Optum Maryland

Maryland Pre-admission and Resident Review (Serious Mental Illness (SMI)

Karen Gauvin, BSN, R.N.

November 2020

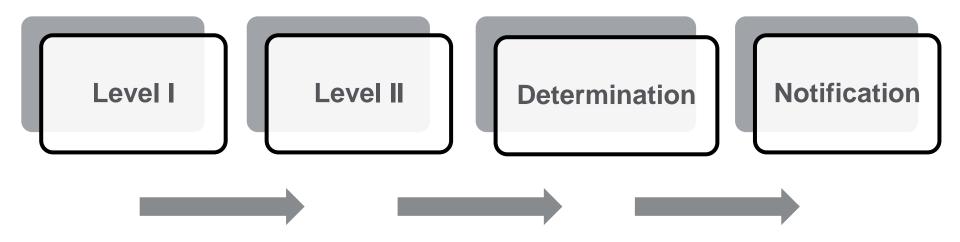


Objectives of Presentation

- •Components of PASRR process Level I
 - Level II evaluation
 - Determination
 - Notification
- Roles and Responsibilities for PASRR
- Contacts for PASRR SMI
- •Resources



Components of PASRR





Preadmission and Resident Review (PASRR) Process

Serious Mental Illness (SMI)

 n%202016.odf Prior to admission, form is completed by facility or provider referring individual to nursing home Used to determine whether individual has or is suspected to have Serious Mental Illness, Intellectual Disability or both After admission to nursing facility, form is completed by nursing facility 	STEP 1.	Level I - ID Screen (DHMH 4345)- Required for admissions or residents of a Medicaid certified Nursing Home
 Prior to admission, form is completed by facility or provider referring individual to nursing home Used to determine whether individual has or is suspected to have Serious Mental illness, intellectual Disability or both After admission to nursing facility, form is completed by nursing facility Used when new information is received that indicates Serious Mental illness, intellectual Disability or both significant change in mental or medical status has occurred, or when there is a new diagnosis of mental illness TEEP 2. Adult Evaluation and Review Services (AERS) Level II Assessment within 3 working/business days of receipt of accurate, signed and dated DHMH 4345 (Level I. Conduct STEP SAssessment (A+F) A Diagnosis(s) Medical & Psychiatric (current and historical), current and history of medications, including compliancy B. Review of all body systems including neurological system C. Functional assessment (ADU/ADU) D. Psychosocial assessment E. Mental health assessment Obtain psychiatric evaluation from treating Psychiatrist, Licensed Clinical Social Worker-Clinician (LCSW-C), or Advanced Practice Registered Nurse or Nurse Practitioner with Practice in Mental Health (APRN-PMH/CRNP-PMH) Obtain medical documentation to support necessity of nursing home care, if necessary Complete Plan of Care Send all documentation and signed certificate to Optum Maryland MOTE: Termination of PASR proces may occur <u>after</u> the completion of Level II assessment if Alzhenmer's Disease or other neurocognitive disorder TREP 3. Optum Maryland (Behavioral Health Administration's contracted authority) Determination reguine [of determination, documentation shuld be typed, handwritten is acceptable, if legil e Level II Svaluation R		https://mmcp.health.marvland.gov/SiteAssets/pages/UCATransition/Level%20I%20ID%20Screen%20Revised%20Ja n%202016.pdf
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Forwards applicable documents (Determination Letter, certificate, Level II Evaluation Report & BHA resource		
information - whichever is applicable) to: 1) Individual and/or legal representative; 2) NH; 3) Discharging hospital; and 4) Attending physician		

BHA webpage:

https://bha.health.mary land.gov/Documents/P ASRR%20Level%20I %20Instructions.pdf



