

	<b>PENNSYLVANIA DEPARTMENT OF AGING</b>	
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<b>6. Origin:</b> Quality Assurance		<b>7. Contact:</b> Bureau of Quality Assurance (717) 787-4522

**AGING PROGRAM DIRECTIVE**

**SUBJECT: UPDATE TO AGING SERVICE POLICY AND PROCEDURE MANUAL  
CHAPTER IX: ASSESSMENT**

**TO:** AREA AGENCIES ON AGING  
EXECUTIVE STAFF  
PENNSYLVANIA COUNCIL ON AGING  
ADMINISTRATION ON AGING  
COMPTROLLER  
PENNSYLVANIA ASSOCIATION OF AREA AGENCIES ON AGING



**FROM:** -----  
Brian M. Duke  
Secretary  
Pennsylvania Department of Aging

**LEGISLATIVE/  
REGULATORY  
REFERENCE:**

**BACKGROUND:** The Department of Aging has provided the area agencies on aging with procedural requirements for assessment in Chapter 1 of the Aging Service Policy and Procedure Manual.

The Department of Aging HCBS manual required updates to provide local AAA and service providers with information regarding departmental policies, procedures and processes. The Quality & Compliance Division has worked with Pennsylvania Area Agency on Aging (P4A) and 13 volunteer Area Agencies on Aging (AAA) members that formed a work group to update and revise the manual renamed the "Aging Service Policy and Procedure Manual". This revised manual has 12 chapters which address aging programs and services. Due to the request by the AAA network the chapters will be released individually as they are completed. g.

The process for this revision included a thorough review of previous aging APDs, policies, references, etc. followed with a draft chapter presented to the AAA work group for input and revisions. Following revisions the chapter was distributed to the entire aging network with comment period and additional revision prior to finalization.

The update Aging Service Policy and Procedure Manual will be posted on the internet for reference with links to additional reference documents, forms and appendices for the user to have easy access to the information. The document can also be printed by the local user if they prefer. The Department will not provide hard copies of the documents.

**PURPOSE:** The purpose of this Aging Program Directive is to set forth assessment procedural requirements for aging program consumers and for OBRA assessments. This APD rescinds APD 14-01-06 ISSUANCE OF AGING SERVICE POLICY AND PROCEDURE MANUAL CHAPTER IX: ASSESSMENT

**CONTENT:** **Chapter IX: Assessment** includes

Section I: Assessment Tools

NEW - Need Assessment Tool – Express (NAT-E) which replaces the PA Screen and is both a self-declaration tool and can also be completed by Aging staff, including Case Aide under the supervision of a Care Manager or Care Management Supervisor. The NAT –E is to be used for individuals who receive:

- Non-Congregate/In-Home Meals
- Congregate Meals (Section 1 – Introduction and Section 2 – Nutrition only)
- Emergent Service (after 72 hours if this service is still needed, there must and LCD and NAT completed)

Section II: Level of Care Requirements

- Individuals to be assessed
- Time frames for initial assessments - 15 days for ALL assessments and re-certifications (PCH/Dom Care and Aging Waiver).

### Section III: Physician Input

Acceptable medical certification forms and in what situations which form is required including all individuals applying for OPTIONS who have a level of care determination of Nursing Facility Clinically Eligible.

### Section IV: Level of Care Definitions

- Definition of Nursing Facility Clinically Eligible (NFCE) and Nursing Facility Ineligible (NFI)
- AAA no longer responsible to determine Long Term or Short Term NFCE

### Section V: Completion of the LCD

Procedures for completion of the LCD including:

- Informed consent of individual being assessed is required
- Guidance as to the conduction of the assessment visit
- Important criteria to be identified in completing a level of care determination
- Use of professional consultants

### Section VI: Other Considerations

Guidance on general topics including:

- Completion of requests for assessment from nursing facilities
- Mandatory Enrollment

### Section VII OBRA Assessments

- Change in naming of PASRR forms
- Information on OBRA times frames (Appendix C)

### Section VIII: Personnel Requirements

- Minimum requirements for assessor credentialing
- Minimum Education and Training Standards for individuals who complete, review and sign-off on assessments

### Section IX: Quality Assurance

- Requirements for the AAA to establish and implement a quality assurance procedure to assure clinical validity, assessor reliability and accuracy of the level of care determination
- Monitoring activity that will be conducted by the Quality and Compliance Division in the Bureau of Quality Assurance.

### Appendices

#### A. Documentation Requirements

#### B. Forms:

- The Level of Care Determination Notice replaces the OPTIONS Determination Report. It is no longer a requirement to determine Long Term or Short Term Nursing facility Clinically Eligible on this form or the MA-51

#### C. Regulations and Citations

#### D. SAMS data entry requirements

- There are no longer mandatory Activities and Referrals