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Preadmission Screening and Resident Review (PASRR) Mailbox Top Two FAQs

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Agenda

Part 1: Nursing Facility
Specialized Services (NFSS)

Part 2: PASRR Admission Types

Session Objectives



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At the conclusion of this session participants will gain an understanding of:

- PASRR NFSS Customized Manual Wheel Chair (CMWC), Durable Medical Equipment (DME), and Habilitative Therapy) Requests
- PASRR Admission Processes



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NFSS Long-Term Care (LTC) Online Portal Requests

Overview of NFSS LTC Online Portal Screen

Doug Odle, Program Specialist

Katy Krueger, Program Specialist

NFSS

This section will:

- Provide an overview of the NFSS form for submitting PASRR specialized services authorization requests.
- Assist users navigating through the LTC online portal quickly and efficiently to ensure a smooth path to specialized services authorization.



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Where to Find NFSS Screens

Must have a login and password to the LTC online portal.

TMHP TEXAS MEDICAID & HEALTHCARE PARTNERSHIP A STATE MEDICAID CONTRACTOR Home :: TMHP.com :: My Account

Search ▾ Reports Printable Forms Alerts

Power Search

Search Criteria

Form

Type of Form From Date To Date

DLN

Client

Last Name
First Name
SSN
Medicaid Number
Medicare Number
Date of Birth

Vendor

Provider Number
Vendor Number
Provider User
Internal User
NPI

Additional Criteria

Status	Type of Service	Requested DME Item	Therapy Authorization Type
<input type="checkbox"/> AI Check Inactive	<input type="checkbox"/> CMWC Assessment Only	<input type="checkbox"/> Gait Trainer	<input type="checkbox"/> Assessment Only
<input type="checkbox"/> AI Confirmed	<input type="checkbox"/> CMWC	<input type="checkbox"/> Orthotic Device	<input type="checkbox"/> New
<input type="checkbox"/> AI Pending	<input type="checkbox"/> DME Assessment Only	<input type="checkbox"/> Positioning Wedge	<input type="checkbox"/> Restart
<input type="checkbox"/> Denial Upheld	<input type="checkbox"/> DME	<input type="checkbox"/> Prosthetic Device	<input type="checkbox"/> Recertification




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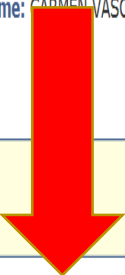
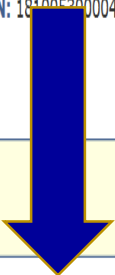
Two Separate Requests – Assessments and NFSS Services

Authorization Request for PASRR NF Specialized Services (NFSS)

Current Status: AI Confirmed Name: CARMEN VASQUEZ DLN: 181005200004 Username: gilbert.estrada.tx

 [Return to Search Results](#)

Form Actions:
[Print](#) [Add Note](#)

Resident/NF	CMWC/DME Assessment	CMWC Request	Gait Trainer	Orthotic Device	Car Seat/Travel Restraint	Mattress	Positioning Wedge	
Prosthetic Device	Standing Board/Frame	OT Assessment	OT Service	PT Assessment	PT Service	ST Assessment	ST Service	Auth Summary



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PTID History Notes

The PASRR Transaction Identifier (PTID) notes are located in the lower part of the resident's history section.

- Documents activities;
- Allows the Nursing Facility (NF) and PASRR unit to communicate.

Up to 10 files can be uploaded. Files cannot exceed 10mb per file.
Supported file types: PDF, Image (JPG, TIF, PNG), MS Word, MS Excel, and RTF.

Successful Attachments	
<input checked="" type="checkbox"/> Attachment_32527_06292018.PDF	Delete
<input checked="" type="checkbox"/> Attachment_32525_06292018.PDF	Delete
<input checked="" type="checkbox"/> Attachment_32524_06292018.PDF	Delete

PTID Actions:
[Add Note](#)

Authorization

C6000. CMWC Request

A. PTID	B. Status
18180355594	Pending State Review

D. Reason Code



- 1. Five years has not elapsed since the date of purchase of the previous it
- 2. HHSC did not receive information previously requested from the nursing for the service or item
- 3. The therapist's assessment indicates the resident will not benefit from a time
- 4. Other

