

FREQUENTLY ASKED QUESTIONS

[On-demand webinar] Texas PASRR: Conducting PEs via phone or video

On September 17, 2020, Texas Health and Human Services (HHSC) adopted an emergency rule for local authorities. This rule allows local authorities to conduct PEs and resident reviews, for a limited time, by telephone or videoconferencing, rather than face-to-face. SimpleLTC and Texas HHSC held a [PASRR webinar](#) on Oct. 1, covering the effects the new PE process will have on NF admissions beginning October 1, 2020. This document contains answers from Texas HHSC to specific questions asked during the webinar and have been organized according to topic.

HHSC Information Letter 20-41: Preadmission Screening and Resident Review (PASRR) Evaluations: Use of Telephone Interviews or Videoconferencing

1. **Where can we receive a copy of this Provider letter?**
2. **Where can the information letter be found?**

The information letter can be found at the following websites:

HHSC Nursing Facility Provider Resources – Communications page:

<https://apps.hhs.texas.gov/providers/communications/2020/letters/IL2020-41.pdf>

Simple LTC PASRR Resources page:

<https://www.simpleltc.com/wp-content/uploads/2020/09/Information-Letter-No-20-41-Texas-HHSC.pdf>

TMHP Recent News Page (9/28/2020):

http://www.tmhp.com/news?program_id=56

3. **To clarify, new residents admitted as positive PL1s no longer have a 30-day time frame for completing PEs. PEs need to be completed within 7 days as of October 1st, correct?**

Correct. NFs and local authorities must submit every new admission to a NF with a positive PL1 after October 1, 2020 into the Texas Medicaid and Healthcare Partnership (TMHP) Long-Term Care Online Portal (LTCOP) in accordance with the criteria outlined in rule for EHDs, expedited admissions or pre-admissions. HHSC will expect local authorities to complete the PE within seven calendar days after receiving the automatic alert.

4. **Can you please clarify if the PL1 will be completed as it was completed prior to COVID, except the LA calling the resident or on a video chat with the resident?**

That is correct. PL1 submissions for persons seeking admissions on or after October 1 will be admitted in accordance with rules outlined for EHD, expedited, and preadmissions. Please see question number three.

PASRR Level 1 (PL1) Screening

5. **For positive PL1 that was entered before Oct 1, do we need to re-enter them again?**

PL1 submitted between March 1, 2020 and September 30, 2020 do not need to be resubmitted again. These PL1 should be in the status of "Awaiting PE" and this will be used to generate the report for each local authority to complete the PE's.

6. **Does this include MI PL1s also? The Local Auth will contact us for the MI PL1s too?**

Yes, this includes all PL1's submitted between April 9, 2020, and Sept. 30, 2020 in the status of "Awaiting PE".

7. **Just to clarify, must positive PL1 be submitted to the LAR for approval before the resident can be admitted to the facility?**

In accordance with [§19.2704\(a\)\(2\)](#) Nursing Facilities (NF's) may provide assistance in completing the PL1, if the referring entity is a family member, LAR, other personal representative selected by the individual, or a representative from an emergency placement source and requests assistance in completing the PL1.

When the person is being admitted from home, the NF must follow the preadmission process. Please refer to PASRR Admission Processes explained on the following [HHSC PASRR for NF webpage](#) for more information on the preadmission process.

8. **Two of our residents received NFSS services in a nursing home but had to transfer to another nursing home for 7-10 days due to positive COVID dx. They are back at our facility and new PL1 has been entered. Are they treated as new resident with new PE and initial PCSP entered with new NFSS assessments?**

When a person is admitted from another NF, the discharging NF serves as the referring entity (RE) to the admitting NF and the admission type is Expedited. The person is considered a new admission when admitted from another NF.

After the PL1 is submitted, the LA will receive an alert to complete the PE. The PASRR process starts again for this person and an initial IDT will need to be scheduled and recorded on the PCSP form. NF specialized services must be initiated on the NFSS form.

