



# LONG-TERM CARE (LTC) USER GUIDE

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**FOR INTERMEDIATE CARE FACILITIES FOR  
INDIVIDUALS WITH AN INTELLECTUAL  
DISABILITY OR RELATED CONDITIONS (ICF/IID)  
PROGRAM PROVIDERS**



TEXAS MEDICAID & HEALTHCARE PARTNERSHIP  
A STATE MEDICAID CONTRACTOR

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# Learning Objectives

## What is the Long-Term Care (LTC) Online Portal?

The LTC Online Portal is a web-based application where providers can submit, monitor, and manage forms and assessments. This user guide is designed to teach Intermediate Care Facilities for Individuals with an Intellectual Disability or Related Conditions (ICF/IID) program users about how to use the LTC Online Portal.

You will begin by learning the basics of the LTC Online Portal, such as how to log in and set up your account, what the buttons on the blue navigational bar do, and the features on the yellow Form Actions bar. These lessons will enable you to use the LTC Online Portal to enter and manage all your forms and assessments in an easier, more convenient manner.

**Note:** State supported living centers (SSLCs) will continue to enter the Individual Movement Form (IMT) in the same way they do today. SSLCs will not submit the IMT directly on the LTC Online Portal because there is an interface between the Integrated Resident Information System (IRIS) and the LTC Online Portal. The Texas Health and Human Services Commission (HHSC) will submit IMTs to the Texas Medicaid & Healthcare Partnership (TMHP) through a batch interface between IRIS and the LTC Online Portal. These forms will still undergo the same validation checks and be routed to the same workflow as the forms that are entered directly on the LTC Online Portal.

This ICF/IID user guide will help you to:

- Understand the Medicaid team roles.
- Identify National Provider Identifier (NPI) requirements.
- Describe the purpose and identify the benefits of the LTC Online Portal.
- Obtain an LTC Online Portal administrator account.
- Understand basic LTC Online Portal features.
- Submit Level of Care (LOC) and Level of Need (LON) Assessments.
- Understand how to correct assessments, inactivate forms and assessments, and print both completed and blank forms and assessments.
- Identify form and assessment statuses.
- Report Medicaid waste, abuse, and fraud.
- Understand the Health Insurance Portability and Accountability Act (HIPAA) of 1996 guidelines and provider responsibilities.
- Identify additional resources.
- Identify the options on the blue navigational bar and on the yellow Form Actions bar.



## Medicaid Team

The following groups and people make up the Medicaid team, who delivers Medicaid services to Texans.

- **Centers for Medicare & Medicaid Services (CMS)** – The federal agency that oversees Medicaid on a federal level. CMS creates and administers guidelines, rules, and regulations.
- **Health maintenance organization (HMO)** – The state-contracted entity that provides acute and long-term services to support enrolled managed care members.
- **Person/People** – The individuals who are served by Texas Medicaid.
- **Providers** – Providers are the crucial players in a quality health care program. Providers focus on providing the best care possible while being reimbursed for allowed services rendered.
- **HHSC** – HHSC oversees the operations of the entire health and human services system in Texas. HHSC operates the Medicaid acute care program and several other related programs. HHSC's Office of Eligibility Services (OES) determines eligibility for Medicaid.
- **TMHP** – TMHP is contracted by the state to process claims for providers under traditional Medicaid. TMHP processes and approves claims for traditional LTC. TMHP does not pay LTC claims; this is done by the comptroller. TMHP is also responsible for the following:
  - Determining medical necessity (MN)
  - Offering provider education
  - Processing claims (except for services covered by the STAR+PLUS premium) in a timely manner
  - Publishing yearly manuals, quarterly LTC Bulletins, and biweekly Remittance and Status (R&S) Reports
  - Maintaining the TMHP Call Center/Help Desk Monday through Friday from 7 a.m. – 7 p.m. Central time
  - Coordinating training sessions for providers, including technical assistance for the LTC Online Portal
- **Texas State Legislature** – The state legislature allocates budgetary funding for Texas Medicaid.

## **NPI Requirements**

In 1996, HIPAA established the NPI as the 10-digit standard unique identifier for health care providers. The NPI is required by covered health care providers, clearinghouses, and health plans in HIPAA-covered transactions.

The NPI is required on all claims that are submitted electronically through third-party software or TexMedConnect. On the LTC Online Portal, the NPI is used for security purposes and links providers to their forms and assessments so that only those associated with that NPI are viewable. Without an NPI, providers will not be able to locate their forms and assessments on the LTC Online Portal.

To obtain an NPI, go to [nppes.cms.hhs.gov/NPPES](https://nppes.cms.hhs.gov/NPPES).

# The LTC Online Portal

## LTC Online Portal Benefits

The benefits of using the LTC Online Portal include the following:

- A web-based application that features 24/7 availability.
- TMHP offers LTC Online Portal technical support by telephone at 800-626-4117 Monday through Friday from 7 a.m. – 7 p.m. Central time, excluding holidays. When calling, state your provider account type as Nursing Facility/Waiver, vendor number [0+component code], and Medicaid provider number.
- Edits can be made to verify the validity of the data entered.
- Providers may view error messages that must be resolved before forms and assessments can be submitted.
- Providers can monitor the status of their forms and assessments by using the Form Status Inquiry (FSI) or Current Activity.
- Electronically submitted forms and assessments are processed faster.
- Users may add notes to forms and assessments.

## LTC Online Portal Security

You must first request access to the LTC Online Portal before you can begin to use it. Your facility may already have an account that allows you to access the LTC Online Portal. If that is the case, contact your facility's administrator for user access. An administrator account is required for LTC Online Portal access, but it is strongly recommended to have at least one backup administrator account in case one administrator is unavailable.

The administrator account is the primary user account for a provider number. It is the only account with the ability to add and remove permissions (access to LTC Online Portal features) for other user accounts on the same provider number.

A user account can be created by an administrator. User account permissions and limitations are set by the holder of an administrator account. This allows administrators to set the level of access to LTC Online Portal features based on the employees' responsibilities.

If you already have either an administrator or user account, go to [tmhp.com/programs/ltc](https://tmhp.com/programs/ltc) and click the **LTC Online Portal** button.

If you do not have an account, you can create one. You must have the following information to create an account:

- Provider number – HHSC assigns provider numbers to providers of Medicaid services.
- Vendor number – Also known as a component code, a vendor number is a numeric or alphanumeric number that is assigned by HHSC. It can have up to five digits.

- Vendor password – To receive your vendor password, call the Electronic Data Interchange (EDI) Help Desk at 888-863-3638, option 3. When calling, state your provider account type as Nursing Facility/Waiver, vendor number [0+component code], and Medicaid provider number.  
**Note:** It may take three to five business days by postal mail to receive the password, so you may prefer to receive your vendor password by email.

Information on how to create an LTC Online Portal administrator account, access My Account, and log into the LTC Online Portal, can be found in the *Long-Term Care (LTC) User Guide for General Information, Online Portal Basics, and Program Resources*.

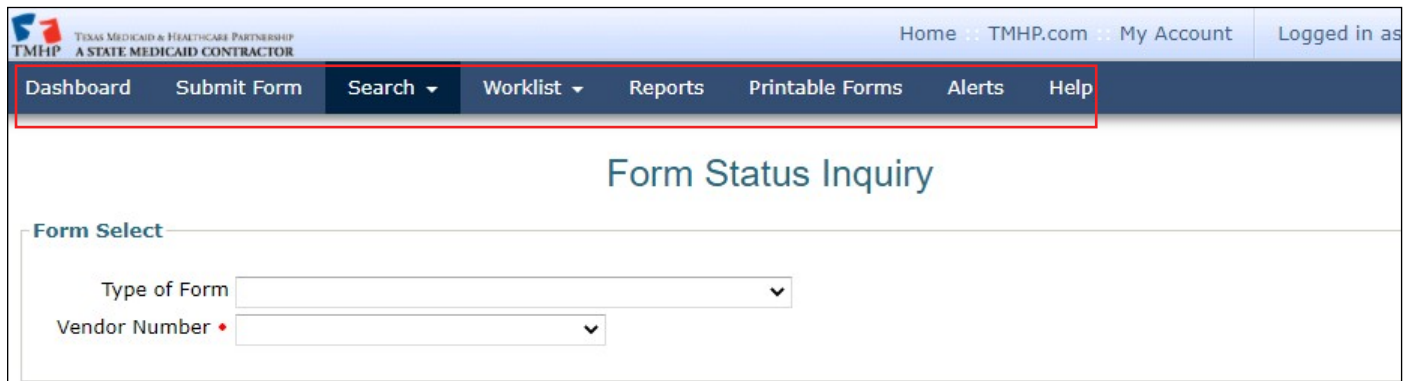


# LTC Online Portal Basics

## Blue Navigational Bar Links

Portal features based on your security permissions can be found on the blue navigational bar located at the top of the portal screen.

Depending on your security permissions, the options found on the blue navigational bar may include: Submit Form, Search (with drop-down options for Form Status Inquiry and Vendors), Worklist (with drop-down options for Current Activity and Drafts), Printable Forms, Alerts, and Help.



TMHP TEXAS MEDICAID & HEALTHCARE PARTNERSHIP A STATE MEDICAID CONTRACTOR

Home :: TMHP.com :: My Account Logged in as

Dashboard Submit Form Search Worklist Reports Printable Forms Alerts Help

### Form Status Inquiry

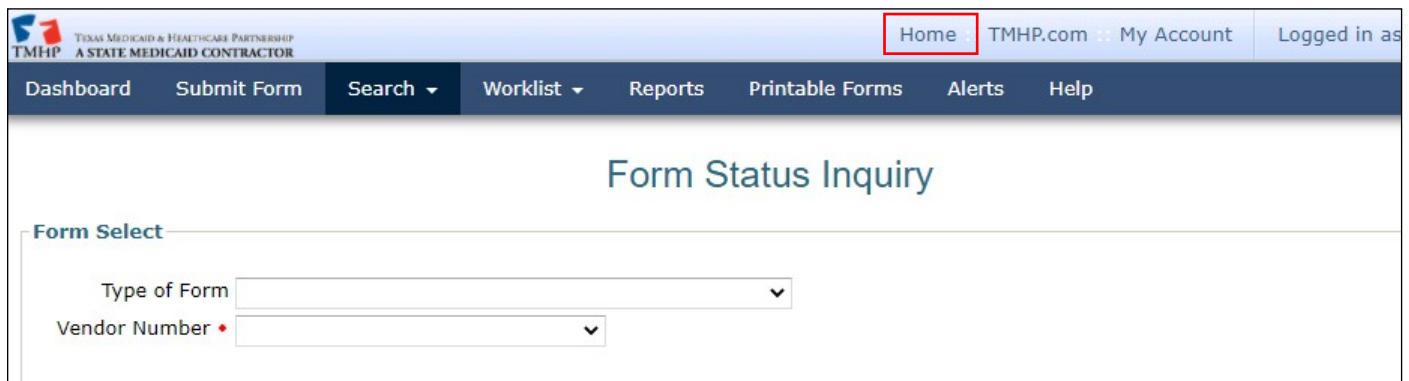
**Form Select**

Type of Form

Vendor Number

## Home

The **Home** button on the light blue navigational bar takes you to the LTC home page.



TMHP TEXAS MEDICAID & HEALTHCARE PARTNERSHIP A STATE MEDICAID CONTRACTOR

Home TMHP.com :: My Account Logged in as

Dashboard Submit Form Search Worklist Reports Printable Forms Alerts Help

### Form Status Inquiry

**Form Select**

Type of Form

Vendor Number

Providers may use the LTC home page to:

- Access the LTC Online Portal.
- Access TexMedConnect.
- Research provider manuals and guides.
- Review bulletins.

## Submit Form

The Submit Form feature allows providers to submit forms and assessments.

To submit a form or assessment (the following steps outline how to submit the 8578 Assessment specifically):

- 1) Log in to the LTC Online Portal.
- 2) Click the **Submit Form** button located on the blue navigational bar.
- 3) In the Type of Form field, choose **8578 Intellectual Disability/Related Condition Assessment** from the drop-down menu.
- 4) In the Program field, choose one of the following programs from the drop-down menu:
  - **ICF (SSLC)**
  - **ICF (Community / State)**
  - **ICF (Non-State)** (i.e., community).

- 5) Choose the appropriate Vendor Number from the drop-down menu.

- 6) Enter information about an existing recipient, if needed. This will autofill the form or assessment with the recipient's demographic information (except gender).
- 7) Click the **Enter Form** button. The form will display for data entry.
- 8) Enter all required information as indicated by the red dots.
- 9) From here, you have the following two choices:
  - a) Click the **Save as Draft** button in the yellow Form Actions bar to save the form or assessment until you are ready to submit. The form or assessment does not have to be complete to save the draft.
  - b) Click the **Submit Form** button, located at the bottom of the screen, to submit the form or assessment.

## FSI

FSI allows you to search for and monitor the status of an ID/RC 8578 Assessment or an Individual Movement Form (IMT). The search results will be limited to forms that you have entered when using the FSI. You can search across all form types; for example you can search for the 8578 and the IMT at the same time, but to do so you must leave the Type of Form drop-down field blank. FSI also enables you to search for 8578s that are expiring by entering future dates. FSI can also be used to search by a person or by document locator number (DLN).

