



Date: June 23, 2017

To: Nursing Facility Providers (NFs)

Subject: Information Letter No. 17-12 — Requests for Preadmission Screening and Resident Review (PASRR) Specialized Services

The purpose of this letter is to notify nursing facility providers of the new process for requesting Preadmission Screening and Resident Review (PASRR) nursing facility specialized services. **This directly affects how nursing facility providers request and receive authorization for specialized services for residents with an intellectual disability (ID), developmental disability (DD), or mental illness (MI).**

After an individual or resident who is determined to have MI, ID, or DD from a PASRR Evaluation or resident review has been admitted to a nursing facility, the facility must submit a complete and accurate request for nursing facility specialized services in the Texas Medicaid and Healthcare Partnership (TMHP) Long Term Care (LTC) Online Portal within 20 business days after the date of the Interdisciplinary Team (IDT) meeting.

Effective June 23, 2017, the Health and Human Services Commission (HHSC) Intellectual and Developmental Disabilities (IDD) PASRR Unit will no longer be accepting the following paper forms:

- **1017** Specialized Services Durable Medical Equipment (DME) Authorization Request;
- **1018** Specialized Services Customized Manual Wheelchair (CMWC) Authorization Request; and
- **2465** Specialized Services Request.

Providers can continue to submit paper forms through June 22, 2017. After this date, providers will need to log onto the TMHP LTC Online Portal and complete a Nursing Facility Specialized Services (NFSS) form to request the following PASRR nursing facility specialized services:

- habilitative physical therapy (PT);
- habilitative occupational therapy (OT);
- habilitative speech therapy (ST);
- a customized manual wheelchair (CMWC); and
- durable medical equipment (DME), which consists of:
  - a gait trainer;
  - a standing board;
  - a special needs car seat or travel restraint;
  - a specialized or treated pressure-reducing support surface mattress;

- a positioning wedge;
- a prosthetic device; and
- an orthotic device.

### **Assessments**

An assessment by a therapist licensed in Texas must still be submitted with a request for PASRR nursing facility specialized services. Assessments will only be accepted if they are performed by a fully credentialed therapist, not a therapy assistant. A therapist may complete the assessment using the assessment tool normally used by the therapist or the nursing facility. Another option is for the therapist to download and print an NFSS form and use the appropriate assessment tab. [A copy of the NFSS form in PDF format is available for downloading online.](#)

If the therapist completes the assessment using the assessment tool normally used by the therapist or the nursing facility, the therapist must enter the information from the assessment into the NFSS form and successfully submit it. The original assessment is maintained in the resident's medical record.

If a therapist chooses to use the downloaded PDF copy of the NFSS form to record the assessment, all information from the Assessment section must be entered on the NFSS form in the TMHP LTC Online Portal and the original assessment completed on the PDF form is maintained in the resident's medical record.

When the assessment confirms the need for a particular nursing facility (NF) specialized service, both the assessment information and the related service request must be submitted on the TMHP LTC Online Portal using the same NFSS form. When the assessment does not indicate the need for a particular specialized service, the assessment may be entered on the NFSS form on the TMHP LTC Online Portal and submitted for service authorization separately as an "Assessment Only" request.

### **Required Signatures**

Each assessment entered on the NFSS form must be accompanied by an attachment with the therapist's signature.

When requesting payment for an assessment, a nursing facility must ensure the assessment is signed by the therapist that performed the assessment. If the submission will also be requesting authorization for a service, the attachment must contain the signatures of the referring physician and the NF Administrator. This is done by downloading the signature page from the TMHP LTC Online Portal, having the therapist sign the signature page to indicate they are the therapist performing the assessment, and if required having the referring physician and NF administrator sign the signature page as well. The signature page can be uploaded as an attachment on the TMHP LTC Online Portal as part of the NFSS form submission. Attachments can also be submitted by fax or through electronic data interchange (EDI) to TMHP.

