

Detailed Item by Item
Guide for Completing the
PASRR Comprehensive
Service Plan (PCSP) Form

Texas Health and Human Services
September 2023

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Overview

After a positive Preadmission Screening Resident Review (PASRR) Evaluation has been submitted into the Texas Medicaid and Healthcare Partnership (TMHP) Long Term Care (LTC) Online Portal, the nursing facility (NF) receives an alert from the TMHP automated system. The alert informs the NF that a positive PASRR Evaluation (PE) has been submitted and instructs the NF to certify the ability to serve the individual.

The NF is then required to conduct an interdisciplinary team (IDT) meeting. The alert includes the individual's PASRR determination of intellectual disability (ID), developmental disability (DD), and/or mental illness (MI) so that the NF knows if the local intellectual and developmental disability authority (LIDDA), local mental health authority (LMHA)/local behavioral health authority (LBHA), or both needs to attend the IDT meeting.

The PASRR Comprehensive Service Plan (PCSP) simplifies the specialized services identification process. The LTC Online Portal allows NFs and local authorities (LAs) to submit and view one form that captures an integrated service plan and allows a comprehensive view of the individual's needs for a year at a time.

The term LA is used to reference LIDDAs, LMHAs, and LBHAs when a PCSP requirement or function applies to all three.

Initial Interdisciplinary Team Meeting

An initial IDT meeting must be held for all individuals with a positive PE within 14 calendar days of the individual's admission to the NF or for a resident review, within 14 days after the LTC Online Portal generates an automatic alert to the LA to complete and submit a PE.

The PCSP must be submitted into the LTC Online Portal for every individual with a positive PE as a means to document the IDT meeting. An IDT meeting is required in order for the NFs Minimum Data Set (MDS) Long-Term Care Medicaid Information (LTCMI) to process. NFs should not wait for the first MDS assessment denial before conducting an initial or annual IDT meeting. NFs must track the IDT meeting due dates.

The purpose of the initial and annual IDT meeting is:

- 1. Discuss the PASRR specialized services recommended on the individual's PE, or the individual's ongoing PASRR specialized services.
- 2. Determine which PASRR specialized services, if any, agreed upon by the IDT that the individual will receive or continue to receive.
- 3. Discuss the best residential placement for the individual.

IDT meetings are important to ensure that an individual receives the necessary PASRR specialized services, so the NF should schedule enough time for a full team discussion.

Required IDT Meeting Members

The NF should review the PE and all the specialized services being recommended before the NF schedules the initial IDT meeting. This will assist the NF in certifying whether the NF can meet the individual's needs. Additionally, the PE will indicate the PASRR condition which will assist the NF in determining which team members to invite to the IDT meeting. If NF staff are unsure who must be invited, they should call their LA representative to seek clarification.

The Health and Human Services Commission (HHSC) recommends that NFs and LAs use a signature sheet for all meetings to record and verify attendance.

The required team members for PASRR IDT meetings must include, at a minimum:

- 1. Registered Nurse (RN) from the NF
- 2. Individual or legally authorized representative (LAR) or both
- 3. LIDDA, LMHA/LBHA, or both as indicated by the PASRR condition confirmed bythe PE
- 4. Hospice provider (if the individual is receiving hospice services)

The required participants of an IDT meeting must be documented on the PCSP form prior to the form being submitted successfully into the LTC Online Portal, or the following error message will be displayed upon submission:

"NF-RN, Individual and/or LAR, LA- IDD (if the individual is positive for ID or DD) and LA-MI (if the individual is positive for MI) are required to be entered as a Participant Type."

The error message will be slightly different if the required participants are not documented for a Quarterly or LA Update meeting.

NFs and LAs should work together to schedule the meetings. Communication between the LA and NF is key. At the start of the meeting, both parties should identify the type of meeting being held and determine who will enter the meeting information into the LTC Online Portal.

If the individual is assigned a habilitation coordinator, the habilitation coordinator will also be a required member of the IDT and SPT meetings. When the individual is dually- diagnosed (has both ID/DD and MI), the habilitation coordinator will take the lead and be responsible for coordination with the LMHA/LBHA to ensure all MI PASRR specialized services are initiated and delivered.

The NF is responsible for holding an IDT meeting for a PASRR positive individual who elects hospice care. Because the hospice provider is the primary entity responsible for the individual's plan of care, the NF must notify and include the hospice provider in the IDT meeting. If the hospice provider did not participate in the most recent IDT meeting, any Nursing Facility Specialized Services (NFSS) request submitted by the NF will not be approved.

The individual or LAR or both should be encouraged to attend all meetings, but they do have a right to decline. If they decline to attend the meeting, it should be documented in the PCSP per the instructions in this guide under <u>Section 12</u>, 2500. Meeting Participation, B. Attendance Type.

All other team members are mandatory participants and must attend the meeting in person or by telephone, or the LTC Online Portal will not accept the PCSP form submission.

Optional team members may include:

- 1. Staff who are involved in delivering the individual's PASRR specialized services.
- 2. Service coordinator from the individual's managed care organization (MCO).
- 3. Anyone that the individual or LAR invites to attend.
- 4. Anyone who works with the individual to provide services.

Sometimes, service providers may not be identified or scheduled at the time of the initial IDT meeting but should be added to all future meetings. The exception is durable medical equipment (DME) suppliers, who should never be included.

During the initial IDT/SPT meeting, the NF can fill out a paper copy of the PCSP form to record the results of the meeting. If possible, the results of the meeting can be data entered directly into the LTC Online Portal during the meeting. It is best practice to use a signature sheet to record the attendance at the meeting, including members who attended over the phone by mailing them the signature sheet and asking them to return the signed form. The NF must maintain all documentation related to the IDT meeting, including signature sheets, assessments, etc.

Local Authority Confirmation on IDT meeting

For an initial or annual IDT meeting, the LA must confirm the following on the PCSP:

- 1. Attendance at the meeting (in person or by phone)
- 2. All PASRR specialized services discussed at the meeting are recorded on he PCSP meeting form.

The individual's PASRR determination (IDD, MI, or IDD and MI) will dictate which LAs must attend the IDT, and confirm the above on the PCSP.

Within five business days after the PCSP form is submitted with initial or annual IDT/SPT meeting information, one or both LAs will receive an alert to confirm their participation in the meeting and the PASRR specialized services agreed to by the team. This section will only be enabled for data entry by the LA for the initial and annual meeting types.

If an LA did not attend an IDT meeting, the LA will confirm on the PCSP form that they did not attend. The meeting type will change to "5. Invalid" and the TMHP LTC Online Portal will send an alert to the NF to reconvene the IDT meeting. The NF must then hold a new IDT meeting and ensure that the LA is in attendance before submitting the PCSP form.

Note: This also means that the NF cannot submit its Minimum Data Set (MDS) assessment and Long-Term Care Medicaid Information (LTCMI) until it submits a new IDT meeting on the PCSP form.

PASRR Specialized Services

PASRR specialized services and all available funding sources should be discussed during IDT, SPT quarterly, MI quarterly and LA update meetings. All PASRR specialized services the individual agrees to receive (or the LAR on the individual's behalf) should be documented on the PCSP form. Ongoing changes to the delivery status of PASRR specialized services are also documented on the PCSP form on a quarterly or as needed basis.

Additionally, the funding for these services should be discussed. For example, if the individual is age 20 or younger, additional services could be accessed through Texas Health Steps (THSteps). Funding sources other than Medicaid for individuals age 21 or older should also be recorded in the comment section of the PCSP form (field A3200 for NFs or field A3300 for LAs).

Examples of other funding sources for PASRR specialized services include, but are not limited to:

- 1. Texas Health Steps
- 2. Medicare
- 3. Private pay
- 4. State funded services, e.g., from MI or IDD agency
- 5. Funding from grants awarded to LAs
- 6. Other federal programs

Submitting an Initial/Annual IDT Meeting

The results of the initial and annual IDT meeting will be recorded on the PCSP form and submitted into the LTC Online Portal as an "Initial IDT/SPT" or "Annual IDT/SPT" meeting type. The PCSP form will be initiated from the positive PE by clicking on the **Initiate PCSP** button.



The initial IDT meeting also serves as the initial SPT meeting, which is why providers will see the "Meeting Type" option listed as 'Initial IDT/SPT' or 'Annual IDT/SPT.'

There can only be one active PE form per individual, per NF stay for the same provider number. The LTC Online Portal will not allow the submission of another PCSP form that is indicated as a "1. Initial IDT/SPT" meeting initiated from the same PE for the same provider number if an initial IDT meeting is already submitted. Only an NF can submit an initial and annual IDT meeting on the PCSP form.

When a new positive PE is initiated from the same PL1 Screening Form for an individual residing in the same NF, the previous PE is in-activated, a new IDT must be convened, and another initial IDT/SPT must be submitted. This requirement includes PEs submitted for changes of ownership (CHOWs) or resident reviews.

The LTC Online Portal will not allow submission of the PCSP form if the required members did not attend the meeting.

At initial and annual meetings, an NF RN must attend. Another staff from the NF who knows the individual's needs can also attend the initial and annual meetings. This NF staff must continue to attend the quarterly and LA update meetings.

Prior to clicking on the **Submit Form** button, the NF should double-check all fields on the PCSP form, including the date, for accuracy. After the form is submitted on the LTC Online Portal, NFs can make corrections to the IDT meeting on the PCSP form if the LA has not confirmed the meeting within 30 days, or another meeting has not been added.