**Note:** FSI can retrieve information from the previous seven years. The search is based on the TMHP Received Date.

FSI allows you to retrieve submissions to:

- Research and review statuses.
- Add or attach additional information to a form or assessment.
- Make corrections (only the ID/RC 8578 Assessment can be corrected).
- Perform inactivations.
- Export the search results to Microsoft Excel™.
- Search for ID/RC 8578 Assessments that are expiring. (To do this, you must enter a date range in either the From Date and To Date range or the Expiration From Date and the Expiration To Date range. You may enter future dates when searching for 8578s.)
- Perform a query for ID/RC 8578 Assessments that are current with their future expiration dates (for example, for a roster of people with assessments during a 12-month window, enter today's date as the Expiration From Date and the Expiration To Date as 12 months later).

**Note:** The From Date and To Date are searched against the TMHP Received Date, which is the date of the successful submission.

To locate a form or assessment using FSI:

- 1) Click **Search** on the blue navigational bar.

- 2) Choose **Form Status Inquiry** from the drop-down menu.

The screenshot shows the LTC Online Portal interface. The top navigation bar includes links for Dashboard, Submit Form, Search (highlighted with a red box), Worklist, Reports, Printable Forms, Alerts, and Help. Below the navigation bar, the 'Form Status Inquiry' title is highlighted with a red box. The form is divided into two sections: 'Form Select' and 'Form Status Inquiry'. The 'Form Select' section contains 'Type of Form' and 'Vendor Number' dropdown menus. The 'Form Status Inquiry' section contains input fields for DLN, Last Name, Form Status, SSN, CARE ID, From Date, To Date, Medicaid Number, and First Name. A 'Search' button is located at the bottom right of the form.

- 3) In the Type of Form field, choose from the drop-down menu.

- This choice determines the type of document that will display in the FSI results page.
- To search across all form types, leave this blank, but you must enter either the Medicaid Number or Social Security number (SSN) or First Name and Last Name.
- You may omit the Type of Form field if you are the original submitter and enter the DLN of the document you need to retrieve. If you are not the original submitter, you must choose the Type of Form even if you enter a DLN.

**Note:** ID/RC 8578 Purpose Code (PC) 2 Assessments submitted by the LIDDA will only be visible to the provider if the IMT was submitted before the submission of the ID/RC 8578 PC 2. If the IMT was submitted after the ID/RC 8578 PC 2, the provider should refer to the person's Medicaid Eligibility Service Authorization Verification (MESAV) to view the LOC/LON information, including the effective date range.

- 4) For the IMT and 8578 Assessment only, choose from the drop-down menu in the Program field.

- 5) In the Vendor Number field, choose from the drop-down menu.

- 6) Enter data for all required fields as indicated by the red dots. You can narrow results by entering specific criteria in the following additional fields: DLN (only the DLN must be entered; the date does not need to be entered for a search by DLN), Last Name, First Name, Medicaid Number, Form Status, CARE ID, From Date and To Date, and PC.

**Note:** To search for 8578 Assessments that are expiring, enter a date range in either the From Date and To Date range or the Expiration From Date and the Expiration To Date range. The From Date and To Date are searched against the TMHP Received Date (which is the date of the successful submission).

- 7) Click the **Search** button for the LTC Online Portal to return any matching submissions (records). Only 50 records will display at a time. To view the next set of records, you must choose another page from the Select a



page drop-down menu. You may also export the search results to Microsoft Excel.

**17** record(s) returned.  
[Export Data to Excel](#)

	DLN	TMHP Received Date	CARE ID	Medicaid	First Name	Last Name	Status	Purpose Code	Provider Number	Vendor Number	Expiration Date
<a href="#">View Detail</a>		10/3/2018					Processed/Complete	3			10/24/2019
<a href="#">View Detail</a>		10/15/2018					Processed/Complete	3			11/2/2019
<a href="#">View Detail</a>		2/26/2019					Processed/Complete	3			3/4/2020
<a href="#">View Detail</a>		2/26/2019					Processed/Complete	3			2/14/2020
<a href="#">View Detail</a>		9/9/2019					Processed/Complete	3			6/20/2020
<a href="#">View Detail</a>		10/8/2019					Processed/Complete	3			11/1/2020
<a href="#">View Detail</a>		10/8/2019					Processed/Complete	3			10/23/2020

- 8) The numbers in the second column are the DLNs associated with a particular vendor number. You may sort the FSI results by clicking the heading of a column. The first time you click a heading, it is sorted in ascending order. By clicking the column heading a second time, the sort will change to descending order. Click the **View Detail** button to the left of the DLN to display the details of the form or assessment.

Here are descriptions of the column headings seen above:

- **View Detail:** The hyperlink used to open the document
- **DLN:** The unique document locator number assigned to each successful submission
- **TMHP Received Date:** The actual date the form or assessment was successfully submitted on the LTC Online Portal
- **CARE ID:** Client Assignment and Registration ID
- **Medicaid #:** (IMT: 13; ID/RC 8578: 8) Medicaid Number of the person as it was entered upon submission
- **First Name:** (IMT: 12a; ID/RC 8578: 4) The first name of the person as it was entered upon submission
- **Last Name:** (IMT: 12c; ID/RC 8578: 4b) The last name of the person as it was entered upon submission
- **Status:** The status of the form or assessment at the time of the search
- **Purpose Code:** The PC displayed on the form
- **Provider Number:** Formerly known as the contract number
- **Vendor Number:** A number assigned by HHSC (the Component Code with a leading zero)
- **Expiration Date:** Expiration date of the LOC determination/LON assignment

## Current Activity

The Current Activity feature only allows you to view form and assessment submissions and status changes that have occurred in the last 14 calendar days. After 14 days, you must use the FSI query tool to locate a form or an assessment.

To use the Current Activity feature, perform the following steps:

- 1) Click **Worklist** on the blue navigational bar.
- 2) Choose **Current Activity** from the drop-down menu.
- 3) Click the appropriate vendor number.

The user name is associated with the following Vendor/Provider numbers. Select the Vendor/Provider number to configure a administrator account.

**Long Term Care Provider Numbers**

Three input fields for Long Term Care Provider Numbers.

**Vendor Numbers**

Five input fields for Vendor Numbers, each with a placeholder text "for Provider Number".

- 4) The results page displays a summary of form and assessment submissions and status changes that have occurred in the last 14 calendar days.

**Current Activity**

HCS PreEnrollment Form	Received	Medicaid	CARE ID	CSIL ID	Name	Slot Type	Status
	5/7/2021 10:56:55 AM					115	Pre-enrolled
	7/9/2021 12:28:21 PM					19	Enrolled
	7/9/2021 3:34:32 PM					116	Rejected by CSIL
	7/8/2021 4:05:06 PM					116	Inactivated
	4/13/2021 4:20:29 AM					114	Inactivated
	7/8/2021 3:46:29 PM					116	Inactivated
	7/7/2021 2:48:06 PM					116	Inactivated

TxHTML PreEnrollment Form	Received	Medicaid	CARE ID	CSIL ID	Name	Slot Type	Status
	7/8/2021 3:37:14 PM					116	Inactivated
	6/20/2021 10:04:51 AM					62	Inactivated

- 5) The numbers in the first column that you see are the DLNs associated with a particular vendor number. Click the **DLN** to show the details of the form or assessment. You may sort the Current Activity results by clicking the heading of a column.

## Drafts

Drafts are unsubmitted forms and assessments that have been started and saved, but not yet submitted on the LTC Online Portal. Forms and assessments saved as drafts will not have a DLN. Once submitted, the form or assessment will be assigned a DLN and will no longer be searchable under Drafts.

When you save a form or assessment as a draft, it will save under the vendor number that you selected when you entered the form or assessment. Drafts are saved for two months and will then be deleted.

The screenshot shows the 'Submit Form' page of the LTC Online Portal. The top navigation bar includes links for Dashboard, Submit Form, Search, Worklist (highlighted with a red box), Reports, Printable Forms, Alerts, and Help. Below the navigation bar, the 'Form Select' section contains two dropdown menus: 'Type of Form' and 'Vendor Number'.

To access a saved draft:

- 1) Click **Worklist** on the blue navigational bar.
- 2) Choose **Drafts** from the drop-down menu.  
**Note:** The initial Drafts page will display a list of all vendor or provider numbers to which the user is linked.
- 3) Click the appropriate vendor number under the Vendor Numbers field.
- 4) A list of drafts saved for the selected vendor or provider number will display.

The screenshot shows the 'Drafts' page of the LTC Online Portal. The top navigation bar includes links for Dashboard, Submit Form, Search, Worklist (highlighted with a red box), Reports, Printable Forms, Alerts, and Help. Below the navigation bar, the 'Drafts' section displays a table with columns: Date Created, Form Type, Description, and Select. The 'Select' column contains 'Remove' and 'Open' buttons.

- 5) From here you have the following two choices:
  - a) Click **Open** to open the draft to edit and submit.
  - b) Click **Remove** to permanently delete the draft. If you choose the **Remove** button, the following confirmation message will appear:

Press 'OK' to confirm that you would like to delete this draft from the portal. Press 'Cancel' to keep the draft.

OK

Cancel

1. Click the **OK** button to delete the draft.
2. Click the **Cancel** button to keep the draft.

**Note:** After a draft has been deleted, it cannot be retrieved.

## Printable Forms

The Printable Forms feature allows you to view and print blank forms or assessments, or interactively complete forms or assessments and save them to your desktop for your unofficial records. Forms and assessments saved to your desktop cannot be submitted to the LTC Online Portal, but can be printed.

**Note:** These LTC Online Portal printable forms cannot be used in place of official, signed forms and assessments required for record keeping.

- 1) Click **Printable Forms** on the blue navigational bar.





- 2) Choose a form or assessment by clicking the corresponding link. A new window and application called Adobe Reader® will open and display the blank document in portable document format (PDF).

DLN		Individual	
<b>8578 Intellectual Disability/Related Condition Assessment</b>			
<b>Purpose Code Information</b>			
13. Purpose Code			
<b>Facility / Provider Information</b>			
1a. Submitter Provider No.		1b. Submitter Vendor Number	
1c. Submitter NPI			
1. Facility / Provider Name			
2. Facility / Provider No.		2a. Facility / Provider Vendor Number	
2b. Facility / Provider NPI Number			
3. Facility / Provider Mailing Address			
3a. Facility / Provider Mailing Address City			
3b. Facility / Provider Mailing Address State		3c. Facility / Provider Mailing Address ZIP Code	
<b>Individual Information</b>			
4. First Name		4a. Middle Initial	

**Note:** After the PDF is open, you can fill out the document and save it to your desktop.

- 3) Click the **Print** icon located at the top left of the PDF document.
- 4) To print the entire document, perform the following steps:
- In the Printer field, choose the appropriate printer name from the drop-down menu.
  - In the Print Range field, click the **All** radio button.
  - Click the **Print** button.
- 5) To print only certain pages instead of the entire document, perform the following steps:
- In the Printer field, choose the appropriate printer name from the drop-down menu.
  - In the Print Range field, click the **Pages** radio button.
  - Enter the particular pages you want to print. (For example, entering 1–5 will print all pages 1 through 5; if you enter 1, 3, 7, the printer will print only pages 1, 3, and 7.)
  - Click the **Print** button.

The image shows a 'Print' dialog box on the left and a form titled 'Individual Movement' on the right.

**Print Dialog Box:**

- Print:** Total: 3 sheets of paper
- Printer:** Canon MG3500 series
- Copies:** 1
- Layout:** Portrait (selected), Landscape
- Pages:** All (selected), Odd pages only, Even pages only, e.g. 1-5, 8, 11-13
- Color:** Color
- Buttons:** Print, Cancel

**Individual Movement Form:**

DLN \_\_\_\_\_ Individual \_\_\_\_\_

**Provider Information**

2. Provider/ Facility Name	
3. Provider/ Facility Address	
4. Provider/ Facility City	
5. Provider/ Facility State	6. Provider/ Facility Zip Code
7. Provider/ Facility Vendor No.	8. Provider/ Facility Provider No.
9. Provider/ Facility NPI	
31. Submitter Vendor No.	
32. Submitter Provider No.	32a. Submitter NPI
33. DSA Legal Name	
34. DSA Vendor No.	35. DSA Provider No.
36. SFSA Vendor No.	37. SFSA Provider No.
38. CDSA Legal Name	
39. CDSA Vendor No.	40. CDSA Provider No.
40a. LA Vendor No.	40b. LA Provider No.

**Individual Movement Information**

10. Program	11. Purpose
-------------	-------------

## Help

The Help feature, at the far right on the blue navigational bar, displays the Help page which includes links to online guides to help with questions that you may have about the LTC Online Portal.

The image shows the 'Help' page in the LTC Online Portal. The 'Help' tab is highlighted in the navigation bar.

**Help**

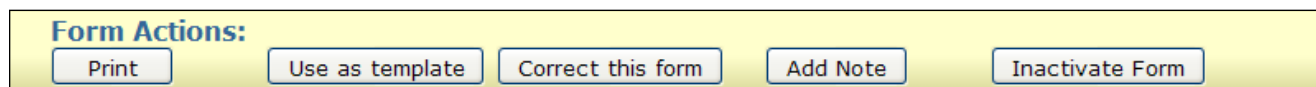
Information regarding claims submissions via TexMedConnect can be found in the TexMedConnect User Guide. All user guides and manuals can be found on the TMHP website ([www.tmhp.com](http://www.tmhp.com)).

