











# LONG-TERM CARE
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# Changes for Inactive EDI Submitter Accounts Effective December 1, 2026

On December 1, 2026, the Texas Medicaid & Healthcare Partnership (TMHP) will deactivate all Electronic Data Interchange (EDI) submitters that have not accessed their EDI submitter account since November 30, 2025.

For more information, call the TMHP EDI Help Desk at 888-863-3638.

# Coming Soon: New EDI Trading Partner Agreement Required by May 15, 2027

The Texas Medicaid & Healthcare Partnership (TMHP) will require all Electronic Data Interchange (EDI) submitters to submit a new EDI Trading Partner Agreement by May 15, 2027, to enhance the security of submitter accounts.

**Important:** TMHP will deactivate EDI submitter accounts that do not have an updated EDI Trading Partner Agreement by May 15, 2027.

The new agreement will be available on December 1, 2026. EDI submitters must submit the form electronically on TMHP's website. Check tmhp.com regularly for further updates and follow GovDelivery for more information.

Go to the GovDelivery sign-up page to enroll in GovDelivery.

## Additional Documentation

TMHP may also require EDI submitters to complete additional forms based on their provider type. EDI submitters will be able to submit these additional forms electronically on TMHP's website as well.

Check the EDI Get Started web page regularly for updates. For more information call TMHP EDI Help Desk at 888-863-3638.

# Coming Soon: Form 8578-CFC Functionality in the LTC Online Portal

On February 1, 2027, the Intellectual Disability/Related Condition (ID/RC) Assessment for the Community First Choice (CFC) Non-Waiver program Form 8578-CFC will move from the Client Assignment and Registration (CARE) system to the Long-Term Care Online Portal (LTCOP).

After this transition, the Texas Health and Human Services Commission (HHSC) and the Texas Medicaid & Healthcare Partnership (TMHP) will accept Form 8578-CFC only through the LTCOP.

### Cutoff Date

Local intellectual and developmental disability authorities (LIDDAs) must submit and process all outstanding Form 8578-CFC assessments in the CARE system before January 22, 2027. Any Form 8578-CFC assessments that are submitted or processed after that date must be reentered in the LTCOP.

LTCOP training materials will be updated to reflect these changes. TMHP will publish an article when the updates are available.

### Upcoming Changes

The LTCOP will support the following Form 8578-CFC processes:

- Form submission, review, and approval workflows
- Form corrections
- Applicable form statuses and workflow action buttons
- Notifications and alerts for Level of Care (LOC) denials
- Denial letters
- Purpose codes 2, 3, 4, and 5 and their associated functions:
  - Purpose Code 2—Initial Assessment
  - Purpose Code 3—Annual Reassessment
  - Purpose Code 4—Off Cycle Reassessment (Change)
  - Purpose Code 5—MCO Plan Code or LIDDA Change Only
- Attachments
- Dashboard functionality
- Form inquiry and reports
- Historical CFC 8578 assessments from CARE

For more information, call the TMHP LTC Help Desk at 800-626-4117.

## Change to the Local Authority Confirmation Section of the PASRR Comprehensive Service Plan (PCSP) Effective December 1, 2026

On December 1, 2026, a validation will be added to the LA-MI and LA-IDD Signature Date field(s) in the Local Authority Confirmation section of the PCSP form.

This validation will prevent the nursing facility (NF) from submitting the form when the signature date is earlier than the "Confirm IDT" alert sent date. After the Interdisciplinary Team (IDT) Meeting, the NF facility submits the PCSP form. The local authority must confirm local intellectual and developmental disability authority (LIDDA), local mental health authority (LMHA), or local behavioral health authority (LBHA) participation in the meeting and the specialized services recommendation.

If the LA-MI and/or LA-IDD Signature Date field(s) contain a date earlier than the "Confirm IDT" alert, a pop-up error message will appear, and the date must be corrected before the NF can successfully submit the form. This functionality is intended to support compliance with state and federal reporting requirements in the Preadmission Screening and Resident Review (PASRR) process.

