PASRR Level II Evaluation and Determination

Linda Lewis-Day Director, Office of Benefits & Special Projects Division of Developmental Disabilities

Level II PASRR Evaluation

- □ The Level II PASRR evaluation determines if the mental retardation or other related condition needs of the individual can be met in a Nursing Facility or if the individual requires Specialized Services.
- DDD reviews the Level I PASRR Screen and then performs a Level II evaluation of the individual's needs
- DDD uses the social history, medical reports/patient care and plan of treatment, current physician's orders, current medications, and ongoing therapy reports to make the determination

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Level II PASRR Determination

- ☐ If the individual needs specialized services, the person cannot be admitted to the nursing facility
- ☐ The Specialized Services Recommendation will list the service areas needed, if the individual needs specialized services
- ☐ If the individual <u>does not need specialized services</u> and <u>needs the level of Nursing Facility services</u>, the individual may be admitted to the Nursing Facility

Fall 2010

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Level II Evaluation and Determination

Level II Evaluation is performed by nurses located in DDDøs four regional offices:

Northern Region ó Morris, Sussex & Warren - 973-927-2600; fax 973-927-2689

Northern Region ó Bergen, Hudson & Passaic ó 973-977-4004; fax 973-977-2120

Upper Central Region ó Somerset, Union & Essex ó 908-226-7838; fax 908-412-7900

Fall 2010

NJDHS Division of Developmental Disabilities

Level II Evaluation and Determination

Lower Central ó Ocean & Monmouth ó
732-863-4546; fax 732-863-4406
Lower Central ó Hunterdon, Mercer & Middlesex ó
609-588-7108; fax 609-584-1402
Southern ó Camden & Burlington ó
856-770-5499; fax 856-770-5935
Southern ó Atlantic & Cape May ó
609-476-5200; fax 609-909-0656

Southern ó Cumberland, Salem & Gloucester ó

856-696-6747; fax 856-690-5277

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Categorical Determinations

- ☐ States are permitted to exempt certain individuals from a comprehensive Level II evaluation if they fall into specific categories
- ☐ The categories are based on certain diagnoses, severity of illness, or the need for a particular services, such as a ventilator
- ☐ Individuals who fall within these categories would normally require admission to a NF

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Categorical Determinations

- □ **Dementia** ó individuals with severe mental illness who have a documented primary diagnosis of dementia, including Alzheimergs or related disorder based on most current DSM criteria and who also have a diagnosis of mental retardation or related condition
- □ **Terminal Illness** the individual is terminally ill and has a life expectancy of six (6) months or less AND the individual is not a danger to self or to others
- □ Severe Physical Illness the individual has a medical condition of such severity that is would limit the individual

 ability to participate in specialized services

Fall 201

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Categorical Determinations

- □ Respite Care an adult may be admitted to a NF from home or an Adult Family Care home (non-institutional setting) for short-term respite care not to exceed thirty (30) days per state or federal annual funding cycle.
- □ Protective Services ó an adult who is referred to Adult
 Protective Services may be admitted to a nursing facility from
 the community for a period not to exceed seven (7) days
 while longer term placement is being arranged.

Fall 2010

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Resident Review

- □ Nursing Facility residents must have a Resident Review when there is a new diagnosis of mental illness or mental retardation or related condition or a significant change in the resident sphysical or mental condition
- □ The Significant Change in Status Assessment in the MDS should trigger a resident review.
- ☐ The NF should notify DDD whení
 - An individual is newly diagnosed with mental retardation or related condition; or
 - An individual experiences a significant change (improvement or decline) in status

Fall 2010

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Resident Review	
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□ The NF should fax the following information to the appropriate DDD office: ■ Resident Review Referral Form	
Resident Review Referral Form Current MDS	