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October 2020

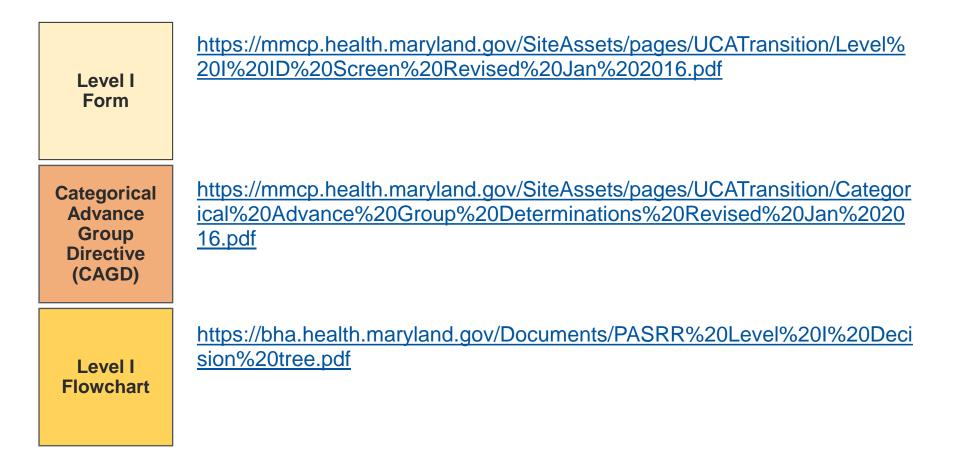
Level I - 42 CFR 483.128

- Applicants to or residents of a Medicaid-certified nursing facilities (NF) to identify a serious mental illness (SMI), Intellectual or Developmental Disabilities (ID), or a related condition (RC)
- Preliminary and "broad screening" for SMI, ID, or RC



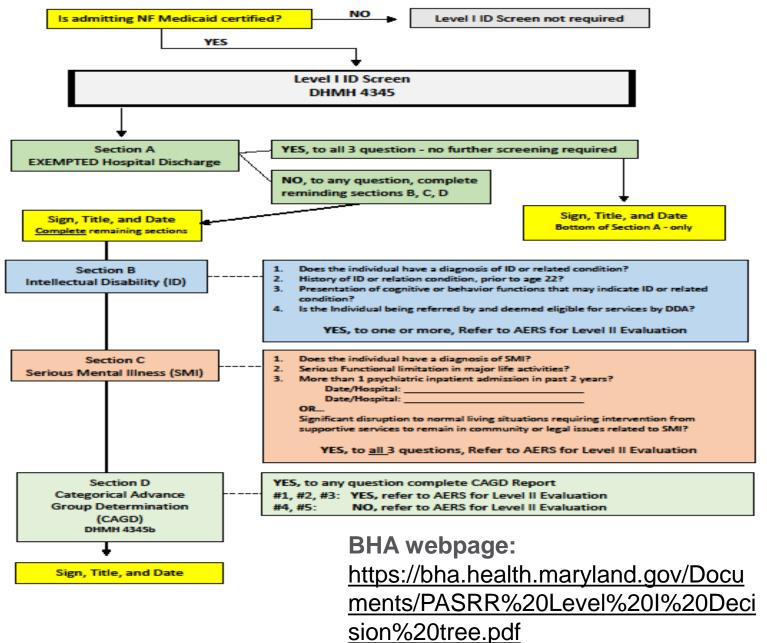
Maryland PASRR Level I Forms

Also referred to as the ID Screen





Flow Chart for completing DHMH 4345 (Level I)



Level I Requirements - 42 CFR 483.128

1. When is a Level I completed?

- <u>PRIOR</u> to admission to nursing facility
- Upon a <u>SIGNIFICANT CHANGE</u> of current resident of NF

2. Who can complete a Level I?

CFR does not specify personnel who may complete Level I

3."Positive" Level I:

- Notify the individual or his/her legal guardian
- Refer to Adult Evaluation and Review Services (AERS) at Local Health Department for PASRR Level II assessment