## New Functionality in the PASRR Comprehensive Service Plan (PCSP) Effective on December 1, 2026

Starting December 1, 2026, a new button will be added to the PCSP form that allows local authorities (LAs) to remand the form to the nursing facility (NF) for corrections when discrepancies are identified in the Interdisciplinary Team (IDT) meeting before confirming participation and the specialized services recommendation.

The LA can notify the NF of the discrepancies, and the NF can notify the LA when corrections have been made. The LA can then review the corrections, confirm the information, and submit the form. This functionality is intended to support data accuracy and compliance with state and federal reporting requirements in the Preadmission Screening and Resident Review (PASRR) process.

## Reminder From HHSC: NF Providers Must Submit Form 3618 Within 72 Hours of Admission or Discharge

The Texas Health and Human Services Commission (HHSC) Preadmission Screening and Resident Review (PASRR) Unit reminds nursing facilities (NFs) to submit Form 3618 within 72 hours of a recipient's admission or discharge from a Medicaid NF. Timely submission helps to ensure that authorization for daily care is in place, which will allow residents to receive nursing facility specialized services (NFSS).

Failure to submit Form 3618 within this timeframe can affect PASRR-positive individuals as follows:

- It can delay provision of intellectual and developmental disabilities (IDD), mental illness (MI), and NFSS specialized services.
- It can result in non-payment of services from the Medicaid NF vendor payment system.
- It can cause a delay in receiving services in the community for individuals who have transitioned out of the NF due to Medicaid showing they are still in the NF.

For questions about this information, email the PASRR Unit at PASRR.Support@hhs.texas.gov. ■

# July 27 HCS and TxHmL Quarterly Webinar with HHSC LTCR Recording Available

The July 27 quarterly webinar recording for the Home and Community Services (HCS) and Texas Home Living (TxHmL) programs is available.

Listen to the HCS and TxHmL Quarterly Webinar recording.

Read the HCS and TxHmL Quarterly Webinar (PDF).

Email LTCR Policy for the transcript.

# Up-to-Date eLearning for Nursing Facility and Hospice Forms Now Available

Online eLearning courses for nursing facility forms 3618/3619 and Minimum Data Set (MDS)/Long-term Care Medicaid Information (LTCMI) and for hospice forms 3071/3074 are now available.

Providers can access the eLearning courses on the Texas Medicaid & Healthcare Partnership (TMHP) Learning Management System (LMS) by following these steps:

1. Log into the LMS using an existing account, or sign up to create a new account.
2. Select the appropriate button to view the eLearning courses in a web browser or to download the file for offline use.

New LMS users can access materials and take courses immediately after they register. Providers can always access eLearning and additional training materials on the LMS.

For LMS access issues, email TMHP LMS support at TMHPTrainingSupport@tmhp.com.

# Free Online Continuing Nursing Education for LTC Nurses, Certified Nurse Aides, and Administrative Leaders

The Texas Health and Human Services Commission (HHSC) and The University of Texas at Austin School of Nursing are pleased to announce a collaborative effort to improve long-term care (LTC) in Texas. This partnership includes eight web-based courses that deliver best-practices education to LTC providers in Texas nursing facilities:

- Infection Prevention and Control
- Reducing Antipsychotic Use in Long-Term Care Facilities
- Culture Change for Person-Centered Care
- Quality Improvement
- Advanced Geriatric Practice

- Transition to Practice
- Intellectual and Developmental Disabilities
- Mental Health with Aging and Severe Mental Illness

In addition to the eight web-based courses, we have added four recorded webinars:

- Diving Into Enhanced Barrier Precautions for Nursing Facilities
- From Risk to Resilience: Infection Control Risk Assessment for Nursing Homes
- Integrating the Infection Control Risk Assessment Findings into Your QAPI Process
- From Policy to Practice: Implementing Effective Antibiotic Stewardship in Long Term Care

Continuing education credit is free and available for registered nurses, certified nurse aides, and licensed nursing facility administrators.

To register and to find out more, visit the Johnson-Turpin Center: Continuing Nursing Education | School of Nursing website.

