



# **Preadmission Screening Resident Review PASRR Updates for Nursing Facilities and Hospitals**

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# Learning Objectives

- Understand the history and regulatory requirements of PASRR
- Recognize the purpose and importance of PASRR
- Recognize Roles and Responsibilities regarding PASRR
- Learn the component parts of the PASRR Level I process.
- Review Level I PASRR completion.
- Understand Level II PASRR and referral process.

# PASRR Acronym Breakdown

- **PAS = Preadmission Screening**
- **R= Resident**
- **R= Review**

# PASRR History and Regulations

- PASRR = Preadmission Screening Resident Review
- Part of the OBRA Act of 1987 which introduced a comprehensive set of regulations to elevate the quality of care and life for residents in long-term care facilities, which receive Medicare or Medicaid funding.
- The act included pre-admission screening and annual resident reviews to prevent the inappropriate placement of mentally ill individuals into nursing homes.
- Governs the State's responsibility for Preadmission Screening/Resident Review(PASRR) of individuals with Mental illness, Intellectual Disability or Related Condition.
- Screening tool used to identify individuals who may have a serious Mental Illness or Intellectual Disability.

# PASRR History and Regulations (cont.)

- Federal regulations (42 CFR §483.100 – 138) require that all individuals applying for or residing in a Medicaid-certified nursing facility be screened to determine whether they:
  1. Have serious mental illness or an intellectual disability or related condition; and if so,
  2. Require the level of services provided by a nursing facility; and if so
  3. Require specialized services beyond what the nursing facility may provide.
- PASRR Level I documents the first level of screening. If serious mental illness or intellectual disability or a related disability is identified or credibly suspected, a Level II evaluation is required to confirm that identification, determine whether the individual requires nursing facility level of care, and determine whether specialized services are required.
- Ensures that individuals who are identified as having a serious mental illness or Intellectual Disability or Related Condition are placed appropriately and are able to receive specialized services recommended or needed as deemed by the state authority.

# 4 Purposes of PASRR

- To prevent the inappropriate placement of individuals with a serious mental illness (SMI) or intellectual/related disability (ID/RD) in nursing facilities.
- To ensure that individuals are evaluated for evidence of possible serious mental illness (MI), intellectual disability (ID), or related condition (RC).
- To determine that the individual requires the level of services that can be provided by a nursing facility (NF).
- To determine whether the individual requires specialized services for their MI, ID, or RC, wherever they are placed.

# Two Levels of PASRR

**Level I PASRR:** Identifies all individuals who are suspected of having Mental Illness or Intellectual Disability or a related disability (example: Downs Syndrome) prior to admission to the nursing facility. The Level I is a SCREENING TOOL used to determine if further action is needed.

## **Level II PASRR:**

This further assesses those who are identified or suspected of having a serious mental illness, Intellectual Disability or Related Disability, may be a danger to themselves or others as found in the Level I screening.

# PASRR

# Who Needs One

# Who needs a Level I PASRR?

- All individuals who apply to or reside in a Title XIX (Facility that accepts Medicaid) certified nursing facility , regardless of the payment source for the nursing facility services AND regardless of the individual's known diagnosis. Anyone who is being admitted to a nursing facility that accepts Medicaid MUST HAVE A PASRR.
- All existing nursing facility residents who have a significant change.

# Who needs a Level I PASRR (cont.)

- All new admissions to a Medicaid certified nursing facility, regardless of pay source.
- Prior to readmission from a hospital for inpatient treatment of a psychiatric condition, if the applicant has exceeded the 10-day bed-hold.
- All out of state transfers.
- Respite care admissions to a nursing facility for up to fourteen days or less (Respite care admissions to a hospital are not subject to Level I screening).

# When is a PASRR Not Required

- Interfacility transfers (from one Medicaid nursing facility to another Medicaid nursing facility) are NOT considered new admissions and are not subject to Level I screening. The transferring nursing facility is responsible for sending all PASRR information to the receiving facility.
- Admissions to facilities that are not certified for Medicaid participation.
- Intra-facility conversions from one pay source to another.

# When is a PASRR Not Required (cont.)

- Readmission to a Medicaid certified nursing facility from a hospital, including hospitalization for an inpatient psychiatric care if within the 10-day bed hold.
- Patients admitted to a nursing facility from a hospital for acute inpatient treatment of the same condition for which they were hospitalized, where the stay is anticipated to be less than 30 day as certified by a physician.
- Swing bed or Administrative Day admissions.

