



State of Tennessee  
Department of Finance and Administration  
Bureau of TennCare  
310 Great Circle Road  
Nashville, TN 37243

Phil Bredesen  
Governor

M.D. Goetz, Jr.  
Commissioner

**URGENT MEMO**

**DATE:** July 8, 2009

**TO:** Administrators and Directors of ICFs and SNFs  
Mr. Craig Becker, President, Tennessee Hospital Assoc.  
Mr. Donald Alexander, MPH, Chief Executive Officer Tennessee Medical Assoc.

**FROM:** Patti Killingsworth  
Chief of Long Term Care

**Cc:** Dr. Wendy Long, Chief Medical Officer, Bureau of TennCare  
Pat Santel, Director of LTC Elderly & Disabled Institutional Services  
Debbie Coleman, RN, PAE Nurse Unit Manager

**RE:** **Frequently Asked Questions - PASRR and PAE Changes Effective July 1, 2009**

As you are aware, changes to the PAE and PASRR processes were implemented July 1, 2009. To help prepare nursing facilities and other key stakeholders, multiple memos about the new requirements were disseminated in advance of these changes. In addition to the memos, all Medicaid-certified nursing facilities received the new PASRR form, PAE application and PAE Checklist. All of the aforementioned documents, including the new PASRR Manual were posted on our website @ <http://tennessee.gov/tenncare/long-elderly.html#1>. We hope that this information has been helpful to you, and sincerely appreciate the efforts taken by both hospitals and nursing facilities to understand and implement these new requirements.

Nonetheless, we have been inundated with calls and questions, as well as PASRR forms and PAE applications. We are doing our best to be responsive to your calls, while also ensuring that we process a significant increase in PAE applications on our court-ordered eight (8)-business day turnaround time.

While we understand that changes are always challenging, we are finding that many of the questions we are receiving have already been answered in the materials that have been disseminated. In an effort to further assist you, LTC staff have put together a list of the most **“Frequently Asked Questions”** about the changes and their responses. While this is by no means an exhaustive list, we hope that you will find the information very useful.

If there are questions that are not listed, we respectfully request that staff carefully review the memos to ensure that the response has not already been provided. If after reading the memos and reviewing the attached “Frequently Asked Questions,” document, you feel that you still do not have a clear understanding of your question or concern, please feel free to call the Division of Long Term Care at 615-507-6964 or 1-877-224-0219.

We want to continue to do everything we can to assist you in making this transition as smooth as possible. Certainly every call is important to us, and we want to be responsive to your questions and concerns. However, please know that we are experiencing an **extremely** high volume of PAEs and PASRR submissions. We will respond to your calls as quickly as we possibly can.

Thank you for your continued partnership and service to TennCare members.

**FREQUENTLY ASKED QUESTIONS  
CHANGES TO THE PASRR and PAE PROCESSES  
IMPLEMENTED JULY 1, 2009**

**Question 1:** Does the new PAE form have to be used?

**Response:** Yes, beginning July 1, 2009, the new PAE form should be used. However, if you have already submitted the "old" PAE form (i.e., the form in use prior to 7/1/09), you do not have to re-submit the PAE, using the new form. See Question 2 below for additional information.

**Question 2:** What if a PAE is submitted on the "old" form?

**Response:** To assist nursing facilities and persons seeking admission to nursing facilities following implementation of the 7/1 PASRR and PAE changes, for at least sixty (60) days after 7/1/09, TennCare will continue to accept and process "old" PAE forms that are received. However, such forms will be processed based on TennCare Rules in effect **at the time of receipt**. So, for example, if the PASRR screen is submitted as part of the PAE (as it was prior to 7/1/09), the earliest date of Medicaid reimbursement will be the date the PASRR is received, regardless of the request date on the PAE.

**Question 3:** Where can we find the new PAE and PASRR forms?

**Response:** The new PAE and PASRR forms, along with the PAE Checklist, PAE and PASRR Memos and PASRR Manual can be found at <http://www.tn.gov/tenncare/long-elderly.html#1>.

**Question 4:** If a PAE is submitted *after* July 1, 2009, but the PAE Request Date is *prior to* July 1, 2009, how will the PAE be processed?