## Online eLearning in the TMHP Learning Management System

The following long-term care (LTC)-specific eLearning courses are currently available on the Texas Medicaid & Healthcare Partnership (TMHP) Learning Management System (LMS):

- LTC Online Portal Basics—This interactive eLearning course provides a basic overview of the Long-Term Care Online Portal (LTCOP), including information about creating an administrator account and an overview of the features of the blue navigational bar and the yellow Form Actions bar. Demonstrations and simulations appear throughout the eLearning course to provide opportunities for an interactive experience.
- TexMedConnect for LTC eLearning—This eLearning course demonstrates effective navigation and use of the LTC TexMedConnect web application. Providers will learn how to:
  - Log in to TexMedConnect.
  - Verify a client's eligibility.
  - Enter, save, and adjust different types of claims.
  - Export claim data.
  - Find the status of a claim.
  - View Remittance and Status (R&S) Reports.

The TMHP LMS can be accessed directly at learn.tmhp.com or through the TMHP website.

Providers must create an account to access the training materials on the LMS. To create an account, click **Create a new user account** on the LMS home page.

For questions about the LTC eLearning and webinars, call the TMHP LTC Help Desk at 800-626-4117 or 800-727-5436. For LMS login or access issues, email TMHP LMS support at TMHPTrainingSupport@tmhp.com.

# Webinars and eLearning Available for LAs, MCOs, and Nursing Facility, Hospice, Community Services Waiver Program, and HCS and TxHmL Program Providers

Long-term care (LTC) training sessions are available in webinar or eLearning format. LTC providers can take advantage of live, online training webinars as well as replays and recordings of those webinars that cover topics relevant to tasks performed on the Long-Term Care Online Portal (LTCOP). These webinars target nursing facility (NF) and hospice providers, Community Services Waiver Program providers, Home and Community-based Services (HCS) and Texas Home Living (TxHmL) program providers, local authorities (LAs) involved in NF Preadmission Screening and Resident Review (PASRR), and managed care organizations (MCOs).

The training courses that are currently offered include:

- LTC Nursing Facility Forms 3618/3619 and MDS/LTCMI eLearning—Provides information on the sequencing of documents, provider workflow process and rejection messages, correcting and inactivating forms, and the purpose of the forms.
- LTC PASRR eLearning—Provides information on determining medical necessity (MN), the PL1 Screening Form, using the NFSS form to request authorization for specialized services, completing the PCSP form, fair hearings, system alerts, and more.
- LTC Hospice Forms 3071/3074 eLearning—Provides information on the sequencing of documents, the purpose of the forms, how to fill out and submit the forms, effective dates, and form pairing.
- HCS and TxHmL Webinar Suite—Provides practical training for HCS and TxHmL providers, local intellectual and developmental disability authorities (LIDDAs), and financial management services agencies (FMSAs) on using Texas Medicaid and LTC systems to support compliant service delivery and program operations. This suite focuses on workflows, system updates, and common issues. It covers the following:
  - The LTC Online Portal
  - Electronic Visit Verification (EVV) requirements and claims matching
  - Key waiver assessments and forms
  - Enrollment and revalidation processes
  - TexMedConnect claims submission

Together, the webinars and eLearning equip stakeholders with the knowledge needed to navigate TMHP systems accurately, meet program requirements, and manage services and claims effectively.

For upcoming broadcast dates and registration links, visit the Recent News on the LTC home page. For a list of webinar or eLearning descriptions, recordings of past webinars, and Q&A documents, visit the TMHP LMS at learn.tmhp.com. ■

# Updated User Guide for HCS and TxHmL Waiver Programs Now Available

The Texas Medicaid & Healthcare Partnership (TMHP) has updated the *Long-Term Care (LTC) Home and Community-based Services (HCS) and Texas Home Living (TxHmL) Waiver Programs Provider User Guide* for providers and local intellectual and developmental disability authorities (LIDDAs). These updates reflect recent enhancements to the TMHP LTC Online Portal (LTCOP).

## LTCOP Medicaid ID Workflow Enhancements

TMHP has enhanced the Medicaid ID workflow to simplify the processing of financial ineligibility denials and reduce delays in enrollment. The following updates are now available:

### Automatic Status Updates Across Related Forms

When a financial ineligibility denial is applied, the LTCOP will now automatically apply the appropriate denied status to all related forms, including:

- Pre-enrollment.
- Intellectual Disability/Related Condition (ID/RC) Purpose Code (PC) 2.
- Enrollment Individual Plan of Care (IPC).

