

# Tool- PASARR Policy & Procedure Checklist

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## **Tool: Preadmission Assessment and Annual Resident Review (PASARR)**

### **§ 483.20 Intent**

A facility must coordinate assessments with the pre-admission screening and resident review (PASARR) program under Medicaid in subpart C to the maximum extent practicable to avoid duplicative testing and effort. A facility must coordinate the assessment process with the preadmission screening and annual resident review for those residents meeting the requirements.

Preadmission Screening is for individuals *with a mental disorder* and individuals with *intellectual disability*. The facility must not admit any new residents with: mental disorder, unless the State mental health authority has determined, based on an independent physical and mental evaluation performed by a person or entity other than the State mental health authority, prior to admission; that, because of the physical and mental condition of the individual, the individual requires the level of services provided by a nursing facility; and if the individual requires such level of services, whether the individual requires specialized services; or *Intellectual disability* unless the State *intellectual disability* or developmental disability authority has determined prior to admission that, because of the physical and mental condition of the individual, the individual requires the level of services provided by a nursing facility; and if the individual requires such level of services, whether the individual requires specialized services for intellectual disability.

### **Purpose and Intent of 483.20**

The purpose of the Preadmission Assessment and Annual Resident Review Program (PASARR) policy and procedure is to develop guidelines for admission related to those individuals with mental illness and intellectual disabilities to ensure they receive the care and services needed in the most appropriate setting.

To assure that the individual facility has followed all the required steps for the development and implementation of a comprehensive Preadmission Assessment and Annual Resident Review Program (PASARR) in accordance to the new Requirements of Participation (RoP), the following checklist captures specific action items for successful completion. The far left column represents the actual Requirements of Participation (RoP) language and the right column indicates specific leadership strategies for successful completion and implementation of the revised RoP. When preparing updated policies and procedures, it is recommended to include actual RoP language as applicable. Please note that CMS has not issued its interpretative guidance for the new Requirements of Participation (RoP), therefore additional updates may be necessary once the guidance is released.

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## Suggested Checklist: Preadmission Assessment and Annual Resident Review (PASARR) Policy and Procedure

Regulation	Recommended Actions
<p><b>§ 483.20 (e)Coordination</b> A facility must coordinate assessments with the preadmission screening and resident review (PASARR) program under Medicaid in subpart C of this part to the maximum extent practicable to avoid duplicative testing and effort.</p> <p>Coordination includes—(1) Incorporating the recommendations from the PASARR level II determination and the PASARR evaluation report into a resident’s assessment, care planning, and transitions of care.</p> <p>(2) Referring all level II residents and all residents with newly evident or possible serious mental disorder, intellectual disability, or a related condition for level II resident review upon a significant change in status assessment.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Review and revise admissions policy and procedure and correlating documents</li> <li><input type="checkbox"/> Update language to include the new definitions of mental disorder, intellectual disabilities and related conditions as well as resident representative definition and terminology</li> <li><input type="checkbox"/> Review and revise comprehensive assessment policy and procedure and correlating documents to include PASARR coordination requirements</li> <li><input type="checkbox"/> Review and revise comprehensive care plan policy and procedure and correlating documents to include PASARR coordination requirements as well as Level II screening recommendation requirements</li> <li><input type="checkbox"/> Conduct targeted education for nursing, admissions and social services staff related to their respective PASARR roles and responsibilities</li> </ul>
<p><i>(k) Preadmission screening for individuals with a mental disorder and individuals with intellectual disability.</i></p> <p>(1) A nursing facility must not admit, on or after January 1, 1989, any new resident with—</p> <p>(i) Mental disorder as defined in paragraph (k)(3)(i) of this section, unless the State mental health authority has determined, based on an independent physical and</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Review and revise admissions policy and procedure and correlating documents</li> <li><input type="checkbox"/> Update language to include the new definitions of mental illness, intellectual disabilities, and related conditions, exceptions as well as resident representative definition and terminology.</li> </ul>

