LONG-TERM CARE
PROVIDER BULLETIN

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Contents

LTCOP Transition From RUG to PDPM LTC for NF Residents

On September 1, 2025, the Texas Medicaid & Healthcare Partnership (TMHP) Long-Term Care Online Portal (LTCOP) implemented the Patient Driven Payment Model (PDPM) Long-term Care (LTC) methodology for nursing facility (NF) daily care reimbursement.

This new methodology aims to enhance care quality by using patient-driven data to calculate daily rates.

The need for an update to the original algorithm was identified prior to implementation. Necessary changes were completed, and an updated algorithm was deployed on September 26, 2025.

Minimum Data Sets (MDSs) that were impacted by the change had PDPM LTC recalculated to ensure that accurate reimbursement for NF daily care could be made.

An additional algorithm update was approved in October with deployment planned for December.

PDPM Resources

Providers can access the patient driven payment model (PDPM) long-term care (LTC) calculation worksheet on the Texas Medicaid & Healthcare Partnership (TMHP) Long-Term Care Reference Material web page in the "General Information" section.

The HHSC Provider Finance Department's PDPM web page includes additional details related to PDPM LTC development and the associated rates for Medicaid NF daily care.

For more information, call the TMHP LTC Help Desk at 800-626-4117, and select option 1.

Updated User Guides and Webinars for HCS and TxHmL Waiver Programs Now Available

The following user guides and webinars for Home and Community-based Services (HCS) and Texas Home Living (TxHmL) waiver program providers and local intellectual and developmental disability authorities (LIDDAs) have been updated to reflect changes to the Texas Medicaid & Healthcare Partnership (TMHP) Long Term Care Online Portal (LTCOP):

- LTC HCS and TxHmL Waiver Programs Provider User Guide
- 3616 Request for Termination of Services Item-by-Item Guide
- LTCOP Training for HCS & TxHmL Waiver Programs Webinar, Part Two
- LTC Online Portal Enhancements for HCS and TxHmL Providers Webinar
- LTC Online Portal Enhancements for HCS and TxHmL LIDDAs Webinar

The following LTCOP enhancements are reflected in the updated training materials.

3616 Request for Termination of Waiver Program Services

TMHP has implemented the following changes to reduce errors, prevent early or incorrect terminations, and minimize manual interventions.

Extended Termination Approval Timer

The "approved to terminate" timer has been increased from 12 calendar days to 14 calendar days, giving users more time before automatic processing.

Updated Termination Reason Options

Two outdated termination reasons are being removed:

- "Qualifies for LON 9 for TxHmL only"
- "Moved out of Texas permanently"

Termination Letter Condition

The LTCOP now generates termination letters based only on the termination reason. Date-based conditions have been removed. This means that if a termination reason requires a letter, it will be generated regardless of the requested termination date. TMHP has implemented this change to prevent forms from getting stuck in "Termination Approved" or "Pending SAS Update" status, eliminate the need for manual intervention or escalation, and provide members with the correct termination letters in a timely manner.

How to Access the Training Materials

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

- On the TMHP 1915c Waiver Programs Reference Material web page in the "General Information" section, click **1915(c) Waiver Programs LMS Trainings.**
- On TMHP's Learning Management System (LMS), log into the LMS using an existing account, or sign up to create a new account. Click the appropriate button to view the user guide or webinar 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. ■

RUG to PDPM LTC Transition Training and Certification Information

In April 2022, the Nursing Facility Payment Methodology Advisory Committee (NF PMAC) voted to recommend that the Texas Health and Human Services Commission (HHSC) transition the payment methodology for nursing facilities from Resource Utilization Group (RUG)-III to a Texas version of the Centers for Medicare & Medicaid Services (CMS) Patient Driven Payment Model for Long-Term Care (PDPM LTC). HHSC developed Texas' PDPM LTC methodology as directed by the 2024-2025 General Appropriations Act, House Bill 1, 88th Legislature, Regular Session, 2023 (Article II, HHSC, Rider 25),

PDPM LTC replaced the RUG methodology effective September 1, 2025, with trainings accessible on September 2, 2025. Deadlines for completing the new training and obtaining certification are specified below.

HHSC-Required Training Has Been Updated

The Office of Inspector General (OIG) and HHSC Medicaid and Children's Health Insurance Program (CHIP) Services (MCS) redesigned and updated the RUG training content and delivery mechanism to align with the new PDPM LTC payment methodology.

The redesigned training modules provide information for nursing facility providers and managed care organizations (MCOs) related to the assessors' completion of the Minimum Data Set (MDS), STAR Kids Screening and Assessment Instrument (SK-SAI), and STAR+PLUS Medical Necessity and Level of Care (MN/LOC) assessments. The training also covers fraud, waste, and abuse in Medicaid.

