



Screening Connections

PACE Team Focus

June 17, 2024

Office of Community Living (OCL)

VIRGINIA'S MEDICAID PROGRAM

DMAS



WELCOME
PACE
LTSS
SCREENING
TEAMS!

Logistics

- Post your questions for today's session in the **Chat box**.
- Click the "Chat" bubble icon at the top of the screen to maximize the Chat feature.



Today's Agenda:



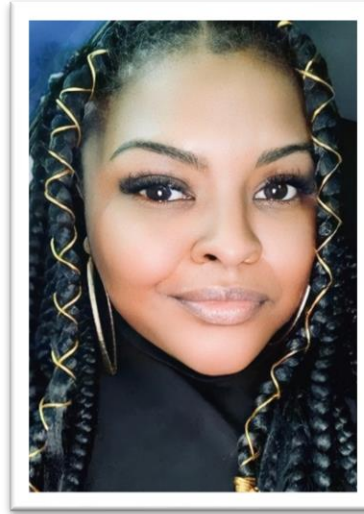
**IMPORTANT UPDATES AND
PACE TEAM REVIEW**



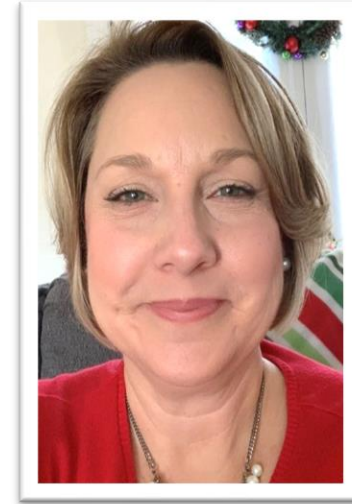
**QUESTION AND ANSWER
PERIOD**



Ryan Fines
LTSS Screening Supervisor



Ivy Young
Technical Assistance for
Screening Assistance Mailbox,
Screening Connections Webex,
& Communications



Dena Schall
Technical Assistance for
Screening Assistance Mailbox
and eMLS

DMAS Office of Community Living (OCL) LTSS Screening Program Staff

**Send all LTSS Screening questions, issues, and concerns to
ScreeningAssistance@dmas.virginia.gov**

Updates and PACE Team Overview

*Presented by Dena Schall,
LTSS Screening Unit*



Update:

WELCOME PACE TEAMS!!!!



DMAS Communicates to LTSS Screening Teams via:

- DMAS Memos and Bulletins for formal communications (Your site should check these periodically on the MES Homepage): <https://vamedicaid.dmas.virginia.gov/provider/library>
- LTSS Screening Connection Call Power Points on the DMAS webpage: Select Providers Tab, Long-Term Care dropdown, then Select Programs and Initiatives, then LTSS Screening <https://www.dmas.virginia.gov/>
- DMAS MES Homepage with multiple resources and information (Memos, Manuals, Forms, etc.): <https://vamedicaid.dmas.virginia.gov/provider>
- Your email that you provide in the VCU Electronic LTSS Screening Training Portal.

Stay Connected:



LTSS Screening Connection Calls

Held quarterly:

- March, June, September and December
- 2nd Tuesday
- 3pm to 4:30pm
- PACE Team will join calls with the Community Based Teams



Next Call: Tuesday September 10, 2024

Stay Connected:



LTSS Screening Connection Call Schedule

2024				
<u>SCREENING TEAM TYPE</u>	<u>QUARTER 1</u>	<u>QUARTER 2</u>	<u>QUARTER 3</u>	<u>QUARTER 4</u>
PACE and Community Based Teams (CBTs)	March	June	September 10, 2024	December 10, 2024
Hospitals	March	June	September 11, 2024	December 11, 2024
Nursing Facilities	March	June	September 12, 2024	December 12, 2024

Connection Call PowerPoints

Posted on the DMAS Website Under the Provider Tab:

Long Term Care:

<https://www.dmas.virginia.gov/for-providers/long-term-care/programs-and-initiatives/>

SCREENING FOR LTSS

Look down the page for Screening Connection call information

The screenshot shows the Virginia Medicaid website interface. At the top, there is a navigation bar with the following items: 'Applicants', 'Members', 'Providers', 'Appeals', 'COVID-19', 'Open Data', and 'About Us'. A red arrow points to the 'Providers' tab. Below the navigation bar is a large banner image of a man in a plaid shirt. Overlaid on the banner is the text 'Programs and Initiatives' with a red arrow pointing to it, and a list of programs: 'Electronic Visit Verification, Program of All-Inclusive Care, Civil Monetary Penalty, Screening'. Below the banner is a section titled 'Resources - Programs and Initiatives' which contains four cards. A red arrow points to the 'Screening' card.