Errors should be corrected immediately, prior to the LAs confirmation.

Issues Caused When IDT Meeting is Not Submitted Timely

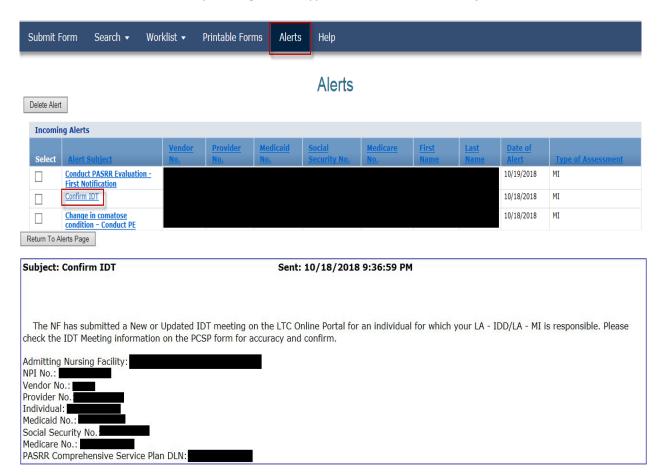
- 1. It is imperative that the NF submit the IDT information on the PCSP form and into the LTC Online Portal within three business days of the IDT meeting. If the NF waits too long to submit the IDT meeting and another meeting has already been submitted on a new PCSP document locator number (DLN), the NF cannot submit its IDT meeting on a new PCSP DLN with the same meeting date.
 - If the NF is unable to submit the IDT information because another meeting has already been submitted on the new PCSP DLN, the NF must enter the date one day later than the actual meeting date. After submitting the IDT meeting, the NF will contact the HHSC PASRR unit, and request that the meeting date bechanged to the actual meeting date.
- 2. Any time a resident is discharged or passes away before the IDT meeting can be held, the NF must enter the discharge date in the discharge section of the PL1 Screening Form by using the "Update Form" button. Entering the discharge date on the PL1 Screening Form stops the LTC Online Portal from:
 - A. sending alerts to the LA to complete a PE; and
 - B. looking for an IDT meeting, thereby, preventing the LTCMI from being submitted.

Simply adding a note to the positive PL1 Screening Form is not sufficient when an individual is discharged or passes away. The PL1 Screening Form must be inactivated by updating the PL1 Screening Form with the date of discharge or death.

Local Authority Confirmation on PCSP Form

An LA must confirm certain information from the IDT meeting on the PCSP form with Meeting Type Initial IDT/SPT or Annual IDT/SPT. The individual's PASRR determination (IDD only, MI only, or IDD and MI) indicated in PCSP field A2400 will determine whether the LIDDA, the LMHA/LBHA, or both will need to confirm the information on the PCSP.

LAs will receive a Confirm IDT alert any time an NF submits a PCSP form for an initial and annual meeting. The LA can view the content of the alert by clicking on the hyperlink under the Alert Subject column.

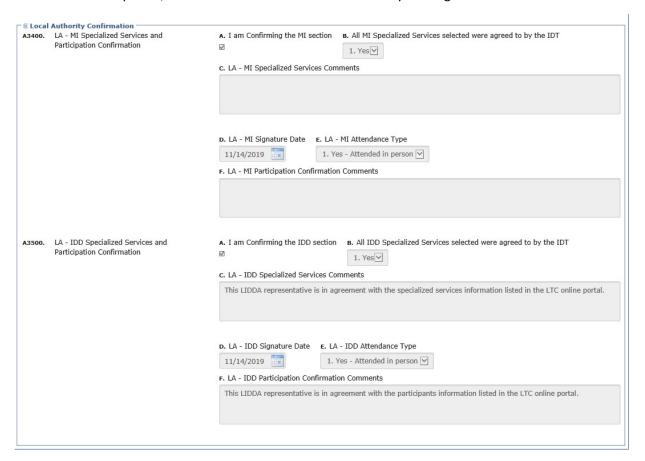


LA's will submit their confirmation on the PCSP form by clicking on the **Confirm IDT** button within five business days after receiving notification from the LTC Online Portal that the NF entered information from the IDT meeting. Only the applicable **Local Authority Confirmation** section will be enabled for data entry. The NF will NOT confirm a Quarterly or LA Update meeting, so this button is never displayed for the NF.

Once the NF has documented the IDT meeting on the PCSP, the LA will be able to confirm attendance and agreement to the PASRR specialized services documented for the individual by taking the following actions:

1. Open the PCSP form on the LTC Online Portal.

- 2. Click on the Confirm IDT button.
- 3. Only the IDT Confirmation section will be enabled for LA entry, though the other sections will be displayed and disabled.
- 4. Depending on the value displayed in field A2400 (Individual PASRR Condition) and the LA security rights, the LA must complete required fields in the mental illness (LA-MI) or intellectual and developmental disability (LA-IDD) portion of the LA Confirmation section (refer to the screen examples below).
- 5. Once completed, the LA will submit their confirmation by clicking the **Submit Form** button.



If the LA attended the IDT meeting but doesn't agree with the documented specialized services, then the LA should contact the NF to request the necessary changes before submitting their IDT meeting confirmation. Before the LA submits the confirmation in this case, the LA should contact the NF and request the necessary corrections. The LA should wait seven calendar days for the NF to revise the PCSP form. If corrections are not made, the LA can confirm attendance and not agree with the list of PASRR specialized service and include a note in the comment field A3400C or A3500C.

Keep in mind that the initial, quarterly, LA update, and annual meeting dates need to be submitted on a PCSP document locator number (DLN) in date order. For LAs, the Quarterly or LA Update meetings added to a PCSP DLN, via the Add Meeting button, must be within 365 calendar days from the last initial or annual meeting date. Any meeting

documented on the PCSP must be held on or after the PE date(s). The required participants for a specific meeting type must be entered on the PCSP form.

A **Form History** trail will be displayed at the bottom of the PCSP form and will display a history of all the accepted confirmed IDT meetings. The Form History trail shows what actions were taken, including submission of the form, updates, and alerts sent.

Form Completed	4/9/2020 11:20:31 AM
4/9/2020 11:20:31 AM	TMHP: This form was submitted from PE: 1000100010001
4/9/2020 11:20:31 AM	TMHP: Medicaid Eligibility found for the person for the Date of Meeting or later.
4/9/2020 11:20:32 AM	TMHP: An alert was created and submitted to the LA – IDD/LA - MI for confirmation of IDT.
4/9/2020 12:50:48 PM	TMHP: The following fields on the form have been updated: Field: A3000A. Individual/LAR Refused all Services Old Value: TRUE New Value: FALSE Field: A3000F. Habilitation Coordination Old Value: 1. Individual/LAR Refused New Value: 3. Ongoing
4/9/2020 12:50:48 PM	TMHP: Medicaid Eligibility found for the person for the Date of Meeting or later.
4/9/2020 12:50:49 PM	TMHP: An alert was created and submitted to the LA – IDD/LA - MI for confirmation of IDT.
4/9/2020 12:56:53 PM	TMHP: The system has accepted IDD Specialized Services and Participation Confirmation of Initial/Annual Meeting

Resident Review

A Resident Review (RR) is a review of a resident's condition and placement after the individual has been admitted to an NF. The RR is completed for an individual who experienced a significant change in status in mental or physical condition.

The NF will submit an LTCMI on the MDS form with the type of assessment being "04. Significant change in status assessment (SCSA)". Submission of the SCSA on the LTC Online Portal will generate an alert to the LA to conduct an RR. The LA has seven calendar days from the date they received the alert (submission of SCSA) to complete the RR.

The purpose of the RR is to ensure the individual has the correct PASRR determination. Additionally, the RR:

- 1. Assesses the person's need for continued care in an NF.
- 2. Assesses the person's need for NF, LIDDA, and LMHA PASRR specializedservices.
- 3. Identifies alternate placement options.

An RR may also be required by a NF or HHSC on a PASRR negative individual who is suspected, after being admitted, of having MI, ID, or DD, to determine whether the resident qualifies for PASRR specialized services. For individuals with a positive status of MI, a change of condition to a primary diagnosis of dementia may warrant an RR.

When an RR is performed, the LA will meet face-to-face with the individual and complete the PE form. The LA is required to complete and submit the PE on the LTC Online Portal within seven calendar days of the notification to conduct an RR.

After the PE is submitted, the NF must hold an initial IDT meeting to discuss the result of the RR within 14 calendar days after the LTC Online Portal generated the automated notification to the LIDDA or LMHA/LBHA.

The NF must initiate a new PCSP form to record the initial IDT meeting from the newly submitted PE by clicking on the **Initiate PCSP** button.



When to Complete and submit an Annual IDT Meeting

The IDT meeting held a year after the initial IDT meeting for the same individual must be labeled as 'Annual' when entering the meeting type.

On an annual basis, but no earlier than 334 days from the date of the previous IDT/SPT meeting, an annual IDT meeting must be convened by the NF and the results documented on a new PCSP form initiated from the same PE. The 334-day limit will be enforced by the LTC Online Portal. The form cannot be submitted earlier than this date.

The annual IDT is initiated from the PE by clicking on the **Initiate PCSP** button. This will cause a new PCSP DLN to generate for the next year.