To align with the implementation of the new PDPM LTC methodology, OIG and HHSC are hosting the updated training. Previously, assessors took the certification training through Texas State University's (TXST's) Minimum Data Set (MDS) Resource Utilization Review (RUG) Online training course. This process is no longer in effect.

PDPM LTC training materials are posted on the OIG website and HHSC website. The OIG website houses the "Nursing Facilities PDPM LTC and Fraud, Waste and Abuse (FWA) Training." The HHSC website houses the "Patient Driven Payment Model Long Term Care (PDPM LTC) Training for Medically Dependent Children Program (MDCP) and STAR+PLUS Home and Community Based Services (HCBS)." The HHSC website includes additional materials required for MCO assessors. See the links below:

Nursing Facilities PDPM LTC and Fraud, Waste and Abuse (FWA) Training:

Go to the OIG Information for Providers page: https://oig.hhs.texas.gov/resources/information-providers. Scroll down to the "Nursing Facilities" box to find the link to the training.

Patient Driven Payment Model Long Term Care (PDPM LTC) Training for Medically Dependent Children Program (MDCP) and STAR+PLUS Home and Community Based Services (HCBS):

Go to the HHSC PDPM LTC Training home page for the training and required materials: https://www.hhs.texas.gov/providers/provider-training/patient-driven-payment-model-long-term-care-training

OIG is working with MCS to ensure that this transition is as smooth as possible.

Individuals Affected by the Training Update

This transition impacts Medicaid nursing facilities and STAR+PLUS, STAR Kids, and STAR Health MCOs. The following individuals must take the updated training:

- Nursing facility registered nurse (RN) assessment coordinators who sign the Long-Term Care Medicaid Information (LTCMI) or successor form or who certify the completeness of a Minimum Data Set (MDS) assessment for Medicaid reimbursement
- MCO staff and MCO-contracted staff who administer the MN/LOC assessment for STAR+PLUS HCBS
- MCO staff and MCO-contracted staff who administer the MDCP portion of the SK-SAI

Deadlines for Completing Training

The following individuals must complete the new PDPM LTC training by November 30, 2025:

- Assessors who have never taken the training before
- New assessors who were certified between June 16, 2025, and August 30, 2025
- Assessors with a certification that expires between September 1, 2025, and November 30, 2025
- Assessors who have a certification that expired before September 1, 2025

Going forward, assessors must complete the PDPM LTC training as their current RUG certification period ends.

The training materials are available at no cost for participants to review.

Certificates will not be issued for completing the PDPM LTC training.

- MCO staff, MCO-contracted staff, and nursing facilities' RN assessment coordinators and service coordinators must comply with HHSC-OIG requirements in accordance with 1 Texas Administrative Code (TAC) §371.214 and Medicaid managed care contracts. All affected individuals must complete the training every two years.

Contact

For all questions or concerns about the PDPM LTC and Fraud, Waste and Abuse (FWA) training for nursing facilities, email OIG_UR@hhs.texas.gov.

For questions about the Patient Driven Payment Model Long Term Care (PDPM LTC) Training for Medically Dependent Children Program (MDCP) and STAR+PLUS Home and Community Based Services (HCBS), email Managed_Care_Initiatives@hhs.texas.gov.

Up-to-Date Computer-Based Trainings for Nursing Facility and Hospice Forms Now Available

New computer-based trainings (CBTs) 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 CBTs 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 CBT 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 CBTs 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, 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. The educational modules are:

- 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.

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.

Computer-Based Training in the TMHP Learning Management System

The following Long-term Care (LTC)-specific computer-based training (CBT) courses are currently available on the Texas Medicaid & Healthcare Partnership (TMHP) Learning Management System (LMS):

- LTC Online Portal Basics—This interactive CBT provides a basic overview of the LTC Online Portal, 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 CBT to provide opportunities for an interactive experience.

- TexMedConnect for LTC Providers—This CBT 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 **Don't have an account? Sign up here** on the LMS home page.

For questions about the LTC CBTs and webinars, call the TMHP Contact Center at 800-626-4117 or 800-727-5436. For LMS login or access issues, email TMHP LMS support at TMHPTraining-Support@tmhp.com.

