



# PASRR: All About NF Specialized Services 2016

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Presented by Cathy Belliveau, PASRR QM/Training Lead

Sponsored by *SIMPLELTC™*



## Session Objectives

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At the conclusion of this session participants will:

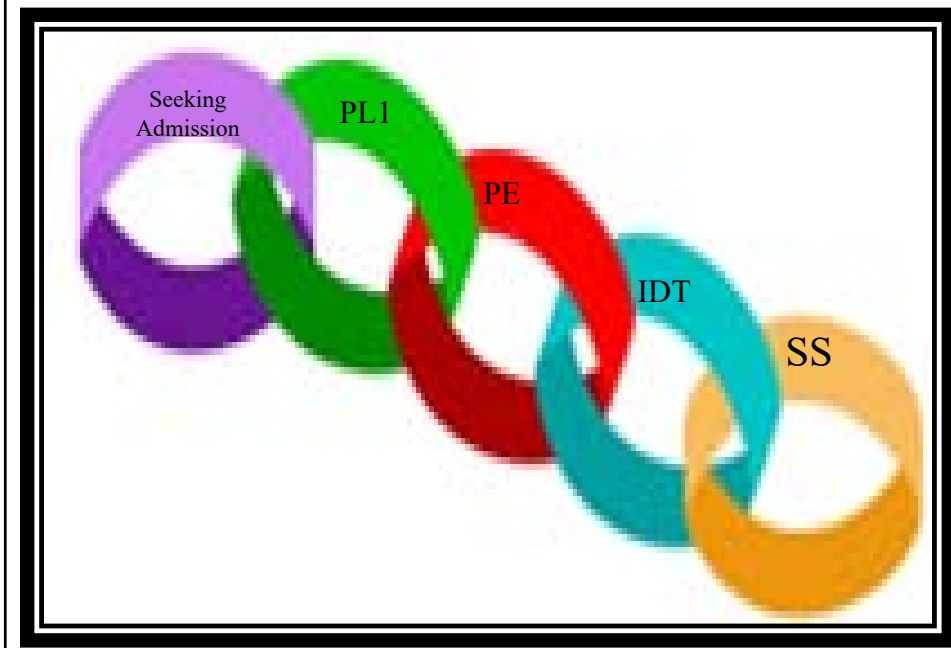
- be familiar with PASRR specialized services provided by the NF and understand the difference between rehabilitation and habilitation services;
- know the process and required forms for prior authorization and understand how to bill for PASRR specialized services; and
- be familiar with the rules and requirements related to PASRR specialized services.



## PASRR's Three Goals

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1. To identify individuals with Mental Illness (MI), Intellectual Disability (ID) or Developmental Disability (DD)/Related Conditions (RC) (this includes adults and children). The PL1 and the PE are used to accomplish this goal.
2. To ensure they are placed appropriately, whether in the community or in a Nursing Facility (NF). There should be an on-going discussion about the appropriate placement for the individual.
3. To ensure individuals receive the services they require for their MI or IDD. Services should assist the individual to reach and maintain the highest quality of life possible.



## Who Qualifies for PASRR SS?

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Individuals who qualify for PASRR Specialized Services have a diagnosis of mental illness; an intellectual disability with onset before age 18 or developmental disability (related condition) with onset before age 22; and

- reside in a Medicaid-certified NF
- have a confirmed PARR Evaluation (PE);
- receive Medicaid; and
- are 21 years of age and older.





## How PASRR SS are Recommended/Recorded

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Determining the PASRR specialized services the individual needs or could benefit from starts when the individual is considered for NF admission and is an on-going process that starts when:

- A Positive PL1 is submitted.
  
- A PE is conducted and is positive.
  
- Areas of need are identified from a review of records and visits with the individual and family members.
  
- Recommended services are recorded on the PE.

Page 8



## How PASRR SS are Recommended/Recorded Continued

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- An IDT meeting is held to discuss the recommended services identified on the PE.
  
- Additional services may be discussed including the need for assessments.