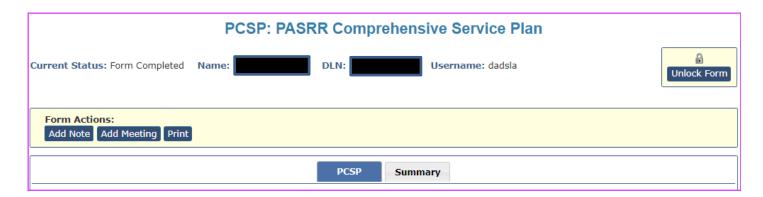
The mandatory team members are the same as the initial IDT meeting's mandatory team members. The LA must confirm the information from the IDT meeting on the PCSP form for the meeting type of Annual IDT/SPT.

Quarterly Service Planning Team, Mental Illness Quarterly, and Local Authority Update Meetings

The PCSP form is used by LIDDAs and LMHAs/LBHAs to document PASRR specialized services information and to monitor the initiation, delivery, and changes to the array of PASRR specialized services the person is receiving. Only the LAs can submit Quarterly meetings or LA Update meetings on the PCSP form.

There are some slight differences between the method of submission used by the NF and the method used by the LA. The LA submits a Quarterly or LA Update meeting by clicking the **Add Meeting** button on the PCSP DLN containing the IDT meeting. The NF will receive an alert that a Quarterly or LA Update meeting has been submitted.

The alert also directs the NF to include a copy of the Quarterly or LA Update meeting on the PCSP form and revised specialized services included in the person's comprehensive care plan.



Similar to the initial and annual meetings, every service enabled on the Quarterly or LA Update meeting must be addressed using the drop-down menu. The requirement will apply to all meeting types except for the LA Update meeting with the reason code for Deceased/Discharged/Transition/Transfer, in which case fields A2800 through A3110 are disabled.

Service Planning Team Meetings

For LIDDA's, the PCSP form is used to record SPT quarterly meetings for individuals who are PASRR positive for ID/DD by clicking the **Add Meeting** button on the PCSP DLN submitted for the IDT meeting. In addition to the initial and annual IDT/SPT meeting, the LMHA/LBHA must also attend the quarterly SPT meetings for an individual with a dual diagnosis.

Service Planning Team Required Team Members

The required SPT members for SPT quarterly meetings is determined by the individual's PASRR determination.

The SPT meeting must include:

- 1. Individual with ID or DD
- 2. Individual's LAR, if any
- 3. LIDDA habilitation coordinator for discussions and service planning related to specialized services.
- 4. Service coordinator for discussions related to transition planning, if the individual is transitioning to the community
- 5. MCO service coordinator if the individual does not object.
 - A. While the individual is in a NF, the SPT meeting must include:
 - a. Nursing facility staff person familiar with the individual's needs
 - Person providing a PASRR specialized service to the individual or a representative of a provider agency that is providing PASRR specialized services for the individual (excludes DME providers, who should never be invited)
 - B. When the individual is transitioning to the community, the SPT meeting must include a:
 - a. Representative from the community program provider, if one has been selected,
 - b. Relocation specialist, and
 - c. Representative from the LMHA or LBHA, if the individual has MI.
 - d. Optional participants for the SPT may include:
 - e. Concerned person whose inclusion is requested by the individual or the LAR, and
 - f. At the discretion of the LIDDA, a person who is directly involved in the deliveryof services to individuals with ID or DD.

Mental Illness Quarterly Meetings

An MI quarterly meeting is convened by the LMHA or LBHA for an individual, who is PASRR positive for MI only, to develop, review, or revise the person-centered recovery plan (PCRP) and the transition plan, if the individual is transitioning to the community.

The required MI PASRR specialized services team members for the MI quarterly meetings must include:

- 1. Individual with MI,
- 2. Individual with MIs LAR, if any
- 3. Qualified Mental Health Professional-Community Services (QMHP-CS) assigned to the resident with MI,
- 4. Representative of the LMHA or LBHA providing the MI specialized services,

- 5. MCO service coordinator if the resident with MI does not object,
- 6. NF staff person familiar with the resident with MI's needs, and
- 7. If the resident with MI is transitioning to the community:
 - A. Representative from the community program provider, if one has been selected
 - B. Relocation specialist.

The MI PASRR specialized services team may also include a concerned person whose inclusion is requested by the resident with MI or the LAR.

Local Authority Update Meeting Types

LA Update meetings can be held at any time by the LIDDA/LMHA/LBHA after the initial or annual IDT or quarterly meeting to add, change, or remove services and torecord discussions related to transfers, transitions, death, or discharges. The LA Update meeting is recorded by clicking the **Add Meeting** button on the PCSP DLN submitted for the IDT meeting.

The PCSP form also allows users to select the reason that the LA Update meeting is being held. Reason codes include:

- 1. Change in Medical Condition
- 2. Change in Service
- 3. Deceased
- 4. Discharged
- 5. Refusal of Habilitation Coordination
- 6. Transfer
- 7. Transition
- 8. Refusal of MI Specialized Services

When "8. Refusal of MI Specialized Services" is selected in field A0900, the LMHA/LBHA is required to conduct follow-up meetings on the 30th, 60th and 90th day after the initial IDT meeting is held to offer the individual MI PASRR specialized services. If the individual continues to refuse MI PASRR specialized services, the meeting and refusal are documented on the PCSP form as an LA Update meeting. The LMHA/LBHA should document on the PCSP form whether the follow-up meeting was conducted with the individual, family member, or NF staff person. The meeting can be either in person or by phone.

When either, "4. Discharged", "6. Transfer", or "7. Transition", is selected in field A0900, the local authority must document in field "A3300. Local Authority Comments" where the individual went after leaving the NF.

Required Members for Local Authority Update Meetings

The required participants for each type of LA Update meeting must be documented on the PCSP form prior to the form being successfully submitted into the LTC OnlinePortal.

Local Authority Updates with reason code 1 or 2

LA Update meetings with reason code 1 or 2 requires the individual or LAR, LA-IDD or LA-MI or both depending on PASRR condition, habilitation coordinator (if assigned), a NF staff member who knows the individual best (may be an RN) and providers of specialized services (except for DME providers).

Local Authority Updates with reason code 3, 4, 5, 6, 7 or 8

LA Update meetings with reason codes 3 to 8 require the LA-IDD or LA MI or both depending on PASRR condition. Because these reason codes are used to document events that took place and affect an individual's PASRR specialized services, convening an entire team is not always necessary. Events can be held at any time after the initial meeting. Event Codes are: (3) Deceased, (4) Discharged, (5) Refusal of Habilitation Coordination, (6) Transfer, (7) Transition, or (8) Refusal of MI Specialized Services.

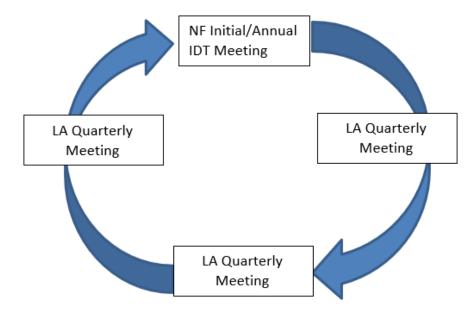
When to Submit Quarterly and Local Authority Update Meetings

The Quarterly or LA Update meetings are added to the PCSP form when the most recent initial or annual IDT meeting is already documented. Only the LIDDA, LMHA, and LBHAs can submit Quarterly and LA Update meetings on the PCSP forms.

Quarterly Meetings

The LA is no longer required to conduct a separate initial SPT meeting or MI quarterly meeting on the same day or after the NF's initial IDT meeting. LAs must not record quarterly meetings on the same date as the NF's initial or annual IDT meeting. The NF's IDT will serve as the LA's initial or annual quarterly meeting and entering another meeting for these dates is not necessary.

Therefore, the LA's first meeting submitted on the PCSP in the LTC Online Portal will be the quarterly SPT or MI quarterly meeting which is **due three months after the initial or annual IDT/SPT team meeting** initiated by the NF. This means that the LA will only have three meetings indicated as "quarterly meetings." Quarterly due dates will be adjusted based on the date of an initial or annual IDT or when a new positive PE is submitted. The quarterly meeting is recorded by clicking the **Add Meeting** button on the PCSP DLN submitted for the IDT meeting.



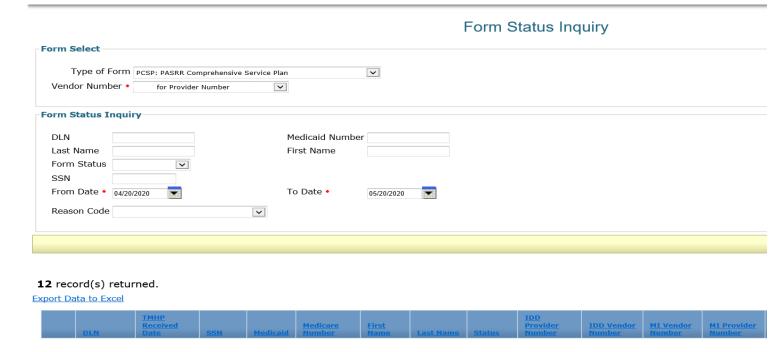
Any time a new positive PE is submitted that inactivates a previous PE, and the individual is still in the same NF, such as after a CHOW or Resident Review, another initial IDT/SPT must be submitted. The new initial IDT/SPT meeting date will determine a new quarterly meeting schedule and reset the meeting dates.