This ensures consistent status updates across the enrollment process.

### Denial Letters Generated Automatically

Required denial letters are now generated automatically when a financial ineligibility denial is applied, reducing manual effort.

### Improved Workflow Efficiency

These updates reduce "dead-end" statuses, minimize manual intervention, and decrease the need for support tickets or escalations.

## How to Access the Training Materials

Providers and LIDDAs can access the updated user guide in one of the following ways:

- On the TMHP 1915c Waiver Programs Reference Material web page in the "User Guides" section, click LTC HCS and TxHmL Waiver Programs Provider User Guide.
- Log in to TMHP's Learning Management System (LMS) using an existing account or sign up to create a new account, and then click the appropriate button to view the user guide in a web browser or download the file for offline use.

New LMS users can access materials and take courses immediately after they register. Providers and LIDDAs can always access computer-based trainings (CBTs) and additional training materials on the LMS.

For LMS access issues, email TMHP LMS support at TMHPTrainingSupport@tmhp.com.

# HHSC Published Information Letter on ICAP Updates

The Texas Health and Human Services Commission (HHSC) released an information letter IL 2026-10. This letter provides key updates regarding the Inventory for Client and Agency Planning (ICAP) Assessment.

For ICAP questions related to an initial Level of Need (LON) (Purpose Code 2) or Adaptive Behavior Level (ABL) for any purpose code, email us at EnrollmentTransferDischargeInfo@hhs.texas.gov. or call us at 512-438-2484.

For ICAP questions related to LON Change Requests (Purpose Codes 3 or 4), email us at deskURLONIPC@hhs.texas.gov, or call us at 512-438-5055.

# Updated User Guides and Video for HCS and TxHmL Waiver Programs Now Available

The Texas Medicaid & Healthcare Partnership (TMHP) has updated the following training materials for Home and Community-based Services (HCS) and Texas Home Living (TxHmL) waiver program providers and local intellectual and developmental disability authorities (LIDDAs):

- *LTC HCS and TxHmL Waiver Programs Provider User Guide*
- *3608 HCS Individual Plan of Care Item-by-Item Guide*
- *8582 TxHmL Individual Plan of Care Item-by-Item Guide*
- *Individual Movement Form Item-by-Item Guide*
- "Entering a Revision IPC" YouTube video

The updates reflect improvements to the form submission process in the TMHP Long-Term Care Online Portal (LTCOP).

**Note:** The article "Now Effective: Enhancements to LTCOP HCS and TxHmL IPC Revision Submissions" features more information on improvements to the submission process.

## How to Access the Training Materials

Providers and LIDDAs can access the updated video on the HCS and TxHmL playlist available on TMHP's YouTube channel.

To view the updated user guides:

- In the "General Information" section of the TMHP 1915(c) Waiver Programs Reference Material web page, click 1915(c) Waiver Programs LMS Trainings.
- Log in to TMHP's Learning Management System (LMS) using an existing account or sign up to create a new account. Next, click the appropriate button to view the chosen user guide in a web browser or download the file for offline use.

New LMS users can access materials and take courses immediately after they register. Providers and LIDDAs can always access computer-based trainings (CBTs) and additional training materials on the LMS.

For LMS access issues, email TMHP LMS support at TMHPTrainingSupport@tmhp.com.

# LTC FFS Claim Processing and Payment Timeline

The Texas Medicaid & Healthcare Partnership (TMHP) has published a long-term care (LTC) fee-for-service (FFS) claim processing and payment timeline.

The timeline outlines the process for an LTC FFS claim submitted to TMHP.

To view the timeline, go to the General Information section of the TMHP LTC Reference Material web page or the 1915(c) Waiver Programs Reference Material web page.

To receive notices about claim and payment processing, such as alerts for known delays (for example, holidays when banks and state offices are closed), sign up for LTC Provider Alerts published by HHSC at https://service.govdelivery.com/accounts/TXHHSC/subscriber/new. Providers may refer questions to the TMHP LTC Help Desk at 800-626-4117.

