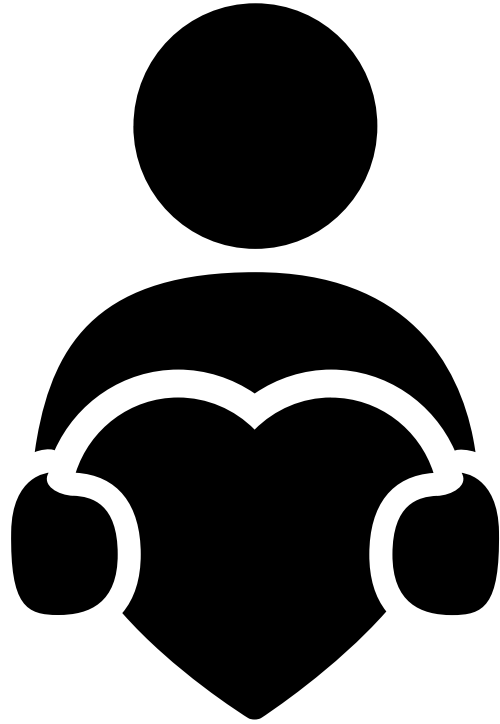


Screening Connections

**Community Based and
PACE Screening Teams**

December 10, 2024

Office of Community Living

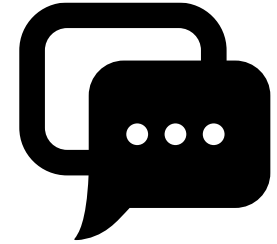


Welcome!

Thank you for your hard work!

LTSS Screening Connection Call

Logistics

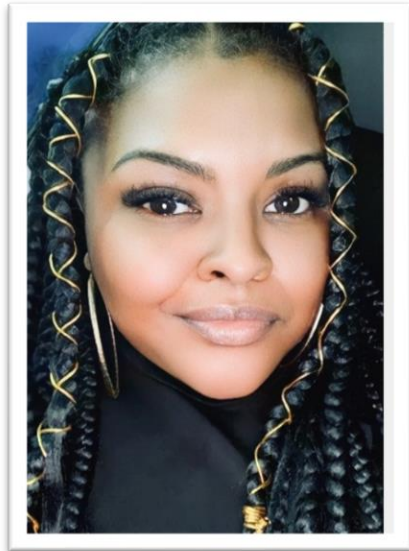


- Post your questions for today's session in the **Chat box**.
- Click the "Chat" bubble icon at the top of the screen to maximize the Chat feature.

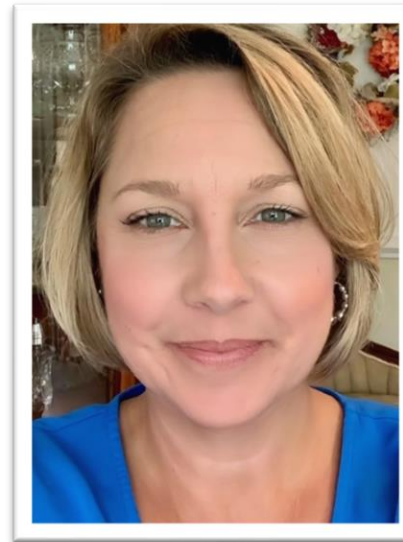
DMAS Office of Community Living (OCL) LTSS Screening Program Staff



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

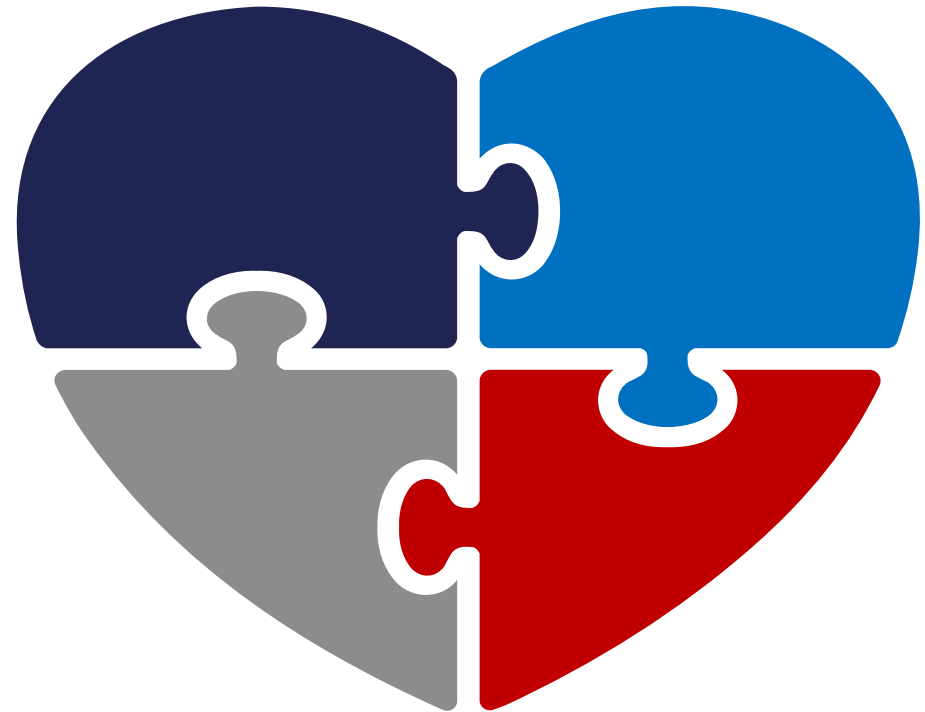


Whitney Singleton
Technical Assistance for
Screening Assistance Mailbox
and PASRR

Send all LTSS Screening Questions to ScreeningAssistance@dmas.virginia.gov

Today's Agenda:

- **Data and Tools**
- **Reminders and Updates**
- **Quick Review**
- **Frequently Asked Questions**
- **Question and Answer Period**



Today's Screening Team Focus: Community Based and PACE Teams



Presented by Dena Schall and Whitney Singleton,
LTSS Screening Program Specialists

CBT and PACE Teams

November 2024 Data



Community Based Teams

Total Screenings	# Over 30 Days	% over 30 Days	Avg # of Days
2,074	228	10.99%	36.05
Submission Date from 11/1/2024 to 11/27/2024			

PACE Teams

Total Screenings	# Over 30 Days	% over 30 Days	Avg # of Days
46	0	0.00%	7.04
Submission Date from 11/6/2024 to 11/27/2024			



CBT and PACE Teams

Program Management and Data Monitoring Tool



It is important for each Screening Team to monitor their LTSS Screenings.