E. If Other



PTID History Notes - Continued

PTID History

Pending Submission	<i>Changed by System on 6/29/2018 2:28:47 AM</i>
6/29/2018 2:31:02 AM	System : Internal: Attachment_32524_06292018.PDF added as an attachment.
6/29/2018 2:31:02 AM	System : External: Attachment_32524_06292018.PDF added as an attachment.
6/29/2018 2:31:07 AM	System : Internal: Attachment_32525_06292018.PDF added as an attachment.
6/29/2018 2:31:07 AM	System : External: Attachment_32525_06292018.PDF added as an attachment.
6/29/2018 2:31:11 AM	System : Internal: Attachment_32527_06292018.PDF added as an attachment.
6/29/2018 2:31:11 AM	System : External: Attachment_32527_06292018.PDF added as an attachment.
PTID Submitted	<i>Changed by System on 6/29/2018 2:32:11 AM</i>
6/29/2018 2:32:11 AM	System : Internal: PTID entered workflow. 
6/29/2018 2:32:11 AM	System : External: PTID entered workflow.
Pending State Review	<i>Changed by System on 6/29/2018 2:32:31 AM</i>
6/29/2018 2:32:31 AM	System : Internal: The Service has been sent for State review. 
6/29/2018 2:32:31 AM	System : External: The Service has been sent for State review.



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Timers and Impact

- Pending Denial = Request for Additional Information
- OT, PT, ST Therapies = 7 days
- CMWC/DME = 14 days
- No response or fail to set the TMHP LTC **online portal back to "Pending State Review"** = System Denial
- Resubmit Request



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Habilitative Therapies Specialized Services

Habilitative Therapies Specialized Services Requests

Habilitative Therapies Specialized Services include:

- Occupational Therapy (OT)
- Physical Therapy (PT)
- Speech Therapy (ST)



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“Assessment Only” Requests

NFs can submit an “assessment only” on the NFSS form in the following situations:

- Determination by a therapist that the individual does not need habilitative therapies.
- The interdisciplinary team (IDT) cannot come to an agreement.



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New Assessments

- (Submit initial assessment) –An initial therapy assessment completed by the therapist is required. The service request must include a treatment plan. **A physician's signature is required.**
- Signature sheet is required on all new submissions.



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Re-Certifications

- Submitted only when there is no change to the amount, duration, or frequency of the therapy service.
- An updated assessment and treatment plan completed by the therapist is not required if the frequency, duration, and intensity remain the same for up to one year.
- Recertifications should only be submitted if there has not been a break in service over 29 days.



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Restart

(When and Why)

Submitted when either of these three situations occur in order to restart therapy services:

- If an individual is discharged from the facility (for any amount of time) and their daily care ends;
- If the frequency or intensity have changed an updated assessment and therapy plan is required; or
- There has been a break in therapy services lasting longer than 30 days.



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10 Most Common Reasons for NFSS Denials

1. Submitting old or unnecessary forms not part of the NFSS form request.
2. Submitting durable medical equipment items costing less than \$1,000.
3. Not including the hospice provider in the interdisciplinary team before requesting specialized services for a hospice recipient.
4. **Not adding the resident's diagnoses at Section C0200, under the CMWC Request tab.**
5. Wrong date order on signature sheets.



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10 Most Common Reasons for NFSS Denials

6. Not setting PASRR PTID back to the “Pending State Review” status to correct the issue.
7. Not attaching signature pages.
8. Not reading the PTID history notes and providing what is being requested.
9. **The signature page’s contents not matching what is entered in the LTC online portal (dates and signatures).**
10. Wrong therapy type (New, Recertification, Restart).



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PASRR Customized Manual Wheelchair Authorization Requests

Purpose

- The purpose of this section is to provide recommendations for submitting PASRR CMWC requests.
- The benefits of using the recommendations described in this presentation will ensure a more expedient and efficient authorization process for all stakeholders.



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NFSS Form Basics

- Ensure applicable fields within the CMWC/DME Assessment and CMWC tabs are completed in a manner that justifies medical necessity.
- All authorization requests that do not include all information needed to justify medical necessity will be subject to an additional medical review resulting in more overall processing time.



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NFSS Form Basics

- PASRR reviewers may request additional information as needed by **setting the status to “Pending Denial”** and commenting in the PASRR PTID history with details regarding what is needed.
- When responding to additional information requests the NF staff must set the status of the request **back to “Pending State Review”** after submitting the requested information.
- Failure to set the request back to **“Pending State Review”** will result in a system generated denial.




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Attachments

Upload Attachments

Required Document

 [CMWC - Supplier Acknowledgement and Signature page](#)


 [CMWC - Receipt Certification](#)


[Click here to Upload Documents](#)


Up to 10 files can be uploaded. Files cannot exceed 10mb per file.

