



STATE OF CONNECTICUT

DEPARTMENT OF SOCIAL SERVICES

25 SIGOURNEY STREET HARTFORD, CONNECTICUT 06106-5033

To: All hospital discharge planning staff
From: Kathy Bruni, Department of Social Services
Date: January 28, 2010
Re: PASRR implementation

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As DSS and Ascend have received questions, we have revised the attached *Frequently Asked Questions* (FAQs) to ensure that all providers remain updated as to the status of the PASRR Level I/II and the Level of Care screening processes. These FAQs are continually updated as new questions are identified and are posted at www.pasrr.com under the Connecticut WebStars™ link.

Three additional issues have arisen as a result of recent discussions with CHA, and those are addressed below. The Department has asked that Ascend make changes in their programming to accommodate the work flow that the hospitals have identified as critical to their daily functioning. Ascend has implemented all of the changes the Department has requested and the changes are summarized below. It is critical that these issues be addressed immediately by hospital providers.

Issue 1: Designation of Supervisors

In response to your feedback, DSS has requested that our PASRR vendor, Ascend, adapt Connecticut's web-based Level I and Level of Care web system (WebStars™) to provide **increased flexibility for provider staff to access, enter, and view the status of screens on-line.**

Ascend has modified programming to enable two important changes. First, any authorized staff at a facility will have the ability to view screening information for persons at that facility. Staff are authorized by a supervisor at that facility and will be designated by the facility supervisors as either clinical or administrative. Administrative staff may **only** enter demographic screening information. Clinical staff (such as nurses, social workers, physicians) **must** enter all clinical information. When the screen is submitted, a clinical staff member from the facility must review the completed screen and attest to the accuracy of all information entered on the screen. **The Department expects that the hospitals will utilize the web based system effective February 1st for both Level I and Level of Care Screens.**

Because of these changes in access, DSS is requiring that **every facility** conducting Level I or Level of Care screens submit (by emailed attachment to CThehelpdesk@ascendami.com or by fax to 877.431.9568) a list affirming staff approved by that facility to be a WebStars™ supervisor as soon as possible and **no later than February 5, 2010.** These supervisors will be responsible for granting and revoking WebStars™ access for specifically assigned facility users. Facilities may appoint multiple WebStars™ supervisors to monitor and manage facility-wide user access to

Connecticut's Level I and Level of Care system. **After February 5th 2010**, access to required Level I and Level of Care submission by supervisors (and their assigned staff) will be suspended until confirmation is submitted. Supervisor Affirmation letters should contain the following:

1. Use facility letterhead with signature and title of an authorized officer of the facility
2. Include the statement: *I affirm that I am authorized to grant approval for access to protected facility information. I affirm that the following individuals have been granted permission by this facility to act in the role of the WebStars™ Supervisor for the purposes of monitoring and managing facility-wide user permissions to access the WebStars™ system.*
3. Provide the name and email of each facility approved Web-Supervisor
4. In cases where a parent company owns or operates multiple distinct facilities needing access, a separate list must be submitted for each distinct facility and their respective supervisors.

It is necessary, for Ascend to receive this verification of supervisor status from an authorized officer at every facility. New supervisors will have the capability to set up distinct users within 24-hours of Ascend's receipt of that information. It will not be necessary for supervisors who have already set up users to make any additional changes.

Issue 2: Access Needs of Ascend's Level II Assessors to Conduct PASRR Clinical Interviews

The second issue is to determine any special needs of each facility to provide access to Ascend's assessors to your facility and records. All PASRR Level II assessors hired by the DSS PASRR vendor have been subjected to a rigorous credentialing process, and all are licensed and qualified mental health professionals in good standing. In order to conduct evaluations by Ascend, the following credentialing has already occurred:

- **Background Checks:** A detailed background check is conducted through ADP (including social security verification); Crimlink [a multijurisdictional criminal history database]; the National Sex Offender Registry; state and county criminal history reports for ten counties of residence for the past seven years; National Practitioner's Data Bank verification; submission of vital information to the Office of the Inspector General; verification of licensure through the appropriate state licensure board, and; ADP completion of multiple professional references.
- **Signed attestations, verifications, and applications:** completion of an extensive application, submission of a vita, and attestations of: Non-use of illegal substance Form; Employment Eligibility Verification Form that affirms the individual is legally eligible to work in the United States (along with provision of associated legal documents to prove identity); Non-discrimination/Sexual Harassment Clause that affirms the applicant will not participate in discrimination or sexual harassment; Voluntary Self Disclosure Form that inquires about national heritage to promote a widely represented assessment team; ADP Disclosure and Release Forms to provide

authorization for both reference and background checks; Encryption Software Affirmation that affirms the applicant will install and maintain Ascend provided encryption software to safeguard all client information that is transmitted; W-9 forms.