Page 9



## How PASRR SS are Recommended/Recorded Continued

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- An IDT is required at least annually.
- Significant changes may require additional meetings to add, modify or remove services:
  - Individual has a serious health decline and services previously agreed to may need to be modified or deleted.
  - Individual previously refused specialized services and now wants to receive them.
  - Individual wants to move to a community setting and Alternate Placement services provided by the LA will need to be added.
  - Individual becomes eligible for Medicaid or turns 21.

Page 10



## Payor Source and SS/IDT

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- The IDT should still be held for individuals without Medicaid (Private Pay), are Medicare only, who are pending Medicaid and for individuals under the age of 21.
- The IDT team should offer services if individuals/LAR are willing to pay for PASRR services out of pocket.
- Document that the individual is PASRR positive and that PASRR specialized services will be reviewed if the individual becomes eligible for Medicaid or turns 21.

Page 11



## SS Are Identified and Agreed on Now What?

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- The final recommendations of the IDT are submitted into the LTC portal within 3 business days after the date of the meeting.
  
- An alert will be sent to the LIDDA/LMHA to confirm the services and their attendance at the meeting.
  
- All services agreed on at the IDT must be initiated within 30 days from the date of the IDT meeting.



## SS Are Identified and Agreed on Now What?

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What happens if you back-date the day of the IDT meeting?

- Entering a date on G0200 “Date of IDT Meeting” months earlier than the day you submit the IDT meeting into the portal can cause issues with compliance with the initiation of services:

Example: If you enter an IDT for a meeting you held in April and submit it into the portal in August, you may be out of compliance with the rule to initiate specialized services within 30 days from the date of the IDT meeting.



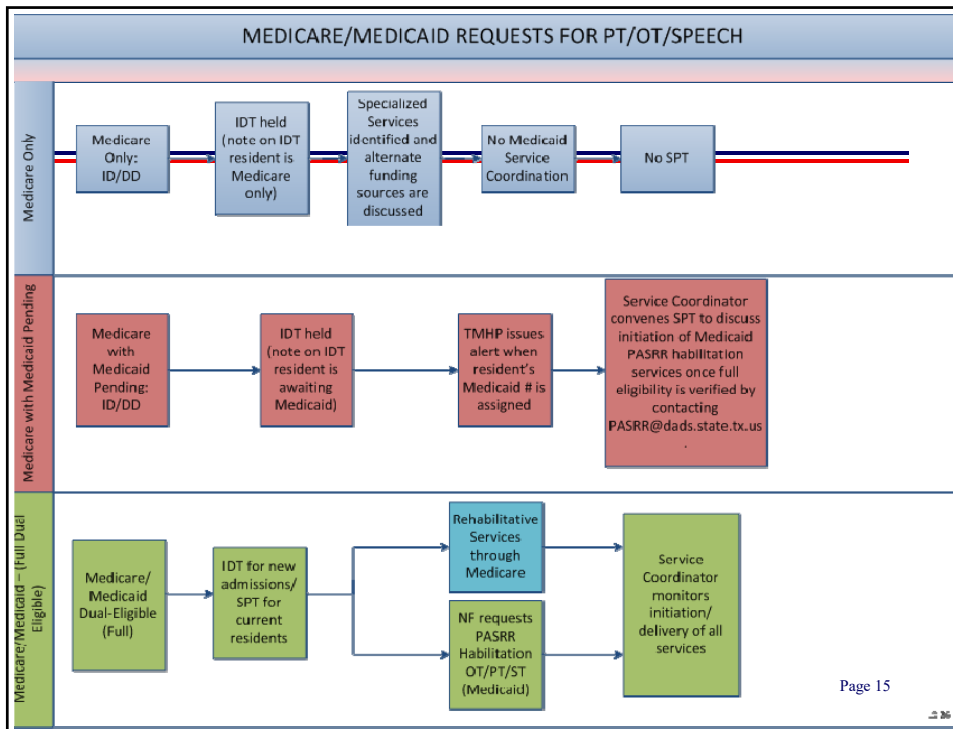
## SS Are Identified and Agreed on Now What Continued.

What happens if you delay the submission of the IDT into the portal?

- ❑ LAs can only confirm the IDT up to 60 days from the date of the meeting.

