealthy/ harmful behaviors + provide interventions</li> <li>Written by a MH professional</li> </ul>
Day Habilitation Program	<ul> <li>Activities/services to help obtain, retain + improve self- help, independence, socialization and adaptive skills</li> </ul>

# **Verifying Specialized Services**

The arrangement of services will be verified during the ServiceMatters (SM) review. SM reviews will be initiated within 20 days following completion of a short-term Level II PASRR determination or within 40 days following a non-time limited approval.

# **Documentation of Specialized Services**

Documentation verifying service delivery, or justification of service non-delivery, is required as part of the ServiceMatters review. Document examples may include progress notes, psych consultations, psychiatric evaluations, behaviorally based treatment plans, etc. The plan of care is also standardly required since identified services must be included in the plan. The upload area of a ServiceMatters review is where documents will be submitted by the NF and reviewed by Maximus.

#### **Contact Us**

PASRR support, including information about PASRR identified services, is available Monday through Friday 9am-5pm EST through the Delaware PASRR helpdesk.

Phone: 83.DEL.PASRR | 833.357.2777

Fax: 877.431.9568

Email: <u>DEPASRR@maximus.com</u>

#### Frequently Asked Questions (FAQs)

Additional resources including training and FAQs can be found here: https://maximusclinicalservices.com/svcs/delaware\_pasrr