- **Clinical Credentialing:** Ascend: conducts multiple interviews with the individual, re-screening the candidate for conflict of interest; reviews of the completed application and background reports by the Recruiting and Credentialing Department and Ascend's multidisciplinary Credentialing Review Committee (CRC) to evaluate the application and packet and make a final determination of hiring status. At least two signatures by CRC members are required before a candidate is approved for hire.
- **Additional Verifications:** Information is submitted through both the DSS and DMHAS for additional review and confirmation that no conflict of interest exists.
- **Training:** The candidate is required to participate in a six hour assessor training module that covers 140 page power point and 62 page manual addressing HIPAA, clinical interviewing, professionalism, PASRR, advocacy, person first language, person centered planning, federal and state laws and evaluation requirements, followed by successful participation in a 60-90 minute one-on-one oral post-test interview conducted by a senior Ascend clinician.
- **Quality Review:** 100% of all evaluations are reviewed by a Master-level mental health professional who is a quality clinician and who conducts any needed quality follow-up, provides written feedback and quality scores, and conducts ongoing training with the clinician.
- **Annual re-credentialing:** in the areas described above.

Each time an assessor receives a referral to conduct an on-site clinical interview at your facility, the assessor will:

1. Call ahead to arrange a time to meet with the individual;
2. Wear an Ascend PASRR project photo identification;
3. Have with them a letter from DSS authorizing them to conduct on-site PASRR evaluations;
4. Ask for a copy of the individual's history and physical, current medications, and records relevant to the individual's behavioral or psychiatric status (only if these have not already been submitted to Ascend) .

Assessors will conduct interviews with the individual and other available caregivers and review the medical record. They **will not** conduct any 'hands-on' medical/physical assessments. CHA has identified that some facilities may maintain special procedures associated with:

- Any additional activities or information necessary to assure that PASRR assessors have access to conduct clinical interviews and to review relevant records at your facility.
- Identification of designated persons the assessor should speak with upon arrival. You may choose to handle this on a case-by-case basis, informing the Ascend reviewer of several possible contact options at the time the review is conducted. It is important to remember that, in the interest of conducting evaluations as expediently as possible, we have asked Ascend to conduct evaluations both during and outside of business hours, including weekends and evenings. In the interest of expediting Level II evaluations, it would be important to not overly limit resources.
- Identification of any special 'check-in' procedures important for the assessor to know at your facility.

Any special procedures associated with the items above must be provided to Ascend by emailed attachment to CThelpdesk@ascendami.com or by fax to 877.431.9568 and must be provided **by or before February 5, 2010**. Please recognize that these evaluators will not conduct 'hands-on' activities, have been extensively credentialed, and will be gathering information to enact a federally mandated assessment to expedite the most appropriate placement for the assessed individual. The more extensive the barriers to enable assessors to conduct PASRR activities (and the more these barriers limit the potential assessor pool for your facility), the greater the likelihood of delays in conducting Level II evaluations at your facility.

Issue 3: PASRR Level II Interim Process Requirements through February 15, 2010

CHA has asked that we delay implementation of onsite PASRR Level II evaluations **until February 15, 2010** so that hospitals with special procedures can identify those. **Until February 15**, Ascend will accept Level II evaluations completed by hospital staff for which you will be reimbursed as you have in the past using the current model and forms. Level II information must be forwarded to Ascend by fax to 877.431.9568. Do not forward Level II information to ABH after February 1. Hospitals without barriers to assessor access may inform Ascend, and Ascend will proceed with federally compliant Level II evaluations beginning February 1. **Beginning February 15th, NFs will not be permitted to admit individuals with mental illness without an Ascend onsite Level II evaluation.**

Attachment: FAQs, revised 1/27/10