Local Authority Update Meetings

LA Update meetings can be held at any time by the LIDDA/LMHA/LBHA after the initial IDT, annual IDT, or quarterly meeting to add, change, or remove specialized services and to record discussions related to transfers, transitions, death, or discharges.

How to submit a Quarterly or Local Authority Update Meeting

The LA will use the **Form Status Inquiry** (FSI) function to find the PCSP with the most recent IDT. If an existing PCSP DLN is not found, then the LA must contact the NF to request the IDT be submitted on the LTC Online Portal. If the IDT meeting has not been submitted by the required timeframe, the LA should enter a note in the Form History after the PCSP form has been submitted to indicate the NF submitted the IDT meeting late.

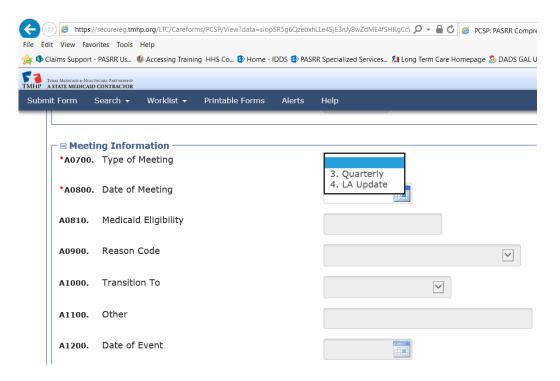


- 1. After opening the PCSP form that has the IDT meeting, the user will click onthe **Add Meeting** button in the yellow Forms Actions bar on the form.
- 2. The user will then select the Type of Meeting: either Quarterly or LA Update

PCSP: PASR

Current Status: Form Completed Name:
Username:

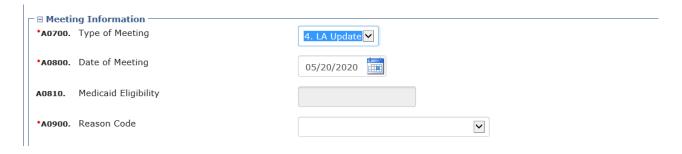
Form Actions:
Add Note Add Meeting Print



3. When the Quarterly meeting is selected, the remainder of the fields in the Meeting Information section of the form become disabled, except for the Dateof Meeting field.



4. When the LA Update meeting is selected, the Date of Meeting and the ReasonCode fields become enabled.



5. Users should refer to <u>Section 13</u>, <u>Line by Line Steps for Completing the PCSP Form</u> of this guide for instructions on completing the rest of the PCSP form.

Add Note Feature

Users with permission to access a specific PCSP DLN can add a note which will be posted in Form History. To add a note, click the **Add Note** button in the yellow Forms Actions bar. Users must be careful what is documented in **Form History**, as comments cannot be deleted once submitted and are part of the permanent record.



Updating the PASRR Comprehensive Service Plan Form

Nursing Facilities

The NF should double-check all fields on the PCSP form, including the date, for accuracy prior to clicking on the **Submit Form** button. Errors should be corrected immediately prior to the LAs confirmation.

The NF can update the IDT meeting to make corrections by clicking on the "Update Form" button.

NFs can make corrections to the new or updated IDT meeting on the PCSP form as long as:

- 1. the date of the correction is within 30 days from when the meeting needing corrections was submitted,
- 2. LA has not confirmed the IDT meeting, or
- 3. another meeting (Quarterly or LA Update) has not been added to the form.

Only the fields enabled for the NF which were enabled when originally entering the IDT meeting information, will be enabled for updates.

If the NF needs to update the IDT meeting submitted on the PCSP DLN, and it's the latest meeting submitted on the form but the "Update Form" button is NOT displayed, then the NF needs to contact the HHSC PASRR Unit to make the necessary updates.

The PASRR Unit can update the IDT meeting and confirmation sections unless another meeting (Quarterly or LA Update) has been added to the PCSP DLN. In this case the HHSC PASRR Unit cannot update the IDT meeting.

Local Authorities

The LA does NOT have the capability to update their Quarterly or LA Update meetings, so the **Update Form** button is never displayed for the LA. The HHSC PASRR Unit can update an LA Quarterly or LA Update meeting. Only the last meeting submitted on the PCSP DLN can be updated, and only the fields enabled to the meeting submitter while originally entering the meeting information will be enabled for changes by the HHSC PASRR Unit.

HHSC PASRR Unit

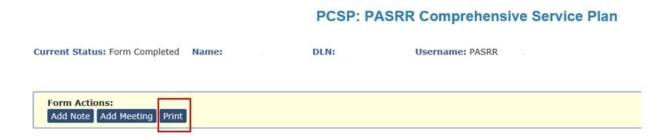
The PASRR Unit can update an IDT, Quarterly, or LA Update meeting under certaincircumstances:

- 1. Only the last meeting submitted on the PCSP DLN can be updated.
- 2. Only the fields enabled to the meeting submitter while originally entering themeeting information will be enabled for the HHSC PASRR Unit.

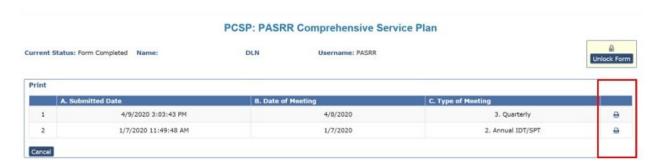
NFs and LAs should contact the HHSC PASRR Unit to request updates to their meetings at PASRR.Support@hhsc.state.tx.us.

Printing the PASRR Comprehensive Service Plan Form

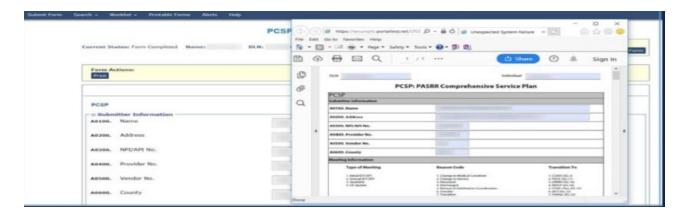
To print a paper copy of the PCSP Form, click the **Print** button in the yellow **Form Action** bar.



The print grid appears, displaying all meetings submitted on the PCSP DLN. To print a meeting, click on the **Printer** icon located to the far right of the meeting you want to print. To cancel printing, click the **Cancel** button. Any meeting on the list can be printed but you can only print one meeting at a time.



Users can also print the PCSP while entering meeting information. Click **Print** and anew window will open displaying the PDF version of the form.



The print function does not print the **Form History** notes or the **Summary** tab.

Item-by-Item Guidance for Completing the PASRR Comprehensive Services Plan Form

Form submitters should only use Microsoft Edge or Google Chrome to access TMHP and complete the PCSP form. The PCSP Form will not open and work properly through other browsers. The DLNs can be searched for on the Form Status Inquiry page. The **Reason Code** search criteria field is displayed when searching for the PCSP forms.

Submitter Information

INTENT: The purpose of this section is to document the identifying and contact information for the nursing facility or LA submitting the PCSP Form (based on the type of meeting being submitted). Whichever provider submits the PCSP form will be designated as the submitter.

- 1. To begin submission of an IDT meeting, click on the **Initiate PCSP** button on the PE with positive PASRR eligibility.
- 2. To begin submission of a quarterly or LA update meeting, click on the Add Meeting button on the PCSP.



A0100-A0600. Submitter Information – Most of the information will be auto-populated with submitter identifying information linked to the submitter's TMHP LTCOnline Portal logon access after the submitter uses the FSI page to search for a form.

The only field not auto-populated is A0600 County when the LA is the submitter because some LAs serve more than one county.

A0100. Name – Agency name under which the submitter provides services.

A0200. Address - Current mailing address, including street or P.O. Box, of submitter's agency.

A0300. NPI/API No. – National Provider Identifier or Atypical Provider Identifier for the agency under which the submitter provides services.

A0400. Provider No. – Provider number under which the submitter provider services.

A0500. Vendor No. – Vendor number for the agency under which the submitter provides services.

A0600. County – The county in which the submitter provides services.

Meeting Information

INTENT: This section is used to record the type of meeting being documented on the PCSP form, in addition to the reason the meeting is being held. If the reason is that the individual has transferred or transitioned to another program, this information is documented as well.

A0700. Type of Meeting - Using the key codes on the form under "Meeting Type," select the option that represents the type of meeting held:

- 1. Initial IDT/SPT
- 2. Annual IDT/SPT
- 3. Quarterly or
- 4. LA Update.

When an initial or annual IDT meeting needs to be recorded, the NF clicks on the "Initiate PCSP" button on the PE and they will be redirected to the Initiate Form page. The NF will select the Type of Meeting from the dropdown box, and then click on the "Enter Form" button. The NF will only be able to select option 1 or 2 from the dropdown box.

The PCSP form will be opened and ready for data entry of the new meeting information with field A0700 disabled.

When a Quarterly or LA Update meeting needs to be recorded and there is an existing PCSP DLN containing the IDT meeting, the LA clicks on the **Add Meeting** button on the existing PCSP. Then the PCSP is refreshed and ready for data entry of the new meeting, and field A0700 is enabled and required. The LA will only be able to select option 3 or 4 from the dropdown box.

LA Update meetings can be held at any time by the LA after the initial meeting to add, change, remove services or to discuss transfers, transitions, death, or discharges.