Webinars and CBTs 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 computer-based training (CBT) 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 LTC Online Portal. 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 trainings that are currently offered include:

- LTC Nursing Facility Forms 3618/3619 and MDS/LTCMI CBT—Provides information on the sequencing of documents, provider workflow process and rejection messages, correcting and inactivating forms, and the purpose of the forms.
- LTC Nursing Facility PASRR CBT—This informative, interactive CBT will replace the two-part PASRR webinar as the companion training to the LTC PASRR User Guide. The CBT will cover the same topics as the webinar, including the PL1 Screening Form, using the NFSS form to request authorization for specialized services, completing the PCSP form, determining medical necessity (MN) and appealing MN decisions using the fair hearing process, how to monitor system alerts, and more. This CBT will be published on the TMHP Learning Management System (LMS), and provider notifications will be posted on TMHP.com and in this bulletin.
- LTC Hospice Forms 3071/3074 CBT—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.

- LTC Online Portal Training for HCS and TxHmL Waiver Programs Webinar—Provides information on the features and navigation of the LTC Online Portal, management of waiver program assessments and forms in the LTC Online Portal, and the purpose and workflow of the forms.

For a list of webinar or CBT descriptions, upcoming broadcast dates, registration links, recordings of past webinars, and Q&A documents, visit the TMHP Learning Management System (LMS) at learn.tmhp.com. ■

PASRR Preadmission Process for NF Providers

The Preadmission admission type is used when there is an 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 LA—not the NF—is responsible for submitting positive Preadmission PL1 Screening Forms. The NF should not submit positive Preadmission PL1 Screening 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 (LTC) Online Portal, the LA must check the history section to confirm that their MN was approved. An individual must meet MN to be admitted to an NF. For the PASRR preadmission process, the TMHP LTC Online Portal 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.

Submitting HCS and TxHmL Individual Movement Forms

The Texas Health and Human Services Commission (HHSC) reminds Home and Community-Based Services Waiver (HCS) and Texas Home Living Waiver (TxHmL) providers to refrain from submitting the following Individual Movement Forms (IMTs) through the Long-Term Care (LTC) Online Portal:

- IMT-Local Authority Reassignment
- IMT-Service Coordinator Update

These specific purpose codes are designated for local intellectual and developmental disability authority (LIDDA) use only and should not be submitted by HCS and TxHmL providers for any reason.

HCS and TxHmL providers can only submit the IMT for purpose codes IMT-Suspension and IMT-Individual Update. See the "Individual Movement Form" section in the LTC HCS and TxHmL Waiver Programs Provider User Guide for details.

Questions

For issues encountered while submitting the IMT on the TMHP LTC Online Portal, call TMHP at 800-626-4117. Select option 1 and then 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 (prior to 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.

The instructions to inactivate the **new** PASRR Level 1 Screening Form (after June 30, 2023) are below:

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.

Coronavirus (COVID-19)

For updated information, visit the COVID-19 web page on the Texas Medicaid & Healthcare Partnership (TMHP) website.

Eligibility Information Available for LTC Providers and LIDDAs

As a reminder, long-term care (LTC) providers and LIDDAs that are seeking eligibility information can pull a Medicaid Eligibility and Service Authorization Verification (MESAV) using any of the following field combinations through TexMedConnect. Providers can use this service 24 hours a day, seven days a week.

- Medicaid/Client No. and Last Name
- Medicaid/Client No. and Date of Birth

- Medicaid/Client No. and Social Security Number
- Social Security Number and Last Name
- Social Security Number and Date of Birth (DOB)
- Last Name, First Name, and DOB

A MESAV can provide the Medicaid eligibility program type, coverage code, and Medicaid recertification due date to help providers ensure appropriate and continued Medicaid eligibility for LTC services.

Listed below are the most common eligibility types that are valid for hospice and most other LTC programs:

Program Type	Coverage Code
Type 12, 11	P
Type 13, 51	R
Type 01, 03, 07, 08, 09, 10, 14, 15, 18, 19, 20, 21, 22, 29, 37, 40, 43, 44, 45, 46, 47, 48, 55, 61, 63, 67	R or P

Note: The Medicaid recertification review due date is not available for all LTC clients, including children who are enrolled in foster care and Medicaid clients who are enrolled through Social Security (Coverage Code R, Program Type 13).

For a list of acceptable Medicaid coverage codes and program types for Home and Community-based Services (HCS) or Texas Home Living (TxHmL) enrollment, refer to the Texas Medicaid web page titled 11000, Maintaining Medicaid Eligibility.

Note: Medicaid Buy-In for Children (program type 88) is allowable for TxHmL ONLY.

For more information on TexMedConnect and using MESAV, call the Texas Medicaid & Healthcare Partnership (TMHP) LTC Help Desk at 800-626-4117, option 1.