### Attachments

Attachments that must be submitted in conjunction with the NFSS form:

For CMWC:

- PASRR NF Specialized Services (NFSS) - CMWC/DME Signature Page for Therapist, Referring Physician and NF Administrator signatures
- PASRR NF Specialized Services (NFSS) - CMWC Supplier Acknowledgment and Signature Page
- PASRR NF Specialized Services (NFSS) - CMWC/DME Receipt Certification for Therapist and NF Administrator signatures

For DME:

- PASRR NF Specialized Services (NFSS) - CMWC/DME Signature Page
- PASRR NF Specialized Services (NFSS) - DME Supplier Acknowledgment and Signature Page
- PASRR NF Specialized Services (NFSS) - CMWC/DME Receipt Certification

For Habilitative Therapies:

- PASRR NF Specialized Services (NFSS) - Therapy Signature Page for Therapist, Referring Physician and NF Administrator signatures

Additionally, after June 22, 2017, DME and CMWCs requested through the NFSS form must include uploaded MSRP catalog pricing. The supplier must furnish information that verifies the prices listed on the Itemized MSRP List for each of the items listed. The catalog pricing for the item must indicate the item is priced at an amount that is the same as, or less than, the MSRP. Quotes are not acceptable substitutes for the catalog pricing documentation.

### Services

When requesting a PASRR specialized service, a provider must ensure that the service is required by and documented in the resident's comprehensive care plan, is based on a relevant diagnosis, and is ordered by the resident's referring physician.

The referring physician's signature is submitted by downloading the Signature Page from the relevant tab on the NFSS form and having the physician sign the signature page to indicate the service is medically necessary and provided under the resident's treatment plan. This signed Signature Page must be included as part of the service request. For **therapy recertification** requests, a physician's signature is not required. The signature page can be uploaded as an attachment on the TMHP LTC Online Portal as part of the NFSS form submission. Attachments can also be submitted by fax or through electronic data interchange (EDI) to TMHP.

A nursing facility must request the service by completing both the assessment tab and the service tab on the NFSS form. The exception to this requirement is for a therapy recertification. Recertification does not require an updated treatment plan if the frequency, duration, and intensity of the therapy remains the same. If the frequency, duration, and intensity of the therapy has changed, **a new** assessment is required.

The PDF NFSS form should NOT be faxed to TMHP or HHS as a means to request a specialized service. These requests will no longer be addressed based on paper forms.

### **Receipt Certification for DMEs and CMWCs**

Once the HHSC IDD PASRR Unit has approved a DME item or CMWC, it will go into a "Pending NF Receipt" status on the TMHP LTC Online Portal. The provider will then order the DME item or CMWC from the DME supplier. Once the DME item or CMWC has arrived, the therapist must ensure that the item or wheelchair fits properly and is the item or chair described in the assessment. The provider will then fill out a receipt certification attachment. This attachment must be uploaded into the TMHP LTC Online Portal after the item has been delivered. The signature by the therapist on this attachment certifies that the item meets the needs of the resident as specified in the assessment. It also indicates, by the administrator's signature, that the item was delivered and received by the nursing facility.

After the HHSC IDD PASRR Unit has received the receipt certification, will it set the DME or CMWC request to "Process Complete," thereby generating a service authorization in the Service Authorization System (SAS) and payment for the DME or CMWC.

**Failure to submit a receipt certification within 364 days of the date the HHSC IDD PASRR Unit approves the DME item or CMWC will delay or prevent the facility's reimbursement.**

### **Resources**

For step-by-step information on how to submit a request for a PASRR NF specialized service using the new NFSS form on the TMHP LTC Online Portal, refer to the [Detailed Item-by-Item Guide for NFSS found online](#).

For more information on accessing and submitting forms on the TMHP LTC Online Portal, [refer to the NF and Hospice User Guide on the TMHP website](#).

For assistance regarding submission of the NFSS form, nursing facility providers should contact TMHP at 1-800-626-4117 and select option 1. For questions regarding the content of this letter, please contact the HHSC IDD PASRR Unit at 1-855-435-7180.

Sincerely,

*[signature on file]*

Haley Turner  
Deputy Associate Commissioner  
Intellectual and Developmental Disabilities