Completion of Level I – DHMH Form 4345

- Section A Exempted Hospital Discharge (EHD)
- Section B Intellectual Disability (ID) or Related Condition (RC)
- 3. Section C Serious Mental Illness (SMI)
- 4. Section D Categorical Advanced Group Determination (CAGD)



Exempted Hospital Discharge (EHD) - 42 CFR 483.106(b)

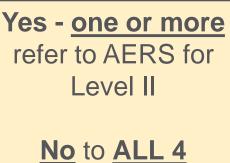
- \rightarrow ALL 3 requirements must be met:
- 1. Individual is admitted to a NF directly from a hospital after receiving inpatient care (NOT: emergency room or observation unit)
- 2. Individual requires NF services for the condition for which they were hospitalized
- 3. <u>Physician has certified</u> before the NF admission that the individual is likely to require less than 30 days NF care



Level I – Section B

Intellectual Disability or Related Condition – 42 CFR 483.128(a)

- 1. Does the individual have a diagnosis of ID or related condition?
- 2. Is there any history of ID or related condition in the individual's past, prior to age 22?
- 3. Is there any presenting evidence (cognitive or behavior functions) that may indicate that the individual has ID or related conditions?
- 4. Is the individual being referred by, and deemed eligible for, services by an agency which serves persons with ID or related conditions?



Not subject to PASRR



According to 42 CFR 483.102(b)(3), an individual has an intellectual disability if he or she has:

- A level of intellectual disability as described in the American Association on Mental Retardation's (AAMR) Manual on Classification in Mental Retardation, published in 1983; or
- A related condition, which is defined by 42 CFR 435.1010 as a disability that: (continue next slide)



Level I – Section B (continued)

a) Is attributable to:

i) Cerebral palsy or epilepsy; or
 ii) Any other condition, other
 than mental illness, found to be
 closely related to intellectual
 disability because it impairs
 intellectual functioning or would
 require services normally
 delivered to an individual with
 impaired intellectual function

b) Manifests before the age of 22;c) Is likely to continue indefinitely, and;

 d) Results in substantial functional limitations in three or more of the following life activities:

- i) Self-care
- ii) ii) Understanding and use of language;
- iii) iii) Learning;
- iv) iv) Mobility;
- v) v) Self-direction; or
- vi) vi) Capacity for independent living



Intellectual Disability or related condition inquiries contact either:

- 1. Adult Evaluation and Review Services (AERS) located in Health Departments <u>https://health.maryland.gov/Pages/departments.ASPX</u>
- Developmental Disabilities Administration
 Regional Registered Nurse
 <u>https://dda.health.maryland.gov/Pages/Regional%20Offic</u>
 <u>es.aspx</u>



Level I – Section C

Serious Mental Illness - 42 CFR 483.102(b)

Three factors that govern if a disorder qualifies as a serious mental illness (SMI) for PASRR determination

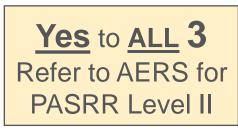
- 1. Assessment of diagnosis or disability
- 2. Level of Impairment
- 3. Recent Treatment



Level I – Section C (continued)

- Disorder is listed as a <u>serious mental</u> <u>disorder</u> in the Diagnostic and Statistical Manual of Mental Disorders, revised (DSM-III-R), published in 1987
- Disorder has resulted <u>in functional</u> <u>impairments</u> in major life activities in the last 3-6 months
- 3. Disorder has resulted in a <u>recent</u> <u>psychiatric treatment</u>





Question #1

Diagnosis - Does the individual have a serious mental illness or disorder?