Please note, the LA is not required to conduct a separate initial Quarterly meeting right after or on the same day as the NFs IDT meeting. The first meeting will be the "1. Initial IDT/SPT" or "2. Annual IDT/SPT" meeting submitted on the PCSP form by the NF. The first quarterly should be scheduled three months after the initial or annual IDT meeting initiated by the NF.

A0800. Date of Meeting - Enter the actual date that the meeting was held with the participants using the "mm/dd/yyyy" format, or via the date picker icon next to this field. This date must be:

- On or after the evaluation date(s) of the last Positive PE.
- After the last meeting submitted on a PCSP form for this individual.
- Cannot be a future date.

Field A0800 is enabled and required for certain meeting types and reason codes.

Field A0800 will only be disabled when the field A1200 has been enabled by selecting one of the following Reason Codes:

- 3. Deceased,
- 4. Discharged,
- 5. Refusal of Habilitation Coordination,
- 6. Transfer,
- 7. Transition or
- 8. Refusal of MI Specialized Services.

Field A0800 will be enabled and required for Reason Codes "1. Change in Medical Condition," and "2. Change in Service."

A0810. Medicaid Eligibility – This field is disabled. The Medicaid Eligibility (ME) status is determined upon submission or update of the meeting on the PCSP form on the LTC Online Portal. Field A0810 documents the results of the determination:

- 1. 0. ME Not Found
- 2. 1. ME Confirmed
- 3. 2. ME Undetermined.

Refer to Section 14, Form Submission on the LTC Online Portal for additionalinformation about this function.

A0900. Reason Code - This field will only be required when "4. LA Update" is selected in field A0700. Select the reason for the LA Update meeting:

- 1. Change in Medical Condition
- 2. Change in Service
- 3. Deceased
- 4. Discharged

- 5. Refusal of Habilitation Coordination
- 6. Transfer
- 7. Transition
- 8. Refusal of MI Specialized Services

A1000. Transition To - This field will only be required when "6. Transfer" or "7. Transition" has been selected as a reason code in field A0900. Select where the person transferred/transitioned to:

- 1. CLASS (SG 2)
- 2. PACE (SG 11)
- 3. DBMD (SG 16)
- 4. MDCP (SG 18)
- 5. STAR+Plus (SG 19)
- 6. HCS (SG 21)
- 7. TxHmL (SG 22)
- 8. YES (DSHS Waiver)
- 9. Other

A1100. Other: This field is required when "9. Other" has been selected in field A1000. Enter where the person transferred/transitioned to.

A1200 Date of Event: This field will be required when the reason code: "3. Deceased", "4. Discharged", "5. Refusal of Habilitation Coordination", "6. Transfer", "7. Transition" or "8. Refusal of MI Specialized Services" has been selected in field A0900.

When a Discharge/Deceased event is submitted, the NF is still required to complete PL1 Screening Form fields B0650 and B0655 (PL1 Screening Forms entered prior to June 30, 2023) and fields H0100 and H0150 (PL1 Screening Forms after June 30, 2023) via the Update Form button which will inactivate the PL1 Screening Form and PE.

Nursing Facility Information

INTENT: The purpose of this section is to document the identifying information for the NF.

This entire section is disabled and auto-populated when the NF initiates a PCSP form from the PE, or when the LA adds a meeting to an existing PCSP DLN.

A1300. Provider No. –The provider number of the NF.

A1400. Vendor No. -The vendor number of the NF.

A1500. NPI No. -The national provider identifier (NPI) number of the NF.

A1600. Facility Name – The name of the NF.

When the LA initiates a PCSP form from the PE, fields A1300 and A1400 are enabled and required to be completed by the LA. The LA enters the data in A1300, and then clicks on the look up tool next to it. Disabled fields A1500 and A1600 will then be auto-populated. The LA also needs to complete field A1400.

The information that the LA enters in A1300 should match one of the NF choices on the PL1 Screening Form "Section D" tab. If the NF information entered by the LA does not match one of the NF choices on the PL1 Screening Form, an error will be encountered.

Local Authority Information

INTENT: The purpose of this section is to document the identifying information for the individual's local intellectual and developmental disability authority(LIDDA), local mental health authority (LMHA) or local behavioral health authority (LBHA).

A1700-A1800. Local Authority Information - This entire section is disabled and auto-populated from the PE "Section A" tab.

A1700. LA-MI Information

- **A.** LA-MI Provider No. The provider number of the LMHA/LBHA.
- **B.** LA-MI Vendor No. The vendor number of the LMHA/LBHA.
- **C. LA-MI NPI/API No.** The national provider identifier (NPI) or Atypical ProviderIdentifier (API) number of the LMHA/LBHA.

A1800. LA-IDD Information

- **A.** LA-IDD Provider No. The provider number of the LIDDA.
- **B.** LA-IDD Vendor No. The vendor number of the LIDDA.
- **C.** LA-IDD NPI/API No. The national provider identifier (NPI) or Atypical Provider Identifier (API) number of the LIDDA.

Individual Information

INTENT: The purpose of this section is to document the identifying information forthe individual and their PASRR determination (IDD, MI, or both).

The IDT/SPT should review all demographic information on both the PL1 Screening Form and PE prior to the meeting to ensure the information is accurate. This includes, the individual's name, date of birth, Social Security Number, Medicaid, and Medicare numbers.

Information on the PE is used to auto-populate the individual's demographic information on the PCSP form, and if the information on the PE is wrong, the information on the PCSP will also be wrong. When errors are found, the PL1 Screening Form and PE form need to be corrected, or resubmitted if corrections are not allowed, before the PCSP is submitted.

When the PE is assigned a system-generated Medicaid Number, the system will update the Medicaid number on both the PL1 Screening Form and PCSP.

A1900-A2400. Individual Information on the LTC Online Portal - Fields A1900-A2300 are disabled and auto-populated from the PE "Section A" tab. Field A2400 is disabled and auto-populated from the PE based on the values in PE fields B0100, B0200 and C0800.

A1900 A. First Name - The first name of the individual.

A1900 B. Middle Initial - The middle initial of the individual.

A1900 C. Last Name - The last name of the individual.

A1900 D. Suffix - The suffix of the individual.

A2000 Social Security No. - The social security number of the individual.

A2100 Medicare No. - The Medicare number of the individual using the Medicare Beneficiary Identifier (MBI). Use of an incorrectly formatted Medicare number can result in providers receiving the error message "Medicare number format is invalid."

A2200. Medicaid No. - The individual's Medicaid number.

A2300 Birth Date - The individual's birth date.

A2400 Individual is PASRR positive for: – The PASRR determination of theindividual: 1. IDD only, 2. MI only, 3. IDD and MI.

Participants Information

INTENT: The purpose of this section is to document who attended the meeting either in person or by telephone. The maximum number of participants that can be documented on the LTC Online Portal is 99. Please see the description of each meetingtype for a list of participants and which ones are mandatory.

The rows in the "Participants Information" section of the PCSP form do not have to be manually deleted when they are blank because they are not needed.

The required participants for each meeting type must still be entered when submitting, updating, or adding a meeting. For example, when an LA Update meeting is submitted to document a discharge, only the LA (IDD or MI or both) needs to be entered in the "Participants Information" section. The remaining two blank rows do not have to be deleted for the meeting to submit.

A2500. Meeting Participation

A. Participant Type

For Column A. Participant Type, select the option that corresponds to the person attending the meeting.

- 1. Individual
- 2. LA-IDD
- 3. LA MI
- 4. Legally Authorized Representative
- 5. Nursing Facility RN
- 6. Nursing Facility
- 7. Specialized Services Provider
- 8. Other
- 9. LIDDA Habilitation Coordinator

When completing the meeting information, there are three rows displayed by default in section A2500. Each row has a trash can symbol on the right of the row. The PCSP form was designed to allow the meeting submitter to add more rows by entering a number and clicking on the "Add Participants" button, or delete rows not needed by clicking on the trash can icon.

If a habilitation coordinator has been assigned, they are a required participant in all initial and annual IDT/SPT and Quarterly meetings. To record the habilitation coordinator's attendance, select "9. LIDDA – Habilitation Coordinator" in field A2500A."



Note: If the required team members are not entered in this section, the system will generate an error message.

For the initial and annual IDT meetings, an RN is a required participant and "5. Nursing Facility – RN" must be selected in field A2500A. If "6. Nursing Facility" is selected in field A2500A instead, the form will display an error message that a required participant is missing even if "10. Registered Nurse (RN)" is selected in fieldA2500C.

Field A2500D is enabled and optional in most cases. However, it's enabled and required if "7. Specialized Services Provider" is selected in Field A2500A or if "13.Other" is selected in Field A2500C.

Attendance Type

For column B. Attendance Type, select the option that corresponds to the selected participant type's attendance at the meeting.

- 1. Yes Attended in person
- 2. Yes Attended via phone
- 3. No Did not attend
- 4. No Declined

NFs and LAs should make at least three attempts to schedule the meeting so that the individual or LAR can attend. The individual or LAR has the right to not attend the meeting. Available specialized services should be discussed with the individual and LAR before the meeting when they choose not to attend.

Title

For Column C. Title, select the option that corresponds to the participant type's title.