Points to consider:

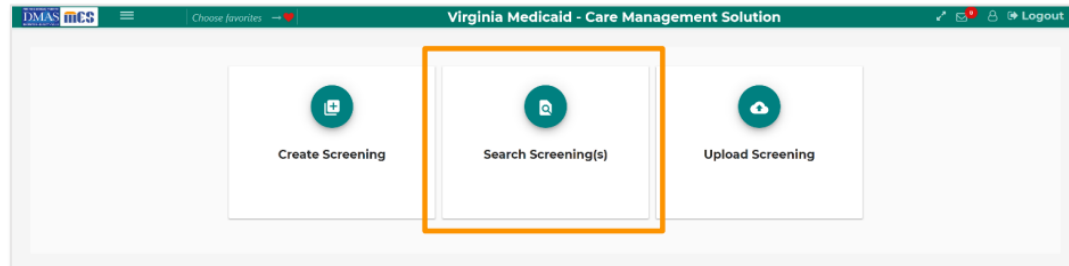
- Better flow in the process from start to completion.
- **Know all Screenings In Approval status waiting on the Physician to sign off.**
- Know all of your Screenings that are In Progress status and need to be finished.
- Know how many total number of Screenings being conducted by your team.
- Know how many approved Authorized or Not Authorized Screenings conducted by your team.
- Know how many Screenings being voided by your team for corrections.
- Know and keep progress on the PDN Screenings waiting on a DMAS secondary Reviewer.
- Clean up unwanted Screenings or those started but not completed by your team.

There should not be random Screenings left incomplete in eMLS.



CBT and PACE Teams

Program Management and Data Monitoring Tool



You can search and filter data by status.

2

At least one search criteria is required.

Last Name	First Name	Date Of Birth	Gender
<input type="text"/>	<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>	<input type="text" value="Please Select"/>
SSN	Medicaid ID	Screening ID	Status
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Please Select"/>

3

CBT and PACE Teams

Program Management and Data Monitoring Tool



Status options to filter:






Status	<p>The status of the assessment currently Status options include:</p> <ul style="list-style-type: none">● Accepted - Authorized● Accepted - Not Authorized● Cancelled● In Approval● In Correction PDN● In Progress● In Review PDN● Void
--------	--



CBT and PACE Teams

Program Management and Data Monitoring Tool



Q Screening's Search

Last Name	First Name	Date Of Birth	Gender
<input type="text"/>	<input type="text"/>	MM/DD/YYYY 	Please Select 
SSN	Medicaid ID	Screening ID	Provider NPI/API
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Status	Screening From Date	Screening To Date	
In Approval 	10/28/2023 	10/26/2024 	

 Search  Reset

- Filter search by Status and put in a date range.
- Date range only goes back a year.
- It is suggested to pull data for the year each time.
- The data pulled is based on the Screening Date not Physician Date.

CBT and PACE Teams

Program Management and Data Monitoring Tool



Screening's Search

Last Name	First Name	Date Of Birth	Gender
<input type="text"/>	<input type="text"/>	MM/DD/YYYY	Please Select
SSN	Medicaid ID	Screening ID	Provider NPI/API
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Status	Screening From Date	Screening To Date	
In Approval	10/28/2023	10/26/2024	

[Q Search](#) [Reset](#) [Download Report](#)

1079 record(s) retrieved using the search criteria.

Search screenings with Screening Id, Last Name, First Name, DOB, Gender...etc

<p>M [Redacted]</p> <p>Last Name: [Redacted] First Name: [Redacted] Date of Birth: [Redacted] Medicaid ID / SSN: [Redacted] Level of Care: [Redacted] NPI: [Redacted]</p> <p>View</p>	<p>In Approval</p>	<p>M [Redacted]</p> <p>Last Name: [Redacted] First Name: [Redacted] Date of Birth: [Redacted] Medicaid ID / SSN: [Redacted] Level of Care: [Redacted] NPI: [Redacted]</p> <p>View</p>	<p>In Approval</p>	<p>[Redacted]</p> <p>Last Name: [Redacted] First Name: [Redacted] Date of Birth: [Redacted] Medicaid ID / SSN: [Redacted] Level of Care: [Redacted] NPI: [Redacted]</p> <p>View</p>	<p>In Approval</p>
<p>M [Redacted]</p> <p>Last Name: [Redacted] First Name: [Redacted] Date of Birth: [Redacted] Medicaid ID / SSN: [Redacted]</p>	<p>In Approval</p>	<p>M [Redacted]</p> <p>Last Name: [Redacted] First Name: [Redacted] Date of Birth: [Redacted] Medicaid ID / SSN: [Redacted]</p>	<p>In Approval</p>	<p>M [Redacted]</p> <p>Last Name: [Redacted] First Name: [Redacted] Date of Birth: [Redacted] Medicaid ID / SSN: [Redacted]</p>	<p>In Approval</p>

CBT and PACE Teams

Program Management and Data Monitoring Tool



A screenshot of a web browser displaying the "Virginia Medicaid - Care Management Solution" search interface. The browser's address bar shows the URL "https://crms.vamedicaid.dmas.virginia.gov/crmsportal/#/crms/pas/searchAssessments". The page header includes the DMAS logo and navigation links. The main content area is titled "Screening's Search" and contains several input fields: Last Name, First Name, Date Of Birth (with a calendar icon), Gender (a dropdown menu), SSN, Medicaid ID, Screening ID, Provider NPI/API, Status (a dropdown menu with "In Approval" selected), Screening From Date (with a calendar icon), and Screening To Date (with a calendar icon). Below the search fields are three buttons: "Search", "Reset", and "Download Report", with the "Download Report" button circled in red. A green banner below the search fields states "1079 record(s) retrieved using the search criteria." A browser download menu is open in the top right, showing a file named "eMLS_Search_Report_2024_10_28_130746.xlsx" circled in red, with an "Open file" link below it.

Select Download Report to generate an excel Report of your Data.