Please refer to [§19.2704\(i\)](#) for NF responsibilities related to new admissions.

9. What if I have a resident who is positive but dc'd to another facility d/t covid and is now back at my facility with a new positive, do I inactivate the old one?

When a person is admitted from another NF, the discharging NF serves as the referring entity (RE) to the admitting NF and the admission type is Expedited. The admitting facility will submit the PL1, thereby inactivating the PL1 at your facility.

When the person returned to your facility, they are considered a new admission, and the steps outlined in question #5 above must be followed.

10. I had a resident awaiting PE to be done, but who was discharged to assisted living 9/29. Do I deactivate it now?

Yes, anytime a resident is discharged or passes away, the NF must enter the discharge date in section B of the PL1. Entering the discharge date on the PL1 serves two purposes, stopping the LTCOP from:

- sending alerts to the LA to complete a PE; and
- looking for an IDT meeting, thereby, preventing the Minimum Data Set (MDS) Long-Term Care Medicaid Information (LTCMI) from being submitted.

Please refer to the [TMHP LTC PASRR User Guide](#) or contact SimpleLTC for instructions on how to enter a discharge date and inactivate a PL1.

11. Will updating PASRR with discharge/expired date create a problem with reimbursement since the completion of the PE allows LTCMIs to be approved?

In accordance with the [TMHP LTC PASRR User Guide](#), if the NF attempts to submit the MDS LTCMI without first submitting the PL1 Screening Form, the LTCMI will not be accepted. In the case of Preadmission, the PL1 and the PE must also be submitted, and medical necessity determined prior to admission. Then the MDS LTCMI can be submitted.

Additionally, if the LTC Online Portal does not find a submitted and valid initial or annual IDT meeting within the past 12 months, the MDS LTCMI will be rejected.

See question number eight above.

12. For PL1 positive that went DC even prior to the IDT meeting, do we need to just make a note?

Any time a resident is discharged or passes away, the NF must enter the discharge date in section B of the PL1. See question number eight above.

13. We are a new Medicaid Provider effective today. Do we need to do PASRR on all new admissions for Medicaid and Private pay or just Medicaid residents?

In accordance with the Code of Federal Regulations ([CFR](#)) [§ 483.102](#), the screening and evaluation of **all** individuals with mental illness or intellectual or developmental disabilities who apply to or reside in Medicaid certified NFs is required, regardless of the source of payment for the NF services, and regardless of the individual's or resident's known diagnoses.

14. Can you repeat the requirements on the expedited discharge from the hospital?

Per IL 20-41, NFs must submit Expedited and Exempted Hospital Discharge admissions beginning October 1, 2020 in accordance with [§19.2703](#).

Exempted hospital discharge -- A category of nursing facility admission that occurs when a physician has certified that an individual who is being discharged from a hospital is likely to require less than 30 days of nursing facility services for the condition for which the individual was hospitalized.

Expedited admission -- A category of nursing facility admission that occurs when an individual meets the criteria for one of the following categories: convalescent care, terminal illness, severe physical illness, delirium, emergency protective services, respite, or coma.

15. If “no” was checked in the box but “yes” should've been checked, could you explain how to go about fixing it and during what length of time can the changes be made?

Checking a “no” box in section C of the PL1 will indicate a negative suspicion for mental illness, intellectual disability, or developmental disability. Current functionality doesn't allow the fields on the “Section C” tab to be updated at any time. In order to correct the mistake, another PL1 must be submitted, which will inactivate the PL1 with the error.

Care should be taken when the new PL1 is submitted, that if any of the boxes were checked “yes” on the old PL1, that all the appropriate boxes are also checked “yes” on the corrected PL1.

The correction should be made as soon as possible so that the PE can be completed.

Please refer to the [TMHP LTC PASRR User Guide](#) or contact SimpleLTC for instructions on how to make updates to

16. What about all of the LTCMIs that are being rejected for no IDT meeting/PCSP during the quarantine period? How are all these forms being processed without an IDT?