1. Diversion Coordinator

- 2. Habilitation Coordinator
- 3. Licensed Clinical Social Worker (LCSW)
- 4. Licensed Professional Counselor (LPC)
- 5. Licensed Psychologist
- 6. Occupational Therapist
- 7. Physical Therapist
- 8. Physician (MD or DO)
- 9. Qualified Mental Health Professional (QMHP)
- 10. Registered Nurse (RN)
- 11. Service Coordinator
- 12. Speech Therapist
- 13. Other
- 14. N/A (Not Applicable)
- 15. Qualified Intellectual Disability Professional (QIDP)

Note: Enter "14. N/A" for the title in field A2500C if the participant type selected in field A2500A is the individual or the LAR.

Other

For Column "D. Other", enter the title of the meeting participant that is not listed as an option under Column "C. Title".

This field is enabled and required if you have selected:

- 1. "13. Other" in field A2500C
- 2. "7. Specialized Services Provider" in field A2500A

Full Name

For Column "E. Full Name", enter the first and last name of the meeting participant.

This field will be disabled and auto-populated with the values from fields A1900A and A1900C if the participant type is "1. Individual". Remember to put "14. N/A" in the "C. Title" field for an individual or LAR.

Type of Meeting

For Column "F. Type of Meeting", this field (A2500F) is disabled and auto-populated with the value from PCSP field A0700.

Date of Meeting

For Column "G. Date of Meeting", this field (A2500G) is disabled and auto-populated with the value from PCSP field A0800.

Alternate Placement Consideration

INTENT - The purpose of this section is to document the discussion held by the teamand the determination whether the resident is best served in a NF or community setting. After the LA has provided the individual and LAR with education about community placement and they have made an informed decision, the meeting submitter will be able to complete this section.

A2600. Alternate Placement Consideration

A2600A. Individual Is Best Served In

For the "PASRR Evaluation" column, this field will be blank and disabled.

For the second column, and subsequent columns that are added as meetings are conducted, this field will require a choice between "0. Nursing Facility" or "1. Community Setting".

A2600B. Does the Individual wish to transition into the community?

For the "PASRR Evaluation" column, this field will be blank and disabled.

For the second column, and subsequent columns that are added as meetings are conducted, this field will require a choice between "0. No" or "1. Yes".

Specialized Services Information

Specialized services are defined as support services in addition to NF services that are identified and recommended through the PE process. These specialized services are discussed, agreed to during the IDT/SPT, Quarterly, or LA Update meetings, and documented on the PCSP form. They are provided to individuals who have Medicaid eligibility at the time of the meeting and who are 21 years of age or older for IDD specialized services or 18 years of age or older for MI specialized services.

INTENT: This section documents what was recommended on the PE and what specialized services were agreed to during the initial IDT/SPT. Additionally, as specialized services are being initiated, changed, or discontinued, this section of the PCSP form documents the status of each specialized service.

A2700. Nursing Facility Specialized Services Indication

This section is completed only if the person's PASRR determination in field A2400 is "1.IDD only" or "3. IDD and MI".

A2700A. I certify that the need for all habilitative therapies (not rehabilitative therapies) were discussed. – By checking this box, the meeting submitter is certifying that the team held a discussion regarding the individual's need for PASRR habilitative therapies.

For the "PASRR Evaluation" column, this field will be blank and disabled.

For the second column, and subsequent columns that are added as meetings are conducted, this checkbox must be checked.

Options for the drop-down for the specialized services for Sections A2800 through A3110

For the "PASRR Evaluation" column, Sections A2800 through A3110 are disabled. The LTC Online Portal will autopopulate all specialized services that were recommended on the PE.

For the new meeting column, Sections A2800 through A3110 will be enabled and required to be completed based on the PASRR condition identified in field A2400. Therefore:

- 1. If field A2400 displays "1. IDD only", then only NF and IDD specialized services are enabled and required (Sections A2800, A2900, and A3000)
- 2. If field A2400 displays "2. MI only", then only MI specialized services are enabled and required (Sections A3100 and A3110)
- 3. If field A2400 displays "3. IDD and MI", then all specialized services are enabled and required (Sections A2800, A2900, A3000, A3100, and A3110)

During the initial IDT meeting, the team must discuss each recommended specialized service, decide on a status, and select the agreed upon option in the new meeting column. Additional services that are not listed on the form can be added in field A3200 based on the team's recommendations.

Select the status agreed upon during the meeting **for each specialized service enabled** in A2800A through A3110 on the box in the new meeting column. Theseoptions include:

- Individual/LAR Refused -individual and or LAR refused these services at the time of the meeting
- 2. New the first time a specialized service is recommended
- Ongoing when a specialized service has already started and will be continued (used for Annual, Quarterly and LA Update meeting types only)
- 4. **Discontinued** when an ongoing specialized service (e.g. habilitative therapies, MI specialized services) will be stopped as agreed to by the team or when the individual no

- longer wants the specialized service (used for Annual, Quarterly and LA Update meeting types only)
- 5. **Item Received** when an individual has received DME items/wheelchair (used for Annual, Quarterly and LA Update meeting types only when DME items/wheelchair are received)
- 6. **Pending** should be used when:
 - a. Specialized services, or DME items/wheelchair have been requested but not started or received yet.
 - b. individuals who have applied but do not have Medicaid at the time of the meeting (Medicaid pending).
 - c. individuals will require alternate funding sources (other than Medicaid) to obtain specialized services.
- 7. Not Needed should be used when the team agrees that the specialized service, DME items, or customized manual wheelchair is not needed at the time of the meeting. This should also be used when the individual does not have Medicaid, or other funding sources have been discussed but none plan to be used.
- 8. **Completed** to be used when a NF specialized service/assessment has been completed or DME items or customized manual wheelchair have been received (only used for Annual, Quarterly and LA Update meeting types).

Discuss each specialized service the individual is eligible for that is documented on the PCSP form at every meeting. Each service must have a selection, or the form will not submit on the LTC Online Portal. The exception to this rule is an LA Update meeting with Reason Code option 3 through 8.

People who are:

- 1. Not Medicaid eligible
- 2. Medicaid pending
- 3. Age 20 or younger for IDD services or
- 4. Age 17 or younger for MI services

must still have specialized services discussed and results recorded in the respective comment section. Comments are required to explain when specialized services are anticipated to begin or whether alternate funding sources will be explored. Record the required comments in field "A3200 Nursing Facility Comments" or "A3300 Local Authority Comments" where services can be obtained outside of PASRR-provided services, and who will provide them. Use "6. Pending" as the option for this scenario.

If "4. Discontinued" or "7. Not Needed" are selected for any of these specialized services, then comments will be required in field "A3200 Nursing Facility Comments" or "A3300 Local Authority Comments" to explain these options.

Specialized services indicated on the PE that will not be provided but were auto-populated on the first column (1. PASRR Evaluation) of the Specialized Services Information section of the PCSP form should be marked as "7. Not Needed," and then comment added to explain the reason in field "A3200 Nursing Facility Comments" or "A3300 Local Authority Comments".

r each service, select the appropriate option from the drop-down l	list.		
	1. PASRR Evaluation	2. Meeting Type 1. Initial IDT/SPT	
. Individual/LAR Refused all Services			
в. Group Skills Training		7. Not Needed	
c. Individual Skills Training	и	7. Not Needed	
p. Intensive Case Management		7. Not Needed	
E. Medication Training (Group)		7. Not Needed	
F. Medication Training (Individual)	w	7. Not Needed	
g. Medication Training & Support Services (Group)	0	7. Not Needed	
н. Medication Training & Support Services (Individual)		7. Not Needed	
r. Psychiatric Diagnostic Examination	w	7. Not Needed	
p. Psychosocial Rehabilitative Services (Group)		7. Not Needed	
k. Psychosocial Rehabilitative Services (Individual)		7. Not Needed	
L. Routine Case Management	W W	7. Not Needed	
м. Skills Training & Development (Group)		7. Not Needed	
N. Skills Training & Development (Individual)	w .	7. Not Needed	

A2800. Nursing Facility Specialized services:

All services recommended on the PE must be discussed at the initial IDT/SPT Meeting. The submitter will then need to select a status for each of the specialized services from the box in the second column 2. Meeting Type/Date of Meeting.

- A. Individual/LAR Refused all Services
- B. Customized Manual Wheelchair (CMWC)
- C. Durable Medical Equipment (DME). (This row will be pre-filled with "Please SeeBelow" in the second column and subsequent columns.)
- D. Specialized Assessment Occupational Therapy (OT)
- E. Specialized Assessment Physical Therapy (PT)

- F. Specialized Assessment Speech Therapy (ST)
- G. Specialized Occupational Therapy (OT)
- H. Specialized Physical Therapy (PT)
- I. Specialized Speech Therapy (ST)

In the "PASRR Evaluation" column, Sections A2800 through A3110 are disabled. The LTC Online Portal will autopopulate all services that were indicated on the PE.

For the new meeting column, if the individual or LAR refused all specialized services, click on the "A. Individual/LAR Refused all Services" checkbox and all of the fields in the applicable section will be auto-populated with "1. Individual/LAR Refused".

A2900. Durable Medical Equipment (DME):

All services recommended on the PE must be discussed at the initial IDT/SPT Meeting. The submitter will then need to select a status for each of the specialized services on the field in the new meeting column 2. Meeting Type/Date of Meeting. For A2900, a status for all DME must also be entered based on the PE determination.

- A. Gait Trainer
- B. Orthotic Device
- C. Positioning Wedge
- D. Prosthetic Device
- E. Special Needs Car Seat or Travel Restraint
- F. Specialized or Treated Pressure-Reducing Support Surface Mattress
- G. Standing Board/Frame

A3000. IDD Specialized services:

All services recommended on the PE must be discussed at the initial IDT/SPT Meetingand the team's decision must be entered in this section. The submitter will then need to select a status for each of the specialized services on the field in the second column 2. Meeting Type/Date of Meeting.