CBT and PACE Teams

Program Management and Data Monitoring Tool



Let us know if you need help at
ScreeningAssistance@dmas.virginia.gov

This is a tool to help the CBT stay within the 30-day timeframe.

This is a tool to show the PACE Team how expedient they are conducting theirs.

CBT and PACE Teams



Reminders:

- When you send a question or issue to Screening Assistance, please make sure to include your name, place of employment, your contact information in addition to the individuals information so we can research and reach out to you if needed.
- **DO NOT FORGET to encrypt your emails that contain PHI.**
- Please be responsive to Providers, MCO's, and individuals who request copies of LTSS Screenings your agency has conducted.

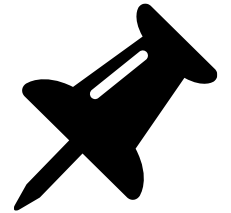


CBT and PACE Teams

Reminders:



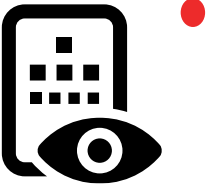
SEND ALL QUESTIONS TO SCREENING ASSISTANCE EMAIL AND NOT TO PERSONAL EMAILS.



- Staff members are getting multiple people emailing and calling them directly.
- Screening Teams should not give the public DMAS staff's direct phone numbers for issues that can be sent to the SA email.

This is for tracking purposes. Sending the issue to SA email ensures your question does not go unanswered should that staff member be out of the office.





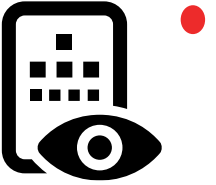
Update: DMAS Monitoring:

DMAS will be auditing LTSS Screenings periodically across the state

Will be monitoring for:

- Thorough justification to support that the individual meets NF level of Care Criteria: Functional, Medical/Nursing Needs, and At-Risk Categories (eMLS Comment section for each category)
- Members Summary to have a complete picture of the individual's condition and situation.

We have noticed that some Screeners are not putting sufficient information in these sections.

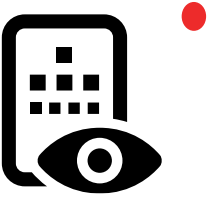


Update: DMAS Monitoring:

DMAS Audits

NF level of Care Criteria: Functional

- Does the Functional sections (ADLs, Behavior and Orientation, Medication Administration, and Joint Motion) match what is described about the individual in the case summary and other sections.
- Did the Screener appropriately use the LTSS Screening manual to score/rate for a child per appropriate developmental stage and/or child and caregiver as a unit concept.



Update: DMAS Monitoring:

DMAS Audits

NF level of Care Criteria: Medical/Nursing Needs and Comment section



Medical/Nursing Needs

Based on member's overall condition, assessor should evaluate medical and/or nursing needs.

Are there ongoing medical/nursing needs? *

No Yes

Describe ongoing medical/nursing needs:

1. Evidence of medical instability
2. Need for observation/assessment to prevent destabilization
3. Complexity created by multiple medical conditions
4. Why member's condition requires a physician, RN, or trained nurse's aide to oversee care on a daily basis

Comments *

500 Characters remaining
Comments required field

Physician's Name/Title

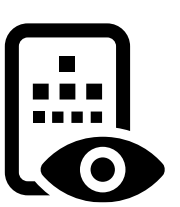
Other's Name/Title

Date

Date

[← Back](#) [Save & Continue →](#)

Update: DMAS Monitoring:



DMAS Audits

NF level of Care Criteria: Care Giver, Care Giver Comment section, and Members Case Summary



Caregiver Assessment Reset Clear

Indicators of Adult Abuse and Neglect: While completing the assessment, if you suspect abuse, neglect or exploitation, you are required by Virginia law, Section 63.1 , 55.3 to report this to the local Department of Social Services, Adult Protective Services.

Does the member have an informal caregiver? *

No Yes

Where does the caregiver live? * Caregiver Living required field

Is the caregiver's help? * Caregiver Help required field

Has providing care to the member become a burden for the caregiver? * Burden For Caregiver required field

Describe any problems with continued caregiving: *

250 Characters remaining
Describe Problems required field

Preferences

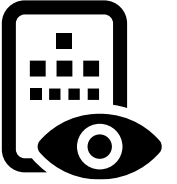
Member's preferences for receiving needed care 75 Characters remaining

Family/Representative's preferences for member's care 75 Characters remaining

Physician's comments (if applicable) 75 Characters remaining

Member's Case Summary *

1000 Characters remaining
Summary Comments required field

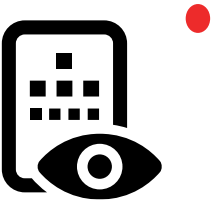


DMAS Monitoring:

DMAS Audits

NF level of Care Criteria: At-Risk and Comment section

The screenshot displays a web-based monitoring interface for DMAS audits. At the top, there are four tabs: 'At-Risk' (highlighted in red), 'DMAS-96', 'DMAS-97', and 'DMAS-96(Part-B)'. Below the tabs is a green header bar with the text 'At Risk' and 'Reset' and 'Clear' buttons. The main content area contains a question: 'In absence of long term services and supports, is the individual at risk of needing the level of care provided in either a nursing facility, specialized care nursing facility, or long-stay hospital within the next 30 days?'. Below the question are two radio buttons: 'No' and 'Yes' (selected). A large text area for 'Comments' is provided, with a character count of '500 Characters remaining' and a red error message 'Comments required field'. At the bottom of the form are two buttons: 'Back' and 'Save & Continue'. Two red arrows on the left side of the screenshot point to the question and the comments field.



Update: DMAS Monitoring:

DMAS Audits

Examples of real comments given for Medical/Nursing Needs, At-Risk, and Case Summary sections:

20. Medical/Nursing Needs

Are there ongoing medical/nursing needs?

Yes

Comments

SEE MEDICAL RECORD

**This is the same
as leaving it blank.**



2. At-Risk Service

In absence of long term services and supports, is the individual at risk of needing the level of care provided in either a nursing facility, specialized care nursing facility, or long-stay hospital within the next 30 days?