In accordance with [IL 20-13](#), new admissions after April 9, 2020 should have been submitted as exempted hospital discharge admissions, which would enable the NFs to submit their LTCMI while the PE and IDT meetings were on hold.

For annual IDTs or IDT meetings held because a resident review (PE) was completed, the local authorities have the option of participating by telephone per the [Detailed Item-by-item Guide for completing the PCSP Form](#). The 1135 waiver did not cover these IDT meetings and these were not placed on hold during the COVID public health emergency.

17. Can a new admission positive pl1 from a Behavior Health Facility be expedited?

In accordance with [§19.2704](#), a NF must not enter the PL1 into the LTCOP if the individual's admission category is preadmission, or admit an individual whose PL1 indicates a suspicion of MI, ID, or DD without a complete PE and PASRR determination.

[§303.302](#) requires local authorities to enter the data from the PE or resident review in the LTCOP within seven days after receiving a copy of the PL1 from the referring entity.

Therefore, it is important for the NF and the RE (behavior health facility) to plan the person's admission to the NF according to these timeframes. For preadmissions, TMHP is responsible for reviewing successfully submitted positive PEs to determine medical necessity (MN) for the person. Admitting someone before MN is determined can affect the NF's reimbursement.

PASRR Evaluations

18. Since nursing homes are re-opening, will those facilities be on site PEs?

Face-to-face interviews for PEs may be completed on a facility-by-facility basis and person-by-person based on the guidance issued in [§19.2803.Emergency Rule for Nursing Facility COVID-19 Response](#).

In situations where an LA staff cannot complete the face-to-face interview, the LA staff person can use telephone or videoconferencing.

19. Why are the LAs not being allowed to come to the facility to complete these tasks since facilities are currently opening for visitors?

See question 18 above.

20. What is the expected timeframe for completion of backlogged PEs?

Per IL 20-41, the local authorities must negotiate with the designated HHSC PASRR unit staff for extensions to complete their backlog. Extensions will be unique to each local authority's backlog, and HHSC will take into account admissions to NFs after Oct. 1, 2020.

21. Is the local authority the one that asks for an extension to get all PEs in?

See question twenty above.

22. How will the local authorities notify the facility of PE schedule?

LA's are encouraged to call the NF or RE location ahead of time and verify that the person is available for the PE.

23. What about behavior health?

See question seventeen above.

24. When we go into phase one visitation will the LIDDA be able to come into a facility to do PEs and SPTs?

If they meet criteria (see question 18 above), the LAs are not prohibited from entering the facility to complete activities in person. However, the NFs should be aware that LA staff may not have access to certain PPE, so visits should be coordinated in advance to ensure the LA staff can meet the NF's screening requirements for providers of essential services. If they cannot, activities may need to be completed virtually.

25. What is the estimated number of PE's statewide that are backlogged? How long are extensions for PE and how many extensions are allowed for an individual.

Approximately 3700 PEs are backlogged. For the backlogged PEs, each LA will have a customized extension related to the number of PEs for which they are responsible.

26. Is it up to the LA to decide if they come into the facility or not, if we allow visitors?

Yes. LAs are permitted to conduct PEs, quarterly SPT meetings, or monitoring visits by telephone or videoconferencing, as well as face-to-face if they meet the criteria to do so. An LA may choose to complete these activities by virtual means, even if permitted to visit.

27. If the facility is accepting visitors can the facility require the LA to come and preform the task on site? If the LA refuses, what is the facility's recourse?

See the answer to question 26. HHSC emergency rules allow LAs to perform certain activities by telephone or videoconferencing in lieu of in person. HHSC encourages NFs and LAs to work together to ensure eligible individuals are able to participate in the PASRR process.

**28. Should we make it a policy to start sending med recs for all PASRR Positive residents?
Where can we find that fax number or does each LA have their own?**

Faxing medical records is only necessary when a local authority cannot access the records in person. NFs should coordinate with LA's on the method for accessing medical records. NFs can refer to the *Other Contact Information* on the [HHSC PASRR webpage](#) to find a list of phone numbers for LA's.