**Response:** PAE forms will be processed based on TennCare Rules in effect **at the time of receipt**. So, for example, if the PAE is received on July 8, 2009 with a request date of June 28, 2009, the PAE will be processed in accordance with new requirements that became effective on July 1, 2009.

**Question 5:** Who can complete the PASRR? Can a hospital do it?

**Response:** Yes, a hospital may complete the PASRR. However, pursuant to federal regulations, it is the responsibility of the NF to ensure that the PASRR is appropriately completed prior to admission, such that all known or suspected instances of mental illness and/or mental retardation are identified, the need for specialized services is evaluated (if applicable), and the person is found to be appropriate for placement in a nursing facility.

**Question 6:** Does a PASRR screening form have to be completed and submitted to TennCare *prior to* admission for **ALL** individuals seeking admission to a NF regardless of payor source?

**Response:** Every person seeking admission to a Medicaid certified nursing facility **MUST** have a completed PASRR screening form submitted to TennCare *before* being admitted to a Medicaid certified nursing facility, regardless of payor source. Persons seeking admission to private pay only facilities and Medicare patients seeking admission to a Medicare certified SNF-only facility are exempt until/unless subsequently transferred to a dually certified (i.e., Medicare/Medicaid) or Medicaid certified facility (including a Medicaid certified facility licensed as a SNF-only).

**Question 7:** What happens if a Medicaid certified facility does not complete the PASRR screening prior to admission?

**Response:** The nursing facility will be out of compliance with federal PASRR regulations. This could result in cited deficiencies in the survey process as well as non-payment and/or recoupment of Medicaid payments for dates of service that required documentation is not in order.

**Question 8:** Does a PASRR screen have to be completed for patients being admitted for Respite Care?

**Response:** Yes. Respite is not one of the advance categorical determinations specified in TennCare Rules which permit persons with a positive PASRR screen to be admitted. ONLY persons admitted from a hospital for short-term convalescence not to exceed 120 days, persons with terminal illness, or persons with severity of illness as specified in TennCare Rules may be admitted following physician certification that the person qualifies for such categorical determination.

**Question 9:** Do persons seeking short-term stay (up to 120 days) from an HCBS waiver program have to have a PASRR screen?

**Response:** Yes, unless they meet other specified exemptions or categorical determinations, e.g., admissions from a hospital for short-term convalescence not to exceed 120 days, terminal illness, or severity of illness as specified in TennCare Rules following physician certification that the person qualifies for such exemption or categorical determination. PASRRs are required ONLY for admission to a NF and are NOT completed for enrollment in HCBS waiver programs, so while the PAE (or level of care) is transferable from HCBS to the NF, the PASRR must still be completed.

**Question 10:** Are PASRRs required to be completed on Medicare patients seeking admission to Medicaid certified nursing facilities?

**Response:** **Yes.** Medicare patients seeking admission to dually certified (i.e., Medicare/Medicaid) facilities must have a PASRR completed. However, Medicare patients seeking admission to a Medicare certified SNF-only facility are exempt until/unless subsequently transitioned to a dually certified or Medicaid certified facility (including a Medicaid certified facility licensed as a SNF-only).

**PLEASE NOTE:** If an individual enters the Medicaid or dually certified NF as a Medicare patient, with a "30 day hospital discharge exemption" on the PASRR screen form, and it is determined that the individual will need to extend the stay beyond 30 days, it is the responsibility of the NF to notify TennCare and to ensure that a PASRR evaluation is completed **no more than** 40 days from the original date of admission (i.e., within 10 days of expiration of the 30-day exemption).

**Question 11:** Are PASRRs required to be completed on Medicare patients in Medicare certified SNF-only facilities, if the crossover payment is being billed to Medicaid?

**Response:** In order for TennCare to adjudicate Medicaid NF claims for crossover payments, a facility must be a TennCare Medicaid provider (i.e., have a signed Medicaid provider agreement). In order to have a signed Medicaid provider agreement, the facility must be Medicaid certified—in which case, all persons seeking admission to the facility will require a PASRR prior to admission.