Yes

Comments: **Left blank.**

Case Summary

EMS REPORTS: POSSIBLE GI BLEED; PT WAS SEEN AT [REDACTED] HOSPITAL FOR SAME SX, CONTINUED SX; FAMILY AND PT REQUESTED TO COME HERE TO [REDACTED]

SOURCE OF INFORMATION: PATIENT , NIECE AT BEDSIDE,

This does not tell us what is actually going on with the individual after evaluation, how it affects ADLs or other Criteria, and their need for LTSS.



Quick Review:

Overview of CBT Team Changes

The Community Based Screening Teams (CBTs) conduct screenings on individuals who request one in the community or their locality.

New Guideline: When Medicaid members residing in the community are in imminent need of nursing facility placement and the community-based screening team cannot conduct the screening within 30 days of the screening request, the nursing facility may collaborate with the community-based team to determine which entity can conduct the screening most expeditiously. **The nursing facility is responsible for documenting the agreement for the nursing facility to conduct the screening in their records.**



Quick Review:

Changes to current practices for Community Based Teams

- CBT Screeners will no longer have to go into the Custodial NF and conduct a LTSS Screening on individuals who do not have one before discharge back into the community. Their NF Team can now conduct them.
- You may still have to do them for those NON-MEDICAID Nursing Facilities and other rare circumstances with DMAS approval.



Quick Review:

Overview of CBT and PACE Team Changes

The new PACE Screening Teams conduct LTSS Screenings 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.

When individuals are interested in PACE, the CBT can contact the local PACE site to see if they are able to conduct the LTSS Screening and document the outcome. Some PACE sites might not be set up or able to conduct LTSS Screenings yet. Each CBT locality should set up a process for these PACE referrals.

If PACE sites are contacted directly for a potential new enrollment, they may accept the request and conduct the screening if they are able.

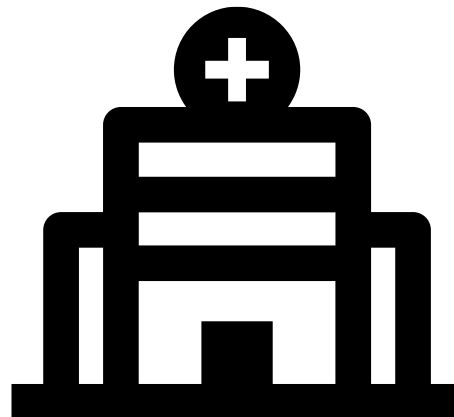
PACE Teams who need assistance with set up should contact ScreeningAssistance@dmas.virginia.gov



Quick Review:

Community Based Teams and conducting LTSS Screenings in the Hospital

- If an individual is in the Emergency Room or in Observational Status in the Hospital and there is an emergency or the individual's life is endangered upon return to a community home, or the case involves APS, LTSS teams (Hospital and Community Based) should confer as to which team can most expediently conduct the LTSS Screening.



Quick Review:



Quick Glance at Other Screening Team Changes


- Hospitals will no longer be conducting LTSS Screenings on individuals discharging to the Skilled Nursing Facility, however it is best practice for them to conduct the PASRR Level I and Level II when warranted (on paper DMAS 95 forms).
- Hospitals will continue to conduct Screenings on individuals who are inpatient, have Medicaid or Medicaid Pending, and are discharging to the Long-Term Custodial NF or discharging home with a need or interest in the CCC Plus Waiver or PACE.
- Nursing Facilities will now be conducting LTSS Screenings on individuals who are in their Skilled Nursing Facility and are transitioning to the Long-Term Custodial NF or discharging home with a need or interest in the CCC Plus Waiver or PACE.
- Nursing Facilities can now work with the CBT to take referrals to conduct screenings on individuals who are in imminent need for NF admission.
- When LTSS Screenings are not obtained or conducted per the guidelines for admission to Medicaid Long-Term Custodial NF there are special instructions for a path to payment with a 6-month Penalty.

Continued Issues:



For All Screening Teams

- A full copy of the Screening Packet (all completed forms) is always provided to the individual or the individual's representative.
- Every individual screened should receive an Approval or Denial Letter from the Screening Team (use DMAS template).
- Screeners will need to retain copies of the Screening packet per retention policy (10 years for adults). This includes the copy of the DMAS 97 Choice Form with the individual's or representatives hand signature.
- Screeners will need to determine whether individuals are in a Medicaid Health Plan-MCO and if so, forward the completed Screening packet to the health plan for use by the individual's assigned care coordinator. Contact and FAX numbers are listed on the MES Homepage.

 **Screeners are responsible for sending a copy of the DMAS 96 form only to the local DSS benefits staff where the individual resides. If you don't have this list contact ScreeningAssistance@dmas.virginia.gov.**

Continued Issues:



Completion of LTSS Screenings within 30 days

Completing screenings within 30 days is a requirement by law.

If your locality is completing LTSS Screenings over 30 days, you are to work with your state liaisons for a resolution.

Frequently Asked Questions:



Topic: Requests for LTSS Screenings in the NF

Q: Do we have to contact DMAS when a NF asks the CBT to conduct a LTSS Screening because they are not able to for a particular reason?

A: Yes, DMAS should be contacted when a NF contacts a CBT to conduct a LTSS Screening. We will need to investigate the NF issue and grant a provision for the CBT to go into the NF and conduct a LTSS Screening.

Usually, with these requests, DMAS has to provide extended technical assistance to the NF.

Frequently Asked Questions:



Topic: Requests for PASRR from the NF

Q: Do we conduct the PASRR DMAS 95 form when a NF requests one from the CBT?

A: NO, the CBT does not conduct PASRR DMAS 95 forms alone for a NF. The CBT only conducts the PASRR bundled with the LTSS Screening when NF is chosen.

When a request like this comes to you, please have the NF contact ScreeningAssistance@dmas.virginia.gov.

Frequently Asked Questions:



Topic: Scoring/Rating Children's Screenings

Q: Do LTSS Screenings for Children have the same NF Level of Care Criteria as Adults?

A: Yes, Children must meet Nursing Facility Level of Care Criteria the same as Adults.

Nursing Facility Level of Care must be assessed:

- **Functional capacity-** meaning ability to complete ADLs, IADLs, and level of independence in the areas of taking medication, mobility, joint motion, behavior and orientation
- **Medical and/or nursing needs,**
- **The Risk** that the individual may be institutionalized in a nursing facility, specialized care nursing facility, or long stay hospital within the next 30 days if no services are provided.

