

<b>CMS Guidance Document</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Survey and Certification Policy Letter</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
Executive Guidance Number 0053	<b>Date: September 6, 2007</b>
<b>Planned Web Site Address</b> <a href="http://www.cms.hhs.gov/SurveyCertificationGenInfo/PMSR/list.asp#TopOfPage">http://www.cms.hhs.gov/SurveyCertificationGenInfo/PMSR/list.asp#TopOfPage</a>	<b>Release planned:</b> <b>September 20, 2007</b>

**PROGRAM AREA: Survey and Certification**

**SUBJECT:** Pre-Admission Screening and Resident Review (PASRR) and the Nursing Home Survey Process

**APPLIES TO:** State Survey Agencies and Regional Survey and Certification Offices; all Medicare- and Medicaid-certified nursing homes.

**I. SUMMARY OF CHANGES:**

- In response to the Office of Inspector General’s recommendation found in report OEI-07-05-00230, “Pre-admission Screening and Resident Review for Younger Nursing Facility Residents with Mental Retardation,” the Centers for Medicare & Medicaid Services (CMS) is reinforcing the current nursing facility survey process for selecting sample residents with mental illness and mental retardation, to ensure that surveyors review required PASRR documentation.
- PASRR requirements are found in the State Operations Manual (SOM), Appendix P Survey Protocol for Long-Term Care Facilities and Appendix PP Interpretive Guidance for Long-Term Care Facilities, to help determine a facility’s compliance with Federal regulations.
- A rebroadcast of the PASRR satellite, “Mental Illness in Nursing Homes” will air on September 28, 2007, 1–3:30 PM EST.

**II. CHANGES IN POLICY INSTRUCTIONS:** N/A

STATUS: R=REVISED, N=NEW, D=DELETED.

Status	Chapter / Section / Subsection / Title
N/A	Reiteration of Current Policy

**III. CLEARANCES:**

Clearance & Point of Contact (POC)	Name/Telephone/Component
Senior Official Clearance	Dennis Smith (410) 786-3870/Center for Medicaid and State Operations (CMSO)
Agency POC	Tracey Mummert (410) 786-3398/CMSO/Survey and Certification Group <a href="mailto:tracey.mummert@cms.hhs.gov">tracey.mummert@cms.hhs.gov</a>

**IV. TYPE (Check appropriate boxes for type of guidance)**

	<b>Audit Guide</b>
	<b>Change Request</b>
	<b>HPMS</b>
	<b>Joint Signature Memorandum</b>
	<b>Manual Transmittal</b>
	<b>State Medicaid Director Letters</b>
<b>X</b>	<b>Other – Survey and Certification Policy Letter</b>

**V. STATUTORY OR REGULATORY AUTHORITY:** 42 CFR 483.20(e), Resident Assessment, Coordination; 42 CFR 483.45, Specialized Rehabilitative Services.

Center for Medicaid and State Operations/Survey and Certification Group

**Ref: S&C-07-XX**

**DATE:**

**TO:** State Survey Agency Directors

**FROM:** Director  
Survey and Certification Group

**SUBJECT:** Pre-Admission Screening and Resident Review (PASRR) and the Nursing Home Survey Process

**Memorandum Summary**

- In response to the Office of Inspector General's (OIG) recommendation found in report OEI-07-05-00230, "Pre-admission Screening and Resident Review for Younger Nursing Facility Residents with Mental Retardation," the Centers for Medicare & Medicaid Services (CMS) is reinforcing the current nursing facility survey process for selecting sample residents with mental illness and mental retardation, to ensure that surveyors review required PASRR documentation.
- PASRR requirements are found in the State Operations Manual (SOM), Appendix P Survey Protocol for Long-Term Care Facilities and Appendix PP Interpretive Guidance for Long-Term Care Facilities, to help determine a facility's compliance with Federal regulations.
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The PASRR is a review required under the State Medicaid program that identifies the specialized services for an individual with mental illness and mental retardation (MI/MR) residing in a nursing facility. CMS' current survey process pertinent to PASRR can be found in Appendices P and PP of the State Operations Manual (SOM). Surveyors are required to follow the survey protocols for selecting resident samples off-site and on-site as outlined in Appendix P, Survey Protocol for Long-Term Care Facilities.

In Appendix P, Tasks 1- 7 are resident-centered, outcome-oriented inspections that rely on a case mix stratified sample of residents to gather information about the facility's compliance with participation requirements. The following are examples of tasks that refer to MI/MR:

- One of the tasks states that there are "Special Factors to Consider in Sample Selection" which includes "Residents under the age of 55; and residents with mental illness and mental retardation."

- Another task informs the surveyor that some States have formal mechanisms to share PASRR reports with the survey agency. The shared information includes the results of PASRR screens for residents with mental illness or mental retardation. If this information is available, evaluate if there are potential concerns and note names of residents for possible inclusion in the sample.
- Throughout the survey process there is reference to resources for determining whether residents with a diagnosis of MI/MR are residing in the nursing home for inclusion in the selected sample.

The specific regulatory requirements and guidance to determine a facility's compliance with PASRR are found in Appendix PP, Interpretive Guidance for Long-Term Care Facilities at:

- F285 - 42 CFR 483.20(e) – “Coordination. A facility must coordinate assessments with the pre-admission screening and resident review program under Medicaid in part 483, subpart C to the maximum extent practicable to avoid duplicate testing and effort.”
- The Interpretive Guidance for F285 states “With respect to the responsibilities under the PASRR program, the State is responsible for conducting the screens, preparing the PASRR report, and providing or arranging the specialized services that are needed as a result of conducting the screens. The State is required to provide a copy of the PASRR report to the facility. This report must list the specialized services that the individual requires and that are the responsibility of the State to provide. All other needed services are the responsibility of the facility to provide.”
- F406 - 42 CFR 483.45 – “Specialized Rehabilitative Services – If specialized rehabilitative services such as, but not limited to physical therapy, speech-language pathology, occupational therapy, and mental health rehabilitative services for mental illness and mental retardation, are required in the resident's comprehensive plan of care, the facility must 1) provide the required services; or 2) obtain the required services from an outside resource (in accordance with 483.75(h) of this part) from a provider of specialized rehabilitative services.”
- The Guidance to Surveyors section “Procedures” found at F406 states, “For sampled residents, whose comprehensive assessment indicates physical, psychosocial, and/or communications rehabilitation potential, (See MDS 2.0, Sections G, C F, E) observe for unmet needs for rehabilitative services. Determine the extent of follow-through with comprehensive care plan ...”

**Summary:** Surveyors are to review the record of selected sample residents with MI/MR to ensure a nursing facility's compliance with PASRR documentation of pre-admission screens with identified specialized services and that care and services are provided as appropriate for their condition.

For questions concerning this memorandum, please contact Rosemary Dunn by e-mail at [Rosemary.Dunn@cms.hhs.gov](mailto:Rosemary.Dunn@cms.hhs.gov) or call 410-786-1372.

**Effective Date:** This guidance is currently in effect and should be shared with all survey and certification staff, their managers, the state training coordinators and all long-term care providers within 30 days.

**Training:** A re-run of the satellite “Mental Illness in Nursing Homes,” an excellent resource regarding PASRR survey protocol and regulations, is scheduled for September 28, 2007 at 1-3:30 pm EST. This satellite is mandatory for all surveyors.

/s/

Thomas E. Hamilton

cc: Survey and Certification Regional Office Management