29. Do you have a portal to upload secure information when a request is provided for health information concerning the PE?

At this time there is no portal to upload health information for an LA to review as part of the PE. Refer to question 28 above for a list of PASRR fax numbers for each LA.

30. What should be done when the agent asks for medical records?

[§303.302](#) requires local authorities to enter the data from the completed PE or resident review in the LTCOP within seven days after receiving a copy of the PL1 from the referring entity or notification from the LTCOP to complete the PE. The LA will request to review medical records during this time frame.

Preadmissions

31. Does the PE need to be complete prior to admission in LTC?

In accordance with [§19.2704\(f\)](#) a nursing facility may admit an individual whose PL1 indicates a suspicion of MI, ID, or DD without a complete PE and PASRR determination only if the individual is admitted as an expedited admission or exempted hospital discharge admission.

32. Can you please repeat what you said on sending PL1s to the LAs? Was this if the patient is coming from a hospital or NF, or if they are coming from the community?

As defined in [§303.102\(49\)](#) a preadmission is a category of nursing facility admission from a community setting, such as a private home, an assisted living facility, a group home, a psychiatric hospital, or jail, but not an acute care hospital or another nursing facility and that is not an expedited admission or an exempted hospital discharge.

Per the process outlined in [§303.201](#) a referring entity must complete a PL1 when an individual is seeking admission into a NF through the preadmission process when the PL1 indicates the person is suspected of having MI, ID, or DD. The RE must provide a copy of the positive PL1 to the LIDDA, LMHA, or LBHA, as applicable and the local authority will complete a PE for an individual who is suspected of having MI, ID, or DD and who is seeking admission to a nursing facility through the preadmission process

If the PL1 indicates the person is not suspected of having MI, ID, or DD, the RE must provide a copy of the completed PL1 to the nursing facility for submission into the LTCOP.

33. What about those residents that come from home; who is responsible for the PL1?

Please see question 32 Persons coming from home must follow the preadmission process. Per [§19.2704\(a\)\(2\)](#) the NF may provide assistance in completing the PL1, if the referring entity is a family member, LAR, other personal representative selected by the individual, or a representative from an emergency placement source and requests assistance in completing the PL1.

34. If someone is coming from home and has negative PL1, does LA still have to have it prior to admission?

As outlined in [§19.2704\(c\)](#), the NF may admit the individual into the facility through the routine admission process if an individual's PL1 indicates the individual is **not** suspected of having MI, ID, or DD, and the NF must enter the PL1 from the referring entity into the LTC Online Portal.

35. Is it correct that the PE has to be completed by LA before LTC facility can admit?

See question 31.

36. What is the process for preadmission when they are coming from out of state and the PL1 is positive?

Please refer to the HHSC [Out of State NF Admissions](#) webpage for instructions on the process for out of state admissions.

37. Can the PL1 on someone coming from a psych hospital be negative?

Yes, a person that is coming from a psychiatric hospital can have a negative PL1. For example, this can happen when a person with dementia (no mental illness) experiences changes in their behaviors (i.e. delirium, combativeness, sleep disorder) and needs the help of a geriatric psych unit to focus on stabilizing the person, which includes assessing their medications. NFs may also send a person who has a traumatic brain injury, Parkinson's, Huntington's, etc., but has no history of mental illness to psychiatric hospitals due to behaviors caused by their diagnosis.

Specialized Services

38. If the resident was denied PASRR services e.g. OT/PT/T, do we need to start the IDT meeting, or do we have to continue with quarterly update?

When the NF submits a request for specialized services e.g. OT/PT/ST on the Authorization Request for PASRR Nursing Facility Specialized Services form, and it is denied by HHSC, there does not need to be another IDT held.

The NF should review the PASRR Transaction Identifier (PTID) history notes found on the NFSS form for the denial reasons and steps to resolve the issue. The NF can refer to the [Companion Guide for Completing the Authorization Request for PASRR Nursing Facility Specialized Services \(NFSS\) Form](#) for instructions on how to complete the NFSS form and resolve issues related to the request.