**The following are links to online guides to be used in conjunction with TMHP's LTC Online Portal:**

- [Long Term Care Nursing Facility/Hospice Workshop User Guide](#)  
The Long Term Care (LTC) Nursing Facility/Hospice Workshop User Guide provides step-by-step instructions for how to use the various features of the portal, each form type, when to submit the various forms and assessments and managing forms and assessments set to status "Provider Action Required".
- [LTCMI - Nursing Facility 3.0 Instructions](#)  
The entry of 3.0 LTCMI (Long-Term Care Medicaid Information) can ONLY occur after the submission of the Federal MDS 3.0 Assessments and retrieval on TMHP's LTC Online Portal. This document covers only the LTCMI portion of the MDS 3.0 Assessments. All other 3.0 Assessment field information can be found on the Federal CMS website ([www.cms.hhs.gov](http://www.cms.hhs.gov)).
- [Authorization Request for PASRR NF Specialized Services \(NFSS\) Instructions](#)  
The Authorization Request for PASRR NF Specialized Services (NFSS) form is designed for use by nursing facilities to request specialized services which include habilitative therapies (OT, PT, and Speech), Customized Manual Wheelchairs, and PASRR DME. The nursing facility must request and receive authorization from HHSC prior to purchasing or delivering any specialized services.

## Yellow Form Actions Bar

Depending on the status of a form or assessment and security permissions, options found on the yellow Form Actions bar may include: **Print**, **Use as template**, **Correct this form**, **Add Note**, **Inactivate Form**, **Fill Assessment Gap**, or **Request LON Change**. The yellow Form Actions bar is available when an individual form or assessment is being viewed in detail (but remember that not all possible buttons will display at one time).

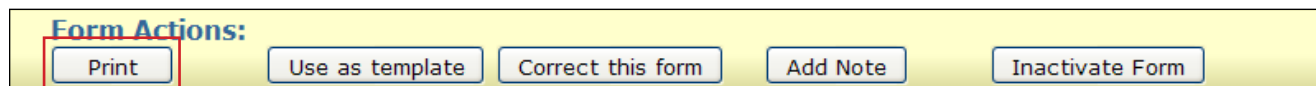


**Form Actions:**

Print Use as template Correct this form Add Note Inactivate Form

## Print

The Print feature allows you to print completed forms and assessments. If you want a hard copy, click the **Print** button located on the yellow Form Actions bar to print the document.



**Form Actions:**

Print Use as template Correct this form Add Note Inactivate Form

**Remember:** To print only specific sections of a form or assessment, click the **Pages** radio button and enter the page range for the desired pages. When printing a form or assessment, the person's name will appear on the top right corner of each page. The name will be autofilled based on the information entered in the name field.

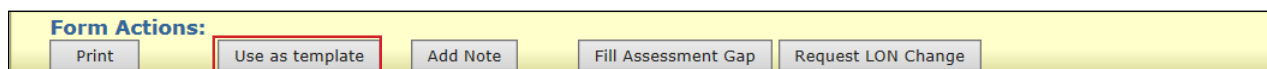
## Use as Template

The Use as template feature allows you to complete a new form or assessment using the information from a previously submitted form or assessment as a template. Various fields will autofill with the information from the form or assessment that you have chosen to use as a template, so be sure to check for accuracy.

**Note:** Depending on the status of the form or assessment, the **Use as template** button may appear on the yellow Form Actions bar.

Use FSI or Current Activity to locate and display the form or assessment that you want to use as a template. Then complete the following steps:

- 1) Click the **Use as template** button.



**Form Actions:**

Print Use as template Add Note Fill Assessment Gap Request LON Change

- 2) When you click the **Use as template** button, the Submit Form screen will open. The Type of Form and the Program drop-down menus will be grayed out and cannot be edited. You must enter the applicable vendor number.

**Submit Form**

**Form Select**

Type of Form •

Vendor Number •

**Recipient**

To prepopulate recipient information please provide one of the following combinations of information.  
Medicaid/CSHCN ID  
or Social Security Number AND Last Name  
or Social Security Number AND Date of Birth  
or Date of Birth AND Last Name AND First Name

Medicaid Number

SSN

Date of Birth

First Name

Last Name

**Enter Form**

- 3) Click the **Enter Form** button at the bottom right of the page.
- 4) A new form or assessment will open with most of the information autofilled. Make sure to verify that the autofilled information is correct. Some fields will be grayed out and cannot be edited. Enter data into the remaining fields that did not autofill.



**Note:** Not all fields will be copied to the new document.

**ID/RC 8578 Assessment**

Current Status: Name:  DLN:0

**Form Actions:**

**PROV/INDIVIDUAL INFO** **DIAGNOSTICS** **ASSESSMENT DATA** **PHYSICIAN EVALUATION**

**CERTIFICATIONS** **LA/DADS REVIEW** **ENROLLMENT DATA**

**Purpose Code Information**

13 ♦ Purpose Code

**Facility/Provider Information**

1a Submitter Provider No.

1b Submitter Vendor Number

1c Submitter NPI

1 Facility/Provider Name

2 ♦ Facility/Provider No.  Provider number of the facility.

2a ♦ Facility/Provider Vendor Number  Vendor number of the facility

2b Facility/Provider NPI Number

3 Facility/Provider Mailing Address

3a Facility/Provider Mailing Address City

3b Facility/Provider Mailing Address State  Texas(TX)

3c Facility/Provider Mailing Address ZIP Code

**Individual Information**

4 ♦ First Name

- 5) If you want a hard copy for your records, click the **Print** button located on the yellow Form Actions bar to print the document.
- 6) From here you have two choices:
  - a) If you are ready to submit the form or assessment, click the **Submit Form** button located at the bottom right of the screen. If you have successfully submitted the document, a DLN will be generated.

- b) If you are not ready to submit the form or assessment, click the **Save as Draft** button located on the yellow Form Actions bar to save the document.

## Correct This Form

The **Correct this form** feature allows users to make corrections to the ID/RC 8578 Assessment (corrections cannot be made to the IMT). Corrections can be made only to assessments that are in the following statuses:

- *Pending Physician License Verification*
- *Out of State Physician License Invalid*
- *Remanded to Submitter* (For this status, the assessment is correctable before the authorization process or if the assessment has been remanded.)

When you click the **Correct this form** button, you will complete a new assessment and the original assessment will be set to status **Corrected**.

When corrections are made to an assessment, a child (new) assessment is created. The information in the parent (original) assessment is copied to the child assessment. The child assessment has a unique DLN. The parent DLN is shown on the child assessment.

**Note:** The steps to correct an assessment are covered in the Corrections section.

## Add Note

The Add Note feature located on the yellow Form Actions bar is always available unless the form or assessment is locked by another user.

The Add Note feature may be used to add information that was not captured in the original submission. The information that is typed into the Add Note text box is added to the History trail of the form or assessment, not to the form or assessment itself (i.e., not added to Comments in the notes section).

The status field of a remanded form or assessment changes after the submitter adds a note to the remanded form or assessment. After a note is saved, it cannot be corrected or deleted.

To add a note to an already submitted form or assessment:

- 1) [Follow the steps](#) for using FSI or Current Activity to locate the form or assessment.
- 2) Click the **Add Note** button. A text box will open.

The screenshot shows the top portion of a web form titled "ID/RC 8578 Assessment". Below the title, there are fields for "Current Status:", "Name:", and "DLN:". Below these fields is a section titled "Form Actions:" containing five buttons: "Print", "Use as template", "Correct this form", "Add Note", and "Inactivate Form". The "Add Note" button is highlighted with a red rectangular box.

- 3) Enter additional information (up to 500 characters).

The screenshot shows a dialog box titled "Form Actions:". It contains the same five buttons as the previous screenshot: "Print", "Use as template", "Correct this form", "Add Note", and "Inactivate Form". Below the buttons is a large, empty text area for entering a note. At the bottom of the dialog box are two buttons: "Cancel" and "Save".

- 4) Click the **Save** button under the text box to save your note, or click the **Cancel** button to erase your note.  
**Note:** If the form or assessment has been remanded to the LIDDA or provider submitter, adding a note (by the LIDDA or provider) will change the form or assessment from status **Remanded to Submitter** to a status of **Pending DADS Review**. However, the form or assessment will continue to be in status **Remanded to Submitter** if a member of the HHSC staff adds a note.

## Inactivate Form

The Inactivate Form feature allows users to inactivate a form or assessment. Once inactivated, the form or assessment will not be available for further processing. Inactivated forms and assessments may, however, be used as templates if you use the **Use as template** feature.

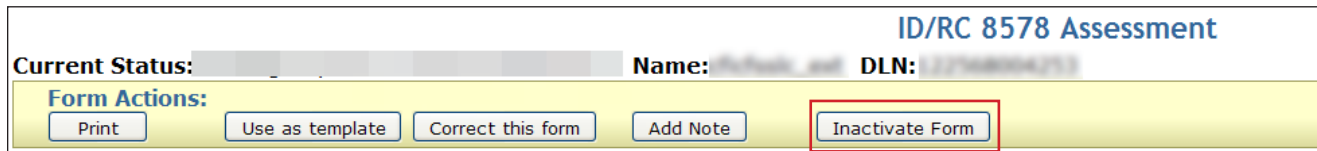
The **Inactivate Form** button will be available on the ID/RC 8578 Assessment and the IMT only in the **Remanded to Submitter** status.

Inactivations are not allowed if the ID/RC 8578 or IMT's History trail contains any of the following statuses:

- **Processed/Complete**
- **DADS SAS Resolution Complete**

- **PCS Processed/Complete**

Users with the proper security rights can deactivate a submitted ID/RC 8578 Assessment that has been remanded by HHSC staff.



**ID/RC 8578 Assessment**

Current Status:   Name:   DLN:  

**Form Actions:**

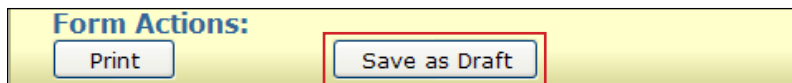
Print Use as template Correct this form Add Note **Inactivate Form**

**Note:** The steps to deactivate forms and assessments are covered in the “[Inactivations](#)” section of this user guide.

## Save as Draft

The Save as Draft feature allows users to save unfinished or unsubmitted forms and assessments on the LTC Online Portal. Once saved, these drafts will be accessible by all users under the draft’s applicable vendor/provider number. The user may access previously saved drafts by clicking the **Drafts** button located under Worklist on the blue navigational bar. Drafts will stay in the system for 60 days and will then be deleted.

**Note:** The **Save as Draft** button will display on the yellow Form Actions bar until the form or assessment being entered has been successfully submitted on the LTC Online Portal and the DLN is assigned.



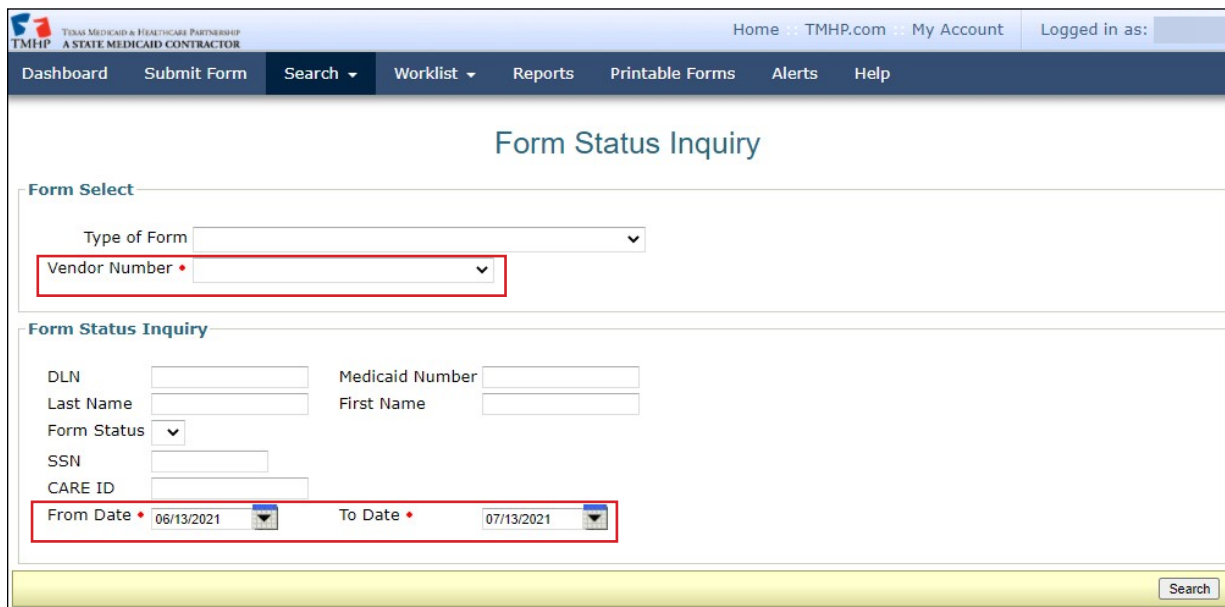
**Form Actions:**

Print **Save as Draft**

## Other Basic Information

### Required Fields

On the LTC Online Portal, red dots indicate required fields. However, not all required fields have red dots.



