



Sustaining a No Wrong Door System: Federal Funding Strategies for Information Technology and Preadmission Screening and Resident Review



Introduction

Sustaining a No Wrong Door (NWD) System requires diversity in funding. Generally, a state's sources of funds for their NWD System functions include Medicaid Administrative Claiming (MAC), Veterans Health Administration (VHA) programs, Older Americans Act formula funding, Rehabilitation Act funding, and Administration on Community Living (ACL) grants. States also leverage additional federal, state, and local resources as well as private payments from individuals and organizations.

ACL and the Centers for Medicare and Medicaid Services (CMS) have supported many states with technical assistance in planning for implementation of MAC funding to support NWD System operations such as outreach, application assistance, program planning and training.¹ This paper highlights two additional streams of MAC funding which could also serve to support and sustain state NWD Systems.

Preadmission Screening and Resident Review (PASRR)

Created in 1987 through the Omnibus Budget Reconciliation Act (OBRA), the Preadmission Screening and Resident Review (PASRR) program has three goals:

1. Identify individuals with mental illness (MI) and/or intellectual disability (ID);
2. Ensure they are supported appropriately, whether in the community or in a nursing facility; and
3. Ensure that they receive the services they require for their MI or ID.

These goals are accomplished through Level I (initial screening) and Level II (more in-depth screening to determine if nursing facility placement is appropriate and to identify supportive services) screenings upon entry into all Medicaid-certified nursing facilities regardless of payer source. PASRR can serve as an important process in helping states educate individuals and families about options in community living. As states work with people through the PASRR process, integration with NWD Systems provides an opportunity to use PASRR screening discussions to engage in conversations about community-based options for long-term services and supports (LTSS).

Implementation of PASRR generally rests with the state Medicaid agency, the state mental health authority, and the state intellectual and developmental disability authority. These agencies should ideally also be involved in the state governance structure of a state's NWD System.²

Activities that support the administration of PASRR and are included in an approved cost allocation plan are eligible for 75/25 federal/state match. Staff participating in MAC for PASRR must track their time to calculate a percentage of time spent on PASRR-related activities. To

¹ <https://www.medicaid.gov/medicaid/finance/admin-claiming/no-wrong-door/index.html>

² See NWD Key Elements at <https://nwd.acl.gov/pdf/NWD-National-Elements.pdf>



learn more about PASRR and see examples of activities, visit the Centers for Medicare and Medicaid Services (CMS)-funded [PASRR Technical Assistance Center](#).³

How to Get Started

1. Contact your state Medicaid agency, the state mental health authority, and the state intellectual and developmental disability authority to fully understand how PASRR Level I and Level II screening work in your state.
2. Begin conversations about how PASRR could be a resource in the promotion of community living through integration with the NWD System.
3. Learn from other states. In 2013, the Minnesota legislature recognized that the NWD System could conduct the PASRR Level I screens and provide follow-up with individuals to offer long term counseling as a way of identifying people at risk of hospital re-admission.

Information Technology (IT) Claiming

The Medicaid Management Information System (MMIS) is a foundational component of a state's NWD System information technology structure. According to the CMS NWD System Reference Guide, states may be able to obtain Federal Financial Participation (FFP) for enhancements made to the state's MMIS to support the state's NWD System.⁴ State can obtain a matching rate of 90 percent (90/10 funding) for costs associated with building eligibility and enrollment (E&E) systems called Design, Development and Installation (DDI) and 75 percent (75/25) funding for Maintenance and Operations (M&O) to operate and maintain them.⁵

Advance Planning Documents (APDs) must be approved as a first step in IT claiming. There are specific conditions and standards required for receipt of enhanced funding for Mechanized Claims Processing and Information Retrieval Systems, including both Medicaid E&E systems and MMIS.⁶

How to Get Started

1. Find out what your state's recent investments have been in Medicaid IT. Explore how current initiatives could integrate into NWD System development work.
2. Begin discussions about how IT and data system enhancements can support the NWD System.
3. Reach out to CMS, in conjunction with your state Medicaid agency, to learn more about eligibility for IT claiming.

³ PASRR Technical Assistance Center: <http://pasrassist.org/>

⁴ From No Wrong Door System Reference Guide available at <https://www.medicaid.gov/medicaid/finance/downloads/no-wrong-door-guidance.pdf>

⁵ From CMS Medicaid Management Information Systems website at <https://www.medicaid.gov/medicaid/data-and-systems/mmis/index.html>

⁶ Available at <http://www.medicaid.gov/federal-policy-guidance/downloads/smd16009.pdf>



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Resources

Medicaid IT Claiming

[CMS IT Webpage](#)

PASRR Claiming

[CMS PASRR Webpage](#)

[PASRR Technical Assistance](#)