Supported file types: PDF, Image (JPG, TIF, PNG), MS Word, MS Excel, and RTF.

Successful Attachments

 [..._NF receipt.pdf](#)

 [page 6 of catalog.pdf](#)

 [..._wc new.pdf](#)



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Attachments

- Upload only the documents that are required for the submission.
- The Intellectual and Developmental Disability (IDD) Services PASRR unit or Texas Medicaid and Healthcare Partnership (TMHP) will not accept faxed documents with the watermark **“For Reference Only”**.
- To avoid duplicate submissions, only upload a document once to the LTC online portal and avoid duplicate submissions.
- Check **“Successful Attachments”** and **“PTID History”**.



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Attachments

- PASRR Reviewers may request other items in specialized circumstances.
- PASRR Reviewers will provide specific instructions in the PTID History notes when additional attachments are required.
- Examples include but are not limited to:
 - Documentation needed for further Medical Review when required.
 - Photos of an existing CMWC or DME.
 - Signature verifications.



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Prices Lists & Catalog Pages

- The DME manufacturer's catalog pages, price lists, or order forms are required to verify the prices entered into the NFSS form are equal to the MSRP or less.
- The components, items, and prices are entered in the Itemized MSRP Quote section of the CMWC Request tab.
- **It is a requirement for NF's to attach catalog pages for all CMWC submissions when available.**
- A compilation of items on one price list or order form is only acceptable when the manufacturer does not have an on-line catalog.



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MSRP Attestation Letter

MSRP Attestation Letters are required from the DME supplier when:

- A catalog page is not available and an itemized price list has to be compiled by the DME Supplier; or
- A catalog page is available but does not have Manufacturer's Suggested Retail Price (MSRP) pricing information included in the catalog.
- **Ensure the resident's PL1 Document Locator Number (DLN) is included on any information from the DME supplier.**



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MSRP Attestation Letter

- The body of the MSRP Attestation Letter should only have a statement attesting all prices in the separately attached catalog page/order form/price list are reflective of MSRP pricing.
- Do not include item descriptions, pricing, and quantities in the MSRP attestation letter.



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LTC Online Portal Entry and MSRP Documentation Reconciliation

- PASRR Reviewers are not at liberty to guess what wheelchair components and accessories identified within any attached documentation match the wheelchair components and accessories listed in Section C1900 at the CMWC/DME request tab.
- All items should be easily identifiable within the documentation and in Section C1900 of the NFSS CMWC/DME tab.



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LTC Online Portal Entry and MSRP Documentation Reconciliation

- All NFSS form entries should include the applicable Healthcare Common Procedure Coding System (HCPCS) codes.
- Each item in the catalog/order form should be clearly labeled (item 1,2, etc.) to the corresponding row of itemized MSRP section of the NFSS (Section C1900).
- Each item should be entered in the same sequential order in the LTC online portal as it appears in the attached documentation.



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LTC Online Portal Entry and MSRP Order Form Reconciliation

- Providers can over-ride the text in the rows under Section C1900 column entitled **“D. Description of Item”** row in order to ensure the catalog description and the LTC online portal match.
- Descriptions of **“W/C Component – Accessory NOS”** will result in a **“Pending Denial”** status and will require correction.



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B. Item No.	C. HCPCS Code	D. Description of Item	E. Item Price*
21	K0108 <input type="text"/>	W/C COMPONENT-ACCESSORY NOS	\$ 25.00
22	K0108 <input type="text"/>	W/C COMPONENT-ACCESSORY NOS	\$ 25.00

Rolling up Items

- Section C1900 of the NFSS Form is limited to 22 rows, so it may be **necessary to “roll up” several items in one row for CMWC’s that involve extensive modifications.**
- It is important to clearly identify all rolled up items in the LTC online portal and on the catalog order form **to avoid “pending denial” and “denied” statuses.**



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Rolling up Items

Label all rolled-up items appropriately on the catalog like the below example:

CATALYST 5 TTL

All items on this page are rolled up together in Item 12 on the NFSS portal with a QTY of 1.