**Form Status Inquiry**

**Form Select**

Type of Form  

Vendor Number  

**Form Status Inquiry**

DLN   Medicaid Number  

Last Name   First Name  

Form Status  

SSN  

CARE ID  

From Date 06/13/2021 To Date 07/13/2021

**Search**

## Field Description

If you're not sure what a certain field is for, you can hover over the field with your mouse pointer and a description will display.

18	Recommended LON	<input type="text"/>
67w	Enrolled From	<input type="text"/>
<b>Requested Begin and End Dates</b>		
59	Requested Begin Date	<input type="text"/>
60	Requested End Date	<input type="text"/>

Enter the requested effective date of the LOC determination/LON assignment.

## History Trail

Every form and assessment has a History trail of statuses. After opening a form or assessment, scroll to the bottom. The History trail will display a list of every status that has been held by the form or assessment, along with appropriate details. Notes added by you or any comments from TMHP or HHSC will also be located in the History trail. The most recent status will appear at the bottom.

40b	LA Contract No.	<input type="text"/>
<b>Individual Movement Information</b>		
10	Program	ICF_SSLC
11	Purpose	Admission
41	Effective Date	9/5/2012
42	Effective Time	01:03 AM
<b>Individual Information</b>		
12a	Individual First Name	<input type="text"/>
12b	Individual Middle Initial	<input type="text"/>
12c	Individual Last Name	<input type="text"/>
12d	Individual Suffix	<input type="text"/>
13	Medicaid No.	<input type="text"/>
14	Date of Birth	5/17/1968
15	Social Security No.	<input type="text"/>
16	CARE ID	<input type="text"/>
17	Local Case No.	<input type="text"/>
18	Location Code	<input type="text"/>
<b>History</b>		
Form Submitted	9/25/2012	1:05:59 PM
Submitted	9/25/2012	1:06:00 PM
Medicaid ID Pending	9/25/2012	1:06:00 PM
9/25/2012 1:06:00 PM	TMHP : Medicaid ID request submitted.	
ID Confirmed	9/26/2012	11:31:14 AM
9/26/2012 11:31:14 AM	TMHP : Medicaid ID 219921403 confirmed for this Individual.	
Pending Medicaid Eligibility Verification	9/26/2012	11:31:15 AM
9/26/2012 11:31:15 AM	TMHP : Medicaid Eligibility request submitted.	

## UnLock Form

A form or assessment will automatically be locked by the user who opened the document. It will remain locked while that user is actively working in the form or assessment. The document will unlock if the user clicks the **UnLock Form** button or if there is no activity in the form or assessment for 15 minutes.

The **UnLock Form** button will unlock the document so that other authorized users can make changes to the document. When a document is locked, others will not be able to make changes or add information. When receiving assistance from TMHP or HHSC, the user may be asked to unlock the document so that the person assisting the user can make changes.

To unlock a document, click the **UnLock Form** button located in the upper-right corner of the screen.

## Error Messages

There are two types of error message that can occur: field validation error messages and submission error messages.

If required information is missing or if information is invalid, a field validation error message will display and you will not be able to continue to the next step until the error is resolved. Some error messages are simply warnings and do not prevent form submission or processing.

Error messages are displayed at the top of the screen. When you click an error message hyperlink, you will automatically go to the field containing the error.

If the form or assessment was not submitted successfully, a submission error message will appear and the form will not move forward in the workflow.

The error message(s) received upon submission will be specific to the error that caused it and will explain how to correct the error. Submission errors are not hyperlinked, whereas field validation error messages are.

## Entering Dates

There are two ways to enter dates: you can click the calendar icon next to any of the date fields to activate the dynamic calendar and choose the desired date, or you can enter the date using the mm/dd/yyyy format.

## Time Out

The LTC Online Portal will time out after 20 minutes of inactivity. To prevent this, you can continue typing or click on the screen to reset the timer.

If you have been working on a form or assessment and you've been inactive on the computer for 20 minutes, the LTC Online Portal will default to the FSI screen and you will lose any work you may have started (this also applies to forms and assessments that have not been submitted). If you think you will be away from the LTC Online Portal for more than 20 minutes, be sure to first save your work as a draft.

If you are working on a previously submitted form or assessment and a timeout occurs, you will lose only the work completed in the immediate past 20 minutes. You will not lose the information that was previously submitted.

## Current Status

Each submitted form or assessment will display a status that indicates where the form or assessment is in the workflow and whether any action is required to complete the form or assessment.

The status is displayed at the top-left corner of the form or assessment. The status that is displayed is called the current status.



To view previous statuses and notes associated with a form or assessment, go to the History trail.

A complete list of statuses and their descriptions can be found in Appendix A of this user guide. We will also cover common statuses throughout this user guide.

ID/RC 8578 Assessment

Current Status:Processed/Complete

Name:

DLN:

Form Actions:

Print

Restart Form

Edit Content

Remand to Submitter

Indicate UR Review

PROV/INDIVIDUAL INFO

DIAGNOSTICS

ASSESSMENT DATA

PHYSICIAN EVALUATION

CERTIFICATIONS

LA/DADS REVIEW

ENROLLMENT DATA

## Forms and Assessments

There are two documents that ICF/IID program users will use: the ID/RC 8578 Assessment and the IMT.

Name	Purpose
ID/RC 8578 Assessment	<ul style="list-style-type: none"> <li>• Initial assessment of LOC and LON</li> <li>• Renew program eligibility for LOC and LON</li> <li>• Request a change in LON</li> <li>• Request LOC and LON during a gap period</li> </ul>
IMT	<ul style="list-style-type: none"> <li>• Admission</li> <li>• Discharge</li> <li>• Absence</li> <li>• Return</li> </ul>

**Note:** State Supported Living Centers (SSLCs) will submit the ID/RC 8578 Assessment through the LTC Online Portal, but will submit the IMT by using the Integrated Resident Information System (IRIS).

Program users (LIDDAs, providers, etc.) can access forms and assessments based on their association to a person. This means that program users will have access to a form or assessment submitted by a different entity, as long as that program user has a current association with the person. For ICF/IID relationships, the following associations are established:

- LIDDA to person association
- ICF provider to person association
- SSLC to person association

Providers can perform the following tasks on the LTC Online Portal:

- Searching for forms and assessments using FSI or Current Activity
- Submitting forms and assessments on the LTC Online Portal
- Correcting assessments that have been remanded by HHSC staff
- Adding a note to a form or assessment at any time
- Inactivating a form or assessment to stop it from moving forward in the workflow
- Reactivating a Medicaid ID (MI), Medicaid Eligibility (ME), or Applied Income (AI) check
- Remanding ID/RC 8578 Assessments
- Searching for letters

**Note:** If you have trouble viewing a form, contact the TMHP Call Center/Help Desk at 800-626-4117, option 1, then option 4.

## Form Sections

On the LTC Online Portal, forms and assessments are divided into tabbed sections that contain different information, such as Diagnostics, Assessment Data, and Enrollment Data. Be sure to click the tabbed sections and enter the required information. Fields with red dots are required fields in which you must enter data.

The screenshot shows the 'ID/RC 8578 Assessment' form. At the top, it displays 'Current Status: Processed/Complete', 'Name:', and 'DLN:'. Below this is a yellow 'Form Actions' bar with buttons for 'Print', 'Use as template', and 'Add Note'. A row of tabs includes 'PROV/INDIVIDUAL INFO' (highlighted in blue), 'DIAGNOSTICS', 'ASSESSMENT DATA', 'PHYSICIAN EVALUATION', and 'CERTIFICATIONS'. Below these tabs are 'LA/DADS REVIEW' and 'ENROLLMENT DATA'. At the bottom is a blue bar labeled 'Purpose Code Information'.

The screenshot shows the 'Individual Movement' form. It features the same top section with 'Current Status: Processed/Complete', 'Name:', and 'DLN:'. The 'Form Actions' bar is yellow with 'Print', 'Use as template', and 'Add Note' buttons. The tabs row includes 'PROV/INDIVIDUAL INFO' (highlighted in blue), 'ICF/ID INFO', and 'CERTIFICATIONS'. At the bottom is a blue bar labeled 'Provider Information'.

## ID/RC 8578 Assessment

The LIDDA uses the ID/RC 8578 Assessment to request authorization from HHSC for a person's initial LOC and LON.

The ID/RC 8578 Assessment can also be used by applicable ICF/IID program providers to:

- Request initial LOC and LON.
- Renew program eligibility for LOC and LON.
- Request a change in the LON.

The ID/RC 8578 Assessment can be used for different purposes when the ID/RC 8578 Assessment is assigned a different PC. Each PC creates a different type of assessment. These assessments are:

- PC 2 = No Current Assessment (used to request initial LOC and LON).
- PC 3 = Continued Stay Assessment (used to renew program eligibility for LOC and LON, or request a change in the LON).
- PC 4 = Change LON on Existing Assessment (used to request a change in the LON).
- PC E = Gaps in Assessment (used to request LOC and LON during a gap period).

The general path that the ID/RC 8578 Assessment takes when it is entered on the LTC Online Portal is a series of checks and reviews known as the workflow. The parts of the ID/RC 8578 Assessment workflow that relate to providers and LIDDAs include:

- Submitting the assessment on the LTC Online Portal.
- Making corrections to an assessment that has been remanded.
- Reactivating the check for MI, ME, or AI.

## ID/RC 8578 PC 2 No Current Assessment

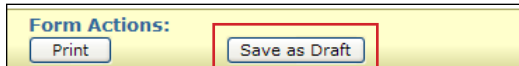
SSLCs and LIDDAs will submit the ID/RC 8578 Assessment with PC 2 for initial eligibility in the ICF/IID program. The ICF/IID provider will notify the LIDDA that the initial ID/RC 8578 Assessment is needed to admit the person into the facility. This LIDDA notification date must be included with the initial ID/RC 8578 Assessment.

The ID/RC 8578 Assessment and the IMT are not dependent on each other and are submitted on the LTC Online Portal independently.

To submit the ID/RC 8578 Assessment with PC 2, perform the following steps:

- 1) Go to [tmhp.com](https://tmhp.com).
- 2) Click **Programs**.
- 3) Click **Long-Term Care (LTC)** from the drop-down menu.
- 4) Click the **LTC Online Portal** button.
- 5) Enter your user name and password, then click the **Sign in** button. The FSI page will display by default.
- 6) Click the **Submit Form** button located on the blue navigational bar.
- 7) In the Type of Form field, choose **8578 Intellectual Disability/Related Condition Assessment** from the drop-down menu.
- 8) In the Program field, choose one of the following programs from the drop-down menu:
  - **ICF (SSLC)**
  - **ICF (Community / State)**
  - **ICF (Non-State)** (i.e., community)
- 9) In the Vendor Number field, choose from the drop-down menu.
- 10) As an option, you can enter additional information in the Recipient section to autofill fields on the assessment.
- 11) Click the **Enter Form** button at the bottom right of the screen. The ID/RC 8578 Assessment will display on the screen.
- 12) For the ID/RC 8578 Assessment you must choose a Purpose Code from the drop-down menu in field number 13.

- 13) Click the tabbed sections, and enter the assessment information. Fields with red dots are required fields in which you must enter data. If you try to submit an assessment but have left information missing from fields with red dots, you will receive error messages indicating which required fields must be completed before the assessment can be submitted.
- 14) When you have completed all the required fields, you can either:
- Click the **Save as Draft** button on the yellow Form Actions bar to save the assessment until you are ready to submit.



- Click the **Submit Form** button at the bottom of the screen to submit the assessment. The LTC Online Portal will attempt to validate the ID/RC 8578 Assessment upon submission. If it does not pass validation, error messages will display and a DLN will not be generated.



If the assessment has been successfully submitted, a unique DLN will be assigned that can be used to locate and track the status of the assessment using FSI.



- To print the submitted document for your records, open the document and click the **Print** button located in the yellow Form Actions bar.

If no admission to the ICF has been entered at the time of HHSC review, the ID/RC 8578 Assessment will be authorized for 30 days from the physician's signature date. If the admission exists, the ID/RC 8578 Assessment will be authorized for 180 days.

If HHSC staff denies the LOC on the ID/RC 8578 Assessment, the assessment will be set to status **LOC Denied**, and a denial letter will be sent to the person or the Legally Authorized Representative (LAR).

If the person or LAR wishes to appeal, the denied LOC appeal request will be transmitted to HHSC staff and the assessment will be set to status **LOC Decision Under Appeal**.

A denial status notification will also be provided to the provider and LIDDA (or SSLC as applicable).

If HHSC denial of LOC is upheld, the assessment will be set to status **LOC Decision Sustained During Appeal**. However, if HHSC denial of LOC is overturned, the assessment will be set to status **LOC Decision Reversed During Appeal** and then will attempt to validate ME. Modification of LOC or LON on a PC 2 by HHSC staff for an initial ID/RC 8578 Assessment is not considered a denial.

Either a successful or an unsuccessful update will be indicated in the History trail. In the event of an unsuccessful update, the ID/RC 8578 Assessment will be routed to HHSC's manual workflow for resolution.