# Holidays Impacting LTC FFS Claim Processing and Payment Timeline

The Texas Medicaid & Healthcare Partnership (TMHP) has published a list of bank holidays that impact the long-term care (LTC) fee-for-service (FFS) claim processing and payment timeline.

Bank holidays are non-business days and do not count toward the LTC FFS claim processing/payment timeline. Providers should account for bank holidays as non-processing days when calculating claim processing/payment times.

To view the LTC FFS Claim Processing/Payment Timeline or Holidays Impacting LTC FFS Claim Processing/Payment Timeline, go to the General Information section of the TMHP LTC Reference Material web page or the 1915(c) Waiver Programs Reference Material web page.

Providers may refer questions to the TMHP LTC Help Desk at 800-626-4117, option 1.

# New PASRR Plan of Care Form

On September 1, 2026, the new Preadmission Screening and Resident Review (PASRR) Plan of Care form became available in the Texas Medicaid & Healthcare Partnership (TMHP) Long-Term Care Online Portal (LTCOP).

The Texas Health and Human Services Commission (HHSC) began developing the new form in January 2026. The new form is similar to existing PASRR forms in the LTCOP.

Local intellectual and developmental disability authorities (LIDDAs) will use the new form to create a plan of care for individuals who:

- Have an intellectual or developmental disability (IDD).
- Are currently admitted to a Medicaid-certified nursing facility.
- Are eligible for Medicaid and PASRR.

The form also automates requests to authorize habilitation coordination service units.

**Note:** LIDDAs will continue to submit claims for habilitation coordination services through the TMHP claims management system.

# Now Effective: Enhancements to LTCOP HCS and TxHmL IPC Revision Submissions

On February 20, 2026, the Texas Medicaid & Healthcare Partnership (TMHP) released enhancements to the Long-Term Care Online Portal (LTCOP) to streamline the Revision Individual Plan of Care (IPC) process for the Home and Community-based Services (HCS) and Texas Home Living (TxHmL) programs.

The enhancements combine Revision IPC forms with Individual Movement Tracking (IMT)—Individual Update forms in some scenarios, enabling users to submit required updates through a single form.

## What's Changed

TMHP has updated LTCOP Revision IPC submissions to automatically include the IMT—Individual Update form.

This improvement prevents out-of-sequence submissions and reduces administrative workload for providers, local intellectual and developmental disability authorities (LIDDAs), and Texas Health and Human Services Commission (HHSC) staff.

**Note:** The stand-alone IMT—Individual Update form remains available for updates that do not fall under these combined-form scenarios.

## Additional Changes to Revision IPC Forms

TMHP has also updated Revision IPC forms to include the following:

- County field filtering: Only counties served by the program provider or Consumer Directed Services (CDS) agency are displayed.
- System-generated address entry:
  - When a location code is active as of the Revision IPC effective date, the LTCOP will fill in the associated address automatically.
  - If a location code is inactive, the system will display an instructional error message.
- Own home/family home (OHFH) addresses will continue to be editable by users.

Corrections that are made to both existing and newly submitted Revision IPCs follow these updated rules.

## Training Updates

TMHP will publish updated training materials on the TMHP Learning Management System (LMS) and the 1915(c) Reference Material web page.

For more information, call the TMHP LTC Help Desk at 800-626-4117.

# Transfer Form Submission Sequencing Enhancements Now Available

On December 18, 2025, the Texas Medicaid & Healthcare Partnership (TMHP) released enhancements to the Long-Term Care Online Portal (LTCOP) that are designed to streamline the transfer process for the Home and Community-based Services (HCS) and Texas Home Living (TxHmL) waiver programs. These updates are now in effect for use by providers and local intellectual and developmental disability authorities (LIDDAs).

## What's Changed

TMHP has implemented the following features:

- When a LIDDA submits an Individual Plan of Care (IPC) Transfer form, the LTCOP will now automatically include the corresponding Individual Movement (IMT)—Individual Update form. Separate IMT—Individual Update submissions are no longer necessary when an IPC Transfer is processed.

**Note:** There is no change to the current process for LIDDA reassignments or for IMT—Individual Updates that are used without an IPC Transfer form.