Includes but not limited to: schizophrenia, schizoaffective disorder, major depression disorder, mood disorders, paranoia, panic or other severe anxiety disorders; somatoform disorder; personality disorder; other psychotic disorder; or another mental disorder that led to a disability

Not a primary diagnosis of dementia, including Alzheimer's disease or a related neurocognitive disorder



Level I – Section C (continued)

Dementia - 42 CFR 483.128(m)(i)(ii)

• MDH requires completion of the Level II assessment by AERS:

- 1. To determination if the primary diagnosis is dementia or a neurocognitive disorder versus serious mental illness
- 2. To determine if the individual who has a SMI and dementia or cognitive disorder can still benefit from specialized services
- The diagnosis of dementia or related condition must be from a Physician or Psychiatric Nurse Practitioner
- CMS PTAC Dementia and neurocognitive disorders and the diagnostic criterion:

http://www.pasrrassist.org/events/webinar/dementia-and-pasrr



Question #2

<u>Level of Impairment</u> - Has the disorder resulted in serious functional limitations in major life activities within the past 3 – 6 months (e.g., interpersonal functioning, concentration, persistence and pace; or adaptation to change?)

Examples:

- Difficulties or deficiencies in essential self care needs
- Marked limitations in maintaining or accessing housing or health care services
- Pronounced difficulties in maintaining basic social functioning whether family, work, or school settings



Question #3

Recent psychiatric treatment -

In the past 2 years, has the individual had more than one inpatient psychiatric hospitalization?

<u>or</u>

In the past 2 years, required community supportive services or intervention by law enforcement officials to maintain normal living situation and functioning in a community setting (home, assisted living, residential treatment facility)?



Section D

Categorical Advance Group Determinations (CAGD) – 42 CFR 483.130

- CAGD considers certain diagnoses, severity of illness(s), or situations that <u>clearly indicate</u> immediate admission to a NF is needed. In these circumstances an individual can be admitted to a nursing facility prior to completion of the Level II assessment and some situations a Level II assessment may not be needed
- CAGD admissions require supplemental form 4345b
- It is the responsibility of the nursing facility to notify AERS should the individual's care needs change or extend beyond 120 days



Categories:

- 1. <u>Convalescent care</u> not to exceed 120 days due to an acute physical illness which required hospitalization criteria does not meet all the criteria for an exempt hospital discharge
- 2. <u>Terminal illness</u> certified by a physician
- Severe physical illness in which the individual could not be expected to benefit from Specialized Services (e.g. coma)
- 4. <u>Provisional admission</u> due to an emergency involving protective services
- 5. <u>Respite</u> in which the stay will not exceed 14 days



Level – Significant Change - 42 CFR § 483.20(2)(ii)





Level I – Significant Change (continued)

- Section 1919(e)(7)(B)(iii) of the Social Security Act, Resident Reviews are required for NF residents experiencing a "significant change in condition."
- 42 CFR § 483.20(2)(ii) New Level I within 14 calendar days of major decline or improvement which impacts on more than one area of health status and requires interdisciplinary review or revision of the NF care plan, or both.
- Maryland Medical Assistance Program Nursing Home Transmittal No. 239:

https://mmcp.health.maryland.gov/MCOupdates/pdf/PT-19-12-NH239.pdf



Level I – "Obstacles"

- 1. Not being completed <u>Prior</u> to the discharge from hospital or <u>prior</u> to the admission to nursing facility
- 2. Not being completed Significant Change
- 3. Misuse of Exempted Hospital Discharge
- 4. Form not being properly signed or dated
- 5. Understanding the definition of Intellectual Disability (ID) or related condition (RC)
- 6. Understanding definition of Serious Mental Illness (SMI)
- 7. Circumstances of primary Dementia or related condition
- 8. Understanding of Categorical Advance Group Determination
- 9. Not completing supplemental form for CAGD



An individual who resides in a community residential rehabilitation program (RRP) suffered a stroke and was hospitalized for 10 days. The individual cannot return to RRP. The acute care hospital is discharging the individual to Medicaid certified nursing home for rehabilitation services and long-term care.

Poll #1: What is the first step in the PASRR process?