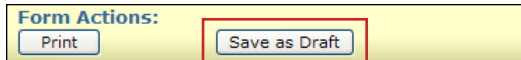
## ID/RC 8578 PC 3 Continued Stay Assessment

Providers will submit the ID/RC 8578 Assessment with PC 3 to request a renewal of LOC and LON. The LTC Online Portal will attempt to validate the ID/RC 8578 Assessment PC 3 Continued Stay upon submission. If it does not pass validations, error messages will be displayed and a DLN will not be generated.

The steps to submit the ID/RC 8578 Assessment with PC 3 are as follows:

- 1) Go to [tmhp.com](https://tmhp.com).
- 2) Click **Programs**.
- 3) Click **Long-Term Care (LTC)** from the drop-down menu.
- 4) Click the **LTC Online Portal** button.
- 5) Enter your user name and password, then click the **Sign in** button. FSI will display by default.
- 6) Click the **Submit Form** button located on the blue navigational bar.
- 7) In the Type of Form field, choose **8578 Intellectual Disability/Related Condition Assessment** from the drop-down menu.
- 8) In the Program field, choose one of the following programs from the drop-down menu:
  - **ICF (SSLC)**
  - **ICF (Community / State)**
  - **ICF (Non-State)** (i.e., communities)
- 9) In the Vendor Number field, choose the applicable number from the drop-down menu.
- 10) As an option, you can enter additional information in the Recipient section to autofill fields on the assessment.
- 11) Click the **Enter Form** button at the bottom right of the screen. The ID/RC 8578 Assessment will display on the screen.
- 12) For the ID/RC 8578 Assessment you must choose a Purpose Code from the drop-down menu in field number 13.
- 13) Click the tabbed sections, and enter the assessment information. Fields with red dots are required fields in which you must enter data. If you try to submit an assessment, but have left information missing from fields with red dots, you will receive error messages indicating which required fields must be completed before the assessment can be submitted.
- 14) When you have completed all the required fields, you can:

- a) Click the **Save as Draft** button on the yellow Form Actions bar to save the assessment until you are ready to submit.



- b) Click the **Submit Form** button at the bottom of the screen to submit the assessment. The LTC Online Portal will attempt to validate the ID/RC 8578 Assessment upon submission. If it does not pass validation, error messages will display and a DLN will not be generated.



**Note:** Submission of the ID/RC 8578 PC 3 Continued Stay more than 180 days after the previous ID/RC expiration date requires HHSC approval and cannot be submitted by the provider. The provider must contact Intellectual and Developmental Disabilities Program Eligibility Services (IDD PES) at 512-438-2484 for assistance.

If the assessment is valid and the person is admitted to an ICF/IID facility, a pop-up message will display upon submission to notify the submitter that a gap has been created. A note will also appear in the History trail.

Through FSI, a unique DLN will be assigned that can be used to locate and track the status of the assessment. To print the submitted document for your records, open the document and click the **Print** button located in the yellow Form Actions bar.

The ID/RC 8578 PC 3 may be automatically approved by the system if certain criteria are met. If the automatically approved criteria are not met, the assessment will be sent to HHSC staff for review. If the provider requests an increased LON, the provider will be notified that documentation is due to HHSC within seven calendar days.

HHSC staff can remand the assessment for correction or more information. They may also correct or inactivate the assessment; approve, modify, or deny the LOC; and approve or modify the LON.

If HHSC staff approves the LOC and LON, the assessment will be set to status **LOC/LON Approved**. The assessment will move forward in the process until ME has been verified. Letters are not sent for approved assessment renewals.

If HHSC staff denies the LOC, the ID/RC 8578 Assessment PC 3 will be set to status **LOC Denied**, a denial letter will be sent to the person or LAR, and the provider will be notified.

If a person or LAR requests an appeal of LOC denial, the assessment will be set to status **LOC Decision Under Appeal**. If HHSC denial of LOC is upheld, the assessment will be set to status **LOC Decision Sustained During Appeal**. If HHSC denial of LOC is overturned, the assessment will be set to status **LOC Decision Reversed During Appeal**, and the assessment will continue through the process after ME is verified.

If the denial of LON is upheld during the reconsideration process, the assessment will be set to status **LON Sustained During Reconsideration**, and an Administrative Review letter will be sent to the provider and the person or LAR. If the denial of LON is overturned, the assessment will be set to status **LON Reversed During Reconsideration**.

HHSC staff allows the provider to request an Administrative Review within 15 calendar days if the decision is upheld during reconsideration. If the provider requests an Administrative Review, the assessment will be set to status **Pending Administrative Review**. If the denial of LON is overturned during Administrative Review, the



assessment will be set to status ***LON Reversed During Administrative Review***. If the denial of LON is upheld during Administrative Review, the assessment will be set to status ***LON Sustained During Administrative Review***.

In the event of an increased LON request from the provider, HHSC staff can indicate whether a justification packet was received in the required seven calendar days. If HHSC staff indicates that a justification packet was not received, the ID/RC 8578 Assessment will move forward in the process, but a modified LON will not trigger a letter and will not be eligible for reconsideration. Instead, a note in the History trail will inform the provider that the requested LON was modified because the required justification packet was not received in the required time.

The LTC Online Portal will indicate either a successful or an unsuccessful update to Service Authorization System (SAS) records in the History trail. In the event of an unsuccessful update to SAS records, the assessment will be routed to HHSC's manual workflow for resolution.

When LOC/LON are approved, MI, ME, and AI verification will occur. If MI, ME, or AI validation initially fails, the portal will leave the assessment in the status of ***Medicaid ID Pending***, ***Pending Medicaid Eligibility Verification***, or ***Pending Applied Income Verification*** for 180 days. The portal will check for updates daily; if nothing is found after 180 days, then the assessment moves into an ***Inactive*** status. When MI, ME, and AI are verified, the assessment will continue processing.

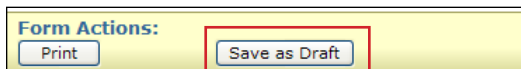
## ID/RC 8578 PC E Gaps in Assessment

Providers will submit the ID/RC 8578 Assessment PC E for Gaps in Assessment. The LTC Online Portal will autofill the gap dates on the ID/RC 8578 Assessment PC E. The PC E must be initiated from the current ID/RC 8578 Assessment of the person, so the provider must search for the current assessment using FSI. (If it has been fewer than 14 days since the current ID/RC 8578 was submitted, Current Activity may be used).

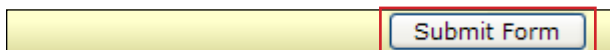
To locate a person's current ID/RC 8578 Assessment using FSI:

- 1) Click **Search** on the blue navigational bar.
- 2) Choose **Form Status Inquiry** from the drop-down menu.
- 3) In the Type of Form field, choose **8578 ID/RC Assessment** from the drop-down menu.
- 4) In the Program field, choose from the drop-down menu.
- 5) In the Vendor Number field, choose the applicable number from the drop-down menu.
- 6) Enter data for all required fields as indicated by the red dots. You can narrow results by entering specific criteria in these additional fields: DLN, Last Name, First Name, Medicaid Number, Expiration From and To Dates, and Purpose Code. Dates are searched against the TMHP Received Date.
- 7) Click the **Search** button, and the LTC Online Portal will return any matching submissions (records).
- 8) Click **View Detail** at the left of the DLN to display the details of the assessment.

- 9) After the current assessment is open, the submitter must click the **Fill Assessment Gap** button (for the button to display, the assessment must be set to status **Processed/Complete** or **PCS Processed/Complete**) on the yellow Form Actions bar to launch the Gaps in Assessment. When launched, the PC E Assessment will display and autofill with read-only fields (with data from the person's current assessment) that are disabled so that the autofilled data cannot be changed.
- 10) Enter all required information in the fields, as indicated by the red dots.
- 11) When all required fields are completed, you can:
  - a) Click the **Save as Draft** button on the yellow Form Actions bar to save the assessment until you are ready to submit.



- b) Click the **Submit Form** button at the bottom of the screen to submit the assessment. The LTC Online Portal will attempt to validate the ID/RC 8578 PC E Gaps in Assessment upon submission. If it does not pass validations, error messages will display indicating the error(s) and a DLN will not be generated.



If the assessment has been successfully submitted, a unique DLN will be assigned that can be used to locate and track the status of the assessment using FSI. To print the submitted document for your records, open the document and click the **Print** button located in the yellow Form Actions bar. ID/RC 8578 PC E Gaps in Assessments are automatically approved and will not have an approval letter.

## ID/RC 8578 PC 4 Change LON on Existing Assessment

Providers are responsible for submitting the ID/RC 8578 Assessment with PC 4 to initiate a change in LON assignment. The provider actions for the ID/RC 8578 Assessment PC 4 include the:

- Provider submission process.
- Remand process.

The ID/RC 8578 Assessment PC 4 must be initiated from the current ID/RC 8578 Assessment of the person. Therefore, the provider must locate the current assessment using FSI.

To locate a person's current ID/RC 8578 Assessment using FSI:

- 1) Click **Search** on the blue navigational bar.
- 2) Choose **Form Status Inquiry** from the drop-down menu.
- 3) In the Type of Form field, choose **8578 ID/RC Assessment** from the drop-down menu.
- 4) In the Program field, choose from the drop-down menu.
- 5) In the Vendor Number field, choose the applicable number from the drop-down menu.

- 6) Enter data for all required fields as indicated by the red dots. You can narrow results by entering specific criteria in these additional fields: DLN, Last Name, First Name, Medicaid Number, and Purpose Code. Dates are searched against the TMHP Received Date.  
**Note:** The narrowing search criteria fields that display when performing an FSI will vary based on the type of form chosen.
- 7) Click the **Search** button on the bottom right, and the LTC Online Portal will return any matching submissions (records).
- 8) Click the **View Detail** link to the left of the DLN to display the details of the assessment.
- 9) After the assessment is open, there will be a **Request LON Change** button displayed on the yellow Form Actions bar. When the button is clicked, a new assessment will open with some of the fields autofilled with data from the current assessment and disabled so that you cannot change the autofilled data.

- 10) Enter all required information in the fields, as indicated by the red dots.
- 11) When you have completed all the required fields, you can:
  - a) Click the **Save as Draft** button on the yellow Form Actions bar to save the assessment until you are ready to submit.

- b) Click the **Submit Form** button at the bottom of the screen to submit the assessment. The LTC Online Portal will attempt to validate the ID/RC 8578 Assessment upon submission. If it does not pass validations, error messages will display indicating the error(s) and a DLN will not be generated.

**Note:** The **Request LON Change** button will be available for use on assessments with PCs 2, 3, or 4, and with the most recent submission time stamp.

If the 8578 Assessment is valid and the person is admitted to an ICF/IID facility, a unique DLN will be assigned and the assessment will be sent to HHSC staff for review. All 8578 PC 4 Change in LON Assessments will be sent to HHSC staff for review. If the provider requests an increased LON, the provider must send a justification packet to HHSC within seven calendar days.

## IMT

The ICF/IID IMT allows providers to report a person's admission, discharge, absence, or return at an ICF/IID facility. The submission process for each use of the IMT is the same. In step 10, Purpose, one of the following is selected: Admission, Discharge, Absence, or Return.

Providers can print, add a note to, save drafts of, and, depending on security level, inactivate the IMT.

The provider will submit an admission request through the IMT on the LTC Online Portal for the ICF/IID program.

**Note:** SSLCs will enter the IMT using IRIS. HHSC will submit Individual Movement records to TMHP through a batch interface between IRIS and the LTC Online Portal. The IMT will still undergo the same validation checks and be routed to the same workflow as non-SSLC forms entered directly on the LTC Online Portal.

The steps to submit an IMT are as follows:

- 1) Go to [tmhp.com](http://tmhp.com).
- 2) Click **Programs**.
- 3) Click **Long-Term Care (LTC)** from the drop-down menu.
- 4) Click the **LTC Online Portal** button.
- 5) Enter your user name and password. Click the **Sign in** button. The FSI page will display by default.
- 6) Click the **Submit Form** button located on the blue navigational bar.
- 7) In the Type of Form field, choose **Individual Movement Form** from the drop-down menu.
- 8) In the Program field, choose one of the following programs from the drop-down menu:
  - **ICF (SSLC)**
  - **ICF (Community / State)**
  - **ICF (Non-State)** (i.e., community)

**Submit Form**

**Form Select**

Type of Form • Individual Movement Form

Program •

- ICF (SSLC)
- ICF (Community / State)
- ICF (Non-State)

**Recipient**

To prepopulate recipient information please provide one of the following combinations of information.  
Medicaid/CSHCN ID

- 9) In the Vendor Number field, choose the applicable number from the drop-down menu.
- 10) In the Purpose field, choose one of the following: Admission, Discharge, Absence, or Return.

**Submit Form**

**Form Select**

Type of Form • Individual Movement Form

Program • ICF (Community / State)

Vendor Number • for Provider Number

Purpose •  
Admission  
Discharge  
Absence  
Return

**Recipient**

To prepopulate recipient information please provide one of the following combinations of information.  
Medicaid/CSHCN ID  
or Social Security Number AND Last Name  
or Social Security Number AND Date of Birth  
or Date of Birth AND Last Name AND First Name

Medicaid Number

SSN

Date of Birth mm/dd/yyyy

First Name

Last Name

Enter Form

- 11) You can also enter additional information in the Recipient section to autofill fields in the form.
- 12) Click the **Enter Form** button. The IMT will display.