Virginia Medicaid
Department of Medical Assistance Services

Privacy Policy | Sitemap | MDS Portal Login

Search the site

Providers

Programs and Initiatives
Electronic Visit Verification, Program of All-Inclusive Care, Civil Monetary Penalty, Screening

Resources - Programs and Initiatives

- Electronic Visit Verification**
The federal 21st Century CURES Act of 2016 requires states to implement Electronic Visit Verification (EVV).
- Program of All-Inclusive Care**
PACE helps adults ages 55+ who are living with chronic health care needs and/or disabilities to receive community-based services and support.
- Civil Monetary Penalty**
Civil Monetary Penalty (CMP) funds help improve the quality of life for individuals residing in Nursing Facilities within the Commonwealth.
- Screening**
Screening ensures Medicaid-eligible individuals, and those who will become eligible for Medicaid within six months, meet the required level of care criteria.

Big Update:



General Assembly House Bill 2024 Session: Passed

House Bill 729 PACE programs; long-term services and support screening.

- Allows qualified staff of programs of all-inclusive care for the elderly (PACE) to conduct the required long-term services and supports screening in accordance with requirements established by the Department of Medical Assistance Services.

DMAS Memo/Bulletin will be released soon.

Virginia's Legislative Information System

<https://lis.virginia.gov/lis.htm>

Big Update



House Bill 729 PACE programs; long-term services and support screening.

What does this mean:

- When the community-based teams are unable to complete the screening within 30 days and/or the individual has requested enrollment in a PACE program, the CBT can make a referral to the local PACE site to conduct the LTSS Screening.
- The intention is for PACE sites to take referrals for individuals who are interested in PACE.

Big Update



Even though it is a PACE referral, the PACE Team must provide choice to the individual of all of the Medicaid LTSS options:

- Custodial Long Term Nursing Facility,
- CCC Plus Waiver, or
- PACE

If the individual changes their mind and wants either the NF or CCC Plus Waiver, it must be honored, and the LTSS Screening referral process in the manual must be followed.

Reminder:



Bulletins and Memos can be found on the MES Home Page in the Provider Menu at:

<https://vamedicaid.dmas.virginia.gov/>

The screenshot shows the MES Public Portal website. At the top, it says "MES Public Portal - Department of Medical Assistance Services" and "An official website of the Commonwealth of Virginia". The "MES" logo is prominent. A navigation bar includes links for Appeals, CRMS, EDI, EPS, MES Training, and Providers. On the left, a "Provider Menu" sidebar lists various options: PROVIDER HOME, MCO Provider, Provider Training, CRMS Resources, CRMS Training, Provider FAQ, Popular Downloads, Manuals Library, Memos/Bulletins Library (circled in red), MES Forms Library, EDI Resources, EPS Resources, and Login/Password Help. Red arrows point from the words "Manuals" and "Forms" on the left to the "Manuals Library" and "MES Forms Library" items respectively. The main content area features a "Provider Resources" header with a photo of a doctor, a welcome message, a search engine, and a "What is MES?" section.

Designate someone on your team to check periodically for new Bulletins and Memos that may provide updates on the LTSS Screening Process.

Laws and Guidelines

Virginia's laws for LTSS Screening are found in the Code of Virginia, Title 32.1. Health, Chapter 10. Department of Medical Assistance Services, § 32.1-330. Preadmission screening required.

Administrative Code: 12VAC30-60-301 through 315

<https://law.lis.virginia.gov/admincode/title12/agency30/chapter60/section301/>

Virginia's Legislative Information System (For Information):

<https://lis.virginia.gov/lis.htm>

Note: Currently these laws are in the process of being updated, so Screening Teams may be required to follow additional resources for guidance from Memos/Bulletins, LTSS Screening Manuals, and the quarterly Connection Calls.

PACE LTSS Screening Team Staff

Who can conduct LTSS Screenings on the PACE Team:

- Team must have at least one **Registered Nurse** and a **Physician** (can include a Physician's Assistant or Nurse Practitioner under the direction of the MD).
- You may also have additional staff such as a Social Worker or other medical professionals skilled in conducting assessments, but their must be a RN signing with them.

