PURPOSE

The purpose of the Developmental Disabilities Administration (DDA) Preadmission Screening and Resident Review (PASRR) Program is to identify individuals with intellectual disabilities or related conditions (ID/RC) who have been referred for nursing facility (NF) care, to determine whether a NF is the most appropriate setting to meet the person’s needs, and to assure that the person receives any specialized services needed for ID/RC while receiving NF care. This DDA PASRR policy establishes guidelines and outlines process instructions for DDA staff who work with individuals referred to NFs.

SCOPE

This policy applies to DDA PASRR staff, Nursing Care Consultants (NCCs), and Regional Clinical Teams.

DEFINITIONS

Client, for PASRR purposes, means a person who has been confirmed to have ID/RC by a DDA PASRR Assessor through the PASRR process, regardless of whether the person meets eligibility criteria to receive services from DDA.

DDA PASRR Management System (DPMS) is the tool used by DDA PASRR staff for completing PASRR assessments and storing PASRR data.
**PASRR Level I** means the screening completed by a referring party when an individual is being referred to a Medicaid-certified nursing facility.

**PASRR Level II** means the evaluation completed by a DDA PASRR Assessor with a potential, or current, nursing facility resident referred by the PASRR Level I.

**Person with an intellectual disability or related condition (ID/RC) or PASRR Client** means an individual who has an ID/RC as defined in Code of Federal Regulations (CFR) §483.102.

**POLICY**

PASRR Coordinators and Assessors must consult with medical professionals when appropriate to ensure PASRR determinations and recommendations are appropriate.

**PROCEDURES**

A. PASRR Assessors must consult with medical professionals as needed to ensure PASRR determinations, recommendations, and services are medically appropriate and to strategize about supports needed to assist a nursing facility resident with achieving his or her goals.

B. Medical professionals include, but are not limited to, the resident’s treating physician, hospital or nursing facility staff, therapists, DDA NCCs, and Regional Clinical Teams.

C. Indicators that a medical professional should be consulted include:

1. Conflicting information in the client’s medical records;
2. Unexplained symptoms, complaints, or decline in the client’s health status;
3. Questions or concerns related to specialized service provision;
4. Professional recommendation needed for assistive technology or habilitative therapies;
5. Uncertainty about whether transition to a community setting is medically optimal;
6. Questions about supports needed in community settings;
7. Behavioral changes or concerns;
8. Questions about diagnoses;
9. Questions about medications; or
10. Medical questions arise during PASRR assessments, PASRR Follow-up Meetings, or PASRR Regional Monthly Meetings.

D. To consult with the regional NCC regarding a PASRR client:
   1. E-mail the NCC and copy the Nursing Services Unit Manager and the Headquarters PASRR Team; and
   2. If the regional NCC is unavailable, e-mail the Nursing Services Unit Manager and the DDA Headquarters PASRR Team.

E. To consult with the Regional Clinical Team regarding a PASRR client, e-mail the Clinical Team.

EXCEPTION

Any exception to this policy must have the prior written approval of the Deputy Assistant Secretary.

SUPERSESSION

None.

Approved: /s/ Donald Clintsman
Deputy Assistant Secretary
Developmental Disabilities Administration

Date: June 16, 2017