- 13) Click the tabbed sections and enter the information. Fields with red dots are required fields that must be completed. If you try to submit the form but have not completed the fields with red dots, you will receive error messages indicating which required fields must be completed before the form can be submitted.

**Individual Movement**

**Current Status: Name: DLN:0**

**Form Actions:**

Print Save as Draft

**PROV/INDIVIDUAL INFO ICF/ID INFO CERTIFICATIONS**

**Provider Information**

2	Facility Provider Name	
3	Facility Provider Address	
4	Facility Provider City	
5	Facility Provider State	▼
6	Facility Provider ZIP Code	
7	Facility Provider Vendor No.	
8	Facility Provider No.	
9	Facility Provider NPI	
31	Submitter Vendor No.	
32	Submitter Provider No.	
	Submitter NPI	
32a		
40a	LA Vendor No.	
40b	LA Provider No.	

**Individual Movement Information**

10	Program	ICF_Community_State ▼
11	Purpose	Admission ▼
41	Effective Date	mm/dd/yyyy ▼
42	Effective Time	00:00 am

- 14) When you have completed all the required fields, you can:

- a) Click the **Save as Draft** button on the yellow Form Actions bar to save the form until you are ready to submit.

**Form Actions:**

Print Save as Draft

- b) Click the **Submit Form** button at the bottom of the screen to submit the form. The LTC Online Portal will attempt to validate the form upon submission. If it does not pass validations, error messages will display and a DLN will not be generated.

**Submit Form**

If the form has been successfully submitted, a unique DLN will be assigned that can be used to locate and track the status of the form using FSI. To print the submitted document for your records, open the document and click the **Print** button located in the yellow Form Actions bar.

Upon successful submission, the form will move into the MI/ME verification processes. If ME validation is not immediately successful, the automatic check will continue for 180 calendar days. If, after 180 days, ME has still

not been validated, the form will be set to status **Medicaid ID Check Inactive** or **Medicaid Eligibility Verification Inactive**. Forms can be reactivated by providers.

After ME has been verified, the IMT form data will be submitted to SAS for processing. If this is unsuccessful, the form will be routed to HHSC's manual workflow for resolution.

**Note:** You can log into the LTC Online Portal to check the status of the form at any time.

## Reactivate Medicaid ID, Medicaid Eligibility, or Applied Income Check

After a form or assessment is submitted, the LTC Online Portal automatically checks for MI, ME, and AI consecutively, for up to 180 days.

**Note:** The AI check only occurs on the 8578 ID/RC and not on the IMT.

During the 180 days, the LTC Online Portal first checks for a valid Medicaid ID. If a valid Medicaid ID is not found in 180 days, the Medicaid Eligibility check will not start, and the form or assessment is set to status **Medicaid ID Check Inactive**. In this status, the **Reactivate Medicaid ID Check** button will display on the yellow Form Actions bar which allows the provider, HHSC, or the LIDDA to reactivate the Medicaid ID check.

If a valid Medicaid ID is found, the LTC Online Portal will continue to check for Medicaid Eligibility. Medicaid Eligibility is validated during the remainder of the 180 days. If no eligibility is found during the remaining time, the form or assessment is set to status **Medicaid Eligibility Verification Inactive**. In this status, the submitting entity or HHSC may reactivate the Medicaid Eligibility check.

**Note:** It is not required that you reactivate this check, and approval of LOC/LON is not dependent on Medicaid Eligibility, but payment for Medicaid services will not be authorized if Medicaid Eligibility cannot be found.

If Medicaid Eligibility is found, the LTC Online Portal will continue to check for Applied Income. If no Applied Income record is found during the remaining time, the form or assessment is set to status **Applied Income Verification Inactive**. In this status, the submitting entity or HHSC may reactivate the Applied Income check.

**ID/RC 8578 Assessment**

**Current Status:** Medicaid ID Check Inactive **Name:** \_\_\_\_\_ **DLN:** \_\_\_\_\_

<b>Form Actions:</b>	<b>Workflow Actions:</b>
<input type="button" value="Print"/> <input type="button" value="Use as template"/>	<input type="button" value="Reactivate Medicaid ID Check"/>

PROV/INDIVIDUAL INFO	DIAGNOSTICS	ASSESSMENT DATA	PHYSICIAN EVALUATION	CERTIFICATIONS	LA/DADS REVIEW
ENROLLMENT DATA					

Purpose Code Information		
13	Purpose Code	2 = No Current Assessment
Facility/Provider Information		
1a	Submitter Provider No.	



**ID/RC 8578 Assessment**

Current Status: Medicaid Eligibility Verification Inactive Name: \_\_\_\_\_ DLN: \_\_\_\_\_

**Form Actions:** Print Use as template

**Workflow Actions:** Reactivate Medicaid Eligibility Check

**PROV/INDIVIDUAL INFO** **DIAGNOSTICS** **ASSESSMENT DATA** **PHYSICIAN EVALUATION** **CERTIFICATIONS** **LA/DADS REVIEW**

**ENROLLMENT DATA**

**Purpose Code Information**

13	Purpose Code	2 = No Current Assessment
----	--------------	---------------------------

**Facility/Provider Information**

1a	Submitter Provider No.	
1b	Submitter Vendor Number	

**ID/RC 8578 Assessment**

Current Status: Applied Income Verification Inactive Name: \_\_\_\_\_ DLN: \_\_\_\_\_

**Form Actions:** Print Add Note Inactivate Form

**Workflow Actions:** Reactivate Applied Income Check

**PROV/INDIVIDUAL INFO** **DIAGNOSTICS** **ASSESSMENT DATA** **PHYSICIAN EVALUATION** **CERTIFICATIONS** **LA/DADS REVIEW**

**ENROLLMENT DATA**

**Purpose Code Information**

13	Purpose Code	3 = Continued Stay Assessment
----	--------------	-------------------------------

**Facility/Provider Information**

1a	Submitter Provider No.	
1b	Submitter Vendor Number	
1c	Submitter NPI	

**Note:** When set to status *Medicaid ID Check Inactive*, *Medicaid Eligibility Verification Inactive*, or *Applied Income Verification Inactive*, the approval of LOC/LON assignments will not be affected.

## Discharge Using the IMT

Providers will submit a discharge request by using the IMT following the steps already covered and indicating the discharge reason.

If a permanent discharge is indicated, the provider must document where the person will be going. Successful submission of the IMT results in the assignment of a DLN. The form data is then sent to SAS for processing. If the form is successfully processed in SAS, it will be routed to HHSC's manual workflow for resolution.

**Note:** SSLCs will enter the IMT using IRIS. HHSC will submit Individual Movement records to TMHP through a batch interface between IRIS and the LTC Online Portal. The IMT will still undergo the same validation checks and be routed to the same workflow as non-SSLC forms entered directly on the LTC Online Portal.

## Absence Using the IMT

Providers will use the IMT to submit an absence request by following the steps already covered and indicating the reason for absence. If two consecutive absences are submitted, the system will generate an error message that the person is currently absent from an ICF facility.

## Return Using the IMT

Providers will submit a return request by using the IMT following the steps already covered and indicating the return reason.

## Corrections

In the ICF/IID Program, corrections can be made only to the ID/RC 8578 Assessment. Corrections cannot be made to the Individual Movement Form (see the Inactivations section for instructions on how to inactivate the Individual Movement Form). Furthermore, providers can only make corrections to an assessment in one of the following statuses:

- *Pending Physician License Verification*
- *Out of State Physician License Invalid*
- *Remanded to Submitter*

Assessments may be corrected during the HHSC authorization process.

If incorrect data is submitted on an ID/RC 8578 Assessment, corrections can be made by clicking the **Correct this form** button. However, not all fields are correctable. To correct an assessment, access the assessment using FSI or Current Activity.

Examples of incorrect data include:

- The person is listed as a male, but is actually a female.
- The person's diagnosis indicates diabetes, but the person actually has hypoglycemia.

**Note:** If a past date is displayed in field 64. Expiration Date, the assessment cannot be corrected. Additionally, if the field requiring an update is not correctable, the provider can inactivate the assessment, update the field, and resubmit.

## Who May Submit the Correction?

The original submitter does not have to be the one who submits a correction, but the submission does have to be from the same vendor/provider number. Regardless of the current status of an ID/RC 8578 Assessment, corrections cannot be made to assessments that have at any time been set to status **Corrected**, **Inactivated**, or **Invalid/Complete**. The **Correct this form** button will not be displayed on the yellow Form Actions bar on an assessment that cannot be corrected. Corrections are processed immediately.

## How to Submit a Correction

You can use either FSI or Current Activity to access the ID/RC 8578 Assessment that you need to correct. To submit a correction, perform the following steps:

- 1) Click the **Search** button on the blue navigational bar.
- 2) Choose **Form Status Inquiry** from the drop-down menu.
- 3) In the Type of Form field, choose **8578 ID/RC Assessment** from the drop-down menu.
- 4) In the Program field, choose from the drop-down menu.

- 5) In the Vendor Number field, choose the applicable number from the drop-down menu.
- 6) Enter data for all required fields as indicated by the red dots. You can narrow results by entering specific criteria in the additional fields: DLN, Last Name, First Name, Medicaid Number, and Purpose Code. Dates are searched against the TMHP Received Date (date of successful submission).
- 7) Click the **Search** button on the bottom right, and the LTC Online Portal will return any matching records.
- 8) Scroll to the bottom of the page. Click the **View Detail** button to the left of the DLN to display the details of the assessment.

5 record(s) returned.

[Export Data to Excel](#)

	DLN	TMHP Received Date	CARE ID	Medicaid #	First Name	Last Name	Status	Purpose Code	Provider Number	Vendor Number	Expiration Date
<a href="#">View Detail</a>		1/13/20					Processed/Complete	3			1/11/20
<a href="#">View Detail</a>		1/13/20					Processed/Complete	3			1/11/20
<a href="#">View Detail</a>		1/21/20					Processed/Complete	3			2/15/20
<a href="#">View Detail</a>		1/26/20					Processed/Complete	3			2/23/20
<a href="#">View Detail</a>		3/21/20					Processed/Complete	E			1/12/20

- 9) Click the **Correct this form** button.

**ID/RC 8578 Assessment**

**Current Status:**   **Name:**   **DLN:**  

**Form Actions:**

- 10) A new assessment will launch. (The status of the parent assessment will be set to **Corrected** when the **Correct this form** button is clicked and the new child assessment is launched.)

History		
Form Submitted	10/5/20	5:07:24 PM
Pending MD/DO License Verification	10/5/20	5:07:25 PM
10/5/20	5:07:25 PM	TMHP : License must be manually verified
Corrected	10/5/20	5:26:04 PM
10/5/20	5:26:04 PM	: Form has been corrected by DLN

- 11) Enter correct information into all required fields and fields that need to be corrected.
- 12) Click the **Submit Form** button.

The new child assessment DLN is assigned, creating the parent/child DLN relationship. The new child assessment becomes the current assessment and replaces the parent assessment.

**ID/RC 8578 Assessment**

**Current Status:** PCS Processed/Complete **Name:**  **DLN:**

**Parent DLN:**

**Form Actions:**

**Workflow Actions:**

**PROV/INDIVIDUAL INFO** **DIAGNOSTICS** **ASSESSMENT DATA** **PHYSICIAN EVALUATION** **CERTIFICATIONS**

**LA/DADS REVIEW** **ENROLLMENT DATA** **CHANGE HISTORY**

Purpose Code Information		
13	Purpose Code	2 = No Current Assessment <input type="button" value="v"/>

Facility/Provider Information		
1a	Submitter Provider No.	<input type="text"/>
1b	Submitter Vendor Number	<input type="text"/>
1c	Submitter NPI	<input type="text"/>
1	Facility/Provider Name	<input type="text"/>
2	Facility/Provider No.	Provider number of the facility <input type="text"/>
2a	Facility/Provider Vendor Number	Vendor number of the facility <input type="text"/>
2b	Facility/Provider NPI Number	<input type="text"/>
3	Facility/Provider Mailing Address	<input type="text"/>
3a	Facility/Provider Mailing Address City	ABILENE <input type="text"/>
3b	Facility/Provider Mailing Address State	Texas(TX) <input type="button" value="v"/>
3c	Facility/Provider Mailing Address ZIP Code	<input type="text"/>

## Inactivations

Forms and assessments may need to be inactivated for many reasons. However, inactivations are only available in certain statuses.

For the Individual Movement Form, instead of inactivating the form, Program Eligibility and Support (PES) can now edit the form so that correct information can be updated and then resubmitted. Contact PES at 512-438-2484 or by email at [enrollmenttransferdischargeinfo@hhs.texas.gov](mailto:enrollmenttransferdischargeinfo@hhs.texas.gov).

For the ID/RC 8578 Assessment the **Inactivate Form** button will be available in the following statuses:

- **Pending Physician License Verification**
- **Out of State Physician License Invalid**
- **Remanded to Submitter** — In this status, the assessment is available for inactivation before the HHSC authorization process or if the assessment has been remanded.