Frequently Asked Questions:



Topic: Scoring/Rating Children's Screenings

Q: What is different about rating Children's LTSS Screenings?

A: Adults are expected to be independent in performing ADLs unless they have a medical, physical, and or emotional condition or limitation. Children are expected to need assistance from those around them based on age and appropriate developmental stage. This means that a child's age and developmental stage must be considered prior to rating a functional area.

- For younger age groups, accurately assessing needs may involve looking at the child and a caregiver as a unit. This means that for children of a certain age, it is normal for the child to be dependent on a caregiver to complete certain tasks or ADLs. In these cases, we would not want to rate the child in a dependent category unless the child has other special considerations that make it hard for that caregiver to complete the ADL task safely (ex. Infants).
- Children from birth through 5 years of age often require supervision for safety and physical assistance to complete certain tasks. To accurately assess a child, screeners must take into consideration whether the child has complex medical needs and/or equipment; or has any of the special considerations for the task as listed in the manual; or if the child needs assistance from their caregiver, beyond what is age appropriate.

Please note that assessing child and caregiver as a unit does not mean that the screener rates the parents' or caregiver's ability to perform the task. If the caregiver is unable to perform the task, they should not be used to assess the functionality of ADLs

Frequently Asked Questions:



Topic: Scoring/Rating Children's Screenings

Q: Do I have to use the LTSS Screening Manual to Score/Rate Children?

A: Yes, you MUST use the LTSS Screening Manual to guide you through the various age categories for children, based on their developmental stage and the degree to which a child should be participating in the ADL activity.

This is based off the Bright Futures guidelines from the American Academy of Pediatrics (AAP).

Frequently Asked Questions:



Topic: Scoring/Rating Children's Screenings

Q: Do all children with a Medically Complex Condition or Special Consideration automatically get a big "D" Dependency for their scoring and rating?

A: NO, If the "Child and Caregiver as a Unit" can take care of the task independently, without difficulty, and do not need an additional caregiver to assist in completing the task for safety concerns then the child should be rated Independent (I).

- If equipment or serious medical condition exists and the caregiver has difficulty completing the ADLs or requires additional assistance, then the Screener should note this need and provide a thorough explanation in the Members Summary and other applicable comment areas in the Screening. Children who meet this criteria should be rated dependent (D) in the category that most applies, as age appropriate (Ex: Supervision/Physical Assistance or Performed by others).
- Serious medical conditions or complex medical equipment may include life support, or child living with seizure activity, spasticity, contractures, lack of muscle tone, paralysis, or any other special considerations for a child. In the LTSS Screening manual, screening considerations for children are provided in each ADL section.

Children's Scoring and Rating Example:



Rating Criteria for Bathing from the LTSS Screening Manual:

Bathing entails getting in and out of the tub, preparing the bath (e.g., turning on the water), actually washing oneself, and towel drying. Some individuals may report various methods of bathing that constitute their usual pattern. For example, they may bathe themselves at a sink or basin five days a week but take a tub bath two days of the week when an aide assists them. The questions refer to the method used most or all of the time to bathe the entire body.

The first step in scoring and rating is to determine if the child has a complex medical condition or equipment or any special consideration related to their serious condition.

Bathing Screening considerations for children, as age appropriate, include safety concerns such as seizure activity; balance; head positioning; awareness of water depth, temperature, or surroundings (i.e. location of faucet); and/or other characteristics that make bathing very difficult such as complex medical needs or equipment.

If any of these situations exist and the equipment or a condition makes it difficult for the caregiver to complete the ADL safely or requires an additional caregiver to assist in completing the task, then the Screener should note in the Members Summary that the child has complex medical needs. Children who meet these criteria should be rated Dependent (D) in the appropriate category (**Supervision/Physical Assistance or Performed by Others**).

Children's Scoring and Rating Example:



Rating Criteria for Bathing from the LTSS Screening Manual:

INDEPENDENT (I)

Does Not Need Help (I): The child and caregiver as a unit, or the child, as age appropriate, gets in and out of the tub or shower, turns on the water, bathes entire body, or takes a full sponge bath at the sink.

- Children younger than 12 months are developmentally expected to be totally dependent on another person/caregiver for bathing. If there are no other complex medical needs or equipment, then the child is rated as independent.
- Children aged 1 to 4 are developmentally expected to physically participate in bathing but require caregiver supervision, physical assistance, and help getting in and out of the tub. If the child and caregiver as a unit can achieve this task; the child is participating as appropriate; and there are no other complex medical needs or equipment, then they are independent.
- Children aged 5 to 18 years are developmentally expected to physically and cognitively perform all essential components of bathing safely and without assistance. The child should be able to bathe independently (if they are not able to achieve this task, then refer to one of the other functional capacities listed below and rate accordingly).

Children's Scoring and Rating Example:



Rating Criteria for Bathing from the LTSS Screening Manual:

SEMI-DEPENDENT (d)

- **Mechanical Help Only (d):** The child and caregiver as a unit, or the child, as age appropriate, needs equipment or an assistive device such as a shower/tub chair/stool, pedal/knee-controlled faucet, grab bars, long-handled brush, and/or a mechanical lift to complete the bathing process. This does not include a baby tub for infants.

Children's Scoring and Rating Example:



Rating Criteria for Bathing from the LTSS Screening Manual:

DEPENDENT (D)

Human Help Only (D):

Supervision (Verbal Cues, Prompting): The child, needs supervision, prompting and/or verbal cues to safely complete washing the entire body. Developmental stage should be considered as to what is appropriate.

Physical Assistance (Set-up, Hands-On Care): The child requires someone to fill the tub or bring water to the child, wash part of the body, help the child get in and out of the tub or shower, and/or help the child towel dry. Developmental stage should be considered as to what is appropriate. Children who only need help to wash their hair, backs, or feet would not be included in this category.

- Children younger than 12 months are developmentally expected to be totally dependent on another person/caregiver for bathing. If there are no other complex medical needs or equipment, then the child is rated independent. If the child has a complex medical need, then this category may be appropriate.
- Children aged 1 to 4 are developmentally expected to physically participate in bathing but require caregiver supervision, physical assistance, and help getting in and out of the tub. If the child and caregiver as a unit can achieve this task; the child is participating; and there are no other complex medical needs or equipment, then the child is rated independent. If the child has a complex medical need, then this category may be appropriate.
- Children aged 5 to 18 years are developmentally expected to physically and cognitively perform all essential components of bathing safely and without assistance. The child should be able to bathe independently (if they are not able achieve this task then this category may be appropriate).