The authorization or denial for Medicaid LTSS (DMAS 96) must be attested and electronically signed by the PACE LTSS screener(s) and physician.

DMAS Required Training for LTSS Screeners

VCU Medicaid LTSS Screening Training Modules, Competency Test, and Certificate:

- RN screeners and other optional Screeners need to register under the facility NPI and complete Modules 1-3.
- Physicians, Nurse Practitioners, and Physician Assistants need to register under the facility NPI with a role of Physician and complete Module 5 only.
- Certificates will have a number/letter sequence on it that will be used to electronically sign off in the eMLS Screening on the DMAS 96 Authorization form.
- Recertification for Screeners and Physician must be maintained every 3 years.
- Other staff that play a role on the team, but do not screen can take the training as a guest but will not receive a competency test or certificate.

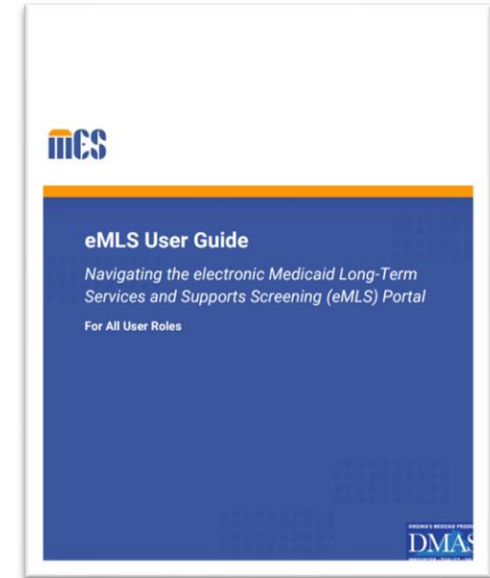
To log in or register as a screener or guest go to: <https://medicaidtss.partnership.vcu.edu/register>

Also use the Power Point Presentation provided to your site that walks you step by step on how to use the VCU Training Portal. If you need technical assistance with the training portal, your account, or certificate please contact ppdtechhelp@vcu.edu.



Use eMLS User Guide and Training

- Access, System Requirements, User Access Roles, and Logging In
- Navigation and Functions of System
- Error Message Meaning
- Searching of an Existing Screening
- Data Entry and Submission of New Electronic LTSS Screenings
- Screening Status and Watermarks
- Voiding and Corrections of Existing Screenings
- Printing Screenings
- Uploading and Downloading the P-98 offline form
- And many more concepts



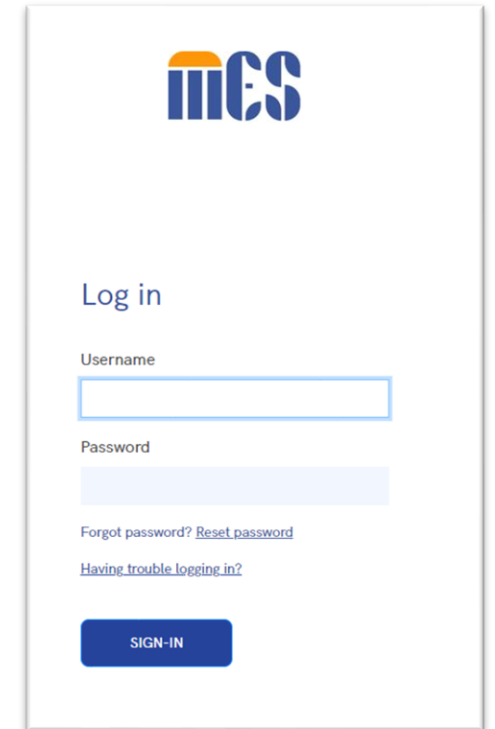
<https://vamedicaid.dmas.virginia.gov/training/crms>

Complete courses, CRMS-101,103,104,106, & download the e-MLS User Guide

eMLS-Electronic Medicaid Long Term Services and Supports Screening

MES eMLS Log-In Access:

