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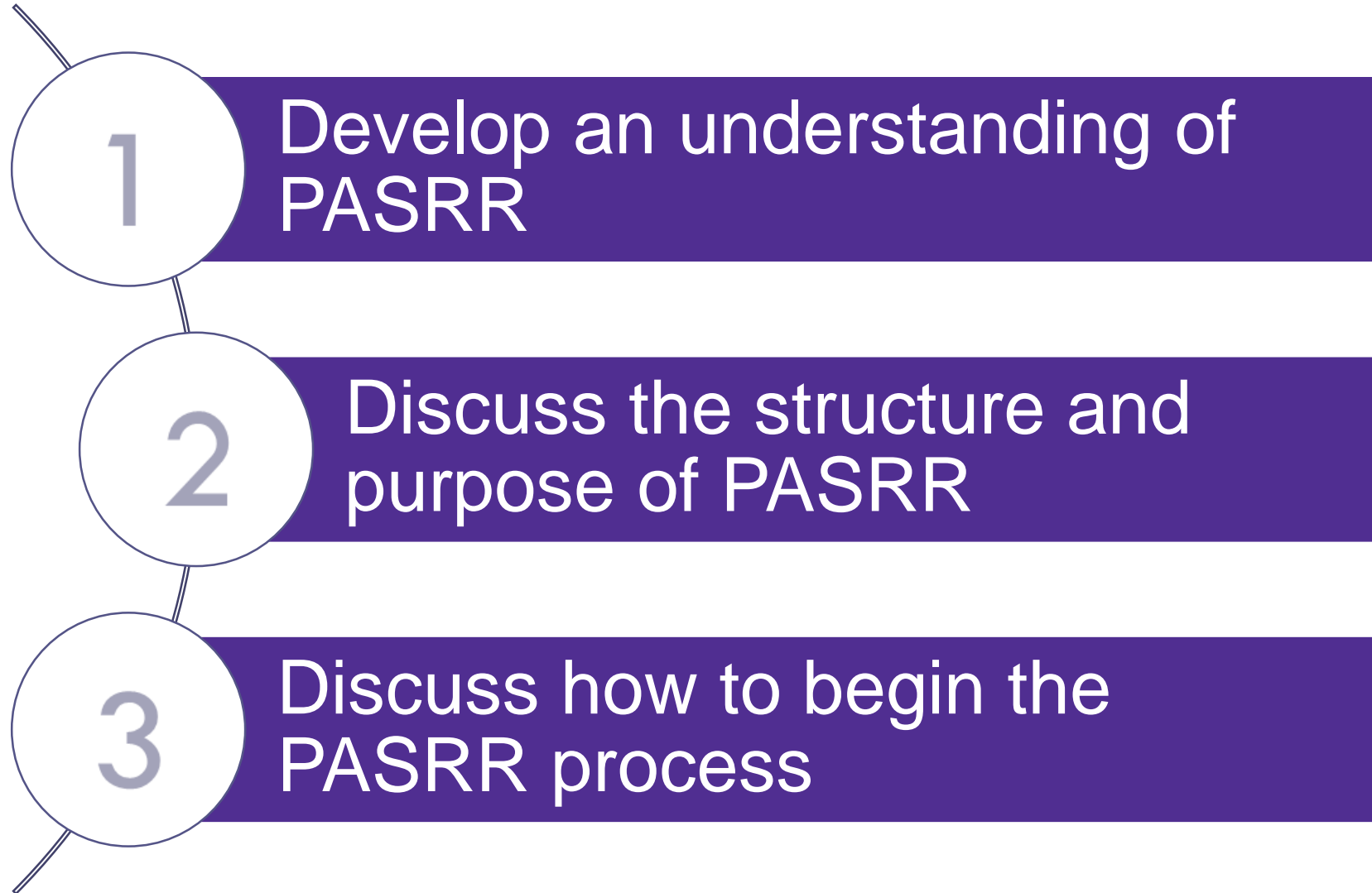
VIRGINIA PASRR

*An introduction to Virginia's
Preadmission Screening and
Resident Review Process*





Learning Objectives





- ✓ Preadmission Screening & Resident Review
- ✓ Administered by CMS
 - Created in 1987
- ✓ Anyone in Medicaid-certified NF screened for:
 - SMI, ID, RC
- ✓ Known or suspected condition = evaluation
 - To ensure NF is most appropriate placement
 - To ensure receipt of needed services

Structure & Purpose of PASRR



**Optimize an individual's placement
success, treatment success, and
QUALITY OF LIFE
in the least restrictive setting possible**

How do we reach that goal?



(Source: Dan Timmel, CMS, 8-13-2006, 2013)



✓ Level I (broad screening)

- Screening to determine presence of MI, ID, or RC
- DMAS 95
- Required for all applicants for federally-funded NFs

✓ Level II (PASRR individualized evaluation)

- Exemptions and categorical decisions
- Onsite comprehensive evaluation
- Make level of care, placement, and treatment recommendations
- Persons with sole dementia with no suspicion of an underlying mental illness and with no suspicion of an IDD condition do not need to be referred for PASRR

Required PASRR Components



✓ Level II Summary report and notification letters

- NF must:
 - Keep copy in active chart
 - Address identified services in plan of care

✓ Follow-up assessments

- Resident Reviews, Status Change, or Change in Condition evaluations
- NF must report certain changes in conditions to the PASRR authority

Required PASRR Components cont.