Example: If you held the meeting in April and in August you enter the IDT into the portal, the LA cannot confirm the meeting and the IDT is invalid.

**Important Note: Conduct the IDT meeting and enter it promptly.**







## Managed Care Organizations and PASRR

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Managed Care Organizations (MCOs) do not approve any PASRR Specialized Services Requests. PASRR is carved out of the MCO approval process. All PASRR Specialized Service requests are approved by DADS.



## Rehabilitative/Habilitative

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- PASRR Specialized Services should assist the individual to reach and maintain the highest quality of life possible.
  
- PASRR funded services are habilitative services as opposed to rehabilitative services.
  
- Habilitative services should be more intense and for longer duration than rehabilitative services.



## Rehabilitative/Habilitative

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- Habilitation Services are health care services that help a person keep, learn or improve skills and functioning for daily living.
- Habilitative therapies can be approved for up to 6 months of therapy per authorization request.

We will now review the chart showing differences between Rehabilitative and Habilitative services.



## More on Habilitative PASRR Services

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- You can provide both rehabilitative and habilitative services at the same time.
- The IDT meeting is where the discussion of habilitative services should be documented as well as in your comprehensive care plan.



## Requesting CMWC/DME Forms 1017/1018

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To request a customized manual wheelchair or PASRR approved DMEs, providers must complete forms 1017 and/or 1018.

For 1017 (DME): <http://www.dads.state.tx.us/forms/1017/>

For 1018(CMWC): <http://www.dads.state.tx.us/forms/1018/>

Page 20



## Form 1018 - Customized Manual Wheelchair

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Customized Manual Wheelchair - CMWC



Page 21



## What makes a CMWC a specialized service?

- The resident is measured for a customized manual wheelchair, to meet specific individualized medical needs and anatomic measurements.
- It is designed to compensate for the resident's physical limitations and allow for maximum independence.
- Only the recipient can use the equipment, and it must be identified as the personal property of the recipient. Upon discharge from the facility, the recipient retains the equipment that was purchased through PASRR.
- Examples of customizations:
  - Modifications that allow the resident to self-propel
  - Tilted seating modifications that allow the resident with spinal curvature(s) to sit comfortably

Page 22



## How To Prepare Forms 1017/1018

- The required information must be prepared by the therapist seeking approval for the purchase of a CMWC or DME for a Medicaid-eligible resident of the NF.
- Therapist may only request CMWC or DME for residents who have a positive PASRR eligibility. PASRR eligibility is determined via a completed PE submitted to the TMHP LTC Online portal
- The specialized services DME must be listed on Attachment 1, which can be found: <http://www.dads.state.tx.us/forms/1017/Attach1.pdf>.
- It is the responsibility of the therapist to ensure the resident is PASRR positive prior to submitting a request to **DADS**.

Page 23



## Form 3706 – Custom Power Wheelchair

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- Is *not* a PASRR Specialized Service.
- Form 3706 can be found on the DADS website
- Form 3706 should be faxed to TMHP at (512)514-4223

Page 24



## DME Supplier

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- Only the NF or therapist should have interaction with **DADS** regarding request forms 1017/1018.
- DME suppliers should not contact **DADS** or fax request Forms 1017/1018 for NF.
- Request Forms 1017/1018 will be denied if faxed by DME supplier

Page 25



## DME/CMWC Authorization Process

- Therapists should fax requests to the DADS PASRR Unit at (512) 438-2180.
- PASRR unit staff reviews submitted forms for completeness.
- Incomplete forms will be returned if documentation is missing. Incomplete forms will be returned within 24 hours. Corrected forms should be faxed to DADS. A new request does not have to be submitted.
- DADS Provider Claims (PCS) has 24 – 48 hours to approve request. Authorization of the request is faxed to the NF 24 hours after approved by DADS PCS Unit.
- The Selected DME supplier delivers the equipment. The DME supplier has 6 months from approval date to deliver equipment.
- The Supplier is paid by NF.
- The entire process for DME/CMWC can take 5 -7 days depending on form completeness.

