

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

State/Territory: UTAH

PASRR Level II Preadmission Screening by Categorical Determination

The following categories developed by the State mental health or intellectual disability authorities may be made applicable to individuals identified by Level I as possibly having serious mental illness/intellectual disability when existing data on the individual appear to be current and accurate and are sufficient to allow the evaluator to readily verify that the individual fits into the category. The data available includes physical, mental, and functional assessments as required by 42 CFR 483.132(c). An adequate inspection of records for a categorical determination takes the place of the NF or the Specialized Services individualized Level II evaluation. Prior to admission, the State mental health or intellectual disability authority produces categorical evaluation and determination reports as required by 42 CFR 483.128 and .130. When existing data is not adequate, the evaluator must complete the individualized Level II evaluation. Specialized Services may be recommended for categorical determinations however, if the evaluator determines that the level of complexity for an individual exceeds that of a categorical determination, the evaluator must complete the individualized Level II evaluation.

Categorical Determination that NF placement is appropriate. Specialized Services evaluation and determination by the SMH/IDA

- Convalescent care from an acute physical illness which required hospitalization and does not meet all the criteria for an exempt hospital discharge, (which, as specified in 42 CFR 483.106(b)(2) is not subject to preadmission screening).

Definition: The Convalescent Care Categorical Determination only applies if the individual was at a hospital for a medical condition and is being admitted to the Medicaid certified nursing facility for the same medical condition.	Time limit 120 calendar days

- Terminal illness, as defined for hospice purposes in 42 CFR 418.3.

Additional Definition: <i>(optional)</i> The Terminal Illness Categorical Determination requires a physician statement that the individual is terminally ill. If the individual is not receiving Hospice service an individualized Level II evaluation is required.

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- Other category(s) defined by the State.
Short Stay

Definition: The Short Stay Categorical Determination allows an individual who is suffering from an acute physical illness while living in a community setting to be admitted directly into the nursing facility for a short stay in order to stabilize the acute physical illness.	Time limit <i>(optional)</i> <i>Not to exceed</i> <i>120 calendar</i> <i>days</i>

Categorical Determination that NF placement is appropriate. Option to also categorically determine by the SMH/IDA that Specialized Services (SS) are not needed. No categorical determinations are made that Specialized Services are needed.

- Provisional admission pending further assessment in case of delirium where an accurate diagnosis cannot be made until the delirium clears.

Additional Definition <i>(optional)</i>	Categorical SS Not Needed	Time limit
	<input checked="" type="checkbox"/>	7 calendar days

- Provisional admission pending further assessment in emergency situations requiring protective services, with placement in the nursing facility not to exceed 7 days.

Additional Definition <i>(optional)</i>	Categorical SS Not Needed	Time limit (≤7 days)
	<input checked="" type="checkbox"/>	7 calendar days

- Severe physical illness; such as coma, ventilator dependence, functioning at a brain stem level, or at a level of impairment so severe that the individual could not be expected to benefit from specialized services.

Definition: The Severe Physical Illness Categorical Determination requires the presence of severe debilitation. Individuals given this determination are too ill to benefit from specialized services.
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- Very brief and finite stays of up to a fixed number of days to provide respite to in-home caregivers to whom the individual with MI or Intellectual disability is expected to return to a community placement following the brief NF stay.

Additional Definition (<i>optional</i>)	Categorical SS Not Needed	Time limit
	<input checked="" type="checkbox"/>	14 calendar days

Categorical determination that Specialized Services are not needed. No categorical determinations are made that Specialized Services are needed. Determination by the SMH/IDA that NF placement is appropriate is individualized.

- Dementia and Intellectual Disability. The State Intellectual disability authority or delegated agency (not Level I screeners) may make categorical determinations that individuals with dementia, which exists in combination with mental retardation or a related condition, do not need specialized services.

Additional Definition (<i>optional</i>)

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