

Planned Action Notice – PASRR Determination

DATE

You have been referred for nursing facility care. The preadmission screening and resident review (PASRR) process is intended to:

- Identify whether you are an individual with an intellectual disability or related condition;
- Determine whether you need nursing facility services;
- Inform you of other options available to you;
- If you choose nursing facility services, assess your needs and make service recommendations.

If the full PASRR report is not attached, it will be forwarded to you within 30 days.

CLIENT'S NAME

ADDRESS 1 CITY STATE ZIP CODE

ADDRESS 2 CITY STATE ZIP CODE

REPRESENTATIVE'S NAME

ADDRESS 1 CITY STATE ZIP CODE

ADDRESS 2 CITY STATE ZIP CODE

Planned Action

Based on a review of your records and conversations with you and others involved in your care, DDA has made the following determinations, effective as of the date of this notice.

DDA has determined that:

- You do do not have an intellectual disability or related condition, as defined in federal regulations (42 C.F.R. §483.102(3) and 42 C.F.R. §435.1010).
- You do do not meet the requirements for nursing facility level of care, as defined in WAC 388-106-0355.
- If you have an intellectual disability or related condition and you meet the requirements for nursing facility level of care, you do do not currently require specialized services in order to acquire skills or behaviors that will enable you to function with as much self-determination and independence as possible, and/or in order to prevent or slow the loss of your current functional status, while you reside at a nursing facility.
 - If you have not been determined to require specialized services, that determination is based on the following reason(s):
 - You have a serious physical illness which results in a level of impairment so severe that you are not expected to benefit from specialized services.
 - You have a diagnosis of dementia which results in a level of impairment so severe that you are not expected to benefit from specialized services.
 - You are experiencing a delirium that prevents an accurate diagnosis.
 - DDA has not identified any services in addition to services provided by the nursing facility that will assist you to function with as much independence as possible, and/or prevent or slow any loss of your functional ability.
 - You are entering the nursing facility for 30 days or less to provide respite to in-home caregivers.
 - You are entering the nursing facility for seven (7) days or less in an emergency situation requiring protective services.
- Your specialized service(s) is / are terminated for the following reason(s):
 - You or your representative have requested this action.
 - The service goal or maximum therapeutic benefit of the service has been reached.

Specialized services will be arranged or provided by DDA per 42 C.F.R. §483.120.

ASSESSOR'S SIGNATURE	ASSESSOR'S PRINTED NAME
ASSESSOR'S TITLE	ASSESSOR'S PHONE (INCLUDE AREA CODE)
ASSESSOR'S FAX NUMBER (INCLUDE AREA CODE)	ASSESSOR'S EMAIL

Notice to Nursing Facility

The following professional evaluations are recommended to assess the individual's current status and make recommendations. Please forward completed evaluation and patient care plan to the PASRR Assessor.

- Physical therapy
- Occupational therapy
- Speech / communication therapy
- Mental health / behavioral support
- Other (specify):

COMMENTS

Any specialized rehabilitative services identified by the recommended professional assessments will be provided by the nursing facility per 42 C.F.R. §483.45.

This action is being taken per the following authority.

Am I eligible for nursing facility care services?	WAC 388-106-0355
Preadmission screening – Level 1	WAC 388-97-1920
Preadmission screening and resident review (PASRR) determination and appeal rights	WAC 388-97-2000
Advanced categorical determinations, not subject to preadmission screening – Level 2.....	WAC 388-97-1940
Preadmission screening – Level 2	WAC 388-97-1960

Your Appeal Rights

You have ninety (90) days from the receipt of this notice to appeal any of the following decisions:

- That you do not have an intellectual disability or related condition;
- That you do not meet the requirements for nursing facility level of care; or
- That you are not in need of specialized services.

You have the following rights:

- To decline or terminate services at any time.
- To have another person represent you (DSHS does not pay for attorneys, but free or low cost legal assistance may be available in your community. For additional information call 1-888-201-1014);
- To receive copies of all information used by DDA in making its decisions, and to view and copy your ADSA file (except for any documents that are exempt from disclosure under state or federal law or parts of the file that contain confidential information about other clients). Your assessor can assist you to obtain this information;
- To submit documents into evidence;
- To testify at the hearing and to present witnesses to testify on your behalf; and
- To cross examine witnesses testifying for the department.