1. Does the individual have a PASRR condition?
2. What is the most appropriate placement for this individual? (acute enough/too acute)
3. Might this individual be a candidate for transition to the community? What supports or services would be necessary to return to his/her community?
4. What unique disability supports and services does this individual need while a resident of a NF to ensure safety, health, and well-being?

FOUR QUESTIONS OF PASRR



Question #1:

Does this individual have a PASRR condition?

THE FOUR Ds OF PASRR—MI

1. Diagnosis (or suspicion of) a serious mental illness
2. Dementia: If present, is it primary?
3. Duration
4. Disability



Question #1:

Does this individual have a PASRR condition?

THE FOUR Ds OF PASRR—ID/RC

1. Diagnosis (or suspicion of)
 - ID prior to age 18
 - RC prior to age 22
2. ~~Dementia~~
3. Duration
4. Disability



Possible PASRR Related Conditions

- ✓ Anoxia at birth
- ✓ Arthrogryposis
- ✓ Autism
- ✓ Congenital Blindness
- ✓ Cerebral Palsy
- ✓ Congenital Deafness
- ✓ Down Syndrome
- ✓ Encephalitis
- ✓ Fetal Alcohol Syndrome
- ✓ Fredreich's Ataxia
- ✓ Hemiparesis
- ✓ Hemiplegia
- ✓ Hydrocephaly
- ✓ Klippel-Feil Syndrome
- ✓ Meningitis
- ✓ Multiple Sclerosis
- ✓ Muscular Dystrophy
- ✓ Paraparesis
- ✓ Paraplegia
- ✓ Polio
- ✓ PDD
- ✓ Prader-Willi syndrome
- ✓ Quadraplegia
- ✓ Seizure Disorder
- ✓ Spinal Bifida
- ✓ Spinal Cord Injury
- ✓ Traumatic Brain Injury
- ✓ XXY Syndrome



Self-care
Understanding and use of language
Learning
Mobility
Self-direction
Capacity for independent living

FUNCTIONAL LIMITATIONS AREAS OF MAJOR LIFE ACTIVITIES



Question #2:

What is the most appropriate placement for this individual?

- ✓ Least restrictive level of care
 - Too acute/not acute enough
- ✓ NF (meets LOC and this NF can meet needs)
 - NF MUST incorporate ALL PASRR identified services into care plan
- ✓ Specialized Services
 - Services specific to the person to meet required needs
- ✓ Alternative Placement or Community Services



Question #3:

*Might this person be a candidate for transition to the community?
What supports or services would be necessary to return to community?*


- ✓ Community placement
 - With or without supports
 - Independent living
 - Group home
 - Assisted living
- ✓ Person directed care



Question #4:

What unique disability supports and services are needed while a resident of an NF to ensure safety, health, and well-being?

- ✓ Specialized Services
- ✓ Highest practicable physical, mental, and psychosocial well-being
- ✓ Any needed service/support
 - Not limited to facility's existing resources

- 
- ✓ Persons suspected of having a PASRR condition
 - Even with no formal diagnosis
 - MI, ID, RC

WHO NEEDS A PASRR?



*Before NF
admission*

- Pre-Admission

*Significant
change in
status*

- Resident Review
- LOC change

*Expiration
of a **time-
limited stay***

- Targeted Resident Review
- You will be contacted via
faxed memo to initiate

When Do I
Submit a
PASRR?



What is the Process?

1. Referrer

- Fax required documents to Ascend
 - Ascend must have everything to proceed

2. Maximus

- Reviews documents
- Assigns independent contractor for an assessment

3. Maximus

- Reviews face-to-face assessment
- Submits the review to DBHDS

4. DBHDS

- Makes final determination
- Submits notifications to referrer



- ✓ Completed UAI
- ✓ DMAS 95
 - Indicate if the person has a(n):
 - Serious mental illness
 - Intellectual disability
 - Related condition
- ✓ Guardianship documentation (if applicable)
- ✓ Medical history and physical
 - In the past year
 - Signed by physician
- ✓ Psychiatric evaluation—if referring for SMI
 - In the past year
 - Signed by a psychiatrist
- ✓ Intelligence testing—if referred for intellectual disability
 - If scores are not available, ascend has contracted intelligence testers that can obtain this information.

Required Documents for PAS



- ✓ Guardianship documentation (if applicable)
- ✓ Medical history and physical
 - In the past year
 - Signed by physician
- ✓ Psychiatric evaluation—if referring for SMI
 - In the past year
 - Signed by a psychiatrist
- ✓ Intelligence testing—if referred for ID
 - If scores are not available, Ascend has testers that can obtain this information
- ✓ Face Sheet
- ✓ Daily notes for the past 7 days
- ✓ Two most recent MDS

Required Documents for Resident Review



Call Ascend for Questions or Assistance

VA PASRR Helpdesk
833-987-2777

VA PASRR FAX: 877-431-9568

Do NOT email PHI



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