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Regulation	Recommended Actions
<p>mental evaluation performed by a person or entity other than the State mental health authority, prior to admission,</p> <p>(A) That, because of the physical and mental condition of the individual, the individual requires the level of services provided by a nursing facility; and (B) If the individual requires such level of services, whether the individual requires specialized services; or</p> <p>(ii) Intellectual disability, as defined in paragraph (k)(3)(ii) of this section, unless the State intellectual disability or developmental disability authority has determined prior to admission—</p> <p>(A) That, because of the physical and mental condition of the individual, the individual requires the level of services provided by a nursing facility; and</p> <p>(B) If the individual requires such level of services, whether the individual requires specialized services for intellectual disability.</p>	<p><input type="checkbox"/> Review and revise facility policies related to specialized services, accessibility and no active treatment waiver process. “Specialized services” are those services the State is required to provide or arrange for that raise the intensity of services to the level needed by the resident. That is, specialized services are an “add-on” to NF services--they are of a higher intensity and frequency than specialized rehabilitation services, which are provided by the NF. For a resident with MI or ID to have his or her specialized needs met, the individual must receive all services necessary to assist the individual in maintaining or achieving as much independence and self-determination as possible</p> <p><input type="checkbox"/> Update employee education and orientation related to new requirements</p>
<p>(2) <i>Exceptions.</i> For purposes of this section—</p> <p>(i) The preadmission screening program under paragraph (k)(1) of this section need not provide for determinations in the case of the readmission to a nursing facility of an individual who, after being admitted to the nursing facility, was transferred for care in a hospital.</p> <p>(ii) The State may choose not to apply the preadmission screening program under paragraph (k)(1) of this section to the admission to a nursing facility of an individual—</p>	<p><input type="checkbox"/> Review and revise admissions policy and procedure and correlating documents</p> <p><input type="checkbox"/> Review and revise pre-admission assessment policy and procedure and correlating documents to include PASARR requirements, Level I and II screens as well as exceptions as defined by CMS</p> <p><input type="checkbox"/> Review and revise the following policy and procedure and correlating documents:</p> <ul style="list-style-type: none"> <li>Behavior Management</li> <li>Psychotropic Medication</li> <li>Comprehensive Assessment/Coordination of Care</li> <li>Individualize Care Plan/Coordination of Care</li> </ul>

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<p>(A) Who is admitted to the facility directly from a hospital after receiving acute inpatient care at the hospital,            (B) Who requires nursing facility services for the condition for which the individual received care in the hospital,            and            (C) Whose attending physician has certified, before admission to the facility that the individual is likely to require less than 30 days of nursing facility services.</p>	<p>Drug Regimen Review            Pharmacy Services            Quality of Life/Activity Therapy            Medically Related Social Services            Physician Services            Notification            Change of Condition</p> <p><input type="checkbox"/> Review and revise the internal process for notification of Level II initiation, findings, and Level II recommendation inclusion in the comprehensive care plan.</p> <p><input type="checkbox"/> Update definitions related to mental disorder, mental illness, intellectual disease, and or related condition as well as health rehabilitation services for MI/ID, and specialized services specific to MI/ID</p>
<p>(3) <i>Definition.</i> For purposes of this section—            (i) An individual is considered to have a mental disorder if the individual has a serious mental disorder as defined in § 483.102(b)(1).            (ii) An individual is considered to have an intellectual disability if the individual has an intellectual disability as defined in § 483.102(b)(3) or is a person with a related condition as described in § 435.1010 of this chapter.            (4) A nursing facility must notify the state mental health authority or state intellectual disability authority, as applicable, promptly after a significant change in the mental or physical condition of a resident who has a mental disorder or intellectual disability for resident review.</p>	<p><input type="checkbox"/> Conduct staff training related to: mental disorder, mental illness, intellectual disease, and or related condition as well as health rehabilitation services for MI/ID and specialized services specific to MI/ID</p> <p><input type="checkbox"/> Conduct specific training for social service and nursing staff specific to roles and responsibilities related to the PASARR process.</p> <p><input type="checkbox"/> Update notification protocols related to individuals with a MI/ID diagnosis and State reporting requirements</p> <p><input type="checkbox"/> Update Medical Director related to policy and procedure revisions and respective roles and responsibilities</p>



Regulation	Recommended Actions
<p>483.70 (i)(5)(iv) Administration (5) The medical record must contain— (iv) The results of any preadmission screening and resident review evaluations and determinations conducted by the State;</p>	<p><input type="checkbox"/> Review and revise medical records policies and procedures to include the specific requirements related to PASARR.</p>

The below areas serves as a cross reference for facility leaders to conduct addition policy and procedure review across departments to incorporate the changes set forth in § 483.20 Preadmission Assessment and Annual Resident Review (PASARR) processes and procedures. This listing is not all encompassing however should serve as a resource for leaders as they update their internal policies, procedures and operational processes.

- CMS Definitions
- Admission Agreement
- Resident Rights
- Resident Rights Postings
- Resident Assessment P&P
- Comprehensive Person Centered Care Planning P&P
- Change of Condition P&P
- Notification P&P
- Discharge Planning P&P
- Specialized Services P&P
- Pre-Admission and Admission Process
- Update appropriate Admission and Discharge Planning documents with MI/ID advocates and contacts
- Activity Therapy Policies
- Social Services Policies
- Vendor Contracts relating to specialized services
- QIDP and QMHP roles and responsibilities if applicable
- Medical Record retention processes
- Psychotropic Medications
- Behavior Management Committee and Plan
- Consultant Pharmacy Services
- Drug Regime Review
- QAPI Plan and Process (Phase II and III)
- Facility Wide Resource Assessment (Phase II)

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