- a) Hospital should contact AERS
- b) Hospital should complete Level I Screen
- c) PASRR is not required in this situation

- Hospital completes Level I indicating the individual is subject to PASRR and contacts AERS for Level II evaluation, then...
- 2. AERS completes Level II and assesses if the individual will benefit from PASRR specialized services



An individual with a previous positive PASRR for major depressive disorder, who has been residing in a Medicaid certified nursing facility for the past 2 years and receiving PASRR specialized services. The individual began experiencing falls, hallucinations, delusions and sleep disturbances. The individual received a new diagnosis of Lewy Body Dementia.

Poll#2: The Nursing Facility is required to complete a new Level I screen. True <u>or</u> False

- True The nursing facility completes new Level I (DHMH 4345), because there is a <u>Significant change</u> related to new diagnosis.
- The NF makes referral to AERS.
- AERS completes new Level II and assesses if the individual will still benefit from PASRR specialized services.



An individual was admitted 25 days ago to a nursing facility on a Level I -Exempted Hospital Discharge. The admission was for rehabilitation related to fractured arm; the individual also has a diagnosis of Schizophrenia. Today, the NF's physician ordered an additional 4 weeks of rehabilitation and the individual agrees to continued stay for rehab.

Poll#3: The facility can complete a Categorical Advance Group Determination for the additional 4 weeks of rehab? True <u>or</u> False

- False The nursing facility must complete new Level I (DHMH 4345) on the day the order was written/given and make a referral to AERS.
- AERS will complete Level II for <u>Resident Review</u> and assess if the individual will benefit from PASRR specialized services.
- Categorical Advance Group Determination can not be applied to the to the additional rehabilitation time, because the individual is currently in NF, so it is considered a Resident Review.



85-year-old male who resides in NF with PASRR determination for SMI & PASRR specialized services. He has been medical and psychiatrically stable for 7 years. He was recently admitted for three-day hospital stay for a scheduled laparoscopic surgery to remove his gallbladder. He is being discharged back to same NF after uncomplicated surgery and hospitalization with discharge plans to "resume all previous medications" and activities".

- No because the surgery nor hospitalization resulted in a Significant Change.
- A new Level I is completed, however, the individual returns to the nursing facility under the previous PASRR determination and resumes PASRR Specialized Services.

Poll#4: Is a new PASRR required?



An individual is being discharged from an acute care hospital to a nursing home under a Categorical Advance Group Determination (CADG). The provisional admission is due to diagnosis of terminal illness (life expectancy of less than six months) as certified by a physician.

Poll #5: Should the nursing facility make a referral to AERS?

Yes - the nursing facility should make a referral to AERS.

According to Nursing Home Transmittal No. 159; "Those in the convalescent care, terminal illness or severe physical illness categories (#1, #2, #3) may require Specialized Services".

Specialized Services are determined by an AERS Level II assessment.



Maryland PASRR Level II

- The purpose of the PASRR Level II is to conduct a comprehensive assessment
- The Maryland Department of Health has designated Adult Evaluation and Review Services (AERS) to conduct PASRR Level II assessments
- AERS offices are in local Health Departments
- Maryland's local Health Departments
 <u>https://health.maryland.gov/Pages/departments.ASPX</u>



Level II - 42 CFR 483.128

The key elements of the Level II AERS comprehensive PASRR assessment are:

- 1. Confirm disability or diagnosis reported on Level I
- 2. Recommend appropriate NF placement or community services
- 3. Determine the need for PASRR Specialized Services, if recommended NF placement
- 4. Review by an independent Physician, if recommended NF placement



Level II - Requirements

42 CFR 483.134

AERS In-Person Assessment	
---------------------------	--

Psychiatric Diagnosis and History	Medical Diagnosis and History	Medications	Functional Assessment	Psychosocial	Psychiatric Assessment

Documentation

- Mental health evaluation (required by MDH) copy of evaluation conducted by a Psychiatrist, LCSW-C, or APRN-PMH/CRNP-PMH
- 2. <u>Psychological evaluation</u>, if applicable
- 3. <u>Supplemental documentation</u>, listed below may assist to facilitate PASRR process
 - Documentation related to the In-Person assessment (ex: medication list, most recent MDS)
 - Documentation related to necessity for admission to nursing facility (ex: Hospital discharge summary)



Level II - #1. Confirm disability or diagnosis

Intellectual Disability or related condition - 42 CFR 483.136 (refer to pages 11 - 14 of this presentation)

Serious mental illness - 42 CFR 483.134 (refer to pages 14 – 20 of this presentation)



Level II – #2. Appropriate placement

42 CFR 483.126; 42 CFR 483.128

•Is the nursing facility the least restrictive environment?