# PASRR Roles and Responsibilities for CLTC

# Role of CLTC in the PASRR Process

- The CLTC area administrator, lead team nurse consultant or nurse consultant shall be available to the nursing facility or hospital contact person as needed to discuss compliance, problems, concerns and training/retraining needs.
- CLTC is responsible for reviewing and monitoring the accuracy and completeness of all Level I PASRR screenings submitted by nursing facilities and hospitals.
- If appropriate, CLTC will submit Level II PASRR to the appropriate authority for a PASRR determination.
- Authority agencies are OIDD (Office of Intellectual and Developmental Disabilities) or OMH( Office of Mental Health).

# Administrative and Support Responsibilities

- CLTC shall designate a contact person(s) in each area office to serve as the liaison with the nursing facility or hospital.
- Each nursing facility or hospital should have a CLTC nurse assigned.
- Provide all necessary training and technical assistance to nursing facility staff concerning PASRR guidelines, policies and procedures.
- CLTC will maintain a log of trainees for reference.

# **PASRR Responsibilities for Hospitals and Nursing Facilities**

# PASRR Responsibilities for Hospitals

- Begin the PASRR process when it is imminent that the patient will be placed in a skilled nursing facility under **Medicaid** payor source.
- Complete an electronic referral to SCDHHS Centralized Intake for Nursing Home Placement.
- Communicate frequently with your CLTC nurse representative.
- Understand Level I and Level II processes.

# PASRR Responsibilities for Hospitals (cont.)

- Designate a contact person to work with the Community Long Term Care (CLTC) Area Office. Any changes in the designated contact should be reported to the CLTC Area Administrator or designee.
- All staff who are designated to complete Level I PASRR's **must** attend training sessions on the PASRR process, conducted by the South Carolina Department of Health and Human Services CLTC **prior** to the completion of the Level I PASRR.
- Copies of all Level I screenings completed by the hospital should be batched and forwarded to the CLTC Area Office weekly for review.

# PASRR Responsibilities for Hospitals (cont.)

- The hospital shall agree to abide by the policies and procedures as outlined in the hospital services provider manual located on the SC DHHS website. Should the Centers for Medicare and Medicaid Services issue any regulations interpretations or amendments to PASRR guidelines which necessitate changes in policies and procedures the hospital will refer to the Hospital Services Provider Manual located on the SCDHHS website.

# PASRR Responsibilities for the Nursing Facility

- Designate a contact person to work with the Community Long Term Care (CLTC) Area Office. If the Nursing Facility designated contact person changes, the Nursing Facility shall notify the Community Long Term Care Area Office Area Administrator or designee.
- Abide by the Policies and Procedures as outlined in the Nursing Facilities Provider Manual located on the SCDHHS website.
- Attend training sessions on the PASRR process, conducted by South Carolina Department of Health and Human Services prior to the completion of the Level I PASRR.
- Order all necessary forms required for participation from the appropriate vendor at no charge or duplicating at its own expense.

# PASRR Responsibilities for the Nursing Facility

- Contact your CLTC representative with questions concerning residents who you suspect may require a Level II PASRR.
- If there is a significant change the nursing facility should **first**, complete a Level I PASRR to reflect the change.
- **Next** complete an **electronic referral** to **SCDHHS Centralized Intake** (<https://phoenix.scdhhs.gov/eref/>) for “Nursing Home Placement” and enter “Level II PASRR Only” in the comment section **and** upload Level I PASRR screening

# PASRR Responsibilities for the Nursing Facility

- Understand sanctions which can be imposed by CMS for noncompliance to PASRR requirements and assures that all non-Medicaid patients who are seeking admission to a Title XIX certified nursing facility will be screened in accordance with the policies and procedures as outlined in the Nursing Facilities Provider Manual located on the SCDHHS website.
- Retain the original PASRR Level 1 form in the facility upon the patient's admission. Copies of all Level I screenings completed by the nursing facility should be batched and forwarded to the CLTC Area Office weekly for review.

# PASRR Reminders for Nursing Facilities

- Retain the original PASRR Level I form in the facility upon the patient's admission.
- For a significant change, the nursing facility should **first** complete a Level I PASRR to indicate the change.
- Copies of all PASRR Level I screenings completed by the nursing facility should be batched and forwarded to the CLTC area office weekly for review.

# PASRR Reminders for Nursing Facilities

- Thoroughly review Level I PASRR prior to accepting a new resident.
- Ensure that the Level I PASRR and certification letter are reviewed and in hand for those entering the facility under Medicaid pay source.