- Only the counties that are served by the submitting LIDDA now appear in the county list on the IPC Transfer form.
- When a LIDDA selects an active location code on the IPC Transfer form, the LTCOP will now autofill the individual's physical address. If an inactive location code is chosen, the system will display an instructional error message. LIDDAs can update the individual's own home/family home (OHFH) physical address on the IPC Transfer form.
- The following new rejection errors have been added for the IPC (3608/8582) Renewals, Revisions, Transfers and Individual Movement form (local authorities [LA] Reassignment):
  - IP-0008: The request cannot be processed because the Address Update flag is set, but IPC does not have any Address records included in the transaction.
  - GN-0040: The request cannot be processed because the Address Update flag is set, and the address type is "Mailing." Mailing address updates must occur in the Texas Integrated Eligibility Redesign System (TIERS).
  - IM-0005: The request cannot be processed because the Location submitted on the form is not a valid Location for this provider.

# Preadmission Screening and Resident Review (PASRR) Process for NF Providers

The preadmission admission type is used when there is a nursing facility (NF) admission from a referring entity (RE) in the community (such as from home, a group home, psychiatric hospital, jail, etc.) and if an

individual is suspected of having mental illness (MI), intellectual disability (ID), or developmental disability (DD). If the RE is a family member, they may request assistance from the NF to complete the PL1 Screening Form. It is important that the NF follows the proper preadmission process.

The local authority (LA) is responsible for submitting positive Preadmission PL1 Screening Forms. NFs must not submit these forms. **The NF is not allowed to admit the person until they have reviewed the PASRR Evaluation (PE), confirmed that MN has been approved, and certified on the PL1 Screening Form that they are willing and able to serve the individual.** If the Preadmission PL1 Screening Form is negative (there is no suspicion of MI, ID, or DD), the NF follows the negative PASRR admission process.

For questions about this information, email the PASRR Unit at PASRR.Support@hhs.texas.gov.

## Medical Necessity for PASRR Positive Preadmission Evaluations

Local authorities (LAs), including local intellectual and developmental disability authorities (LIDDAs), local mental health authorities, local behavioral health authorities, and nursing facilities (NFs), are reminded that medical necessity (MN) is required for an individual to be admitted to an NF with a positive Preadmission Screening and Resident Review (PASRR) Evaluation (PE).

After a positive PE is submitted in the Texas Medicaid & Healthcare Partnership (TMHP) Long-Term Care Online Portal (LTCOP), the LA must check the history section to confirm that their MN application was approved. An individual must meet MN to be admitted to an NF. For the PASRR preadmission process, the TMHP LTCOP must review successfully submitted Preadmission PEs to determine MN for individuals who are PASRR positive. The purpose of preadmissions is to ensure that the individual is appropriate for an NF. The NF must decide whether they are willing to serve the individual. Before the NF can make this decision, MN must first be met.

For more information, refer to the LTC PASRR User Guide, or call the TMHP LTC Help Desk at 800-626-4117, and select option 1.

## Certification of an NF's Ability to Serve the Individual

The Texas Health and Human Services Commission (HHSC) and the Preadmission Screening and Resident Review (PASRR) unit would like to remind nursing facility (NF) providers of the requirement to certify on all PASRR Level 1 (PL1) Screening Forms their ability to serve individuals with a positive PASRR Evaluation (PE).

After a PL1 Screening Form is submitted and the local authority (LA) has completed the PE, the NF will receive an alert when a positive PE has been submitted. However, if it has been more than 30 days since the alert was generated, the alert will be systematically deleted, and the NF must manually check the associated PE to see whether it is positive.

NFs can search for positive PEs on the Form Status Inquiry page. A positive and active PE will be in any status except "Negative PASRR Eligibility" or "Form Inactivated." Then, the NF can navigate to

the associated PL1 Screening Form, which could be set to "Pending Placement in NF – PE Confirmed," "Individual Placed in NF – PE Confirmed," or "Negative PASRR Eligibility" status.