Forms and assessments can be inactivated through the LTC Online Portal by first retrieving the form or assessment using FSI or Current Activity. Once the form or assessment is inactivated, it will be set to status **Inactivated**. While an inactivated form or assessment cannot be reactivated, it can still be used as a template. Forms and assessments that have already processed to completion cannot be inactivated.

## Who may Inactivate?

Inactivations may be performed based on the vendor/contract who originally submitted the form or assessment. HHSC staff can also perform inactivations.

The screenshot shows the 'ID/RC 8578 Assessment' form in the LTC Online Portal. The top navigation bar includes 'Submit Form', 'Search', 'Worklist', 'Printable Forms', 'Alerts', and 'Help'. The form header displays 'Current Status', 'Name', and 'DLN'. Below this, the 'Form Actions' section contains buttons for 'Print', 'Use as template', 'Correct this form', 'Add Note', and 'Inactivate Form' (which is highlighted with a red box). The form is divided into several tabs: 'PROV/INDIVIDUAL INFO', 'DIAGNOSTICS', 'ASSESSMENT DATA', 'PHYSICIAN EVALUATION', 'CERTIFICATIONS', 'LA/DADS REVIEW', and 'ENROLLMENT DATA'. The 'PROV/INDIVIDUAL INFO' tab is active, showing 'Purpose Code Information' with a dropdown set to '2 = No Current Assessment'. Below this is the 'Facility/Provider Information' section, which includes fields for '1a Submitter Provider No.', '1b Submitter Vendor Number', '1c Submitter NPI', '1 Facility/Provider Name', '2 Facility/Provider No.' (with a note 'Provider number of the facility'), '2a Facility/Provider Vendor Number' (with a note 'Vendor number of the facility'), '2b Facility/Provider NPI Number', and '3 Facility/Provider Mailing Address'.

## How to Inactivate a Form or Assessment

- 1) Log in to the LTC Online Portal.
- 2) Find your document using FSI or Current Activity. (For more information on searching for a form or assessment using FSI, go to the FSI section of this user guide. For instructions on how to use Current Activity, go to the Current Activity section of this user guide.)
- 3) Click **View Detail**.
- 4) Click the **Inactivate Form** button.
- 5) When the dialog box stating Are you sure you want to Inactivate this form? appears:
  - a) Click the **OK** button to inactivate the form or assessment.
  - b) Click the **Cancel** button if you do not want to inactivate the form or assessment.

**Note:** Once inactivated, forms and assessments cannot be reactivated and will be set to status ***Inactivated***.

## Reminders

- Users can monitor the status of their forms and assessments through FSI or Current Activity.
- The Add Note feature may be used to provide important information.
- The Printable Forms from the LTC Online Portal cannot be used as the official, signed forms that you are required to keep.
- LTC providers are contractually obligated to follow the instructions provided in information letters. The TMHP website at [tmhp.com/programs/ltc](https://tmhp.com/programs/ltc) contains information letters and other important announcements.
- A **Reactivate Medicaid ID Check** button or a **Reactivate Medicaid Eligibility Check** button will display if the MI or ME check has expired.
- Not all buttons will display on the yellow Form Actions bar for some users because security level and form and assessment status dictate which buttons are available. This also applies to the blue navigational bar buttons.
- SSLCs will continue to enter the Individual Movement Form using the IRIS. The Individual Movement Form will still undergo the same validation checks and be routed to the same workflow as non-SSLC forms entered directly on the LTC Online Portal.
- The Client Assignment and Registration (CARE) system that is currently used will not be discontinued entirely, and the ICF/IID policies currently in place will remain the same.

## **Medicaid Waste, Abuse, and Fraud**

Medicaid fraud is defined as “an intentional deceit or misrepresentation made by a person with the knowledge that deception could result in some unauthorized benefit to himself or some other person. It includes any act that constitutes fraud under applicable federal or state law.”

## **How to Report Waste, Abuse, and Fraud**

Reports may be made through the following website: <https://oig.hhs.texas.gov>. The website also includes instructions on how to submit a report, and how to submit additional documentation that cannot be transmitted over the Internet. Additionally, the website provides information on the types of waste, abuse, and fraud to report to the Office of the Inspector General (OIG).

If you are not sure whether an action is waste, abuse, or fraud, report it to OIG and let the investigators decide. If you are uncomfortable about submitting a report online, contact Client Fraud and Abuse reporting at 800-436-6184.

## **HIPAA Guidelines and Provider Responsibilities**

Providers must comply with the Health Insurance Portability and Accountability Act (HIPAA). It is your responsibility to comply with HIPAA, to seek legal representation when needed, and to consult the manuals or speak to your TMHP provider representative when you have questions.



## Resource Information

Resource	Contact Information
TMHP Call Center/Help Desk	800-727-5436 or 800-626-4117
Medicaid Hotline	800-252-8263
EDI Help Desk	888-863-3638
LTC Help Desk	800-626-4117
TMHP General Customer Service	800-925-9126
Medicaid Fraud	800-436-6184
Payment information for cost reports	512-438-3624
Quality assurance fee (QAF)	512-438-3597 or 512-438-3624
ICF/IID durable medical equipment (DME), DME authorizations, Home and Community Based Services (HCS), Texas Home Living Waiver (TxHmL), home modifications, adaptive aids, and dental services approvals	Provider Claims Services: 512-438-2200, Option 5
CARE System Help Desk for ICF/IID	Request HHSC Field Support Staff: 888-952-4357
Program enrollment for utilization review (UR)/usual, customary utilization control (UC), PCs, ID/RC Assessment, level of service, LON, LOC, and Inventory for Client and Agency Planning (ICAP)	UR: 512-438-5055 Program Eligibility and Support: 512-438-2484 Fax: 512-438-4249
Provider contracts and vendor holds for ICF/IID	512-438-2630, Option 3
Invalid recoupments for ICF/IIDs	Provider Recoupments and Holds: 512-438-2200, Option 3
Client Movement Questions – only if before Implementation, Form history before 2010, CARE questions, Programmatic Eligibility (Functional)	HHSC Help Desk: 800-214-4175
Consumer Rights and Services Surrogate Decision Making Program (SDMP) for people receiving community-based services through the ICF/IID program	Consumer Rights and Services: 800-458-9858 Email: <a href="mailto:CRSComplaints@hhsc.state.tx.us">CRSComplaints@hhsc.state.tx.us</a> Website: <a href="http://www.hhs.texas.gov/about-hhs/your-rights/">www.hhs.texas.gov/about-hhs/your-rights/</a>

## Appendix A: Form and Assessment Statuses

The status of a form or assessment can be monitored by using FSI or Current Activity. The status of a form or assessment is shown in the FSI or Current Activity results or, once a specific document is selected, the status can be located at the top of the page or at the bottom of the document in the History trail. You may see the following statuses:

### ID/RC 8578 Assessment

Status	Description
<b><i>Appeal Withdrawn</i></b>	The person or LAR has withdrawn a previous request for an appeal.
<b><i>Applied Income Verification Inactive</i></b>	The LTC Online Portal has reached the 180-day limit for checking a person's Applied Income. The search may be reactivated by either HHSC staff or an authorized user.
<b><i>Approved (Non-Medicaid)</i></b>	The final status for approved 8578 Assessments submitted for people who are not Medicaid eligible.
<b><i>Callback Initiated</i></b>	HHSC requests justification for an LON assignment review.
<b><i>Corrected</i></b>	The 8578 Assessment has been corrected by the submitter. There will be a new DLN located in the History trail indicating the replacement DLN for the corrected assessment. No further actions are allowed on assessments with a status of <b><i>Corrected</i></b> .
<b><i>Denied Due to Financial Ineligibility</i></b>	HHSC staff has denied LOC due to lack of ME.
<b><i>HHSC SAS Resolution Complete</i></b>	The final status for an 8578 Assessment that has been rejected by SAS, after HHSC staff have taken action to resolve the issue.
<b><i>ID Confirmed</i></b>	The LTC Online Portal has confirmed that a person has a Medicaid ID number assigned.
<b><i>Inactivated</i></b>	The 8578 Assessment has been stopped from moving forward in the workflow. An inactivated assessment cannot be reactivated.
<b><i>Invalid/Complete</i></b>	The final status for an 8578 Assessment that has been rejected by SAS, after HHSC staff has determined that the transaction is invalid.
<b><i>LOC Approved/LON Modified</i></b>	HHSC has approved the requested LOC assignment, but modified the LON assignment.
<b><i>LOC Decision Reversed During Appeal</i></b>	The state has reversed the original decision to deny an LOC assignment as a result of a person's request for an appeal.
<b><i>LOC Decision Sustained During Appeal</i></b>	The state has maintained the original decision to deny the LOC assignment as a result of a person's request for an appeal.
<b><i>LOC Decision Under Appeal</i></b>	The state is reviewing the original decision to deny the LOC assignment as a result of a person's request for an appeal.
<b><i>LOC Decision Under Appeal With Continuation of Services</i></b>	While the state is reviewing the original decision to deny an LOC assignment, the state has authorized the continuation of services for the person.

<b>Status</b>	<b>Description</b>
<b><i>LOC Decision Under Appeal Without Continuation of Services</i></b>	While the state is reviewing the original decision to deny an LOC assignment, the state has not authorized the continuation of services for the person.
<b><i>LOC Denied</i></b>	During the authorization process, HHSC has denied the requested LOC assignment.
<b><i>LOC Modified/LON Approved</i></b>	During the authorization process, HHSC has modified the requested LOC assignment and approved the LON assignment.
<b><i>LOC Modified/LON Modified</i></b>	During the authorization process, HHSC has modified both the requested LOC and LON assignments.
<b><i>LOC/LON Approved</i></b>	During the authorization process, HHSC has approved both the requested LOC and LON assignments.
<b><i>LON Approved</i></b>	During the authorization process, HHSC has approved the requested LON assignment.
<b><i>LON Modified</i></b>	During the authorization process, HHSC has modified the requested LON assignment.
<b><i>LON Reversed During Administrative Review</i></b>	HHSC has reversed the original decision to deny or modify an LON assignment during the final review of a request to reconsider an LON assignment.
<b><i>LON Reversed During Reconsideration</i></b>	HHSC has reversed the original decision to deny or modify the LON assignment during a requested review to reconsider an LON assignment.
<b><i>LON Sustained During Administrative Review</i></b>	HHSC has sustained an original decision to deny or modify an LON assignment during the final review of a request to reconsider an LON assignment.
<b><i>LON Sustained During Reconsideration</i></b>	HHSC has sustained the original decision to deny or modify the LON assignment during a requested review to reconsider an LON assignment.
<b><i>ME Verification Check Activated</i></b>	If Medicaid Eligibility cannot be found for the person (during the 180-day check), either HHSC or the original submitter can request reactivation of the Medicaid Eligibility check.
<b><i>Medicaid Eligibility Confirmed</i></b>	The LTC Online Portal has found Medicaid eligibility for the requested dates.
<b><i>Medicaid Eligibility Verification Inactive</i></b>	The 180-day limit for checking a person's Medicaid eligibility. HHSC staff or the original submitter can reactivate the search for Medicaid eligibility.
<b><i>Medicaid ID Check Activated</i></b>	If a Medicaid ID for a person cannot be found (during the 180-day check), either HHSC or the original submitter can request reactivation of the Medicaid ID check.

<b>Status</b>	<b>Description</b>
<b><i>Medicaid ID Check Inactive</i></b>	The LTC Online Portal has reached the 180-day limit for checking a person's Medicaid ID. HHSC staff or the original submitter may reactivate the search for a person's Medicaid ID.
<b><i>Medicaid ID Pending</i></b>	The LTC Online Portal is checking for a valid Medicaid ID.
<b><i>Pending Applied Income Verification</i></b>	The LTC Online Portal is checking a person's Applied Income for the requested dates.
<b><i>Pending HHSC Review</i></b>	The assessment is pending HHSC review and authorization of the requested LON assignment.
<b><i>Pending HHSC Review - LON</i></b>	The assessment is pending HHSC review and authorization of the requested LON assignment.
<b><i>Pending HHSC Review (Callback - LON Packet Not Received)</i></b>	HHSC has not received justification for the requested LON assignment review.
<b><i>Pending HHSC Review (Callback - LON Packet Received)</i></b>	HHSC has received the LON justification packet and is reviewing the assessment for authorization.
<b><i>Pending HHSC Review (LON Packet Not Received)</i></b>	HHSC has not yet taken action on the assessment during the review and authorization of the requested LON assignment.
<b><i>Pending HHSC Review (LON Packet Received)</i></b>	HHSC has not yet taken action on the assessment during the review and authorization of the requested LON assignment. HHSC has requested justification of the LON assignment review, which has been received.
<b><i>Pending HHSC SAS Resolution</i></b>	The assessment has been rejected by SAS and sent to HHSC staff for resolution.
<b><i>Pending LON Administrative Review</i></b>	HHSC changes the status to reflect that a request has been made for an administrative review of the LON modification.
<b><i>Pending LON Packet Receipt</i></b>	The system is awaiting confirmation by HHSC that justification for the requested increased LON has been received.
<b><i>Pending LON Packet Receipt (Callback)</i></b>	HHSC has indicated that needed justification for an LON assignment review has been received.
<b><i>Pending LON Reconsideration</i></b>	The system is awaiting HHSC to indicate the outcome of the reconsideration process.
<b><i>Pending Medicaid Eligibility Verification</i></b>	The LTC Online Portal is checking a person's Medicaid eligibility for the requested dates.
<b><i>Pending SAS Update</i></b>	Assessment data has been transmitted to SAS and is awaiting a response.
<b><i>Pending Submission</i></b>	The assessment has been accepted by the LTC Online Portal and is performing validations.
<b><i>Processed/Complete</i></b>	The assessment has been processed without error.
<b><i>Rejected by SAS</i></b>	The assessment has not processed.