Page 26



## DME/CMWC Flow Chart

Therapist completes and submits forms 1017/1018 to DADS

DADS reviews forms for completeness, required signatures, and DME supplier quote form within 24 hours of receiving request from Therapist.



DADS checks Long Term Care portal for PASRR positive eligibility, CMS for service authorization, and Medicaid eligibility

Therapist has 7 days to submit information requested by DADS, if not received within 7 days new request forms need to be resubmitted to DADS.



PCS has 72 hours to approve approval letter submitted by DADS

DADS has 24 hours to fax approval letter to NF after approved by PCS. Approval letter from PCS is valid for 6 months from approval date.

Page 27



## Qualifications of a Provider of Therapy Services

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The NF ensures that therapy services are provided to a designated resident by:

- Occupational therapist licensed by the Texas Board of Occupational Therapy.
- Physical therapist licensed by the Texas Board of Physical Therapy Examiners.
- OT or PT therapy assistant licensed to perform OT or PT (within scope of license) therapy with oversight of Licensed OT or PT therapist.
- A Speech-language pathologist licensed by Texas Commission of Licensing.

Page 28



## Requesting PASRR OT, PT or Speech

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To request PASRR OT, PT or Speech

Form 2465: <http://www.dads.state.tx.us/forms/2465/>

Page 29



## PASRR OT, PT and Speech Authorization

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- Therapy must be recommended in NF residents' plan of care and on the IDT.
- The therapist completes an initial evaluation and attaches to Form 2465.
- The nursing facility/therapist ensures a current positive PASRR PE is in the LTC Portal
- The therapist is required to fill out Form 2465 completely or the form will not be processed and will be returned for completion.

Page 30



## Authorization Process Continued

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- Three types of Authorization requests:
  - New (submit initial evaluation)
  - Recertification (do not send plan of care)
  - Restart (submit evaluation)
- The therapist faxes over completed Form 2465 to the DADS PASRR unit at (512) 438-2180.
- DADS PASRR staff will review the form for completion and physician attestation for medical necessity.
- Authorization faxed to nursing facility upon approval.

Page 31





## PASRR Specialized Services-Billing

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### Billing for DME/CMWC

- A NF must submit the claim for payment of the DME/CMWC to DADS within one year after the date of purchase of the DME/CMWC.
  
- Items not listed as NF specialized services are not reimbursable through PASRR specialized services.
  
- The Approval/Denial Notification approval letter will notify the NF to verify in MESAV billing application that there is a service authorization for the requested item and the amount authorized.

Page 32



## PASRR SS-Billing Continued

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The NF must bill and pay for the CMWC following delivery by the supplier and when the following requirements have been met:

- CMWC has been delivered to the facility.
  
- The CMWC meets the specifications made by the requesting therapist.
  
- Any issues identified by the therapist are resolved.

Page 33



## PASRR SS-Billing Continued

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- The resident, resident's responsible party, or therapist has a signed/acknowledged receipt of, and satisfaction with, the CMWC.
  
- The NF must timely draw down reimbursement for the CMWC after receipt of the invoice and reimburse the supplier in accordance with the payment arrangements between the supplier and NF.

Page 34



## PASRR SS-Billing Continued

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- The claim may not exceed the amount of the invoice or the amount authorized in MESAV.
  
- The NF must bill for the item utilizing Texas Medicaid and Health Partnership's (TMHP) TexMedConnect billing system.
  
- The NF must use the appropriate service and billing code to obtain reimbursement.

Page 35



## PASRR SS-Billing Continued

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- The DME/CMWC supplier invoices the NF for the item and the facility must bill for the item and pay the DME supplier within 30 days for the full amount of the claim billed.
  
- In accordance with pricing guidelines of the Medicaid program, the actual authorized amount for an item is based on the Manufacturer's Suggested Retail Price (MSRP) cost minus 18%.

Page 36



## PASRR SS-Billing Continued

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### Billing for Habilitative Speech, OT or PT:

- The Approval/Denial Notification letter will notify the NF to verify in MESAV that there is a service authorization for the requested habilitative therapy including the amount, duration and frequency approved.
  
- The NF must bill for the therapy using THMP's Tex Med Connect billing system **after** it has been delivered.
  