**Question 12:** Do NFs need to submit PASRRs for persons who already have an approved PAE?

**Response:** **NO.** If a person has an approved PAE, the PASRR screen has already been completed (since it has heretofore been part of the PAE application). A PASRR review (rather than a screening) is required when there is a change in the person's status such that mental illness (or mental retardation) is now known or suspected.

**Question 13:** Will the entity submitting the PASRR be notified when a negative PASRR is received at TennCare?

**Response:** **NO.** TennCare will notify the NF (or other submitting entity) **ONLY if contradictory information is identified** which would suggest that the person may have a diagnosis of mental illness and/or mental retardation, such that a PASRR evaluation must be performed, and in such case, will refer for PASRR evaluation.

**Question 14:** Do nursing facilities need to wait for response from TennCare before admitting a person with a negative PASRR screen?

**Response: NO.** Once an appropriately completed negative PASRR screen has been submitted to TennCare, the nursing facility may proceed with admission. Please note that it is incumbent upon the admitting nursing facility to ensure that the PASRR screen is completed appropriately, including review of all information which might indicate whether or not the person is known or suspected to have mental illness or mental retardation. TennCare will notify the NF (or other submitting entity) **ONLY if contradictory information is identified** which would suggest that the person may have a diagnosis of mental illness and/or mental retardation, such that a PASRR evaluation must be performed, and in such case, will refer for PASRR evaluation.

**Question 15:** If TennCare is notifying facilities ONLY when contradictory information is identified, how do nursing facilities know when it is safe to proceed with admitting a person?

**Response:** As long as the nursing facility has exercised due diligence in appropriately completing the PASRR screen as obligated pursuant to federal PASRR regulations, the facility may proceed with admission once a negative screen is completed and submitted to TennCare, including physician-certified exemptions and advance categorical determinations.

**Question 16:** Why is a History & Physical (H & P) requested with the PASRR?

**Response:** A History & Physical (H & P) is requested but not required to be submitted with a negative PASRR screen. TennCare will review the H & P with the PASRR in order to identify as early in the process as possible any contradictory information which might require that a PASRR evaluation be performed. Thus, the NF has less risk of not receiving Medicaid reimbursement for NF services if such contradictory information is not identified until later in the process.

**Question 17: If a H&P is submitted with the PASRR, does the H&P also have to be submitted with the PAE?**

**Response:** A History & Physical (H & P) is requested but not required to be submitted with a negative PASRR screen. TennCare will review the H & P if submitted with the PASRR in order to identify as early in the process as possible any contradictory information which might require that a PASRR evaluation be performed. Thus, the NF has less risk of not receiving Medicaid reimbursement for NF services if such contradictory information is not identified until later in the process.

Because the PASRR and PAE forms are processed separately, **a H & P or other recent medical records supporting the applicant's functional and/or skilled nursing or rehabilitative needs MUST be submitted with the PAE**, regardless of what has been submitted with the PASRR. The H & P or other medical records submitted with the PAE must be signed by the physician, nurse practitioner or physician's assistant.

If the PASRR and PAE are submitted at the same time, it is not necessary to submit two H&Ps.

**Question 18:** If a resident is going to the hospital for a short stay to address an acute physical illness, does the PASRR screen need to be completed before they can go back to the nursing home?

**Response:** No. It is not necessary to complete another PASRR if a person is discharged from a facility to a hospital, and then discharged back to the facility unless there has been some sort of status change, such that the person is now known or suspected to have mental health needs, in which case, a status change (rather than PASRR screen) should be initiated.

**Question 19:** If the patient is coming back to the nursing home from a psychiatric hospital stay, is a PASRR required?

**Response:** The psychiatric hospital or NF will need to initiate a mental health status change to determine if the individual is appropriate to return to the nursing home. The nursing home must obtain a copy of the status change determination for the patient's chart.

**Question 20:** Is it a requirement for the H & P to be signed by a physician?

**Response:** The H & P submitted with the PAE must be signed by a **physician, nurse practitioner or physician's assistant**. As an alternative to the H & P, we will now accept with the PAE other recent medical records supporting the applicant's functional and/or skilled nursing or rehabilitative needs. These records must also signed by the physician, nurse practitioner or physician's assistant.

