



COMMISSIONER
Jon Weizenbaum

July 7, 2015

To: Nursing Facilities (NFs)

Subject: Provider Letter No. 15-16 — Preadmission Screening and Resident Review (PASRR) Facility Requirements (Replaces PL 14-21)

A new rule about PASRRs in nursing facilities took effect July 7, 2015. **DADS will begin surveying for these new requirements on September 1, 2015.** Per this new rule, nursing facilities are responsible for coordinating assessments and providing certain specialized services, as detailed below.

Assessment Coordination

Nursing facilities must do the following:

- Coordinate with referring entities to ensure that any individual seeking admission to a Medicaid-certified NF receives a PASRR Level I screening for an intellectual disability (ID), developmental disability (DD) or mental illness (MI) before or upon admission ([read questions regarding the different admission types](#)).
- If the PASRR Level I screening indicates the individual may have an ID, DD or MI, coordinate with the local intellectual and developmental disabilities authority (LIDDA) and/or local mental health authority (LMHA) to ensure the individual receives a PASRR Level II evaluation.
- If the Level II evaluation confirms ID, DD or MI, coordinate with the LIDDA and/or LMHA to ensure the individual is properly assessed for any specialized services recommended in the Level II evaluation.
- If the PASRR Level II evaluation recommends specialized services, coordinate with the LIDDA to hold an Interdisciplinary Team meeting within 14 days. Per the new rule, the NF is responsible for assessing the individual's or resident's needs for physical, occupational and speech therapy and for durable medical equipment.

Provision of Specialized Services

For individuals with a PASRR Level II evaluation that confirms ID, DD or MI and has a LIDDA recommendation for specialized services, NFs must coordinate with the LIDDA to ensure the NF comprehensive care plan documents both the recommended specialized services and the role the NF will play in the delivery of the services. The NF must also ensure it fulfills its responsibilities as spelled out in the comprehensive care plan. If the Level II evaluation recommends durable medical equipment, physical therapy, occupational therapy and/or speech therapy, the NF is responsible for providing these specialized services if Medicaid or other funding is available.

If the Level II evaluation recommends specialized services, the NF must:

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- certify in the LTC Online Portal (within seven calendar days after the LIDDA or LMHA has entered a PE or resident review into the LTC Online Portal for an individual or resident who has MI, ID, or DD) it can provide, arrange for or support the specialized services;
- document in the comprehensive care plan the roles and responsibilities of the NF in carrying out the specialized services;
- train NF staff on their roles and responsibilities in ensuring the specialized services are provided; and
- document in the individual's clinical record that the specialized services are being provided per the requirements set out in the NF comprehensive care plan.

If the LIDDA or another outside entity is responsible for the specialized service, the NF must coordinate with that entity to ensure (1) the NF's comprehensive care plan includes any supports the NF must provide for successful provision of the specialized service, and (2) that NF staff receive training on their roles and responsibilities in providing those supports. For instance, if the LIDDA has arranged for an individual to participate in a specialized services program at a specified date and time, the comprehensive care plan must reflect the specific date and time of the external specialized services. The NF must not schedule facility-provided services that conflict with the LIDDA-arranged services.

New Rule

The new rule is located in the Texas Administrative Code (TAC), Title 40, Part 1, Chapter 19, Subchapter BB, [Nursing Facility Responsibilities for Preadmission Screening and Resident Review](#). It complies with Centers for Medicare & Medicaid Services requirements in the Code of Federal Regulations (CFR), Title 42, Chapter IV, Subchapter G, Part 483 [F285], Subpart C, Preadmission Screening and Annual Review of Mentally Ill and Mentally Retarded Individuals. Texas Health and Safety Code, Title 4, Subtitle B, Chapter 242, Convalescent and Nursing Homes and Related Institutions, authorizes the Texas Department of Aging and Disability Services (DADS) to license and regulate nursing facilities.

Survey Process

To ensure compliance with 42 CFR §483.20(e) [F285], DADS surveyors will look for the following as part of the standard survey process and during any complaint investigation that may relate to the provision of PASRR-related services:

1. All NF residents must have received a PASRR Level I screening.
2. If a NF serves a resident with a positive PASRR Level I screening (i.e., the resident is suspected of having an ID, DD or MI), the facility must have obtained a PASRR Level II evaluation from the LIDDA or LMHA or have documented attempts to follow up with the LIDDA or LMHA to obtain the PASRR Level II evaluation. **Note: If a individual seeking admission to a NF has a PASRR Level I screening that finds a suspected ID, DD or MI and the individual does not qualify for expedited admission or exempted hospital discharge, as described in 40 TAC Chapter §[19.2703 Definitions](#), the NF cannot admit the individual until the LIDDA or LMHA has completed a PASRR Level II**

evaluation.

3. If a NF admits a resident with a PASRR Level II evaluation that recommends one or more specialized services, the NF must certify in the LTC Online Portal (within seven calendar days after the LIDDA or LMHA has entered a PE or resident review into the LTC Online Portal for an individual or resident who has MI, ID, or DD) it can provide, arrange for or support the specialized services recommended in the Level II evaluation.
4. If a resident's PASRR Level II evaluation recommends one or more specialized services that have been deemed necessary through proper clinical assessment, the resident's comprehensive care plan must note all NF responsibilities related to the provision of each specialized service.
5. A NF must deliver services per each resident's care plan.

For more information about PASRR, please [visit the PASRR website](#).

If you have specific questions about regulatory policy, please contact a Regulatory Services Policy, Rules and Curriculum Development policy specialist at (512) 438-3161.

Sincerely,

[signature on file]

Mary T. Henderson
Assistant Commissioner
Regulatory Services

MTH:cg