•Home and Community Based Services <u>https://mmcp.health.maryland.gov/waiverprograms/Pages/H</u> <u>ome.aspx</u>

•PASRR should not be used for housing purposes



42 CFR 483.134

- 1. Services that are in addition to the basic NF services
- 2. Individualized and related to the individual's PASRR disability
- 3. Identified in the Level II Evaluation
- 4. For diagnosing or reducing behavioral symptoms
- 5. Assist the individual to reach and maintain the highest quality of life possible
- 6. Provided in NF or in a separate location



Level II - #3. Specialized Services (continued)

Examples of Specialized Services:

- ✓ Psychotherapy (individual, group, and family)
- ✓Psychiatric visits
- ✓ Substance use disorder treatment/program
- ✓ Methadone maintenance/program
- ✓ Behavioral Health evaluations



Level II - #3. Specialized Services (continued)

Specialized Services information:

Transmittal No. 271 https://bha.health.maryland.gov/Documents/PT%200919%20 PASRR%20Specialized%20Services%20(1)%20(1).pdf

Billable Specialized Services:

https://files.constantcontact.com/ea962778601/ad01c842a315-49c9-84ad-049f75f000b9.pdf

PTAC https://www.pasrrassist.org/topic-specialized-services



Level II - #4. Review by Independent Physician

42 CFR 483.134(c)(1)

If the history and physical examination are not performed by a <u>physician</u>, then a <u>physician</u> must review and concur with the conclusions

- 1. AERS assessor compiles all the PASRR documentation and information and makes recommendations according to PASRR federal regulations
- 2. The documentation and information is then sent to an independent Psychiatrist for review and concurrence to AERS' recommendations

*If AERS is unable to identify a psychiatrist, the Level II must be reviewed by a physician with mental health experience



Level II Recap

What are the 4 key elements of the Level II comprehensive assessment?

- 1. Confirm disability or diagnosis reported on Level I
- 2. Recommend appropriate NF placement or community services
- 3. Determine the need for PASRR Specialized Services, if recommended NF placement
- 4. Review by an independent Physician, if recommended NF placement



For a Level II assessment, AERS requires copies of social security cards and birth certificates?

No – Required information and documentation:

- 1. Medical & Psychiatric Diagnoses & Histories
- 2. List of all Medications
- 3. Information regarding ADLs & IADLs
- 4. Social information
- 5. Documentation of Mental Health Evaluation
- 6. Documentation supporting need for NF services
- 7. Psychological Evaluation, if applicable



Level II Recap

What are PASRR Specialized Services?

Individualized mental or behavioral services that go beyond the basic nursing facility services and are identified in the AERS Level II evaluation.



PASRR Determination

State Authority responsible for final PASRR Determination		
Serious Mental Illness (SMI) Behavioral Health Authority (Optum Maryland)	Intellectual disability (ID) or related condition (RC) Developmental Disabilities Administration Regional RN	 Dual diagnoses (having diagnoses for ID/RC and SMI) Known to DDA or is eligible for DDA services: → DDA makes the PASRR determination, after consult with BHA/Optum Not known to DDA nor is eligible for DDA services: → BHA/Optum makes the PASRR determination



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PASRR Determination (continued)

42 CFR 483.130

- PASRR documentation is forwarded by AERS to the appropriate State of Maryland authority for the PASRR determination
- Individualized PASRR determinations must consider the following:
 - 1. Whether the individual requires NF services
 - 2. Whether the individual requires PASRR specialized services
 - 3. The rights of the individual to appeal the PASRR determination
 - PASRR determinations are issued in writing and sent to AERS