- The NF must use the appropriate service and billing code to obtain reimbursement.

Page 37



## Payment for OT, PT and Speech

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### 40 TAC §19.1306

- DADS reimburses a NF for specialized services based on fees determined by the Health and Human Services Commission (HHSC) in accordance with 1 TAC 355.313 (relating to Reimbursement Methodology for Specialized and Rehabilitative Services).
- The services must be ordered by the attending physician and be pre-authorized by DADS.

Page 38



## Payment for OT, PT and Speech continued

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- A session is one hour of physical, occupational, or speech therapy service provided for one resident.
- An assessment is reimbursed at the same rate as a session.
- The page for the NF rates for specialized services for individuals with IDD, can be found on the [HHSC Rates and Analysis website](#).

Page 39

## PASRR Success Story: PASRR Matters

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## PASRR SS Requirements

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### The NF:

- is the sole entity responsible for initiation, coordination and submission of a request for authorization of DADS DME;
- bears financial responsibility for any amount paid by DADS for DADS DME;
- may have the full amount billed to DADS, for DADS DME, recouped from the facility if the authorization is found to have been based on inaccurate or falsified information;
- should address any questions relating to DADS DME directly to the designated DADS contact person in order to ensure accurate information is obtained; and
- is the only entity authorized to contact DADS to discuss the status of DADS DME.



## PASRR SS Requirements Continued

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### **DADS:**

- does not contract directly with any DME supplier to provide DADS DME;
- does not maintain a contractual relationship with any DME supplier company for the purpose of dissemination of information or policy in regards to DADS DME; and
- will not provide general status information to any DME supplier company in regards to a DADS PASRR DME submission.



## PASRR SS Requirements Continued

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### **DME Supplier:**

- may not act as the NF representative to contact DADS to discuss the status of a DADS PASRR DME submission;
- is not allowed to complete the forms requesting specialized services on behalf of the NF, and
- may only contact DADS to discuss information related to the supplier information portion of a DADS DME submission.



## Additional Responsibilities-NF

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- When NF staff suspect that a DME supply company representative is engaging in or encouraging others to engage in any business practice that may be classified as unethical or fraudulent, NF staff must inform their facility administrator about the business practice that was observed.
  
- The NF must decline or discontinue any contact or business arrangements with a supplier who is suspected of fraudulent or unethical practices or misuse of state funds and immediately report the supplier to the Health and Human Services Commission Office of the Inspector General Hotline at 1-800-436-6184.

Page 44



## Additional Responsibilities-NF Continued

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- Invite LIDDA/LMHA staff to meetings such as IDT and other meetings where Specialized Services will be reviewed.
  