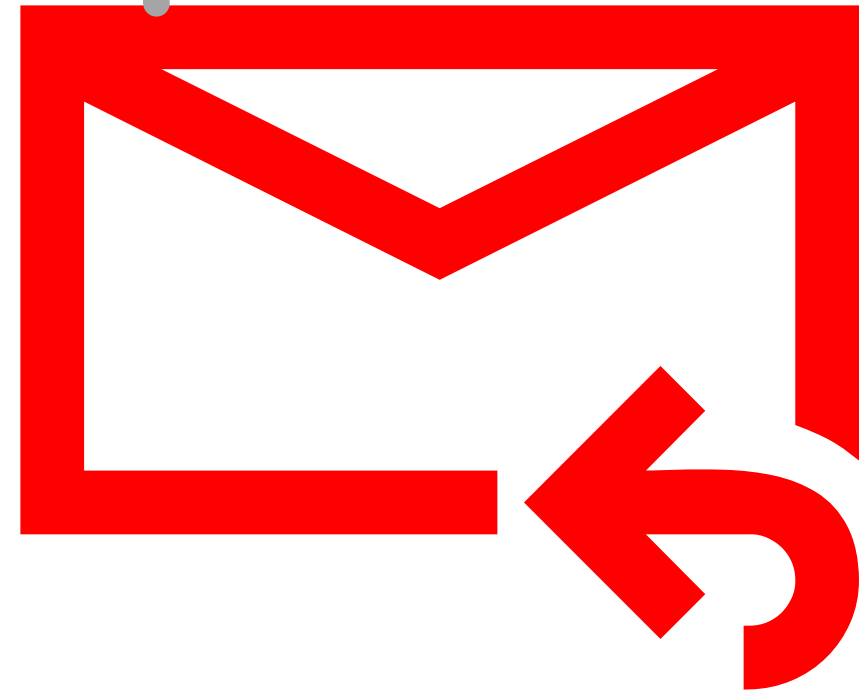
- Your director or Manager will know who your Primary Account Holder-PAH or Delegate Administrators-DAs are for your PACE site NPI. The PAH or DAs are responsible for setting up and providing the MES-CRMS-eMLS Log-in access to PACE site users (Screeners and Physicians).
- Each user or delegate will be set up according to their role:
 - ✓ Creator access is for Screeners who will be conducting the screenings,
 - ✓ Viewer access is for those who will just be printing or viewing screenings in the system, and
 - ✓ Approver access is for the Physicians, Physician's Assistant, or Nurse Practitioners who will be authorizing the screenings
- ➔ • Specific training for your PAH or DAs only, on how to add Delegates or Users can be found at: [Provider Training Resources | MES \(virginia.gov\)](#) PRSS 118.



The screenshot shows the MES eMLS Log-In page. At the top is the MES logo. Below it is the text "Log in". There are two input fields: "Username" and "Password". Below the password field are two links: "Forgot password? [Reset password](#)" and "[Having trouble logging in?](#)". At the bottom is a blue button labeled "SIGN-IN".

Need Help?

- Questions about the LTSS Screening process, policy or requests for copies of screenings go to:
ScreeningAssistance@dmas.Virginia.gov
- Questions about MES (computer system issues) , CRMS, eMLS go to:
MES-Assist@dmas.Virginia.gov
- All technical questions about accessing the Medicaid LTSS Screening Training go to VCU: ppdtechhelp@vcu.edu



Screeners will need the following:

- Completed VCU Electronic LTSS Screening Training and passed the competency test with an 80% score. Must have your certificate with your unique certification ID.
- Completed Medicaid MES-CRMS-e-MLS Portal Training and downloaded the eMLS user guide.
- Downloaded or have access to the LTSS Screening Manual for Scoring and Rating and individual version 10-25-2021. Individuals must meet Functional Criteria (3 criteria within), Medical Nursing Need Criteria, and be at risk of being institutionalized within 30 days (hospital or NF). If they don't meet these requirements by law, then you cannot authorize them on the DMAS 96 form. Manuals can be found on the MES Homepage in the Provider Manual Library.
- Approval (P239) and Denial (P238) Letters for each screening. Templates are located on the MES Homepage in the Forms Library.
- Referral process-See table in manual: Includes sending DMAS 96 only to local DSS, sending copy of successfully processed screening to the individual, provider and/or MCO-Health Plan if they have one.

Note: The LTSS Screening Manuals and VCU Electronic LTSS Screening Training have not been updated yet and will not reflect any PACE Screening Team Language or descriptions but is mandatory.