Children's Scoring and Rating Example:



Rating Criteria for Bathing from the LTSS Screening Manual:

Mechanical and Human Help (D): The child usually needs equipment or a device and requires assistance of other(s) as defined above under Mechanical Help and Human Help to bathe. Developmental stage should be considered as to what is appropriate.

- Children younger than 12 months are developmentally expected to be totally dependent on another person/caregiver for bathing. If the child and caregiver as a unit can achieve this task and there are no other complex medical needs or equipment, then the child is rated independent. If the child has a complex medical need, then this category may be appropriate.
- Children aged 1 to 4 are developmentally expected to physically participate in bathing but require caregiver supervision, physical assistance, and help in and out of the tub. If the child and caregiver as a unit can achieve this task; the child is participating; and there are no other complex medical needs or equipment, then the child is rated independent. If the child has a complex medical need, then this category may be appropriate.
- Children aged 5 to 18 years are developmentally expected to physically and cognitively perform all essential components of bathing safely and without assistance. The child should be able to bathe independently (if they are not able achieve this task then this category may be appropriate).

Children's Scoring and Rating Example:



Rating Criteria for Bathing from the LTSS Screening Manual:

Performed by Others (D): The child is completely bathed by other(s) and does not take part in the activity at all. Developmental stage should be considered as to what is appropriate.

- Children younger than 12 months are developmentally expected to be totally dependent on another person/caregiver for bathing. If there are no other complex medical needs or equipment, then the child is rated independent. If the child has a complex medical need, then this category may be appropriate (Examples for an infant may include neuromuscular disorders, serious skin condition, has a trach, port, or G-tube, etc.)
- Children aged 1 to 4 are developmentally expected to physically participate in bathing but require caregiver supervision, physical assistance, and help in and out of the tub. If the child and caregiver as a unit can achieve this task; the child is participating; and there are no other complex medical needs or equipment, then the child is rated independent. If the child has a complex medical need, then this category may be appropriate.
- Children aged 5 to 18 years are developmentally expected to physically and cognitively perform all essential components of bathing safely and without assistance. The child should be able to bathe independently (if they are not able achieve this task then this category may be appropriate).

As a reminder "Performed by Others" is a child who cannot participate, as age appropriate, may include neuromuscular disorders, lack of tone, contractures, spasticity, seizure activity, or have complex medical needs and/or equipment such as trach, port, G-tube, or a serious skin condition.

Children's Screenings:



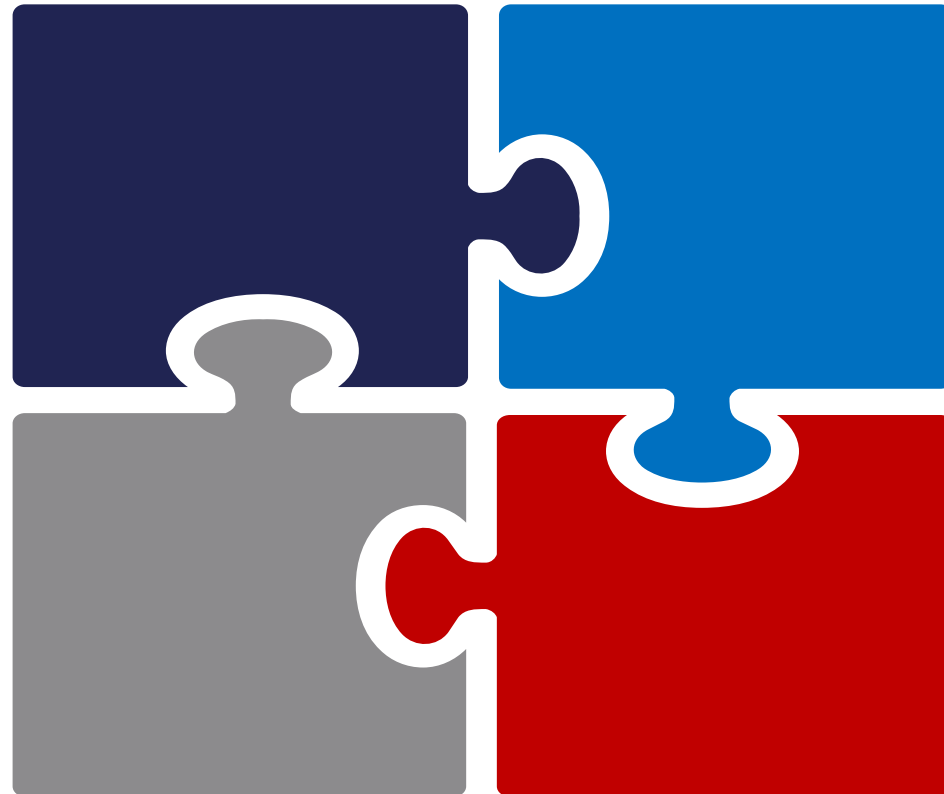
CCC Plus Waiver and CCC Plus Waiver with Private Duty Nursing for Children:

- **Children/parents interested in the CCC Plus Waiver will need a LTSS Screening (Note: Children can get personal care via CCC Plus Waiver or EPSDT).**
- **Children/parents interested in the CCC Plus Waiver with PDN will need to apply for EPSDT for PDN services and will also need an LTSS Screening for Respite Services.**

EPDST provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental, and specialty services.

More information about Virginia's EDPST Program can be found at <http://www.dmas.virginia.gov/#/maternalepsdt>.

Resources:



Connection Call Power Points

Posted on the DMAS Website:
www.dmas.virginia.gov

Under the Provider Tab, select from dropdown- Benefits and Services, then select Long Term Care, Programs and Initiatives, and LTSS Screening.

