



COMMISSIONER
Jon Weizenbaum

September 23, 2015

To: Nursing Facility Providers
Local Intellectual and Developmental Disability Authorities

Subject: Information Letter No. 15-61
Preadmission Screening and Resident Review Habilitative Specialized Services

The purpose of this letter is to inform nursing facility providers and Local Intellectual and Developmental Disability Authorities (LIDDAs) about the difference between the Preadmission Screening and Resident Review (PASRR) specialized services of physical therapy, occupational therapy, and speech therapy and rehabilitative services delivered by a nursing facility.

This letter also explains the billing process required for dual-eligible beneficiaries of Medicare and the Medicaid PASRR program.

PASRR Specialized Services

For PASRR, nursing facility specialized services, defined at Title 40 Texas Administrative Code (TAC) §19.2703(27), include physical therapy, occupational therapy, and speech therapy when provided to help a resident maintain a skill, learn a new skill or improve a skill. In this IL, these specialized services may be referred to as habilitative therapies.

Rehabilitative services

Nursing facility rehabilitation services, as addressed at 40 TAC §19.1304, are physical therapy, occupational therapy, and speech therapy available to all Medicaid facility residents who are not eligible for Medicare or other insurance. Rehabilitative therapy is provided to help the resident regain and maintain a skill that was lost due to illness, injury, or disabling condition.

Additional information regarding the difference between habilitative therapies and rehabilitative services can be found on the Department of Aging and Disability Services PASRR webpage at: <http://www.dads.state.tx.us/providers/pasrr/rehabilitative.html>

Requesting PASRR Specialized Services – Habilitative Therapies

As outlined in 40 TAC §19.2704, a nursing facility has 30 days after the interdisciplinary team meeting date to initiate the specialized services agreed upon. When a therapist is requesting the agreed upon habilitative therapies (physical, occupational, or speech therapy) for a PASRR positive individual, a request can be made based on a professional assessment for up to 6 months.

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For additional information on how to request authorization for the specialized services of habilitative therapies, nursing facility providers can refer to the DADS PASRR website for Requesting Authorization for Specialized Services at <http://www.dads.state.tx.us/providers/pasrr/RequestAuthorization.html>

Medicaid-Medicare Dual Eligible Individuals

Dual-eligible beneficiaries include individuals who receive full Medicaid and Medicare benefits, as well as those who only receive assistance with Medicare premiums or cost sharing. For these individuals, Medicare-covered services are paid first by Medicare because Medicaid is always the payer of last resort.

The nursing facility must first request payment through Medicare for any rehabilitative therapy services which Medicare will cover. Habilitative therapies for dual-eligible PASRR positive nursing facility residents must be requested through the Medicaid PASRR program and billed using the appropriate billing codes found at the following link: <http://www.hhsc.state.tx.us/rad/long-term-svcs/downloads/2008-nf-rehab-ss-rates.pdf>

Sincerely,

[signature on file]

Michelle Martin
Interim Director
Center for Policy and Innovation

[signature on file]

Elisa J. Garza
Assistant Commissioner
Access and Intake