Accessories

Item	Description	Price
<input checked="" type="checkbox"/>	Composite Side Guards: 4000s Part:1	\$140
<input type="checkbox"/>	Anti-Tip	
<input checked="" type="checkbox"/>	Rear Anti-Tip: 10001 Part:2	\$140
<input type="checkbox"/>	Positioning Belt	
<input checked="" type="checkbox"/>	1 1/2" Padded Auto Buckle: 1000s Part:3	\$155
<input type="checkbox"/>	2" Airline Buckle: 1000s	\$110
<input type="checkbox"/>	Bodypoint Eye/Ear - Panic Stabilizer: 1000s	\$183
<input type="checkbox"/>	Bodypoint Belt Mounting Kit	\$105
<input type="checkbox"/>	Seat Pan	
<input checked="" type="checkbox"/>	Removable Aluminum Seat Pan: 10001	\$245

Item	Description	Price
<input type="checkbox"/>	Tool Kit	\$45
<input checked="" type="checkbox"/>	Removable Underseat Pouch Part:4	\$50
<input type="checkbox"/>	Pediatric KI Mobility Backpack New!	\$50
<input checked="" type="checkbox"/>	KI Mobility Backpack Part:5	\$65
<input checked="" type="checkbox"/>	Luggage Carrier Part:6	\$85
<input type="checkbox"/>	Black Neoprene Impact Guards	\$85
<input type="checkbox"/>	Clear Spoke Guards: 4000s	\$115
<input checked="" type="checkbox"/>	Black Spoke Guards: 4000s Part:7	\$115
<input type="checkbox"/>	Cane and Crutch Holder	\$195
<input checked="" type="checkbox"/>	Pole Part:8	\$265
<input type="checkbox"/>	O ₂ Holder	
<input type="checkbox"/>	O ₂ Holder: 1000s	\$295



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Rolling up Items


Modify the description field within the NFSS form to identify that the row contains multiple items.



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Itemized Manufacturer's Suggested Retail Price (MSRP) Quote

C1900. Itemized Price Quote A. Number of Items to Add

B. Item No.	C. HCPCS Code	D. Description of Item	E. Item Price*	F. Quantity	G. Total Price	H. Approved Price
12	K0108 	Accessories - Multiple Items - See Catalog Form	\$ 1015.00	1	\$ 1015.00	\$ <input type="text"/>

Alerts

- HHSC PASRR Unit employees use the Create Alert page to send alerts to NFs when an NF needs to take action by a specific deadline.
- The alerts screen should be accessed on a daily basis by the NF and Local Authority (LA) on the LTC Online Portal to meet deadlines associated with the Alert.
- The alert list only contains alerts for your Vendor/Provider numbers. Alerts are shown for the last 30 days from the current date. Alerts older than 30 days from the current date are not available.



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Contact TMHP for NFSS

Call TMHP at 800-626-4117, Option 1 for:

- NFSS Form Submission and Form Status
- Assistance in submitting attachments to an NFSS form
- Claim Forms
- Claim Submissions
- TMHP Website: www.tmhp.com
- LTC User Guide for PASRR: <https://www.tmhp.com/sites/default/files/file-library/ltc/LTC-PASRR-user-guide.pdf>



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Contact HHS IDD PASRR for NFSS

Email pasrr.support@hhsc.state.tx.us
for assistance with:

- Locating information to complete the NFSS Form.
- Requests that are in “Pending Denial” status and the notes in the PTID History written by the PASRR Reviewer are unclear on how to proceed.



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PASRR Admission Processes

Valerie Krueger, PASRR Specialist

Admission Processes

There are four types of PASRR admission processes:

- Negative
- Exempted
- Expedited
- Preadmission

Note: The type of admission process used by the Referring Entity (RE) depends on where the person is residing at the time of the referral.



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Negative Admission

All REs may use the negative admission process, if applicable:

- Negative PASRR Eligibility – if the PL1 screening is negative (all fields in **Section C** are all “No” as there is no suspicion of MI, ID or DD/RC), then the RE sends the PL1 to the admitting NF with the person.
- Section F0100 of the PL1 will be checked as 0. No.
- Section F0200 of the PL1 will be checked 0. Not Expedited Admission.