- A. Individual/LAR Refused all Services
- B. Alternate Placement Services
- C. Behavioral Support
- D. Day Habilitation
- E. Employment Assistance
- F. Habilitation Coordination

- G. Independent Living Skills Training
- H. Service Coordination
- I. Supported Employment

A3100 MI Specialized services:

All specialized services recommended on the PE must be discussed at the initial IDT/SPT Meeting and the team's decision must be entered in this section. Individuals who are PASRR positive for MI only will not be eligible for NF or IDD services. Use the drop-down choice of "7. Not Needed" to enter a choice for each service the individual is not eligible to receive.

The submitter will need to indicate a status for each of the specialized services on the field in the second column 2. Meeting Type/Date of Meeting.

- A. Individual/LAR Refused all Services
- B. Group Skills Training
- C. Individual Skills Training
- D. Intensive Case Management
- E. Medication Training (Group)
- F. Medication Training (Individual)
- G. Medication Training & Support Services (Group)
- H. Medication Training & Support Services (Individual)
- I. Psychiatric Diagnostic Examination
- J. Psychosocial Rehabilitative Services (Group)
- K. Psychosocial Rehabilitative Services (Individual)
- L. Routine Case Management
- M. Skills Training & Development (Group)
- N. Skills Training & Development (Individual)

A comment should be added to field "A3200 Nursing Facility Comments" or "A3300 Local Authority Comments" for any additional services not listed in this section.

A3110 Additional MI Specialized services:

All services recommended on the PE must be discussed at the initial IDT/SPT Meeting and the team's decision must be entered in this section. The submitter must then select a status for each of the specialized services in the field of the second column "2. Meeting Type/Date of Meeting".

- A. Cognitive Processing Therapy
- B. Counseling Services (CBT Individual or Group)
- C. Crisis Intervention Services
- D. Peer Support
- E. Pharmacological Management
- F. Screening Brief Intervention and Referral to Treatment (SBIRT) Screening -Brief Intervention Not Provided
- G. Screening Brief Intervention and Referral to Treatment (SBIRT) Screening -Brief Intervention Provided

Comments

The comments fields are used to document any information that is pertinent information for specialized services or alternate placement. For example, if there willbe a delay in the initiation of specialized services, the information would be recorded in the applicable comments field. Users can enter up to 1000 alphanumeric characters into these comments fields.

A3200. Nursing Facility Comments

Comments will be required when:

- 1. Specialized services are indicated as "4. Discontinued" or "7. Not Needed".
- 2. If the individual or LAR did not attend the meeting ("3. No Did not attend", or "4. No –Declined").
- 3. A discussion was held to provide rehabilitative therapy services when the teamagreed to wait on habilitative therapy services.
- 4. Individuals who are Medicaid pending will begin specialized services.
- 5. An individual does not have Medicaid, does not meet the age criteria, or alternate funding sources will be explored and when specialized services are anticipated to begin.

A3300. Local Authority Comments

Comments will be required when:

- 1. Specialized services are indicated as "4. Discontinued" or "7. Not Needed".
- 2. If the individual or LAR did not attend the meeting ("3. No Did not attend", or "4. No Declined").
- 3. A discussion was held to provide rehabilitative therapy services when the team agreed to wait on habilitative therapy services.
- 4. Individuals who are Medicaid pending will begin services.

5. An individual does not have Medicaid, does not meet the age criteria, or alternate funding sources will be explored and when services are anticipated to begin.

If MI Specialized services are not listed on the PCSP form but are recommended by the LMHA/LBHA, it should also be documented in the comments field.

Local Authority Confirmation

An LA must confirm certain information from the IDT meeting on the PCSP form with a meeting type of Initial IDT/SPT or Annual IDT/SPT. The individual's PASRR determination (IDD, MI, or both) will determine whether the LIDDA, the LMHA/LBHA, or both will need to confirm the IDT meeting on the PCSP.

Please note that the non-Bexar County LA users will be required to confirm only one section (field A3400A or field A3500A) of the LA Confirmation Section on the PCSP form.

An LA must confirm:

- 1. Their attendance at the meeting (either in person or by phone).
- 2. The list of specialized services agreed to by the interdisciplinary team, including the individual or their LAR.

The LA should contact the NF to discuss making corrections to the form before they complete the confirmation section. The NF should be given seven calendar days to update the form. The LA can then confirm the meeting once the corrections have been made.

If, after seven calendar days, the corrections have not been made, the confirmation should proceed with "0. No" in field A3400B or A3500B.

LA-MI Specialized Services and Participation Confirmation

A representative of the LA will, within five business days after receiving an alert that the initial or annual IDT meeting has been submitted on the LTC Online Portal, confirm their participation in the meeting and the specialized services agreed upon. If the LA was not in attendance but should have been, the meeting is not a valid meeting and must be convened again.

If the LA attended the IDT meeting but does not agree with the documented specialized services, then the LA should contact the NF to request the necessary changes before submitting their IDT meeting confirmation. The LA should then wait for seven calendar days for the NF to revise the PCSP form. If corrections are not made, the LA can confirm their attendance and not agree with the list of specialized service and include a note in field A3400C or A3500C.

A3400. LA-MI Specialized Services and Participation Confirmation

This section will only be enabled for data entry by the LMHA/LBHA for initial andannual meeting types. If an individual is PASRR positive for MI, this section must becompleted.

A3400A. I am Confirming the MI section – Check this box if the LMHA/LBHA isconfirming this section.

A3400B. All MI Specialized Services selected were agreed to by the IDT – Indicate whether there was an agreement by all team members on the specializedservices that the individual will receive by selecting either "0. No" or "1. Yes".

A3400C. LA-MI Specialized Services Comments – This becomes a required field if "0. No" is selected in A3400B.

Selecting "0. No" in field A3400B means that specialized services were left off the form or added when they were not agreed to. Specialized services with a discrepancy should be listed by the LMHA/LBHA and explained in this field.

A3400D. LA-MI Signature date – LMHA/LBHA staff enters the date when theinformation on the PCSP form was confirmed.

A3400E. LA - MI Attendance Type – The LMHA/LBHA staff confirms attendance atthe meeting. The options are:

- 1. Yes Attended in person,
- 2. Yes Attended via phone, or
- 3. No Did not attend.

If the selection is "3. No - Did not attend", then field "A3400F LA-MI Participation Confirmation Comments" must be completed. The "3. No - Did not attend" option should only be selected if the LMHA/LBHA is a required meeting participant and was not invited to participate in the meeting. If the LMHA/LBHA was not in attendance but should have been, the meeting is not a valid IDT meeting and must be convened again.

A3400F. LA-MI Participation Confirmation Comments - This section is required if "3. No – Did not attend" was selected in field A3400E. Enter comments in this field to explain attendance issues or concerns, efforts made to reschedule a meeting when not in attendance, and other related issues.

There is a limit of 500 alphanumeric characters for confirmation comments.

LA-IDD Specialized services and Participation Confirmation

A3500. LA-IDD Specialized Services and Participation Confirmation

This section will only be enabled for data entry by the LIDDA for the initial and annualmeeting types. If an individual is PASRR positive for IDD, this section must be completed.

A3500A. I am Confirming the IDD section – Check this box if the LIDDA isconfirming this section.

A3500B. All IDD Specialized Services selected were agreed to by the IDT–Indicate whether there was an agreement by all team members on the specializedservices the individual will receive by selecting either "0. No" or "1. Yes".

A3500C. LA-IDD Specialized Services Comments – This becomes a required field if "0. No" is selected in A3500B.

Selecting "0. No" means that specialized services were left off the form or added when they weren't agreed to. Specialized services with a discrepancy should be listed by the LIDDA and explained in this field.

A3500D. LA-IDD Signature date – LIDDA staff enters the date when theinformation on the PCSP form was confirmed.

A3500E. LA - IDD Attendance Type – The LIDDA staff confirms attendance at themeeting. The options are:

- 1. Yes Attended in person
- 2. Yes Attended via phone
- 3. No Did not attend

If the selection is "3. No - Did not attend", then field "A3500F LA-IDD Participation Confirmation Comments" must be completed.

The "3. No - Did not attend" option should only be indicated if the LIDDA is a required meeting participant but was not invited to participate in the meeting. If the LIDDA was not in attendance but should have been, the meeting is not a valid meeting and must be convened again.

A3500F. LA-IDD Participation Confirmation Comments - This section is required if "3. No – Did not attend" was selected in field A3500E. Enter comments in this field to explain attendance issues or concerns, efforts made to reschedule a meeting whennot in attendance, and other related issues.

There is a limit of 500 alphanumeric characters.

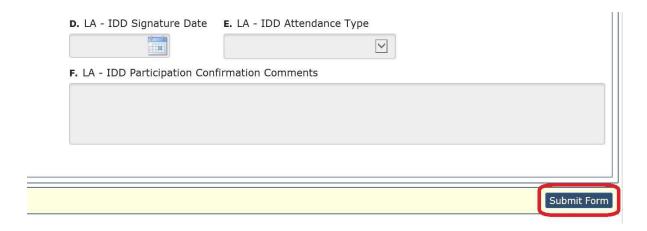
Form Submission on the Long-Term Care Online Portal

Submit Form Button

While completing the form on the LTC Online Portal, users have the option to save work on the PCSP form by clicking on the **Save as Draft** button and then returning tocomplete the form at a later time.