SCREENING CONNECTIONS FOR LTSS

Look down the page for list of Screening Connection calls

The screenshot shows the Virginia Medicaid website interface. At the top, the navigation menu includes 'Applicants', 'Members', 'Providers', 'Appeals', 'Data', and 'About Us'. A red arrow points to the 'Providers' tab. A dropdown menu is open under 'Providers', with a red arrow pointing to the 'Benefits & Services' option. Below the navigation, the main heading is 'Benefits & Services for Providers'. A red arrow points to this heading. Below the heading is a grid of service categories:

Behavioral Health Providing an array of behavioral health and addiction and recovery treatment services through Managed Care Organizations, CCC Plus and Medallion 4.0, and through the Behavioral Health Services Administrator.	Dental Virginia's Medicaid Smiles For Children program offers comprehensive dental services to children, adults, and pregnant members.	Long Term Care Nursing Facilities, Specialized Care Nursing Facilities, Long-Stay Hospitals, Home Health and more.	Pharmacy and Drug Formularies Reference site for the Preferred Drug List and Prior Authorization Programs, as well as for information on upcoming changes.
School Based	Telehealth	Transportation	Waivers

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.

Reminders:



Record and Retention Laws

Screening Teams, must retain or be willing to pull the screening information for:

- **10 years for Adults**
- **Age 28 for a Child**

If your facility conducted the Screening, then your staff are responsible for retrieving copies for Individuals, Providers, Health Plans, and other Screening Teams who may need it.

Fax Cover Sheet for PASRR Level II:



Cover sheet is found at:

<https://maximusclinicalservices.com/svcs/virginia>

When NF is the selected choice, a DMAS-95 form is required. If the Level I indicates that a Level II referral is warranted, there is a referral process for further evaluation and determination of needed specialty services. This process is described in the LTSS Screening Manual.

FAX Number **877-431-9568**

A screenshot of a fax cover sheet from Maximus. The word "Fax" is in the top left, and "maximus" is in the top right. The subject line reads "Subject: Virginia PASRR Level II Referral". Below this, there are fields for "To Name:", "To Fax Number:", and "Reason for referral:". The "To Name:" field contains "Assessment Pro", "To Fax Number:" contains "(877) 431-9568", and "Reason for referral:" contains "check one". To the right of these fields are fields for "From Name:", "From Fax #:", "Resident Review:", and "Preadmission Screening:". The "From Name:" field has a horizontal line, "From Fax #:" has a horizontal line, "Resident Review:" has a checkbox, and "Preadmission Screening:" has a checkbox. A large QR code is centered at the bottom of the form.

PASRR TRACKING



maximus VIRGINIA PASRR
RESIDENT TRACKING FORM

Please return this completed form to Maximus via fax at **877.431.9568**, Attn: Virginia PASRR. This form helps Maximus and the Commonwealth of Virginia track residents who have been referred for a PASRR.

Individual's Name _____
(Last) (First) (MI)

SSN- _____ Date of Birth _____

Upon completion of the Pre-Admission Screening, the following outcome occurred:

Nursing Facility Admission
Admitting Facility _____ Admitting Date _____
Contact Person _____ Contact Phone () _____

Admission to Alternative Level of Care
 Assisted Living Facility _____
 Group Home _____
 State Hospital _____
 Other _____

Other Outcome
 Discharged to/Remained in current residence _____
 Deceased _____
 Other _____

MAXIMUS, as the Level II Evaluator tracks Disposition of Individuals

Please be sure to return the Virginia PASRR Resident Tracking form back to Maximus



Reminders:



All Screening Teams

If an individual is FFS or applying or Medicaid Pending, then the Screening Team is responsible for providing a list of Medicaid Provider options during the Screening Process. If the individual is in a Medicaid Health Plan, then the Health Plan is responsible for providing this list.

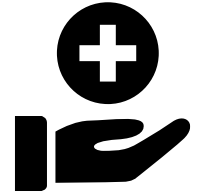
Medicaid Provider Search Tool: <https://vamedicaid.vaxix.net/Search>

The screenshot shows the 'Search Provider' interface for the Medicaid Provider Search Tool. The page features the MES logo in the top left and a 'MES Home' link in the top right. The search form includes the following fields and options:

- First Name: Text input field
- Last Name: Text input field
- Gender: Dropdown menu (Select Gender...)
- Address: Text input field
- City: Text input field
- Zip Code: Text input field
- State: Dropdown menu (Select State...)
- NPI: Text input field
- Provider Type: Dropdown menu (Select Provider Type...)
- Specialty: Dropdown menu (Select Specialty Type...)
- Language: Dropdown menu (Select Language...)
- Business Name: Text input field
- Location Name: Text input field
- Accepting New Patients: Checkbox
- ADA Compliant: Checkbox

Below the form, a note states: "At least one more search criteria is required with 'Accepting New Patient' or 'ADA Compliant'." At the bottom of the form are 'Search' and 'Reset' buttons. The footer contains links for 'Glossary of Terms' and 'Translation Services', 'Privacy Policy' and 'Nondiscrimination/Accessibility', and 'Copyright © 2020 DIMAS'. A copyright notice at the very bottom reads '© 2024 ALL RIGHTS RESERVED'.

Reminders:



Medicaid Provider Search Tool Tips

- **Provider Type:** Filter your search by choosing the provider type. Either choose “Waiver Services” if you are trying to find providers for the CCC Plus Waiver or choose “Nursing Facility”.
- **Specialty:** After choosing a Provider Type, then select a Specialty in the drop down. You can choose “Personal Care Services” for finding a Medicaid CCC Plus Waiver Agency or choose “Consumer Directed Services” to find Service Facilitators OR “Private Duty Nursing” for PDN cases OR by type of Nursing Facility such as Custodial.
- Try looking up multiple localities individually that are near the individual's residence.

MES

Search Provider [MES Home](#)

First Name Last Name Gender

Address City Zip Code State

NPI Provider Type Specialty Language

Business Name Location Name

Accepting New Patients ADA Compliant

At least one more search criteria is required with "Accepting New Patient" or "ADA Compliant".

[Glossary of Terms](#) [Privacy Policy](#) [Nondiscrimination/Accessibility](#) Copyright © 2020 DMAS

© 2024 ALL RIGHTS RESERVED

Health Plan-MCO Contact and Fax Numbers for Referral Process

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.