PASRR Notification

42 CFR 483.130

SMI PASRR Notification documents:

- 1. Written PASRR determination
- 2. Home and Community Based Services information
- 3. BHA Older Adult Behavioral Specialists information
- 4. Level II Evaluation Report
- 5. Appeal Information, if applicable

AERS sends documentation to:



- Individual or their legal representative
- Discharging hospital, if applicable
- Nursing Facility, if applicable
- Primary Care Provider, if applicable



Test your PASRR knowledge

Poll #6: Can AERS provide verbal PASRR Determinations and Notifications to Hospitals or Nursing Facilities?

a) Yes b) No

No, PASRR determinations are from BHA/Optum Maryland and are provided in writing.



Poll #7: What State of Maryland agency makes the final PASRR determination when an individual has diagnoses for both intellectual disability and mental illness (dually diagnosed)?

- a) DDA
- b) BHA/Optum Maryland

Developmental Disabilities Administration (DDA)

Unless DDA determines the individual is not known to DDA or is not eligible for DDA services, then BHA/Optum Maryland will make the final PASRR determination.



PASRR does not end upon NF admission

- Maryland Department of Health's Behavioral Health Administration monitors and tracks PASRR admissions for individuals with SMI diagnoses
- Behavioral Health Administration's Older Adult PASRR Specialists (BHA OA Specialists) are located with local core service agencies and funded through the Medicaid Money Follows the Person Project
- BHA OA Specialists contact nursing facilities to follow-up on individuals who were admitted with positive PASRRs



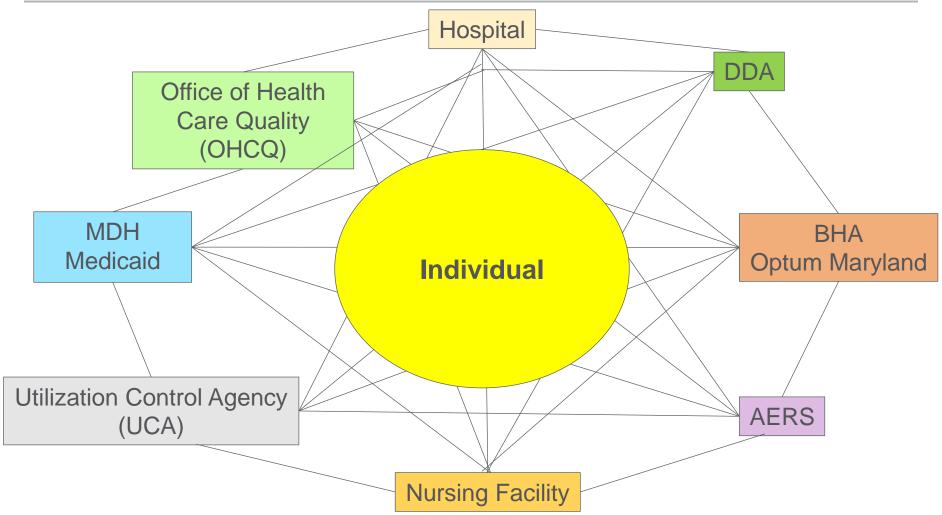
PASRR does not end upon NF admission

(continued)

- BHA Older Adult PASRR Specialists can:
 - 1. Provide behavioral health resources
 - 2. Consultation regarding needed services to NF residents with SMI
 - 3. Assist with facilitating discharges back to the community
- BHA Older Adult PASRR Specials Program Memorandum: <u>https://bha.health.maryland.gov/Documents/UPDATED_August%202020_Maryl</u> <u>and%20PASRR%20program%20for%20serious%20mental%20illness.pdf</u>
 - BHA Older Adult PASRR Specials Program Brochure: <u>https://bha.health.maryland.gov/Documents/OA%20BH%20PASRR%20Brochur</u> <u>e%20Sept%202020%20(1).pdf</u>