When clicking the Save as Draft button, users will immediately be redirected to the Drafts page where saved draft forms will be displayed on the list. A draft form will only be displayed on the Drafts page for 60 days. After 60 days, the draft forms are deleted and cannot be retrieved.

When the PCSP form has been completed and are ready to submit it on the LTC Online Portal, users click the Submit Form button to submit the PCSP.



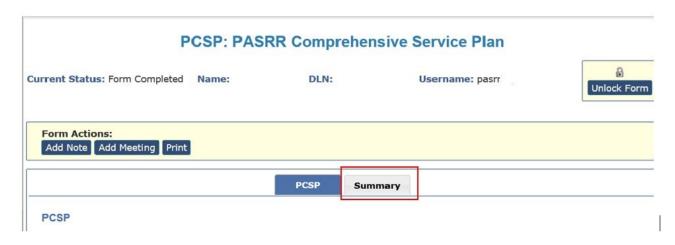
Users will see the following error message when a meeting is being entered on a new PCSP form initiated from the PASRR Evaluation (PE), and the associated PL1 is no longer valid:

"PL1 associated to the PE from which this form was initiated is no longer valid. PCSP form must be initiated from a PE with a valid PASRR Level 1 (PL1). The PASRR process must be started again by submitting a PL1, and associated PE and PCSP if applicable, if the individual is residing at the NF."

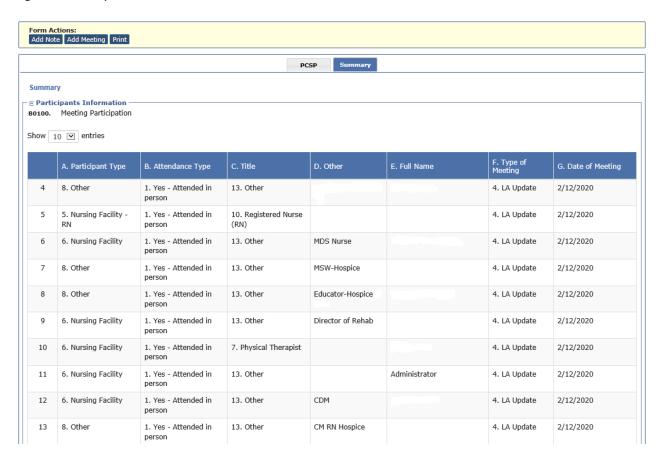
The submitter must correct any error messages received upon submission.

Summary Tab

The "Summary" tab was added to the PCSP form to provide a summary of all meetings submitted on a PCSP DLN. This tab is displayed only after the PCSP form issuccessfully submitted on the LTC Online Portal.



The summary tab includes information about the meeting participants, specialized services information, and comments from the LA and NF. This feature can show a full year's worth of meetings, specialized services, and how they have changed over the year.



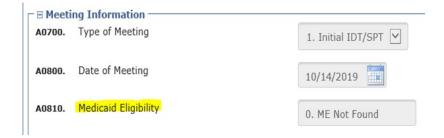
14	6. Nursing Facility	1. Yes - Attended in person	3. Licensed Clinical Social Worker (LCSW)		4. LA Update	2/12/2020
1	4. Legally Authorized Representative	1. Yes - Attended in person	13. Other	mother	1. Initial IDT/SPT	1/29/2020
2	2. LA - IDD	1. Yes - Attended in person	9. Qualified Mental Health Professional (QMHP)		1. Initial IDT/SPT	1/29/2020
3	3. LA - MI	1. Yes - Attended in person	9. Qualified Mental Health Professional (QMHP)		1. Initial IDT/SPT	1/29/2020
4	5. Nursing Facility - RN	1. Yes - Attended in person	10. Registered Nurse (RN)		1. Initial IDT/SPT	1/29/2020
5	6. Nursing Facility	1. Yes - Attended in person	13. Other		1. Initial IDT/SPT	1/29/2020

The Summary tab is read-only, and it will not be included when printing a meeting or a blank PDF Form.

Medicaid Eligibility Check

When any meeting type is submitted or updated on a PCSP form, TMHP will searchfor the individual's ME as of the date of the meeting. PCSP field A0810 documents the results of the ME determination.

The ME determination will be helpful to explain why PASRR specialized services cannot be provided if ME is not found or cannot be determined.



After the system determines what the ME status is, it will populate the PCSP Field A0810 with one of the following status:

- 1. 0. ME Not Found,
- 2. 1. ME Confirmed
- 3. 2. ME Undetermined.

The same ME determination will also be populated in the blue column headings on the "Summary" tab.



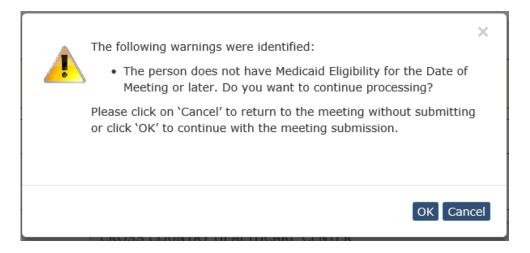
If the value in PCSP field A0180 is either "0. ME Not Found" or "2. ME Undetermined", then the selected PASRR specialized services may need to be delivered using a payer source other than Medicaid if available.

Medicaid Eligibility Confirmed

When ME is confirmed, it means the individual is Medicaid eligible at the time of the meeting and initiation of these services can move forward.

Medicaid Not Found

When ME is not found, it means the individual is not Medicaid eligible as of the meeting date. When a meeting is submitted or updated on a PCSP form and ME is not found, the system will display a large warning message showing the status.



Submission of the meeting on the PCSP forms is not impacted by the warning message. The submitter simply needs to click the **OK** button to proceed.

The submitter will then have the option to:

- 1. cancel the submission and return to the form to make edits, or
- 2. proceed with submitting the form.

A submitter may want to return to the form instead of continuing with the submission after receiving this warning message. Specialized services that were selected on the PCSP form might need to be modified to indicate other funding sources will need to be utilized or changed to "Pending" status or both.

Medicaid Eligibility Unable to be Determined

TMHP looks for the individual's Social Security Number or Date of Birth to match the Medicaid Number submitted on the PCSP against HHSC records. If it cannot verify thematch, it will give a warning message when the meeting on the PCSP form is submitted.



The following warnings were identified:

 Medicaid Eligibility is unable to be determined based on the Medicaid Number, SSN, and/or Date of Birth. Do you want to continue processing?

Please click on 'Cancel' to return to the meeting without submitting or click 'OK' to continue with the meeting submission.



×

The message means that ME cannot be determined on the date of the meeting or later (up to 60 days later depending on the submission date of the meeting on the PCSP form).

Specialized services selected on the PCSP might need to be modified to indicate other funding sources would have to be utilized and or changed to "Pending" status.

If the NF and LA, working together, are unable to determine the demographic error(s) causing this warning message, contact TMHP's LTC Helpdesk at 1-800-626- 4117, option 1

Common Errors on the PASRR Comprehensive Service Plan Form

The three most common mistakes made on the PCSP form are:

1. Submitting a quarterly SPT before the IDT.

LAs should check the LTC Online Portal using Form Status Inquiry to determine if there is an existing IDT meeting submitted on a PCSP form already in the LTC Online Portal within the previous 12 months.

LAs must not submit a Quarterly or LA Update meeting if no IDT meeting existsfor the individual at the current facility. Doing so will prevent the NF from submitting the IDT meeting on the LTC Online Portal and prevent the individual's MDS Long-Term Care Medicaid Information (LTCMI) from submitting due to lack of an IDT meeting.

The LA's first meeting submitted on the LTC Online Portal will be the Quarterlymeeting which is scheduled every three months after the initial or annual IDT/SPT team meeting initiated by the F.

2. Entering the wrong meeting date.

NFs can update the IDT meeting date:

- A. Within 30 calendar days from when the meeting was submitted or updated.
- B. Until the LA confirms the IDT meeting.

If an LA notices an error, they must contact the NF and ask to correct the issueprior to the LA confirming the IDT meeting. Once the LA has confirmed the IDT meeting, the NF cannot make updates to the IDT meeting information on the PCSP form.

3. Selecting the wrong status for PASRR specialized services information.

The NF for an IDT meeting, or the LA for a Quarterly or LA Update meeting, must select the appropriate status for each enabled specialized service listed in the Meeting Type column in Sections A2800 through A3110 which reflects the most current status for that service.

Coding Conventions

When completing any text box on the PCSP, the following characters are allowed: 0-9, A-Z, a-z, and @'/+, -. If users attempt to enter anything other than the acceptedcharacters, the following error message will be received:

"[field name] contains invalid alphanumeric characters. Alphanumeric characters are limited to: 0-9, A-Z, a-z, and the following characters @'/+, _-."

Users will receive the error message when invalid characters are used in the following text boxes:

- 1. A1100. Other
- 2. A1400. Vendor No.
- 3. A2500D. Other
- 4. A2500E. Full Name
- 5. A3200. Nursing Facility Comments
- A3300. Local Authority Comments
- 7. A3400C. LA MI Specialized Services Comments
- 8. A3400F. LA MI Participation Confirmation Comments
- 9. A3500C. LA IDD Specialized Services Comments
- 10. A3500F. LA IDD Participation Confirmation Comments