# Significant Change and Nursing Facility Residents

- Per 1919(e)(7)(B)(iii) of the Social Security Act, resident reviews are required for nursing facility residents experiencing a “significant change in condition.”
  - This provision replaced the requirement that PASRR resident reviews must be performed annually.
- A significant change in condition is outlined as:
  - A resident who exhibits behavioral, psychiatric or mood-related symptoms suggesting the presence of a diagnosis of mental illness as defined in the Code of Federal Regulations (CFR) at 42 CFR 483.102(b)(1) (where dementia is not the primary diagnosis).
  - A resident whose intellectual disability, as defined under 42 CFR 483.102(b)(3) or whose related condition as defined under 42 CFR 435.1010 “Persons with related conditions,” was not previously identified and evaluated through PASRR.

# Significant Change and Nursing Facility Residents *(cont.)*

- Significant change is a major decline or improvement in a resident's status that:
  - Will not normally resolve itself without intervention by staff or by implementing standard disease-related clinical interventions, the decline is not considered "self-limiting"
  - Impacts more than one area of the resident's health status;
  - Requires interdisciplinary review and/or revision of the care plan.

# Level I PASRR Form

# PASRR Form Enhancements and Updates

- The PASRR form has been revised:
- Includes more detailed sections and questions regarding Mental Illness and Intellectual Disability.
- Significant Change and Dementia section added.
- More probing questions regarding mental health treatments and history.
- More detailed recommendations and explanations.
- Added detailed questions regarding the screener's information.

# Component Parts of the Level I PASRR

- Identifies mental illness diagnosis and indicators such as:
  - \*Behaviors
  - \*Hospitalizations
  - \*Mental Health treatments (past and current)
- Intellectual Disability or Related Disability
- Dementia diagnosis
- Recommendation
- Advanced Categorical Determination

# Level II PASRR

- 483.102(a): Level II PASRR evaluation must be completed for all such applicants who: (community or hospital setting)
  - Meet nursing facility level of care requirements; and,
  - Have been identified as having suspected mental illness and/or intellectual disability by the Level I preadmission screening process.
- Level II PASRR evaluations must also be *referred* and/or conducted on nursing facility residents with mental illness and/or intellectual disability:
  - Any time there is a significant change in condition (Section 1919(e)(7)(B)(iii) of the Social Security Act);
  - A significant change may require referral for a PASRR evaluation if a mental illness, intellectual disability or related condition is present or is suspected to be present; or,
  - When the timeline for exempted hospital discharge or categorical determinations conclude.

# Level II PASRR

The Level I determines the need for the Level II PASRR

# PASRR Form Review

# Section One: Mental Illness Updates

- Additional diagnosis were added to include post-traumatic stress disorder, substance abuse, delusional disorder, dissociative disorder, obsessive compulsive disorder
- Includes detailed descriptions of behaviors
- Includes questions about past, current or ongoing mental health treatments.
- Significant change

# Section Two: Intellectual Disability or Related Disability Updates

- Anyone with a diagnosis of intellectual disability or suspected intellectual disability must be referred for Level II PASRR evaluation.

# Section Two: Intellectual Disability or Related Disability Updates (cont.)

- Added examples of related disabilities
  - Autism
  - Cerebral palsy
  - Down syndrome
  - Epilepsy
  - Fetal alcohol syndrome
  - Muscular dystrophy
  - Prader-Willi syndrome
  - Spina bifida
  - Traumatic brain injury
  - Other (specify)

## Section Two: Intellectual Disability or Related Disability Updates *(cont.)*

- Related disability was updated with functional criteria. **If the condition results in substantial functional limitations in three or more major life activities the individual must be referred for Level II PASRR.**
  - Likely to continue indefinitely
  - Capacity for independent living
  - Learning
  - Mobility
  - Self-care
  - Self-direction
  - Understanding and use of language
- \* Contact your CLTC representative for more information.

# Related Disability Example

- For example: If someone with a diagnosis of Cerebral Palsy is unable to live alone, cannot understand and is unable to complete ADL's then this person should be referred for Level II.

# Section Three: Other Indications for PASRR Decision Making (Updates)

- Primary diagnosis of dementia
- Secondary diagnosis of dementia
- Validating documentation to support the diagnosis

# Section IV: Recommendations

- The recommendations remain the same and explanation of each recommendation was added.
- Proceed to Level II PASRR evaluation based on mental illness indicators.
- Proceed to Level II PASRR evaluation based on intellectual disability indicators.
- No further evaluation recommended, but indicators present.
- No further evaluation recommended.