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Section F

<p>F0100. Exempted Hospital Discharge Has a physician certified that individual is likely to require less than 30 days of NF services? (For individuals being admitted from acute care in the hospital)</p>		0. No 1. Yes
<p>F0200. Expedited Admission Does this individual meet any of the following categories for an expedited admission into the nursing facility? (Please select one category below)</p> <ul style="list-style-type: none">0. Not Expedited Admission1. Convalescent Care: Individual is admitted from an acute care hospital to an NF for convalescent care with an acute physical illness or injury which required hospitalization and is expected to remain in the NF for greater than 30 days.2. Terminally Ill: Individual has a medical prognosis that his or her life expectancy is 6 months or less if the illness runs its normal course. An individual's medical prognosis is documented by a physician's certification, which is kept in the individual's medical record maintained by the nursing facility.3. Severe Physical Illness: An illness resulting in ventilator dependence or diagnosis such as chronic obstructive pulmonary disease, Parkinson's disease, Huntington's disease, amyotrophic lateral sclerosis, congestive heart failure, which result in a level of impairment so severe that the individual could not be expected to benefit from specialized services.4. Delirium: Provisional admission pending further assessment in case of delirium where an accurate diagnosis cannot be made until the delirium clears.5. Emergency Protective Services: Provisional admission pending further assessment in emergency situations requiring protective services, with placement in the nursing facility not to exceed 7 days.6. Respite: Very brief and finite stay of up to a fixed number of days to provide respite to in-home caregivers to whom the individual with MI or ID is expected to return following the brief NF stay.7. Coma: Severe illness or injury resulting in inability to respond to external communication or stimuli, such as coma or functioning at brain stem level.		



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Exempted Hospital Discharge

Acute Care Hospitals only:

- This type of admission occurs when a physician has certified that a person, who is being discharged from an acute care hospital, is likely to require less than 30 days of NF services.
- **The physician's certification is not on the PL1 but recorded in the medical records that accompany the person to the NF.**



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Expedited Admission

Acute Care Hospitals and
Nursing Facilities only

This type of admission occurs when a person meets the criteria for one of the following categories:

- Convalescent Care
- Terminally Ill
- Severe Physical Illness
- Delirium
- Emergency Protective Services
- Respite
- Coma



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Preadmission

Any admission from the community that is not expedited or exempted (i.e.: coming from a psychiatric hospital (includes a psychiatric unit within an acute care hospital), home, hospice, group home, assisted living, jail, etc.):

- Not for persons coming from Acute Care Hospitals or Nursing Facilities
- Section F0100 of the PL1 will be checked as 0. No
- Section F0200 of the PL1 will be checked 0. Not Expedited Admission



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Preadmission – Positive PL1 - 1 of 2

If the PL1 screening is positive:

- The RE faxes PL1 to local authority (LA). This starts the 72-hour timer for the LA to meet face to face with the individual.
- The LA submits the PL1 into the Long-Term Care (LTC) Online Portal.

Note: LA includes the local intellectual and developmental disability authority (LIDDA), local mental health authority (LMHA) and local behavioral health authority (LBHA).



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Preadmission – Positive PL1 – 2 of 2

- The LA completes and submits the PASRR Evaluation (PE) into the THMP LTC online portal within seven days.
- The NF reviews PE and certifies on **the PL1 if they are “Able” or “Unable”** to serve individual before the individual is admitted.



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Medical Necessity and Preadmission PEs - 1 of 2

Medical Necessity (MN) Determination Process for Preadmission PEs:

- After PE is entered, the LA must check after submission to confirm MN was approved.
- When reviewing the PE, the NF should also check the history section to see if MN is approved or “Pending Review”.



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Medical Necessity and Preadmission PEs – 2 of 2

- If the criteria is met, then the status of PE is set to “MN Approved”.
- If “Pending Review,” more medical information may need to be provided for the MN to be approved.
- If the MN is denied, then the LA may complete a new PE if more information **regarding the person’s medical condition** is provided.
- If more medical information is not available to prove the MN, then a NF is not the right placement for this person.



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Preadmission from one LA Service area to Another- 1 of 3

LA1 Process and Requirements:

- Referring entity (RE) completes and faxes PL1 to LA1;
- LA1 submits PL1 into the LTC online portal ;
- LA1 completes face to face visit within 72 hours of receipt of PL1 and obtains a signed consent form to share documents with LA2;



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Preadmissions from One LA Service area to Another – 2 of 3

LA1 Process and Requirements continued:

- LA1 completes and submits the PE within seven calendar days of receipt of PL1;
- NF has ability to view **LA1's** PL1 and PE on the LTC online portal;
- If PE is positive and MN is approved, NF certifies ability to serve and admits person; and
- LA1 sends copies of submitted PL1 and PE to LA2.



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Preadmissions from One LA Service area to Another – 3 of 3

LA2 Process and Requirements after receiving PL1 and PE from LA1:

- Revise assessment and signature dates on PL1 and submits PL1 on the LTC online portal;
- Completes face to face visit within 72 hours of receipt of PL1;
- Completes and submits a new PE on the LTC online portal within seven calendar days of receipt of PL1; and
- If PE is positive, the NF certifies ability to serve on the PL1.