39. Do we need to have a new IDT meeting to restart services?

A therapy restart due to hospitalization, break in specialized services lasting longer than 30 days, assessment older than 60 days, or change in amount, duration, or frequency of therapy services does not require a new IDT meeting. The NF should submit an NFSS form and check “restart” as the therapy authorization type. Refer to the [Companion Guide for Completing the Authorization Request for PASRR Nursing Facility Specialized Services \(NFSS\) Form](#) for details on submitting a therapy restart request.

40. I was in the process of entering a NFSS but the resident passed this morning. Do I need to delete the NFSS request?

Please contact the HHSC PASRR Unit staff at PASRR.Support@hhsc.state.tx.us, request that the NFSS form be inactivated due to the resident’s death, and provide the DLN of the NFSS form.

41. I am unable to attach the signature page to the NFSS form and requested some help with this problem and haven't received any help. What do I do next?

Refer to the [Companion Guide for Completing the Authorization Request for PASRR Nursing Facility Specialized Services \(NFSS\) Form](#) for instructions on attaching signature sheets to the NFSS form. If the issue persists, please contact TMHP or SimpleLTC for guidance on resolving this submission issue.

Change of Ownership (CHOW)

42. Should I enter PL1 for residents who moved to another NF during CHOW?

Yes, after October 1, 2020, in CHOWS where the facility receives a new contract number, the NF must:

- a. maintain a list of all newly admitted residents after the CHOW was initiated;
- b. once TMHP LTC portal access is reinstated, enter a new PL1 for every resident in the NF within 90 calendar days; and
- c. refer to the PEs from the old contract number (completed before the CHOW) to complete the new PL1 to determine MI, ID, or DD status and ensure residents that were previously PASRR positive remain positive. The LTCOP will not allow the submission of a negative PL1 when there was previously a positive PE.

In this situation, the NF's old contract number acts as the RE for the new contract number. The NF will need to complete new PL1s and the admission type will be expedited admission, convalescent care.

Local Authorities will complete a new PE within the required timeline when they receive an alert from the NF due to a positive PL1.

CHOWS completed between April 9 and Sept. 30, 2020, will be included with the list of resident reviews that need to be conducted, and HHSC staff will work with local authorities to determine an extended time frame for completion.

43. Our facility had a CHOW in March 2020. I have heard from, and have been able to have meetings/PCSP with my ID/DD LA, but have not heard from my MI LA at all, despite numerous calls and emails to the persons who have come to do them in the past, so that they can come to have them done. I did all new PL1s as soon as I received our new MCD ID, who do I need to contact?

See question 28 above for a list of phone and fax numbers for local authorities. Continued, documented instances of non-responsiveness by an LMHA or LBHA can be forwarded to **877-787-8999**, or submit an online question or complaint at this [Behavioral Health website](#) under *How to get help*.

NFs can also send a fax to 888-780-8099 or write to:
HHS Office of the Ombudsman
P.O. Box 13247
Austin, Texas 78711-3247

Resident Reviews

44. We are in the middle of our annual survey and they noted a PASRR which was done upon admission back in 2017 that did not indicate Mental Illness but had dx of Bipolar and now we are instructed to do an audit on all the Residents in the facility. How should we submit the updated PASRR and will we need to submit a new PASRR with every new psych dx?

Please refer to the instructions for completing [HHSC form 1012](#), Mental Illness/Dementia Resident Review. This form is used to assist NFs in determining whether a resident with a **negative** PL1 screening form submitted into the LTCOP, needs further evaluation for Mental Illness (MI).

This form is used to determine whether the individual has a primary dementia diagnosis or if the individual has a mental illness diagnosis. This form also serves as the NF's documentation for the individual's medical record as to why further evaluation was or was not completed.

After completing the form, if the NF determines a new **positive** PL1 is needed a PE (resident review) will be conducted after the NF submits a new positive PL1 into the LTCOP.