Status	Description
<b><i>Remanded to Submitter</i></b>	The assessment has been returned to the original submitter for corrections.
<b><i>Submit to SAS</i></b>	Transitional status after HHSC staff resubmits an assessment to SAS that has been previously rejected.
<b><i>Submitted</i></b>	The assessment has been successfully submitted to the LTC Online Portal workflow.

## IMT

Status	Description
<b><i>Appeal Requested</i></b>	The form was previously denied and the person or their representative has requested an appeal.
<b><i>Appeal Withdrawn</i></b>	A previous request for a fair hearing for a previously denied form has been withdrawn.
<b><i>Corrected</i></b>	The form has been corrected by the submitter. There will be a new DLN located in the History trail indicating the replacement DLN for the corrected form. No further actions are allowed on forms with a status of <b><i>Corrected</i></b> .
<b><i>HHSC SAS Resolution Complete</i></b>	The final status for a form that has been rejected by SAS. HHSC staff have taken action to resolve the issue in SAS.
<b><i>HHSC SAS Resolution Complete - Returned to Service</i></b>	A person has been returned to services after a suspension.
<b><i>ID Confirmed</i></b>	The LTC Online Portal has confirmed that a person has a Medicaid ID number assigned.
<b><i>Inactivated</i></b>	A form has been stopped from moving forward in the workflow. An inactivated form cannot be reactivated.
<b><i>Individual Update: Pending Submission</i></b>	The Individual Update form has been accepted by the LTC Online Portal and is performing validations.
<b><i>Invalid/Complete</i></b>	The final status for forms that have been rejected by the LTC Online Portal, after HHSC staff determined that the transaction is invalid.
<b><i>Medicaid Eligibility Confirmed</i></b>	The LTC Online Portal has found Medicaid eligibility for the requested dates.
<b><i>Medicaid ID Pending</i></b>	The LTC Online Portal is checking for a valid Medicaid ID.
<b><i>Pending HHSC Review</i></b>	The form is forwarded to HHSC for review and authorization.
<b><i>Pending HHSC SAS Resolution</i></b>	The form has been rejected by SAS and sent to HHSC staff for resolution.
<b><i>Pending Medicaid Eligibility Verification</i></b>	The LTC Online Portal is checking for a person's Medicaid eligibility for the requested dates.
<b><i>Pending SAS Update</i></b>	Form data has been transmitted to SAS and is awaiting a response.

Status	Description
<i>Processed/Complete</i>	The form is complete and has been processed without error.
<i>Processed/Complete (Non-Cert Units)</i>	The form has processed successfully for non-Medicaid beds.
<i>Rejected by SAS</i>	The form has not processed.
<i>Remanded to Submitter</i>	The form has been returned to the original submitter for corrections.

## Appendix B: Response Codes

SAS Response Code	Internal Message Text	External Message Text	Service Group(s)
CM-0003	CM-0003: The request cannot be processed because the services being requested on the Admission form are not applicable for the Provider Number selected on the form.	CM-0003: The request cannot be processed because the services being requested on the Admission form are not applicable for the Provider Number selected on the form.	ICF & SSLC 4, 5, and 6
CM-0004	CM-0004: The request cannot be processed because the returning Individual's hold record cannot be found.	CM-0004: The request cannot be processed because the returning Individual's hold record cannot be found.	ICF & SSLC 4, 5, and 6
CM-0012	CM-0012: This request cannot be processed because the individual requesting an absence does not have a valid Movement Code and Status Combination in the system.	CM-0012: This request cannot be processed because the individual requesting an absence does not have a valid Movement Code and Status Combination in the system.	ICF & SSLC 4, 5, and 6
CM-0013	CM-0013: Individual does not exist in SAS and hence must submit an ID/RC and Individual Movement Form with Purpose = Admission for enrollment to a Certified Bed in this program.	CM-0013: Individual does not exist in SAS and hence must submit an ID/RC and Individual Movement Form with Purpose = Admission for enrollment to a Certified Bed in this program.	SSLC 4
CM-0014	CM-0014: Individual must submit an ID/RC and Individual Movement Form with Purpose = Admission for enrollment to a Certified Bed in this program.	CM-0014: Individual must submit an ID/RC and Individual Movement Form with Purpose = Admission for enrollment to a Certified Bed in this program.	SSLC 4
CM-0015	CM-0015: The discharge request cannot be processed because the Individual is not currently enrolled in the program.	CM-0015: The discharge request cannot be processed because the Individual is not currently enrolled in the program.	ICF & SSLC 4, 5, and 6



<b>SAS Response Code</b>	<b>Internal Message Text</b>	<b>External Message Text</b>	<b>Service Group(s)</b>
CM-0016	CM-0016: The admission request cannot be processed because the effective date being requested overlaps with the admission date for the individual already admitted to an ICF/ID facility under a different Provider Number.	CM-0016: The admission request cannot be processed because the effective date being requested overlaps with the admission date for the individual already admitted to an ICF/ID facility under a different Provider Number.	ICF & SSLC 4, 5, and 6
CM-0018	CM-0018: This request cannot be processed because the individual requesting admission in the ICF/ID facility does not have a valid Movement Code and Status Combination in the system.	CM-0018: This request cannot be processed because the individual requesting admission in the ICF/ID facility does not have a valid Movement Code and Status Combination in the system.	ICF & SSLC 4, 5, and 6
CM-0019	CM-0019: This request cannot be processed because the individual requesting a discharge does not have a valid Movement Code and Status Combination in the system.	CM-0019: This request cannot be processed because the individual requesting a discharge does not have a valid Movement Code and Status Combination in the system.	ICF & SSLC 4, 5, and 6
CM-0020	CM-0020: This request cannot be processed because the individual returning to the ICF/ID facility does not have a valid Movement Code and Status Combination in the system.	CM-0020: This request cannot be processed because the individual returning to the ICF/ID facility does not have a valid Movement Code and Status Combination in the system.	ICF & SSLC 4, 5, and 6
CM-0021	CM-0021: This request cannot be processed because the individual does not have a valid Movement Code and Status Combination in the system.	CM-0021: This request cannot be processed because the individual does not have a valid Movement Code and Status Combination in the system.	SSLC 4
GN-0001	GN-0001: The request cannot be processed because the individual's record does not exist in SAVERR/TIERS.	GN-0001: The request cannot be processed because the individual's record does not exist in SAVERR/TIERS.	ICF & SSLC 4, 5, and 6



<b>SAS Response Code</b>	<b>Internal Message Text</b>	<b>External Message Text</b>	<b>Service Group(s)</b>
GN-0006	GN-0006: The request cannot be processed because the Provider Contract cannot accommodate a new Individual since the Contract Capacity is full.	GN-0006: The request cannot be processed because the Provider Contract cannot accommodate a new Individual since the Contract Capacity is full.	ICF & SSLC 4, 5, and 6
GN-0010	GN-0010: The request cannot be processed because the existing SAS record may have already been updated by HHSC State Office Staff manually.	GN-0010: The request cannot be processed because the existing SAS record may have already been updated by HHSC State Office Staff manually.	ICF & SSLC 4, 5, and 6
GN-0016	GN-0016: The request cannot be processed because the Provider Number submitted on the form is not a valid Provider Number.	GN-0016: The request cannot be processed because the Provider Number submitted on the form is not a valid Provider Number.	ICF & SSLC 4, 5, and 6
GN-0017	GN-0017: The request cannot be processed because the Location submitted on the form is not a valid Location.	GN-0017: The request cannot be processed because the Location submitted on the form is not a valid Location.	SSLC & HCS 21 and 4
GN-0018	GN-0018: This request cannot be processed because the submitted form contains invalid form status for the form type that cannot be processed by the system.	GN-0018: This request cannot be processed because the submitted form contains invalid form status for the form type that cannot be processed by the system.	ICF & SSLC 4, 5, and 6
GN-0019	GN-0019: This form cannot be processed because the individual's original records cannot be found (cannot find Parent DLN in SAS).	GN-0019: This form cannot be processed because the individual's original records cannot be found (cannot find Parent DLN in SAS).	ICF & SSLC 4, 5, and 6
GN-0020	GN-0020: This request cannot be processed because the submitted form contains invalid Purpose Code for the form type that cannot be processed by the system.	GN-0020: This request cannot be processed because the submitted form contains invalid Purpose Code for the form type that cannot be processed by the system.	ICF & SSLC 4, 5, and 6

<b>SAS Response Code</b>	<b>Internal Message Text</b>	<b>External Message Text</b>	<b>Service Group(s)</b>
GN-0021	GN-0021: This request cannot be processed because the submitted form contains an invalid service group for the form type that cannot be processed by the system.	GN-0021: This request cannot be processed because the submitted form contains an invalid service group for the form type that cannot be processed by the system.	ICF & SSLC 4, 5, and 6
GN-0022	GN-0022: This request cannot be processed because the submitted form contains an invalid TMHP change flag value that cannot be processed by the system.	GN-0022: This request cannot be processed because the submitted form contains an invalid TMHP change flag value that cannot be processed by the system.	ICF & SSLC 4, 5, and 6
GN-9200	GN-9200: This form cannot be processed because of a SAS Rules Engine Error.	GN-9200: This form is being processed manually by HHSC. Allow an additional 10 business days for processing.	ICF & SSLC 4, 5, and 6
GN-9246	GN-9246: This form cannot be processed because of a technical error. Assistance from technical staff is required.	GN-9246: This form is being processed manually by HHSC. Allow an additional 10 business days for processing.	ICF & SSLC 4, 5, and 6
LN-0001	LN-0001: The request cannot be processed because the individual does not have an active Level of Service (LN) record in SAS.	LN-0001: The request cannot be processed because the individual does not have an active Level of Service (LN) record in SAS.	ICF & SSLC 4, 5, and 6
MR-0003	MR-0003: The admission request cannot be processed because the individual is already admitted to the facility and has active service authorizations overlapping the effect date of the Admission.	MR-0003: The admission request cannot be processed because the individual is already admitted to the facility and has active service authorizations overlapping the effect date of the Admission.	ICF & SSLC 4, 5, and 6

## Appendix C: Terms and Abbreviations

Term/ Abbreviation	Description
Accepted	Term used to indicate files or transactions that successfully bypassed front-end rejection criteria and are accepted for further processing in Claims Management System.
AI	Applied Income
CARE ID	Client Assignment and Registration ID
CMS	Centers for Medicare & Medicaid Services
DD	Developmental Disability
DLN	Document Locator Number
EDI	Electronic Data Interchange
FSI	Form Status Inquiry
Gap	A period of time for a person for which there is no assessment coverage.
HHSC	Texas Health & Human Services Commission
HIPAA	Health Insurance Portability and Accountability Act
ICAP	Inventory for Client and Agency Planning
ICF/IID	Intermediate Care Facility/Facilities for Individuals with an Intellectual Disability or Related Conditions
ID	Intellectual Disability
ID CARE	Intellectual Disability Client Assignment and Registration (formerly MR CARE)
ID/RC	Intellectual Disability/Related Condition (formerly MR/RC)
IDD	Intellectual and Developmental Disabilities
IID	Individuals with an Intellectual Disability
IRIS	Integrated Resident Information System (replaces AVATAR CRS)
LA	Local Authority (umbrella encompassing both LIDDA and LMHA)
LAR	Legally Authorized Representative
LIDDA	Local Intellectual and Developmental Disability Authority
LMHA	Local Mental Health Authority
LOC	Level of Care
LON	Level of Need
LTC	Long-Term Care
LTC Online Portal	Web-based application accessible through TMHP.com and used by nursing facility (NF) and waiver program providers to submit forms and assessments to TMHP and manage the service authorization process.
ME	Medicaid eligibility
MI	Medicaid ID
MR CARE	See ID CARE

<b>Term/ Abbreviation</b>	<b>Description</b>
NF	Nursing facility
NPI	National Provider Identifier Number
NPPES	National Plan and Provider Enumeration System
PC	Purpose Code
PCS	Provider Claims Services (workflow)
Person/People	The one receiving services (formerly individual, client, consumer, patient, or case)
QDDP	Qualified Developmental Disabilities Professional (SSLCs only)
QIDP	Qualified Intellectual Disability Professional
R&S	Remittance and Status Report
SAS	Service Authorization System
SG	Service Group
SSAS	Single Service Authorization System
SSLC	State Supported Living Center
SSN	Social Security number
TAC	Texas Administrative Code
TMC	TexMedConnect (online claims submission portal/application)
TMHP	Texas Medicaid & Healthcare Partnership
www.tmhp.com	TMHP's website; TMHP web-based applications (e.g., LTC Online Portal, TexMedConnect) can be found at <a href="http://www.tmhp.com">www.tmhp.com</a> .
Workflow	Common term in LTC referring to a unique process

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