LTSS Screening



Name clarification due to history of confusion:

- The Screening for Long Term Medicaid is called Long Term Services and Supports –LTSS Screening and not UAI.
- UAI-Uniform Assessment Instrument: Used by multiple agencies for different purposes (ALFs, DBHDS, DMAS Long Term Screening). Be careful asking for a UAI or using the term UAI because you may get the wrong one and they are not the same.
- The Federal Pre-Admission Screening and Resident Review (PASRR) Level 1 and Level II Screenings and the DMAS LTSS Screening Process (formerly known as Pre-Admission Screening PAS) are two separate programs. The PASRR only bundles with the LTSS Screening Process in certain circumstances such as when a LTSS Screener is conducting a screening and NF is chosen and selected at the time of the Screening being conducted. If the individual being screened chooses Nursing Facility, then the DMAS 95 MI, ID, RC Level 1 form will automatically drop down and must be conducted.

Overview of Other Team Responsibilities



- **Hospital LTSS Screening Teams** are responsible for conducting LTSS Screenings on individuals who are inpatient; have Medicaid/ are Medicaid Pending; directly request LTSS or a LTSS screening from hospital staff; **AND** are going to either the Long-Term Custodial NF, or individuals discharging home and wanting or needing Home and Community Based Services (HCBS) such as the CCC Plus Waiver or PACE.
- **The Skilled Nursing Facility (SNF) Screening Team** is responsible for conducting Screenings on any individual (Medicaid or Non-Medicaid needing to apply) that is in the Nursing Facility for skilled or rehab services and is transitioning to the Custodial Nursing Facility with Medicaid as the intended payor source **or** is discharging home with an interest or need for Medicaid Long Term Services and Supports through the CCC Plus Waiver or PACE.
- **The Community Based Screening Teams (CBTs)** made up of the local Health Department and the Department of Social Services who conducts screenings on individuals who request one in the community or their locality.

Current Screening Timelines:



- Individuals who have a screening conducted have 1 year of the date of the physician's signature to enroll in CCC Plus Waiver, PACE or Custodial Nursing Facility care.
- Screenings completed prior to a discharge from a SNF for persons who are enrolled into Medicaid while in the SNF, including health plans and FFS, have **180 days** post SNF discharge to enroll in the CCC Plus Waiver or PACE or a new LTSS Screening is required. If the individual is not a Medicaid member (non-Medicaid) at SNF discharge, the person has one year from the date of physician's signature on the screening to be enrolled in LTSS. After a year, a new LTSS Screening is required.
- Once an individual is ENROLLED in CCC Plus Waiver, PACE or NF, a screening does NOT expire or need to be updated as long as the individual continues to receive Medicaid LTSS.
- Individuals are allowed **180 days** to transition between providers. After **180 days** the individual must re-apply for Medicaid LTSS and a new screening is required.
- If the individual is terminated because they didn't meet NF LOC requirements, then the individual would need a new LTSS Screening to reapply for Medicaid LTSS.
- When in doubt, screen the individual.

Screening Validity Concepts



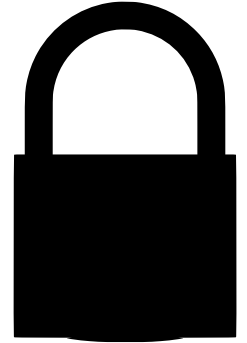
- Screening must have all its required forms and be in Accepted Authorized status for Medicaid LTSS to begin (CCC Plus Waiver, PACE, and Long-Term Custodial NF).
- Screening must be for the correct individual and correct Medicaid Number/Social Security Number. The Medicaid ID and Social Security Number are directly related to how the Screening is attached in the Medicaid MES System. If this is incorrect, it could cause issues with payment because the LTSS Screening will not be found in the system under correct identifying information.
- Be within the General Timelines (listed above).
- Find out if the individual already has Medicaid LTSS and if this is a transition from one LTSS to another or a new Medicaid LTSS enrollment. If it is a transition, this would mean that the original Screening used to enroll the individual into LTSS is used and passed onto the new provider. Keep in mind those Screening conducted prior to July 1, 2019, may be under continuity.

Reminder:



PROTECTED HEALTH INFORMATION AND ENCRYPTION

- Do not put the full Name of the individual, Medicaid Number, Social Security Number, or Screening Numbers in the subject line of your emails to Screening Assistance.
- Make sure to encrypt your messages that have personal information in them.
- Put all identifying information in the body of your encrypted email. For the subject line, you can put the topic and individuals' initials if you need to.