PASRR Roles and Responsibilities





Hospital

- 1. Screening of patients for SMI or ID/RC when NF admission is anticipated
- 2. Complete Level I PRIOR to discharge
- 3. Referral to AERS for Level II evaluation, if applicable

Nursing Facility

- 1. Ensure PASRR requirements are met PRIOR admission
- 2. Develop and implement individualized care plans and include PASRR specialized services, if indicated on Level II
- 3. Complete new Level I for Significant Changes
- 4. Referral to AERS for Level II evaluation, if applicable



AERS

- 1. Conduct individualized assessment
- 2. Arrange for psychological evaluation, if applicable
- 3. Make appropriate recommendations regarding placement and PASRR specialized services, if applicable
- 4. Send notification documentation

BHA/Optum Maryland

- 1. Make PASRR determinations
- 2. Track PASRR admissions for SMI



State of Maryland Medicaid

- 1. Oversee implementation of PASRR
- 2. Provide guidance and direction
- 3. Work with NFs in discharges under MFP

Office of Health Care Quality

- 1. Monitor NFs' compliance with PASRR requirements
- 2. Monitor care provided to residents



Utilization Control Agency

- 1. Monitor NFs' compliance with PASRR requirements
- 2. Track PASRR admissions and report to Medicaid
- 3. Prior to issuing medical eligibility level of care under Medicaid guidelines, verify the Level II and PASRR determination has been completed on persons diagnosed or suspected of SMI/ID/RC



PASRR Contacts for SMI

State of Maryland Medicaid	Behavioral Health Administration Optum Maryland
Division of Long-Term Care Services Jane Sacco, Chief jane.Sacco@maryland.gov	Office of Older Adults and Long- Term Services and Supports Stefani O'Dea, Chief stefani.odea@maryland.gov
	<u>OPTUM - BHA Consultant</u> Karen Gauvin, BSN, RN karen.gauvin@optum.com



PASRR Resources

Code of Federal Regulations, 42 CFR 483.100-138 <u>https://www.ecfr.gov/cgi-bin/text-</u> <u>idx?SID=a8e94a4dc73380c1ccb86dbff2989403&mc=tru</u> <u>e&node=pt42.5.483&rgn=div5#sp42.5.483.c</u>

Code of Maryland Regulations (COMAR) (10.09.10.03 & 10.09.26.11) http://www.dsd.state.md.us/COMAR/ComarHome.html



PASRR Resources (continued)

Centers for Medicare and Medicaid Services: https://www.cms.gov

Medicaid.gov http://www.medicaid.gov

Maryland Medicaid: <u>https://mmcp.health.maryland.gov/Pages/home.aspx</u>

Maryland Behavioral Health Administration: <u>https://bha.health.maryland.gov/Pages/olderadultbehavior</u> <u>alhealthandPASRR.aspx</u>



PASRR Resources (continued)

State of Maryland Transmittals:

https://mmcp.health.maryland.gov/MCOupdates/Pages/Home.aspx

Nursing Home Transmittal No. 159

Preadmission Screening and Resident Review

Nursing Home Transmittal No. 239 PASRR Update and Clarification of Resident Review Requirement Applicable to Nursing Facilities

Hospital Transmittal No. 228 Nursing Home Transmittal No. 249 Categorical Advance Group Determination under PASRR

Nursing Home Transmittal No. 271 Behavioral Health Services Available to Nursing Home Residents



PASRR Resources (continued)

PASRR Technical Assistance Center (PTAC): http://www.pasrrasist.org

Maryland PASRR for Individuals with Mental Illness Frequently Asked Questions (FAQ): <u>https://bha.health.maryland.gov/Documents/PASRR%20Fr</u> <u>equently%20Asked%20Questions.pdf</u>



Maryland PASRR for SMI

Thank you!



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