**Note:** NFs cannot certify their ability to serve the individual on converted PL1 Screening Forms. If a certification on a converted PL1 Screening Form is required because a new PE is requested, the NF must submit a new PL1 Screening Form for the person. The LA can then initiate a new PE, which will allow the NF to certify on the new PL1 Screening Form.

# PASRR Level 1 Screening Form Discharge Process Reminder

The Texas Health and Human Services Commission (HHSC) and the Preadmission Screening and Resident Review (PASRR) unit would like to remind nursing facility (NF) providers to discharge individuals on the PASRR Level 1 (PL1) Screening Form when an individual has died or been discharged.

The instructions to inactivate the **old** PASRR Level 1 Screening Form (before June 30, 2023) are as follows:

1. Locate the PL1 Screening Form using the provided document locator number (DLN).
2. Once the PL1 Screening Form is pulled up, click **Update Form** at the top of the form.
3. Navigate to **Section B,** locate **Field B0650: Individual is deceased or has been discharged** and **Field B0655: Deceased/Discharged Date,** and fill them out accordingly.
4. If the individual was discharged, **Section E: Alternate Placement Disposition** must be filled out before you submit the form.
5. Once all has been completed, click **Submit Form** at the bottom of the screen, and the PL1 Screening Form will be inactivated.

To inactivate the **new** PASRR Level 1 Screening Form (after June 30, 2023):

1. Locate the PL1 Screening Form using the provided document locator number (DLN).
2. Once the PL1 Screening Form is pulled up, click **Update Form** at the top of the form.
3. Navigate to the **Discharge** tab, locate **Field H0100: Individual is deceased or has been discharged?** and **Field H0150: Deceased/Discharged Date,** and fill them out accordingly.
4. If the individual was discharged, the **Alternate Placement Disposition** (located on the Discharge tab) must be filled out before you submit the form.
5. Once all the steps have been completed, click **Submit Form** at the bottom of the screen, and the PL1 Screening Form will be inactivated.

For questions, email the PASRR unit at PASRR.Support@hhs.texas.gov.

# Proper Handling of Medicaid Overpayments by LTC FFS Providers

It is important for providers to follow the proper procedures when they identify a Medicaid overpayment. The correct way to refund money to the Texas Health and Human Services Commission (HHSC) for a long-term care (LTC) fee-for-service (FFS) Medicaid overpayment always starts with a claim adjustment.

Claim adjustments that have been processed to "Approved-to-pay" (A) status will automatically refund money to HHSC by reducing payments for future claims. Claims that are processed to "Transferred" (T) status require repayment by personal or company check or through a deduction.

If the adjustment claim has been processed to A or T status but the provider is no longer submitting new LTC FFS claims to offset the negative balance, then the provider should call HHSC Provider Recoupments and Holds (PRH) to determine the appropriate method for refunding the money. Providers should always contact HHSC PRH before submitting a check for an overpayment.

Things to remember:

- To return an LTC FFS Medicaid overpayment to HHSC, providers should always submit an adjustment claim in TexMedConnect or through their third-party submitter. Providers should not use the TMHP Texas Medicaid Refund Information Form to report LTC FFS overpayments. This form is exclusively used for acute-care claims.
- LTC FFS claim adjustments must include a negative claim detail to offset the original paid claim and a new claim detail to repay the claim at the correct (lower) amount. The net total of the adjustment claim must be negative.
- If they are submitted properly, LTC FFS claim adjustments to return money to HHSC will not be denied by the one-year claim filing deadline edit (explanation of benefits [EOB] F0250).

Some examples of overpayments that require a claim adjustment include:

- Original paid claims that were billed with too many units of service.
- Original paid claims that did not properly report LTC-relevant other insurance payments or coverage.
- Original paid claims that were billed with the wrong revenue code or Healthcare Common Procedure Coding System (HCPCS) code.

## Contact Information

| Entity | What they can do… |
|---|---|
| TMHP LTC Help Desk<br>800-626-4117, option 1 | Help file an adjustment claim<br>Help providers understand their Remittance and Status (R&S) Reports |
| HHSC Provider Re-coupments and Holds<br>5124382200, option 3 | Help facilitate payment to HHSC for outstanding negative balances (A or T claims) |

# LTC and 1915(c) Waiver Program Home Pages on TMHP.com

Long-term Care (LTC) and the 1915(c) Waiver Program have their own dedicated sections on tmhp.com. The content found on the LTC and 1915(c) Waiver Program pages at tmhp.com are up to date and include resources such as news articles, LTC Provider Bulletins, user guides, and webinar information and registration.