Resources



Update:

Updated Health Plan-MCO Contact and Fax Numbers for Referral Process

On the MES Homepage

LTSS Screening Team MCO Contact Numbers

Cardinal Care Health Plan	FAX Number for Screening Documents	Care Management Phone Number
Aetna Better Health of Virginia	844-459-6680	855-652-8249 Ask for Case Management Members 1-800-279-1878
Anthem <u>HealthKeepers Plus</u>	844-471-7937	Members 1-800-901-0020
Molina Healthcare	800-614-7934	800-424-4524 Members 1-800-424-4518
Sentara Health Plans	844-552-7508	866-546-7924 or 757-552-8398 Members 1-800-881-2166
United Healthcare Community Plan	855-770-7088	Providers 877-843-4366 Members 1-844-752-9434

For individuals enrolled in the Cardinal Care Managed Care program, the health plan is responsible for submitting the DMAS-225 to the LDSS benefits program (eligibility section) once services are initiated for the individual. For FFS for NF, CCC Plus Waiver and PACE, the direct service provider is responsible for notifying the LDSS eligibility section via a DMAS-225 that services have been initiated for the individual.

Reminder:



Correcting Demographic Errors

What do you do if you started a new LTSS Screening and an auto populated error displays in the demographics section of the Screening, or you realize that you made an error in the demographic's information?

- You cancel or abandon the initiated screening if it is “In Progress” Status OR Void and delete the Screening if it is in Accepted Status (print a copy first).
- Send in an Enrollment Member Correction Form per instructions on the form.
- Receive an email back from the Enrollment Division that the demographic information has been corrected in the MMIS system which can take 24-48 hours for the information to catch up in the systems (NOT in the existing forms in eMLS).
- The screener, creates a new screening letting the newly corrected information auto populate and checks to make sure that the demographic information is correct.
- Make sure to use the original dates in the new screening (request/screening date, screener signature date, and physician signature date) or it will cause payment issues with the provider. The Physician who originally signed off must still be available to resign using their original date signed.

Also refer to the eMLS User Guide.

Update:



NEW Enrollment Member Correction Form on the MES Homepage for correcting Demographic Errors

For demographic corrections, all Enrollment Member Corrections Forms are to be sent to PatientPay@dmas.virginia.gov

- EMAIL Subject Line should read: **LTSS Screening Member Information Change Request**
- Allow at least **14 Business days** for all Corrections
- Once the change has been completed by the Enrollment Division, it can take up to **48 hours** for the information to show up in the Medicaid System.
- **The Screener must return to eMLS and CANCEL or VOID/DELETE the original Screening with the wrong information, then re-start a new Screening for the corrected information to auto-populate into the form.**
- **Make sure to use all the same dates that was in the original Screening (request, screening, and Screener/Physician signature dates).**
- The eMLS system **DOES NOT** automatically correct the Screening with the new information.
- Instructions are written on the form.

All forms must be completely filled out or they will get sent back.

Update:



Download New Form from MES Homepage

DMAS LTSS SCREENING CHANGE TO MEMBER INFORMATION REQUEST FORM

It is essential that all Medicaid records for an individual match. When the records match, the LTSS Screening links to the individual's appropriate Medicaid record in the Medicaid System allowing the existence of an approved LTSS screening to be confirmed for enrollment. If the demographics do not match, the records may not link correctly, and the individual seeking LTSS could be denied services.

Member enrollment change requests are made when there is an error in one of the following key demographic fields in eMLS:

NAME, SSN, MEDICAID ID, DOB, GENDER, RACE, or a DOD error message.

These errors occur either by auto-fill in the demographic fields while starting a Screening QR when the Screener makes an error manually and processes the Screening (Accepted Status) with the incorrect information.

To resolve these problems, this form must be completed and submitted to:

PatientPay@dmas.virginia.gov

Please label email with the following subject line:

LTSS Screening Member Information Change Request

Allow at least 14 business days for all corrections.

Changes to the Medicaid record must be researched and confirmed to be appropriate. PLEASE do NOT send multiple change requests for the same person or repeatedly email the enrollment office or screening assistance.

Once DMAS Enrollment has researched and made changes to the Medicaid record, you will be notified. Once notified you must wait an additional 48 hours for these changes to be reflected in the eMLS system. After 48 hours you must return to eMLS, CANCEL the newly started screenings that auto filled or VOID/DELETE for processed screenings and then re-enter all the screening information and resubmit. If applicable, use all the original screening dates including original signature dates.

The Enrollment office can only address and make changes to the key demographic information. Please DO NOT send any other type of question to DMAS Enrollment. Other questions should go to ScreeningAssistance@dmas.virginia.gov.

