



COMMISSIONER
Chris Traylor

April 15, 2010

To: Nursing Facility (NF) Providers

Subject: Information Letter 10-50
Specialized Services Benefit

The Department of Aging and Disability Services has developed Form 1018 - Specialized Services Customized Manual Wheelchair (CMWC) Authorization Request, Form 1017 - Specialized Services Durable Medical Equipment (DME) Authorization Request and form instructions. These forms are to be used for nursing facility residents who qualify for the Customized Manual Wheelchair (CMWC) and Durable Medical Equipment benefits through Specialized Services (SS).

Eligibility for Nursing Facility Specialized Services

The CMWC and DME benefits are available only through Specialized Services for PASRR-eligible NF residents. A NF resident must have had a Pre-Admission Screening and Resident Review, PASRR Level 2 completed and approved in order to be eligible for specialized services. Also, the resident PASRR level 2 must indicate a need for specialized services.

Forms Access

Nursing facility providers must now use Form 1018 when requesting prior authorization from DADS for a Customized Manual Wheelchair (CMWC) for a PASRR-eligible nursing facility resident. Refer to the following link to access the Form 1018 form instructions, and CMWC policy attachment: <http://www.dads.state.tx.us/forms/1018/>

When requesting authorization of a CMWC through specialized services, it is strongly recommended by DADS that the facility print and review the following:

- Form 1018,
- Form 1018 instructions and
- Form 1018 Attachment 1.

In addition, nursing facility providers must now use Form 1017 when requesting prior authorization from DADS for specific Durable Medical Equipment (DME) for a Medicaid-eligible nursing facility resident. Form 1017, instructions and Attachment 1 contain the policy, process, and the specific DME that can be requested for prior authorization from DADS. Refer to the following link to access the Form 1017, form instructions and CMWC policy attachment: <http://www.dads.state.tx.us/forms/1017/>

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When requesting authorization of DME through specialized services, it is strongly recommended by DADS that the facility print and review the following:

- Form 1017,
- Form 1017 instructions and
- Form 1017 Attachment 1.

Review of the above documents prior to initiating the process and completing forms 1017 and 1018 should assist in avoiding unnecessary returns or denials of incomplete submissions.

Should you have additional comments or questions regarding PASRR, please contact a PASRR program specialist at (512) 438-4385 or (512) 438-5233. Should you have additional comments or questions regarding the CMWC and DME prior authorization process after reviewing this letter and the above referenced documents, please contact Sean Ivie at (512) 438-5208 or by email at sean.ivie@dads.state.tx.us.

Sincerely,

[signature on file]

William Campbell, Director
Institutional Services Section
Provider Services

WC:gw