




# State of Louisiana

Louisiana Department of Health  
Bureau of Legal Services

## HEALTHCARE FACILITY NOTICE Pre-Admission Screening and Resident Review

### FOR IMMEDIATE RELEASE

TO: All Licensed Hospitals  
All Medicaid Certified Nursing Facilities

FROM: Ruth Johnson  
Medicaid Executive Director 

RE: Lifting of Temporary Suspension of Pre-Admission Screening and Resident Review (PASRR)

DATE: June 12, 2020  
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This Healthcare Facility Notice will supersede all the previously issued memos on the suspension of Pre-Admission Screening and Resident Review (PASRR) activities. This directive is applicable to all licensed hospitals and nursing facilities in Louisiana.

The State of Louisiana, Department of Health (“LDH” or “Department”), is **DIRECTING** that all licensed hospitals and nursing facilities adhere to the following provisions, **EFFECTIVE IMMEDIATELY**:

#### PRE-ADMISSION SCREENING AND RESIDENT REVIEW

Effective June 15, 2020, the Level I and if necessary, the Level II assessments required under PASRR are now required to be completed before Nursing Facility (NF) admission. All Healthcare Facilities should resume the normal NF admission process. If you have any questions, please contact 337-262-1664.

The Level II Authorities, the MCOs and their Level II evaluators, will be conducting evaluations via HIPPA-compliant telehealth methodologies including phone, video-conferencing, and a review of pertinent records. To ensure the timely review of PASRR Level II authorizations (Medicaid Form 142), it is imperative that the Medicaid enrollee and their records are accessible to both the Healthy Louisiana Plans and Level II evaluators with needed records being promptly provided upon request. Failure to provide this information will result in a delay or denial of PASRR Level II authorizations (Medicaid Form 142).

As stated in the LDH Legal Memorandum dated June 12, 2017, the disclosure of Medicaid enrollee information by a Medicaid provider to a Medicaid MCO and Human Service Districts/Authorities (LGE) is permitted without an authorization from the enrollee regardless of whether the provider is part of the Medicaid MCO's provider network for the following reasons: (1) both the provider and the MCO/LGE have a relationship with the enrollee; (2) the PHI being disclosed pertains to that relationship; and (3) the PHI is being disclosed for purpose of the MCO/LGE's PASRR Level II evaluation and to obtain specialized services.

Federal regulations related to PASRR outline the following items as being required as part of the PASRR Level II evaluation process; these items may be requested by the Level II evaluator in order to complete the evaluation:

1. Comprehensive history and physical examination of the person
  - a. Complete medical history;
  - b. Review of all body systems;
  - c. Specific evaluation of the person's neurological system in the areas of motor functioning, sensory functioning, gait, deep tendon reflexes, cranial nerves, and abnormal reflexes; and
  - d. In case of abnormal findings which are the basis for an NF placement, additional evaluations conducted by appropriate specialists.
    - i. If the applicant has a diagnosis of dementia or Alzheimer's disease, documentation supporting diagnosis should be included.
2. Comprehensive drug history including current or immediate past use of medications that could mask symptoms or mimic mental illness.
3. A psychosocial evaluation of the person, including current living arrangements and medical and support systems.
4. A comprehensive psychiatric evaluation including a complete psychiatric history, evaluation of intellectual functioning, memory functioning, and orientation, description of current attitudes and overt behaviors, affect, suicidal or homicidal ideation, paranoia, and degree of reality testing (presence and content of delusions) and hallucinations.
5. A functional assessment of the individual's ability to engage in activities of daily living and the level of support that would be needed to assist the individual to perform these activities while living in the community. The assessment must determine whether this level of support can be provided to the individual in an alternative community setting or whether the level of support needed is such that NF placement is required.
6. The functional assessment must address the following areas: Self-monitoring of health status, self-administering and scheduling of medical treatment, including medication compliance, or both, self-monitoring of nutritional status, handling money, dressing appropriately, and grooming.

End Memo