**Question 21:** Does the PASRR have to be signed?

**Response:** Yes, the PASRR screen must be certified by signature of a Registered or Licensed Nurse, Licensed Social Worker, Physician, Nurse Practitioner, or Physician's Assistant. Any exemptions or categorical determinations on page 2 of the PASRR must be certified by the Physician.

**Question 22:** Does a social worker have to be licensed to certify the PASRR or PAE assessment?

**Response:** Yes. Only a Licensed Social Worker can certify the PASRR screen or the PAE assessment, i.e., the accuracy of the information provided. If a Social Worker completes the PASRR or PAE assessment that is not licensed, the PASRR screen or PAE assessment must be certified by a Licensed Social Worker, Registered or Licensed Nurse, Physician, Nurse Practitioner, or Physician's Assistant. Only a Physician can certify the PAE (i.e., medical necessity for nursing facility level of care).

**Question 23:** Are individuals entering private pay only facilities required to have PASRRs before they are admitted to the facility?

**Response:** No, PASRRs are only required for individuals seeking admission to Medicaid certified nursing homes. However, private pay patients admitted to Medicaid and dually certified (i.e., Medicare/Medicaid) facilities must have a PASRR screen prior to admission.

**Question 24:** Is a physician "signature" required on medical records/PAEs??

**Response:** Yes. We will accept electronically signed or stamped signatures on H & Ps, medical records and PAEs.

**Question 25:** Where do I find the "control number" requested along with supporting documentation for "Other" Skilled or Rehabilitative Services at the bottom of page 4 of the PAE?

**Response:** This is not applicable until implementation of the new electronic PAE later this year, but was inadvertently left on the paper form. Please submit supporting documentation as requested, but disregard the control number. This has been deleted from the PAE posted on the TennCare website.

**Question 26:** What is the difference between an "Exemption" and a "Categorical Determination" on page 2 of the PASRR form?

**Response:** Federal PASRR regulations specify certain **exemptions** from the PASRR process. This includes (1) persons admitted to any NF directly from a hospital after receiving acute inpatient care at the hospital when such person requires NF services for the condition for which s/he received care in the hospital AND the physician has certified before admission to the NF that the individual is likely to require less than 30 days NF services; (2) readmissions to a NF from a hospital to which the person was transferred for care, in which case resident review (rather than screening) is required if there has been a status change; and (3) interfacility transfers from one NF to another without an intervening hospital stay, in which case resident review (rather than screening) is required if there has been a status change.

In addition to these exemptions from the PASRR screening process, a State may elect to specify in advance, certain conditions or circumstances for which persons need NF care and/or for which persons will likely not need or benefit from specialized services such that a person may be admitted to a NF, even when the PASRR screen is positive. The State of Tennessee has elected to specify in Rule as **advance categorical determinations** the following:  
(1) admissions from a hospital for short-term convalescence not to exceed 120 days; (2) terminal illness; or (3) severity of illness as specified in TennCare Rules following physician certification that the person qualifies for such exemption or categorical determination.

**Question 27:** Do we need to complete pages 1 and 2 of the PASRR if we are not certain about the person's mental health and/or mental retardation needs, status, and history?

**Response:** Page 1 of the PASRR must be completed, must be thorough, and should accurately reflect the person's mental health and/or mental retardation needs, status, and history. Page 2 is completed when specified exemptions or advance categorical determinations are applicable. The State of Tennessee has not elected to include as categorical determinations provisional admissions pending further assessment in cases of delirium or emergency circumstances. Thus, it is imperative that information regarding the person's mental health and/or mental retardation needs, status, and history are obtained, thoroughly reviewed, and reflected in the PASRR screening process.

**Question 28:** If the person seeking admission has both dementia and mental illness, which exemption category should be checked on page 2 of the PASRR?

**Response:** Dementia can be an exemption **ONLY IF:** (1) Dementia is the primary diagnosis; OR (2) Dementia is a secondary diagnosis and the person does NOT have a primary diagnosis of a major mental illness.