A form for requesting an administrative hearing is included.

Residential Services

Adult Family Homes

Adult Family Homes are regular neighborhood homes where staff assumes responsibility for the safety and well-being of the adult. A room, meals, laundry, supervision and varying levels of assistance with care are provided. Some provide occasional nursing care. Some offer specialized care for people with mental health issues, developmental disabilities or dementia. The home can have two to six residents and is licensed by the state.

Alternative Living Services

Alternative Living Services are instructional services provided by an individual contractor. The service focuses on community-based individualized training to enable a client to live as independently as possible with minimal residential services.

Community Protection Program

The DDA Community Protection Program provides intensive 24-hour supervision for clients who have been identified as posing a risk to their community due to the crimes they have committed. This program is an opportunity for participants to live successfully in the community and continue to remain out of prison or other justice system settings. Environmental and programmatic safeguards are in place to protect neighbors and community members, to the extent possible, from behaviors that pose a risk to people or property and/or interfere with the rights of others. This structured, specialized environment gives participants the opportunity to make positive choices to resolve or manage the behaviors that require intensive intervention and supervision.

Companion Homes

Companion Homes provide residential services and supports in an adult foster care model to no more than one adult DDA client. The services are offered in a regular family residence approved by DDA to assure client health, safety, and well-being. DDA reimburses the provider for the instruction and support service. Companion homes provide 24-hour available supervision.

Residential Services (continued)

Group Homes

Group Homes are community-based residences serving two or more adult clients and are licensed as either an assisted living facility or an adult family home. Group Homes contract with DDA to provide 24-hour instruction and support. The provider owns or leases the facility. Clients must pay participation for room and board to the service provider.

Supported Living Services

Supported Living services offer instruction and support to persons who live in their own homes in the community. Supports may vary from a few hours per month up to 24 hours per day of one-to-one support. Clients pay for their own rent, food, and other personal expenses. DDA contracts with private agencies to provide Supported Living services.

State Operated Living Alternatives (SOLA)

SOLA programs offer Supported Living services. SOLA programs are operated by DDA with state employees providing instruction and support to clients.

Voluntary Placement Services (VPS)

Voluntary Placement Services offer a variety of supports to eligible children living in a licensed setting outside the family home, when the placement is due solely to the child's disability (RCW 74.13.350). Services may include:

- Case management by a DDA social worker
- Residence in a DSHS Division of Licensed Resources (DLR) foster home, group care facility, or staffed residential home
- Respite care to the licensed provider
- Nursing, therapies and behavior supports not already covered through Foster Care Medical Unit (FCMS) or schools
- Shared Parenting Plan with the provider and the child[s biological / adoptive parent that is designed and implemented to support the family unit while the child lives outside the family home.

Request for Hearing

per Chapter 182-526 for DSHS hearing rules

FOR AGENCY USE ONLY
<input type="checkbox"/> Oral request taken.
NAME
TELEPHONE NUMBER (INCLUDE AREA CODE)

Mail your request to this address:

OR

Fax to this number:

OFFICE OF ADMINISTRATIVE HEARINGS (OAH)
PO BOX 42489
OLYMPIA WA 98504-2489

(360) 586-6563

I am requesting a hearing because I want to challenge the following decision made by the Developmental Disabilities Administration:

PRINT YOUR NAME HERE

TELEPHONE NUMBER (INCLUDE AREA CODE)

ADDRESS OF PERSON REQUESTING HEARING

CITY

STATE

ZIP CODE

I am represented by (if you are going to represent yourself, do not fill in the next two lines):

PRINT YOUR NAME HERE

ORGANIZATION

TELEPHONE NUMBER (INCLUDE AREA CODE)

ADDRESS OF REPRESENTATIVE

CITY

STATE

ZIP CODE

Do you need an interpreter or other assistance or accommodation for the hearing? Yes No

If yes, what language or assistance?