Electronic Preadmission Screening and Resident Review (ePASRR) Form

Date: April – 5, 6, 7, 12, 13, 14 – 2022
ePASRR Flowchart

Submitter
Complete ePASRR form

Liberty receives email alert of ePASRR submission

*30-day Exemption

Submitter receives email alert of ePASRR Status Update

Submitter
replaces email alert with a copy of ePASRR

Liberty review and process ePASRR for Level-I, Level-II, or Exemption

Level-I

Submitter receives email alert for ePASRR Level-II referral

DBH/DDS receives email alert for ePASRR Level-II referral

Phase-II will
include Level-II outcome email alert update back to submitter

Physician receives an email alert for signature request

Liberty receives email alert of ePASRR submission

*Level-II

Submitter is responsible for faxing/emailing ePASRR form and Level-II documents [if applicable] post-physician signature to Liberty

Liberty receives paper ePASRR form via fax/email/DCCC from submitter

*When hospital discharge exemption criteria are met, admitting NF is responsible for ePASRR follow-up if greater than 30 days

*If ePASRR is positive for Level-II, all Level-II required documents should be attached prior to submission/faxing to Liberty
ePASRR Submission

Once you complete the ePASRR, you will see a message that lets you know your submission was successful.
There are seven types of alert messages that update the submitter about the status of the ePASRR.

### ePASRR Alert Messages

**Submitter Alerts**

- **Default alert message to submitter when copy (box) is checked**
  
  **Subject:** Confirmation - Government of the District of Columbia
  
  Thank you for submitting your entry. A copy is included below for your records.

- **Alert message to submitter when physician signature is not required**
  
  **Subject:** Submission alert with copy to submitter
  
  Thank you for submitting ePASRR form. The completed form has been submitted to Liberty for review. You will be notified as soon as updates becomes available. This is a copy for your record. Thank you.

- **Alert message to submitter when fax option is selected for physician signature request**
  
  **Subject:** This is a copy to fax the submitted ePASRR Level-I exemption
  
  Thank you for submitting the ePASRR form. Please fax the ePASRR Level-I exemption request to the physician for signature. Please note, you are required to fax/email the physician signed copy to Liberty for processing. Thank you.

- **Alert message to submitter post physician signature when email option is selected**
  
  **Subject:** ePASRR Level-I exemption request signed and submitted to LHC
  
  Please note, the physician has signed the Level-I exemption request and sent to Liberty for review. You will be notified as soon as updates becomes available. This is a copy for your record. Thank you.
Sample of ePASRR email alerts. It’s important that you enable incoming Smartsheet emails.

Submitter Alerts

➢ Alert message to submitter when ePASRR Level-I hospital discharge exemption criteria is met

  Subject: 30-day exemption criteria met
  This is to notify you that Liberty has updated the ePASRR form below with the following status “30-day exemption criteria met”.
  Thank you.

➢ Alert message to submitter post LHC review for status update with “Reviewed and not Positive for Level-II”

  Subject: Received and Not Positive for Level-II
  This is to notify you that Liberty has updated the ePASRR form below with the following status “Reviewed and Not Positive for Level-II”.
  Thank you.

➢ Alert message to submitter post LHC review for status update with “Reviewed and Referred for Level-II”

  Subject: Received and Referred for Level-II (DDS, DBH, or DBH & DDS):
  This is to notify you that Liberty has updated the ePASRR form below with the following status “Reviewed and Referred for Level-II”.
  Thank you.
There are two types of alert messages that goes to Liberty.

**ePASRR Alert Messages**

**Liberty (LHC) Alerts**

- Alert message to LHC without exemption request i.e., those that does not require physician signature
  
  **Subject: ePASRR Level-I submitted to LHC**
  
  Please note, ePASRR Level-I has been submitted by a provider. Below is the link to the form. Please open the form and review accordingly.
  
  Thank you.

- Alert message to LHC with exemption request post physician signature via email option
  
  **Subject: ePASRR Level-I exemption request signed and submitted to LHC:**
  
  Please note, ePASRR Level-I exemption request has been submitted by a provider and signed by the physician. Below is the link to the form. Please open the form and review accordingly.
  
  Thank you.
Alert message to physician via email for ePASRR Level-I hospital discharge exemption physician signature request.

Physician Alert

Subject: Request physician signature
Please note, ePASRR Level-I hospital discharge exemption request has been submitted for a beneficiary under your care. Physician signature is required only when all the three (3) conditions are met for post-acute inpatient care that is: beneficiary admitted directly to nursing facility; beneficiary requires nursing facility services; and beneficiary is likely to require less than 30-days of nursing facility services.

Thank you.
If you do not have a physician e-mail or if the physician prefer fax, you can fax the ePASRR form directly to the physician after submitting the form for a hard signature request. **However, you are required to fax/email the signed ePASRR to Liberty.**
Submitter **must** check the box "Send me a copy of my responses" **before** clicking the "Submit" box to get full copy of the completed form to be forwarded to Liberty via [dclibertyias@libertyhealth.com](mailto:dclibertyias@libertyhealth.com) or faxed via 202-298-2075.