\*Making the correct recommendation is extremely important! Contact your CLTC representative if you are unsure.

# Section Five: Advanced Categorical Determination

- Categorical decisions and exemptions apply to people with Level II conditions to expedite decisions regarding a person's needs when a full Level II PASRR assessment is not necessary or can be delayed.
- **This is reserved for CLTC staff only.**

# Screener's Information

- Updated to include:
  - Screeners credentials
  - Date
  - Phone
  - Facility or place of employment
  - Fax number
  - Email address

# Level I PASRR Important Facts

- The Level I PASRR is the indicator for the Level II PASRR.
- Documentation of attempted suicide within the last two years and intellectual disability and related disability that has 3 or more functional limitations are **automatic** referrals for the Level II PASRR.
- A diagnosis of Suicidal Ideation without any suicide attempt will require a Level II PASRR.
- CLTC completes all Level II PASRR screenings and sends the information to the proper state authority for determination.

# Level II PASRR

- 483.102(a): Level II PASRR evaluation must be completed for all such applicants who: (community or hospital setting)
  - Meet nursing facility level of care requirements; and,
  - Have been identified as having suspected mental illness and/or intellectual disability by the Level I preadmission screening process.
- Level II PASRR evaluations must also be *referred* and/or conducted on nursing facility residents with mental illness and/or intellectual disability:
  - Any time there is a significant change in condition (Section 1919(e)(7)(B)(iii) of the Social Security Act);
  - A significant change may require referral for a PASRR evaluation if a mental illness, intellectual disability or related condition is present or is suspected to be present; or,
  - When the timeline for exempted hospital discharge or categorical determinations conclude.

# CLTC Responsibilities for Level II PASRR

- If the need for Level II is suspected, and once the electronic referral is received in the area office:
  - Nurse reviews the Level I PASRR and determines the appropriateness for the Level II PASRR
  - Makes a face-to-face visit to gather necessary documents
  - Sends the information to the state authority (OIDD or OMH) for determination.
- Once the state authority returns the determination, CLTC will immediately share the decision with the hospital or nursing facility.

# Frequently Asked Questions

# Is a Level II PASRR Mandatory With a Mental Health Diagnosis as the Primary Reason?

- \* *Mental health diagnosis examples include bipolar disorder, schizophrenia and/or schizoaffective disorder.*
- As defined in **42 CFR 483.102**, it is clear the Level I screener would be looking for any indication of the individual meeting the criteria for a serious mental illness as defined at 42 CFR 483.102(b)(1) or an intellectual disability as defined at **42 CFR 483.102(b)(3)**.
- Any approved Level I screener must understand all the qualifying conditions that warrant a positive finding and advancement to the Level II evaluation.
- In addition, the reviewer would be looking for behaviors and possibly hospitalizations related to the diagnosis.
- If someone has a mental health diagnosis but has no behaviors or documented hospitalizations related to the psychiatric diagnosis and is well controlled on medication, there is no indication that the person should advance to the Level II PASRR process.

# Is a PASRR Level II Mandatory For a Significant Change?

- The nursing facility should complete the Level I PASRR and consult with CLTC if it is suspected that a PASRR condition exists.
- The nursing facility is required to notify the mental health or intellectual disability authority when there is a significant change in condition that has, or may have, an impact on the PASRR condition.
- The nursing facility must also notify the appropriate authority if a resident who had not been initially identified as having a PASRR condition, is now suspected of having a PASRR condition (**Per 42 CFR 483.20(e)(2)**).

# Is a Level II PASRR Mandatory For Those Released from the Department of Corrections?

- Every applicant, no matter where they come from, to a Medicaid-certified nursing facility is subject to PASRR.
- At a minimum there must be a Level I screening and if indicated a Level II evaluation.

# Does a Diagnosis of Substance Abuse Require a Level II PASRR?

- A diagnosis of substance abuse *alone* is not a qualifying diagnosis for a PASRR condition.
- The CFR requires that the person have a
  - Serious mental illness, Per **42 CFR 483.102(b)(1)(i)**,
  - Intellectual disability, per **42 CFR 483.102(b)(3)** or
  - A related disability as defined at **42 CFR 435.1010**.
- A substance abuse diagnosis, accompanied by a suspected or known mental health diagnosis, should advance to the Level II evaluation to determine if the mental health condition meets the criteria at **42 CFR 483.102(b)(1)(i)(A)**.

# Questions