It is essential you fully and accurately complete this form, as applicable, for all Medicaid record change requests.

Revised 11.28.2023

DMAS LTSS SCREENING CHANGE TO MEMBER INFORMATION REQUEST FORM

Submission Date of this Form to Enrollment: _____

LTSS SCREENER INFORMATION: Please print or type.

Name: _____ Contact information (phone and email): _____

Full Name of Agency, Hospital, or Nursing Facility (please do not use initials): _____

LTSS Screening Number: _____ Date of Screening: _____

REQUIRED INDIVIDUAL INFORMATION:

Correct Name _____ Correct DOB _____

Correct SSN _____ Correct Medicaid ID _____

Please check all that apply: Auto fill is Incorrect Error Made by Screener

<input type="checkbox"/> Incorrect Name	<input type="checkbox"/> Incorrect Date of Birth	<input type="checkbox"/> Incorrect Gender
<input type="checkbox"/> Incorrect Social Security Number	<input type="checkbox"/> Incorrect Date of Death	<input type="checkbox"/> Race:

*How have you verified the correct information, please explain (ex. Used social security card, driver's license, etc.)? This area **MUST** be completed.

Please note that ALL name changes **MUST** match with the individual's Social Security card. If the SS card is wrong the individual **MUST** contact the SS Administration before any Medicaid record can be corrected. It is not required to send a copy of the individual's social security card with this form, but it can expedite the process if you do so.

For items needing correction: Please list the wrong information entered or auto filled and the correction needed.

Name of Individual	Wrong:	Correct:
Date of Birth	Wrong:	Correct:
Gender	Wrong:	Correct:
Race:	Wrong:	Correct:
Social Security Number:	Wrong:	Correct:
Medicaid Number:	Wrong:	Correct:

Comments: _____

Return this Form as an Attachment to DMAS Enrollment at **PatientPay@dmas.virginia.gov**

Revised 11.28.2023

Update:



Downloadable Forms and Documents on the MES Homepage

MES

PROVIDER HOME

- [MCO Provider](#)
- [Provider Training](#)
- [Provider Contacts/Resources](#)
- [Provider FAQ](#)
- [Popular Downloads](#)
- [Manuals Library](#)
- [Memos/Bulletins Library](#)
- [MES Forms Library](#)
- [CRMS Training](#)
- [CRMS Resources](#)
- [Claims & Billing](#)
- [EDI Resources](#)
- [EPS Resources](#)
- [Login/Password Help](#)

Care Management CRMS

Care Management, called CRMS, streamlines and standardizes the information exchange among MCOs and DMAS business areas through Member Transition Records.

CRMS maintains a comprehensive set of health records, created and maintained for behavioral health and Long Term Care using eMLS, PACE and LOCERI web applications.

Looking for CRMS training? Check out our [new CRMS training area](#), where you can learn the latest about LOCERI, PACE and eMLS.

Search the MES Public Portal:

ENHANCED BY Google

Downloadable forms and documents:

- [DMAS LTSS Screeners Change to Member Information Correction Form \(PDF\)](#)
- [Health Plan-MCO Contact and Fax number document for the LTSS Screening](#)

Updated eMLS Offline Screening Upload Form to be Used After October 13, 2022

Please use the new eMLS Offline Screening Upload form when uploading into CRMS-eMLS. The new form is located here: <https://vamedicaid.dmas.virginia.gov/sites/default/files/2022-09/eMLS-Offline-Form-Template.xls>

Please note: If the old form is used - the submission *will be denied* by the CRMS-eMLS application.

<https://vamedicaid.dmas.virginia.gov/crms>

New Enrollment Correction Form

New Health Plan Fax Numbers

Reminder:

Health Plan

If the individual is in a **Medicaid Health Plan**, then contact the Health Plan for assistance in checking for Validity of the LTSS Screening.

Once you have contacted the Health Plan, if you have continued deputed contact:
cccplus@dmas.virginia.gov

Fee For Service

If the individual is Fee For Service or is not in a Medicaid Health Plan, then contact the DMAS LTSS Screening Unit at:
ScreeningAssistance@dmas.virginia.gov

SHARE INFORMATION WITH YOUR TEAM

- Other Screeners
- Supervisors
- Managers
- Directors

SHARE



SAVE
— the —
DATE

Next Call:

**PACE and
Community Based Team
Tuesday, September 10, 2024**



Question and Answer Time