Proper Handling of Medicaid Overpayments by LTC FFS Providers

It is important for providers to follow the proper procedures when they discover 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 800-626-4117, option 1	Help file an adjustment claim Help providers understand their Remittance and Status (R&S) Reports
HHSC Provider Re-coupments and Holds 5124382200, option 3	Help facilitate payment to HHSC for outstanding negative balances (A or T claims)

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

The Long-term Care (LTC) and 1915c Waiver Program have their own dedicated sections on tmhp.com. The content found on the LTC and 1915c 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, and the Learning Management System (LMS), and they can do a full search of tmhp.com.

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

The LTC and 1915c 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 LTC Online Portal. 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, including general information, user guides, and frequently asked questions.
- Forms and form instructions, including the various downloadable forms that are needed by LTC providers.

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

Video About Medicaid Eligibility Reports on the LTCOP Dashboard Now Available on YouTube

An educational video focused on Medicaid eligibility reports on the Long-Term Care Online Portal (LTCOP) Dashboard has been added to the Texas Medicaid & Healthcare Partnership's (TMHP's) Home and Community-based Services (HCS) and Texas Home Living (TxHmL) YouTube playlist. This video, titled "Medicaid Eligibility Reports on the LTCOP Dashboard," is for long-term care (LTC) providers and local intellectual and developmental disability authorities (LIDDAs) and discusses the following topics:

- "Lost/Losing Medicaid by end of month" reports
- "Medicaid Annual Renewal due within 1 year" reports
- How to view the Medicaid recertification date and Medicaid eligibility end date
- How to export data from the LTCOP Dashboard
- Best practices for using the Medicaid eligibility reports

For more information, contact the TMHP LTC Help Desk at 800-626-4117, option 1.

MDS Version 1.20.1 Enhancements Available on the LTC Online Portal

On October 1, 2025, the Texas Medicaid & Healthcare Partnership (TMHP) Long-Term Care Online Portal (LTCOP) implemented several enhancements for version 1.20.1 of the Minimum Data Set (MDS). Additionally, updated files for the MDS 3.0 Comprehensive and Quarterly assessments are available in Portable Document Format (PDF) for assessment reference dates (ARD, A2300).

The following is an overview of the enhancements:

Section O

The following enhancements have been implemented for section O:

- **O0390. Therapy Services** has been added. This is a new checklist for therapy services that are received by residents.
- **O0400. Therapies** has been revised to focus on days of respiratory therapy.
- **O0420. Distinct Calendar Days of Therapy** has been removed.

Section A

The following enhancements have been implemented for section A:

- **A0800. Gender** has been replaced with A0810. Sex.
- A1255. Transportation has been added. This is a new drop-down field.

Section I

- **I7900. None of the Above** has been added.

Section X

- X0300. Gender has been replaced with X0310. Sex.

For more information, call the TMHP LTC Help Desk at 800-626-4117 (select option 1).

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
ARD	Assessment Reference Date
CBT	Computer-Based Training
CHIP	Medicaid and Children's Health Insurance Program
DD	Developmental Disability
DLN	Document Locator Number
DOB	Date of Birth
EOB	Explanation of Benefits
FFS	Fee-For-Service
FWA	Fraud, Waste and Abuse
HCBS	Home and Community Based Services
HCPCS	Healthcare Common Procedure Coding System
HCS	Home and Community Based Services
HHSC	Texas Health and Human Services Commission
ID	Intellectual Disability
IMTs	Individual Movement Forms
LA	Local Authority
LIDDA	Local Intellectual and Developmental Disability Authority
LMS	Learning Management System
LTC	Long-Term Care
LTCMI	Long-Term Care Medicaid Information
LTCOP	Long-Term Care Online Portal
MCO	Managed Care Organization
MDCP	Medically Dependent Children Program
MDS	Minimum Data Set
MESAV	Medicaid Eligibility and Service Authorization Verification
MI	Mental Illness
MN/LOC	Medical Necessity and Level of Care
MN	Medical Necessity
NF	Nursing Facility
NF PMAC	Nursing Facility Payment Methodology Advisory Committee
OIG	Office of Inspector General
PASRR	Preadmission Screening and Resident Review
PDF	Portable Document Format
PDPM LTC	Patient Driven Payment Model Long Term Care
PDPM	Patient Driven Payment Model
PE	PASRR Evaluation

Acronym	Definition
PL1	PASRR Level 1
PRH	Provider Recoupments and Holds
Q&A	Question-and-Answer
R&S	Remittance and Status
RE	Referring Entity
RN	Registered Nurse
RUG	Resource Utilization Review
SK-SAI	STAR Kids Screening and Assessment Instrument
TMHP	Texas Medicaid & Healthcare Partnership
TxHmL	Texas Home Living
TXST's	Texas State University's