PathTracker+ Helpful Hints

LOC Process= Payor Source (what is paying for the NF stay)

Level of Care= NF/ICF, Skilled, NFMI

Edit Admission

Individual name : XXXXX LastName126711169

Admitting facility : Oakwood Nursing & Rehab Center
XXXXX
XXXXX
Albia, IA 52531

Ensure admission date is accurate. → Admission date : 7/25/2022

Expected length of stay : 6 months or longer ← **Should equal the PASRR length of approval, if the Individual received a Negative Level I outcome, 6 months or longer could be chosen.**

Is the individual being admitted from a known facility? ● Known facility / ○ Other location ← **Select known facility from drop down menu below, 'Other Location' should only be used if individual is arriving from 'Home' or a location not found in the known facility list.**

Known facility state : Iowa

Known facility : MAHASKA HEALTH PARTNERSHIP

Show facility contact information...

Update/edit when LOC Payor source changes. → LOC process : Medicaid Pending

LOC effective date : 7/25/2022 ← **LOC effective date is initially the admission date, but will change when edits to LOC payor sources are made**

If on Hospice or PACE, immediately edit/update with Provider information from drop down menu → Level of care : NF/ICF

Is the individual currently in Hospice or PACE? ○ Hospice / ○ PACE / ● Neither

LOC should match the LOC approved by PASRR

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PathTracker+ Helpful Hints Continued

Select the PASRR outcome that is associated with the notice you are creating or editing.

What is the individual's PASRR condition?
- ☑ A mental health condition
- ☐ An intellectual disability
- ☐ A condition related to intellectual disability
- ☐ No known or suspected PASRR condition

◉ Select the assessment for this admission:

AID	Type	Outcome	LOS	Determination ... ↑	End Date	Submitting Facility
20297	Level II	Short Term Approval	180	08/13/2018	02/09/2019	Ottumwa Regional Health Center
2083644	Level II	Level II - Approved SS - ST		07/18/2022	01/14/2023	MAHASKA HEALTH PARTNERSHIP
2565687	Level II	Level II - Approved SS - ST		01/24/2023	07/23/2023	Oakwood Nursing & Rehab Center

○ Assessment not listed
○ Date of assessment not known
○ No assessment was submitted for this admission

Date of determination: _____

Completed by: Melissa Hughes   Phone: (555) 555-5555 Ext. _____   Date: 7/25/2022

Admission Id : 1249512

Cancel   Submit

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