

## Louisiana PASRR

### Important Provider Updates: Help Desk Reminders | Review Assessment Best Practice Tips

#### PROCESS REMINDER: Help Desk Contacts

When requesting assistance from the Help Desk, only send an email to the [LAPASRR@Maximus.com](mailto:LAPASRR@Maximus.com) email, not an individual employee's email as your response may be delayed.



Make sure to **only** call the LA PASRR Help Desk contact number, 833.571.4466. not the Service Desk number at the bottom of the Provider webpage – this is a general Maximus number and a response may be delayed and/or misrouted.

#### BEST PRACTICES: Assessment Tips & Reminders

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##### Important Reminders to Consider when Completing a Level I:

- **Demographic Date:** Confirm all demographic data is correct and matches what was documented in the LOCET. *Note:* when calling the Helpdesk to make an update, make sure to have all the necessary information available.
- **LOCET must be submitted prior to Level I.** All providers attest that a LOCET has been completed when submitting a Level I.
- **Required documents:** MAR, H&P dated within last 12 months (signed by MD, DO, NP); progress note is acceptable if it includes a complete Review of Systems; Physician Certification (signed for an EHD request) for EHD and Categorical requests; For a Terminal Illness request, you must provide medical documentation with a statement indicating the person has 6 months or less life expectancy.
- **Psychotropic Medications:** you must list all psychotropic medications in the dropdown list (not manually inputted in the box below unless one isn't showing in the list). This ensures applicants are thoroughly evaluated/screened, and avoids delays in processing.
- **Mental Health Diagnoses:** you must list all mental health diagnoses in the corresponding section. This ensures applicants are thoroughly evaluated/screened, and avoids delays in processing.
- **Primary medical condition/reason for admission to NF:** Add details in the appropriate box, titled, "What are the primary medical conditions requiring nursing facility care?"
- **Reason for Screening:** review reasons for screening and choose the appropriate option.

- **Nursing Facility Applicant:** check this option if the person is a new NF applicant, the person had an institutional break in stay (discharge to the community), or if the person's LOCET is no longer valid.
- **Nursing Facility Resident:** check this option if the person is already a NF resident who is not currently in an inpatient psychiatric hospital/unit. There will be other options to choose from after clicking this button, such as indicating if the person hasn't had a previous PASRR.

*Note: All Continued Stay Reviews (CSRs) must be submitted directly to submitted to them at [NFAdmissions@la.gov](mailto:NFAdmissions@la.gov)*

- **Status Changes (SC):** When submitting a SC, make sure to include documentation supporting the SC (i.e. updated psych eval, most recent psych notes). Add note in SC section that clearly explains the reason for the SC.

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#### AssessmentPro Users:

- **Login Credentials:** Each provider must have and use their own login credentials. For security and privacy reasons, accessing another individual's account is not permitted.
- **Access Coordinators:** when creating a profile for a new user, make sure to add their credentials if requesting a clinical user role.

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#### PathTracker (PT) Reminders:

- **Admissions: All** new PT admissions should be completed within 24 hours of admission. This allows LDH the opportunity to timely track all new admissions and make initial contact with the individual within the required timeline outlined in the DOJ agreement.
- **Discharges/Transfers:** All discharges and transfers should also be processed in PT. *Note:* If a person is transferring to another NF and this transfer isn't inputted in PT, it could lead to delays for the new admitting NF.

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#### Categorical & Short Term Approvals:

This is an approved list that will be considered at Level I. All require submission of the Physician Certification form – **this must be completed and signed by an MD/DO/PA for the EHD request.** The others only require submission of the form with the requested item checked off. When requesting a Categorical or Short term approval, these are reviewed and approved by LDH.

*Reminder: if a person has an expiring time limited stay, a CSR must be submitted to NFA.*

- **Exempted Hospital Discharge (EHD):** a physician indicated a person requires 30 days or less in the NF to continue treatment for what they've been treated for in the hospital. Per Federal PASRR regulations, this requires a person be admitting from a medical unit in a medical facility - not admitting from the ER/ED or an observation unit.
- **90 Day Convalescent Care:** Nursing facility services are needed for convalescent care from an acute physical illness which required hospitalization and does not meet all the criteria for an exempt hospital

discharge.

- **Terminal Categorical:** Provides for Terminal illness as defined for hospice purposes in Sec. 418.3: a life expectancy of six (6) months or less if the illness runs its normal course.
- **Serious Medical Categorical:** Documented severe physical illness which results in a level of impairment documented to be so severe that the individual could not be expected to benefit from Specialized Services. For example: coma, ventilator dependence, functioning at brain stem level, or diagnoses such as chronic obstructive pulmonary disease, Parkinson's disease, Huntington's disease, amyotrophic lateral sclerosis, or congestive heart failure).
- **Respite Categorical:** provides for usually brief or finite stays of up to a fixed number of days to provide respite to in-home caregivers to whom the individual with MI or ID/DD is expected to return following the brief nursing facility stay.
- **Emergency Situation Requiring Protective Services:** confirmation the purpose of the admission is due to an emergency situation, in which the individual requires a nursing facility stay, for a period of time not to exceed seven (7) days.
- **Provisional Admission Due to Delirium:** allows for temporary (7 day) nursing facility admission without a full Level II evaluation when delirium prevents accurate assessment.

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## SUPPORT: Contact the Maximus Louisiana PASRR Help Desk



### Do you have questions about the new online system to process a Level I PASRR screen?

Maximus provides easily accessible resources to support you. You may access the Louisiana PASRR Help Desk for technical assistance on specific referrals and assessments.

Email: [LAPASRR@maximus.com](mailto:LAPASRR@maximus.com)

Phone: **833.571.4466**

Louisiana PASRR Tools and Resources:

[https://maximusclinicalservices.com/svcs/louisiana\\_pasrr](https://maximusclinicalservices.com/svcs/louisiana_pasrr)

**For questions on Louisiana PASRR policy and procedure**, contact the OAAS Nursing Facility Admissions (NFA) Unit by calling **337.262.1664**.

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