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Types of Calls to Refer to TMHP

Call TMHP at 800-626-4117, Option 1, about the following:

- NF forms completion – including PASRR Level 1 Screening Form, PCSP, and NFSS form.
- LA forms completion – including PASRR Level 1 Screening Form, PE, and PCSP.
- Rejection codes on the forms and PTIDs.
- Management of the Provider Action Required status.
- If the Medicaid, Social Security, or Medicare **number and the name match the person's** Medicaid ID card and the form is set to status ID Invalid, call TMHP to see what their options are regarding form resubmittal.



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Types of Calls to Refer to TMHP

- PASRR Level 1 Screening Form, PE, PCSP, and NFSS form submission error messages, and the NFSS PTID and PE PTID error messages.
- PASRR Level 1 Screening Form, PASRR Evaluation, PCSP, and NFSS status questions.
- Call TMHP at 800-626-4117, Option 2, about the following:
 - ▶ MN Determination on PE
- Call TMHP at 800-626-4117, Option 3, about the following:
 - ▶ TMHP LTC Online Portal and TexMedConnect account setup



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Types of Emails to Refer to the HHSC PASRR Unit – 1 of 2

Email PASRR.Support@hhsc.state.tx.us about the following:

- Assistance or cooperation from an RE, NF, LIDDA or LMHA/LBHA
- Assistance with locating information to complete and submit the PL1, PE, PCSP and NFSS forms
- Assistance locating forms, people residing in or entering an NF, LIDDAs, LMHA/LBHAs, or additional training resources



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Types of Emails to Refer to the HHSC PASRR Unit – 2 of 2

- Policy guidance on PASRR processes, specialized services and therapist assessments
- Questions specifically related to MI/ID/DD or related conditions

For additional learning opportunities, information, and forms:

<https://www.hhs.texas.gov/doing-business-hhs/provider-portals/long-term-care-providers/resources/preadmission-screening-resident-review-pasrr>



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PASRR Support Tips – 1 of 2

When sending an email to the PASRR mailbox, please keep in mind the following:

- Include as much detail as possible.
- Send the DLN of the PASRR form(s) rather than names, SSN, etc.
- Do not send an encrypted email – send the DLN so there is no need for an encrypted email.
- Include your contact information.



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PASRR Support Tips – 2 of 2

- Do not copy other HHSC staff, mailboxes, or other staff on your email.
- Do not send duplicative emails.
- If your question is about an error message or an error code you have received, include a screen shot.
- If you are having a TMHP LTC online portal issue, call TMHP first. Only contact the PASRR Unit if they are unable to assist you and include in the email: the date, time, name of person you talked to and the case number TMHP assigned you.

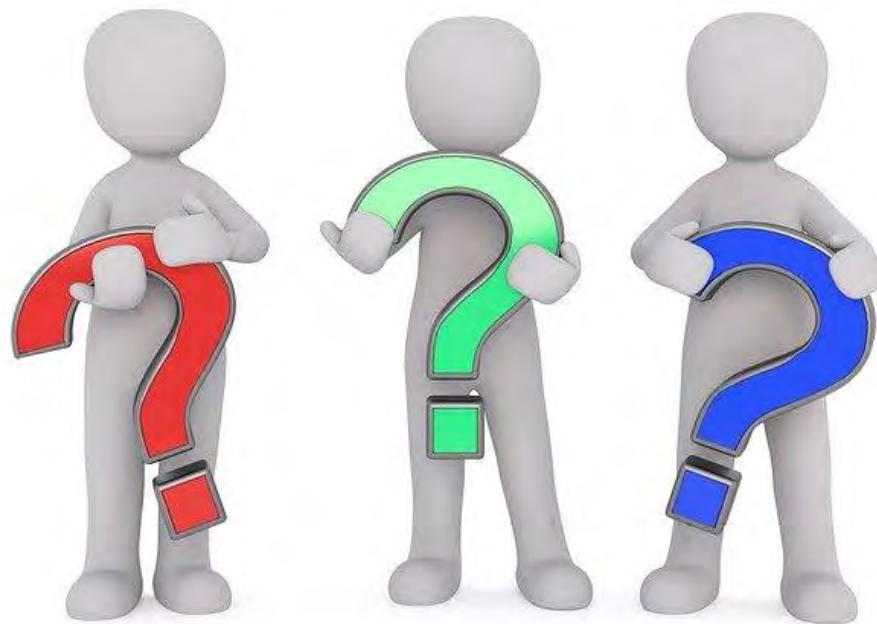


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Questions



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Thank you

HHSC PASRR Unit