Users can also find links to the different Texas Medicaid & Healthcare Partnership (TMHP) applications such as TexMedConnect, the LTC Online Portal (LTCOP), and the Learning Management System (LMS), and they can do a full search of tmhp.com.

To locate the LTC page or the 1915(c) Waiver Program page, click **Programs** at the top of the tmhp.com home page, and then select **Long-Term Care (LTC)** or **1915(c) Waiver Programs** from the drop-down menu.

The LTC and 1915(c) Waiver Program home pages feature recent news articles by category and news articles that have been posted within the last seven days. At the top of the LTC home page is a link to the LTCOP. A link to TexMedConnect can be found on the home page of tmhp.com. Both links require a username and password.

On the left-hand side, there are links to:

- Provider Bulletins, with links to recent LTC Provider Bulletins.
- Provider Education, which includes a link to the LMS, where providers can find multimedia training content, recorded webinars and associated question-and-answer (Q&A) documents, user guides, and a link to the TMHP YouTube channel.
- Reference Material, which includes general information, user guides, and frequently asked questions.
- Forms and form instructions, including the various downloadable forms that LTC providers need.

Providers are encouraged to frequently visit tmhp.com for the latest news and information.

# Provider Resources Guide

The Long-Term Care (LTC) Provider Resources Guide is available on the Texas Medicaid & Healthcare Partnership (TMHP) website and includes information on how to request assistance from the TMHP Provider Relations representatives. ■

# Acronyms in This Issue

| Acronym | Definition |
|---|---|
| ABL | Adaptive Behavior Level |
| CARE | Client Assignment and Registration |
| CBTs | Computer-Based trainings |
| CDS | Consumer Directed Services |
| CFC | Community First Choice |
| DD | Developmental Disability |
| DLN | Document Locator Number |
| EDI | Electronic Data Interchange |
| EVV | Electronic Visit Verification |
| EOB | Explanation of Benefits |
| FFS | Fee-For-Service |
| FMSAs | Financial Management Services Agencies |
| HCPCS | Healthcare Common Procedure Coding System |
| HCS | Home and Community-Based Services |
| HHSC | Texas Health and Human Services Commission |
| ICAP | Inventory for Client and Agency Planning |
| ID/RC | Intellectual Disability/Related Condition |
| IDD | Intellectual or Developmental Disability |
| ID | Intellectual Disability |
| IDT | Interdisciplinary Team |
| IMT | Individual Movement Tracking |
| IPC | Individual Plan of Care |
| LA | Local Authority |
| LAs | Local Authorities |
| LBHA | Local Behavioral Health Authority |
| LIDDA | Local Intellectual and Developmental Disability Authority |
| LIDDAs | Local Intellectual and Developmental Disability Authorities |
| LMHA | Local Mental Health Authority |
| LMS | Learning Management System |
| LON | Level of Need |
| LTC | Long-Term Care |
| LTCMI | Long-Term Care Medicaid Information |
| LTCOP | Long-Term Care Online Portal |
| MCOs | Managed Care Organizations |
| MDS | Minimum Data Set |
| MI | Mental Illness |

| Acronym | Definition |
|---|---|
| MN | Medical Necessity |
| NF | Nursing Facility |
| NFs | Nursing Facilities |
| NFSS | Nursing Facility Specialized Services |
| OHFH | Own Home/Family Home |
| PASRR | Preadmission Screening and Resident Review |
| PC | Purpose Code |
| PE | PASRR Evaluation |
| PL1 | PASRR Level 1 |
| PRH | Provider Recoupments and Holds |
| Q&A | Question-and-Answer |
| R&S | Remittance and Status |
| RE | Referring Entity |
| TIERS | Texas Integrated Eligibility Redesign System |
| TMHP | Texas Medicaid & Healthcare Partnership |
| TxHmL | Texas Home Living |