

PASRR

Pre-Admission Screening and
Resident Review

Overview

- For a state to have its Medicaid plan approved by the Centers for Medicare and Medicaid Services (CMS), it must maintain a Preadmission Screening and Resident Review (PASRR) program that complies with the relevant Federal laws and regulations. Everyone who applies for admission to a nursing facility (NF) must be “screened” for evidence of serious mental illness (MI) and/or intellectual disabilities (ID), developmental disabilities (DD), or related conditions.
- A NF must not admit an applicant who has MI and/or ID unless the appropriate state agency has determined whether a) the individual needs the level of services that a NF provides, and b) whether individuals who need NF services *also* need high-intensity “specialized services.” Generally speaking, the intent of PASRR is to ensure that all NF applicants are thoroughly evaluated, that they are placed in nursing facilities *only* when appropriate, and that they receive all necessary services while they are there.

2 LEVELS of PASRR

- There are two types of screens:
 - Level I
 - Level II
- Level I is usually completed by hospital/NF staff. If there is a request for NF placement directly from a person's home, a community-based social worker, nurse or case manager may complete and submit the Level I.
- Level II is only completed by a PASRR Coordinator.

Purpose of Level I and Level II

The purpose of a Level I screen is to determine whether an individual *might* have MI and/or ID.

If an individual “tests positive” at Level I, PASRR Level II evaluation has three main aims:

- To confirm whether the applicant has MI/ID/DD;
- To assess the applicant’s need for placement in a nursing facility; and
- To assess whether the applicant requires specialized services or specialized rehabilitative services.

Specialized Services

- The Level II determination may include a requirement for Specialized Services.
- Specialized Services are individualized, aimed at addressing the person's needs related to their disability that CANNOT be met by the NF alone.
- For people with ID/DD or Related Condition in Vermont, the maximum allocation for Specialized Services is 5 hours per week, or 25 hours per week depending on whether or not they already have funding for Home & Community Based DD Services.
- Specialized Services must be authorized by the PASRR Coordinator.

Who is PASRR Exempt?

- If a person is being admitted to a nursing facility following an acute hospitalization to receive rehabilitative therapies, and is likely to require treatment for *less than 30 days* in the NF, he/she will not need a Level II evaluation.
- The attending physician must attest to this and sign off in **Part A** of the Level I screen.
- If the person is admitted to a NF and later is determined to need a longer stay, the PASRR Coordinator should be contacted to arrange a Level II evaluation.

Who is responsible for PASRR in VT?

- For individuals diagnosed with mental illness and have “yes” checked off in **Part B** of the Level I form, the Department of Mental Health (DMH) is responsible for the Level II.
- For individuals suspected to have Intellectual/Developmental Disability or Related Condition with “yes” checks in **Part C** of the Level I form, DAIL/Developmental Disabilities Services Division (DDSD) is responsible.
- If a person is believed to have both MI and DD, DMH and DAIL will coordinate and perform a Level II evaluation together.