



pennsylvania
 DEPARTMENT OF PUBLIC WELFARE
 DEPARTMENT OF AGING

OFFICE OF LONG TERM LIVING BULLETIN

www.dpw.state.pa.us/About/OLTL/

ISSUE DATE February 8, 2009	EFFECTIVE DATE March 1, 2009	NUMBER 01-09-01, 03-09-01
SUBJECT Revised Pennsylvania Preadmission Screening and Resident Review Identification Form (MA 376)		 Jennifer Burnett, Acting Deputy Secretary Office of Long Term Living

PURPOSE:

To issue a revised Pennsylvania Preadmission Screening and Resident Review Identification form (PA-PASRR-ID). The revised PA-PASRR-ID replaces the PA-PASRR-ID dated July 1999.

SCOPE:

This bulletin applies to all agencies that perform preadmission screenings for individuals prior to entering a nursing facility enrolled in the Medical Assistance Program.

BACKGROUND/DISCUSSION:

In 1987, Congress enacted major nursing home reform legislation that affected all nursing facilities participating in the Medicare and Medical Assistance (MA) Program as part of the Omnibus Budget Reconciliation Act of 1987 (OBRA '87). OBRA'87, among other things, required the implementation of a preadmission screening program, applicable to all persons seeking admission to any MA certified nursing facility, whether or not that person is applying for or receiving MA benefits. The purpose of the preadmission screening is to determine whether persons with "mental illness" or "mental retardation" or other related conditions require nursing facility services and, if they do, whether they also require specialized services for their condition. See 42 CFR §§483.100 through 483.138. An MA certified nursing facility may not admit any new resident with "mental illness", "mental retardation" or an other related condition unless the Department of Public Welfare (Department) has determined and notified the facility that the individual requires nursing facility services and, if the individual does, whether the individual requires specialized services for "mental illness", "mental retardation", or other related conditions.

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

Office of Long Term Living
 Bureau of Provider Support
 P.O. Box 8025
 Harrisburg, PA 17105
 (717) 772-2570

Visit the Office of Long Term Living's Web site at www.dpw.state.pa.us/About/OLTL

Modifications to the PA-PASRR-ID were made because different versions of the form were being used throughout the Commonwealth. The Program Offices also wanted to make minor clarification updates to the form. A chart of the specific changes to the PA-PASRR-ID is provided below.

PROCEDURE:

Beginning March 1, 2009, the revised PA-PASRR-ID must be completed, prior to admission, on all individuals seeking admission to an MA certified nursing facility regardless of the individual's pay status. If the applicant is a target individual who is not an exceptional admission, the individual's PA-PASRR-ID, along with other required documents, must be forwarded to the appropriate local Area Agency on Aging (AAA) who will complete a Level of Care Assessment (LOCA) prior to an individual's admission to the nursing facility. The individual may only be admitted after the AAA has forwarded its recommendation to the appropriate Department program office and that program office has issued its decision through a Letter of Determination. Failure to follow this procedure may result in sanctions against a facility and/or loss of federal and state funding.

Instructions on how to complete the revised PA-PASRR-ID accompanies the form. The revised form can be ordered from the MA Forms contractor via the Medical Assistance Provider Order Form (MA 300X). The PA-PASRR-ID form number is MA 376 and is available in packs of 25 or may be printed from the following website:
<http://www.dpw.state.pa.us/omap/provinf/maforms/omapmaforms.asp> .

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

**Office of Long Term Living
Bureau of Provider Support
P.O. Box 8025
Harrisburg, PA 17105
(717) 772-2570**

Visit the Office of Long Term Living's Web site at www.dpw.state.pa.us/About/OLTL

Changes to Pennsylvania Preadmission Screening and Resident Review Identification Form effective 03/01/2009

ITEM	NEW
Instructions	Instructions are incorporated throughout the document.
Section II-A Section II-C	Added Bi-polar & Depression in () after Mood Disorder. Added to II-C: #2 Suicide History information #3 Electroconvulsive therapy (ECT) #4 Intensive Case Management #5 Supportive Services.
Section III	Added: III A-Has the individual been diagnosed with MR? III A became III B III B became III C III C became III D III D became III E III E became III G III F was added "Has the resident ever been a resident of a State facility."
Section IV	IV A: added blocks for conditions Removed IV E Added new IV E "Was the individual/family informed of the Community Based Waiver Program." The NF Social Services should look at this and give information to family if necessary.
Section VI-VIII	Old Section VII is now VI. Old Section VIII is now VII and is titled "Type of Admission" Old Section VI is now VIII

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

Office of Long Term Living
Bureau of Provider Support
P.O. Box 8025
Harrisburg, PA 17105
(717) 772-2570

Visit the Office of Long Term Living's Web site at www.dpw.state.pa.us/About/OLTL