- Inform DADS PASRR of any concerns:  
PASRR@dads.state.tx.us

Page 45

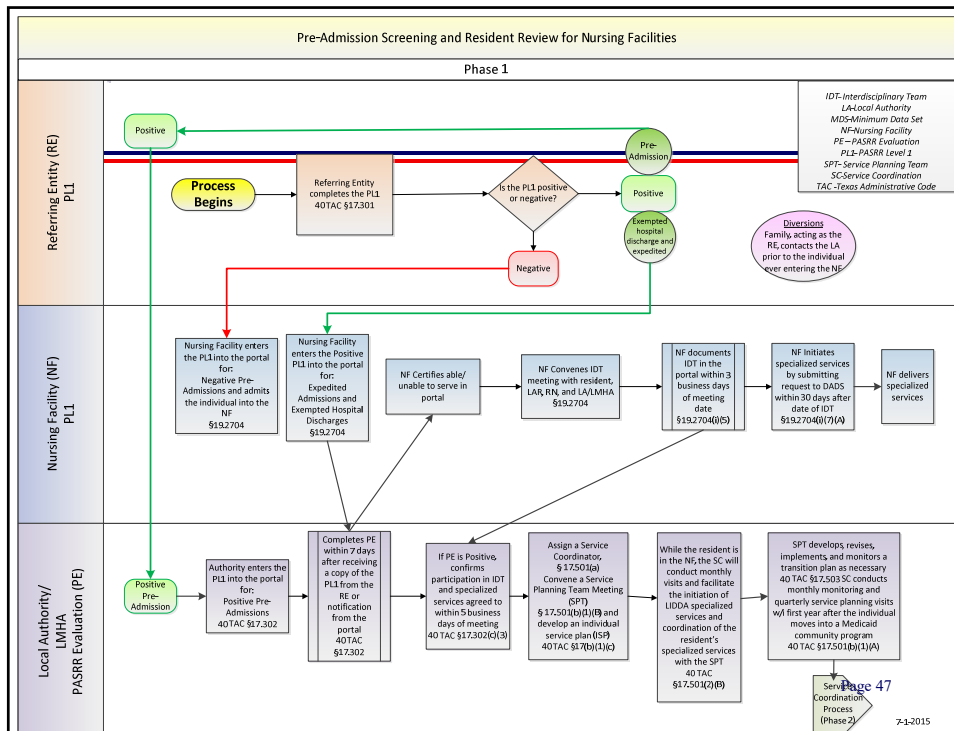
## Future Changes

- ❑ DADS is currently working on revisions to the PASRR rules located in chapter 19 of the Texas Administrative Code. The rule revision clarifies NF's responsibilities regarding PASRR specialized services.

Tentative effective date: March/April 2017

- ❑ DADS and TMHP are working on enhancements to the TMHP LTC portal that will automate the submission of PASRR specialized service requests into the LTC portal.

Release date: Tentative June 2017







## Resources

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- Where to find the LIDDA/LMHA for your facility:  
<http://www.dads.state.tx.us/providers/pasrr/contacts.html>
- Code of Federal Regulations for PASRR-42 CFR 483.100-138:  
<http://www.gpo.gov/fdsys/pkg/CFR-2006-title42-vol4/pdf/CFR-2006-title42-vol4-sec483-102.pdf>
- DADS: <http://www.dads.state.tx.us/>
- DSHS: <http://www.dshs.state.tx.us/>
- PASRR rules pertaining to NFs:  
[http://texreg.sos.state.tx.us/public/readtac\\$ext.ViewTAC?tac\\_view=5&ti=40&pt=1&ch=19&sch=BB&r=Y](http://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=5&ti=40&pt=1&ch=19&sch=BB&r=Y)
- PASRR rules pertaining to LIDDAs:  
[http://texreg.sos.state.tx.us/public/readtac\\$ext.ViewTAC?tac\\_view=4&ti=40&pt=1&ch=17](http://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=4&ti=40&pt=1&ch=17)



## PASRR Contact Information

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### DADS PASRR:

- PASRR Hotline: 1 (855) 435-7180
- [PASRR@dads.state.tx.us](mailto:PASRR@dads.state.tx.us)



## PASRR Contact Information-DADS

<u>PASRR Unit</u>	<u>Phone</u>	<u>Fax</u>
Geri Willems- Manager Geri.Willems@dads.state.tx.us	(512) 438-3159	(512) 438-2180
Terry Hernandez Terry.Hernandez@dads.state.tx.us	(512) 438-5233	(512)438-2180
Cathy Belliveau Cathy.Belliveau@dads.state.tx.us	(512) 438-5477	(512) 438-2180
Anaya Newell Anaya.Newell@dads.state.tx.us	(512) 438-5898	(512) 438-2180
Carlotta Vann Carlotta.Vann@dads.state.tx.us	(512) 438-5213	(512) 438-2180
Michelle Wright (S,OT,PT) Michelle.Wright@dads.state.tx.us	(512) 438-3190	(512) 438-2180
Julie Miles (DME, CMWC) Julie.Miles@dads.state.tx.us	(512) 438-4475	(512) 438-2180
Gilbert Estrada Gilbert.Estrada@dads.state.tx.us	(512) 438-3202	(512) 438-2180



## PASRR Contact Information Continued

PASRR DSHS:

PASRR DSHS Hotline\_1 (866)-378-8440

PASRR DSHS Email [PASRR@dshs.state.tx.us](mailto:PASRR@dshs.state.tx.us)

Valerie Krueger, DSHS PASRR: Phone # (512)-838-4343

Fax # (512) 206-5303