Found on MES Homepage

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

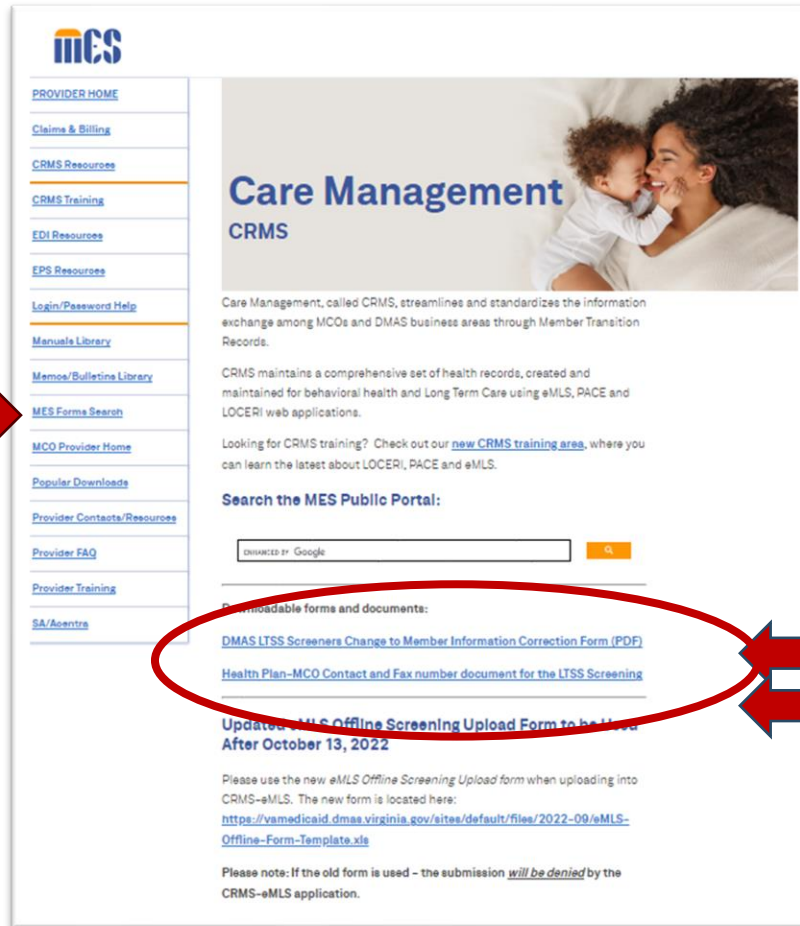
Updated Enrollment Member Correction Form on the MES Homepage

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.**
- The eMLS system **DOES NOT** automatically correct the Screening with the new information.
- **Make sure to use all the same dates that was in the original Screening (request, screening, and Screener/Physician signature dates).**
- Instructions are written on the form.

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

Downloadable Forms and Documents on the MES Homepage



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

*** NEW Updated eMLS Offline Screening Upload Form to be Used After September 12, 2024**

VCU Medicaid LTSS Screening Training and Refresher

VCU Medicaid LTSS Screening Training at:
<https://medicaidltss.partnership.vcu.edu/login>

- Log-in Using your email address and created password
- To Access the Training Modules go to helpful Links – eLearning Modules

Note: In the process of updating the Manual and Training.

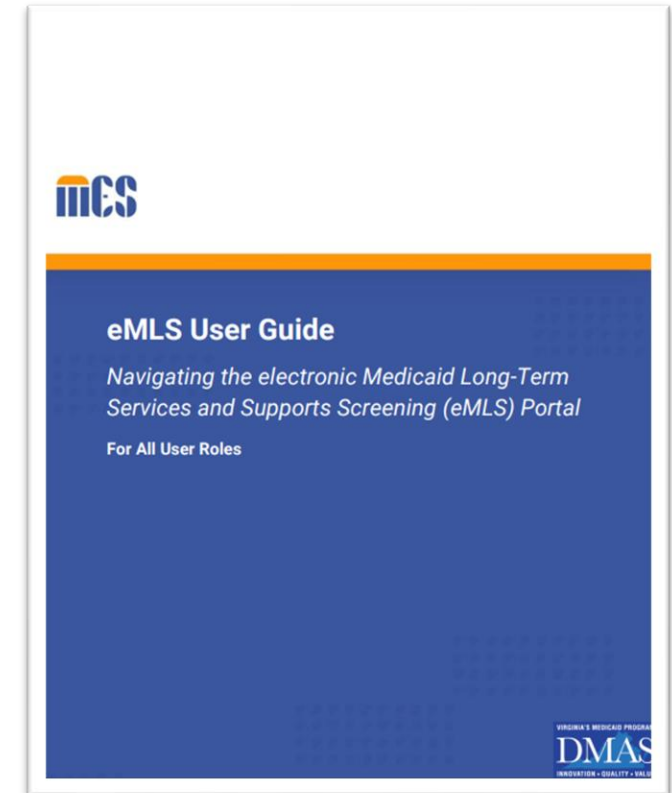
The screenshot shows the login interface for the VCU Medicaid LTSS Screening Training. The page has a purple header with the VCU logo and the text 'VIRGINIA COMMONWEALTH UNIVERSITY'. Below the header, there is a navigation bar with 'Menu', 'Medicaid Long-Term Services and Supports (LTSS) Screening Training', and 'Login'. The main content area is white and contains a login form. The form has a 'Login' heading and two input fields: 'Email address' and 'Password'. A red arrow points to the 'Email address' field. Below the password field is a 'Remember me' checkbox and two buttons: 'Login' and 'Forgot Your Password?'. The footer is purple and contains contact information for the Partnership for People with Disabilities and helpful links.

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

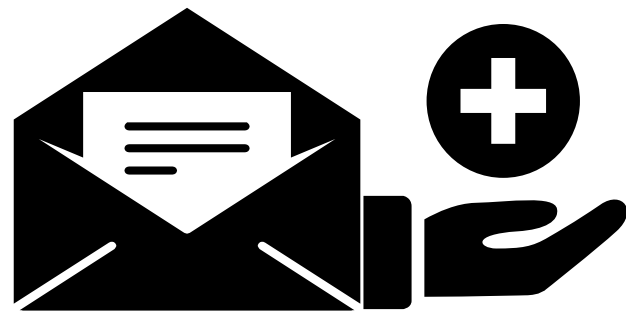
<https://vamedicaid.dmas.virginia.gov/training/crms>

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



Need Help?

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



LTSS Screening Connection Call Schedule

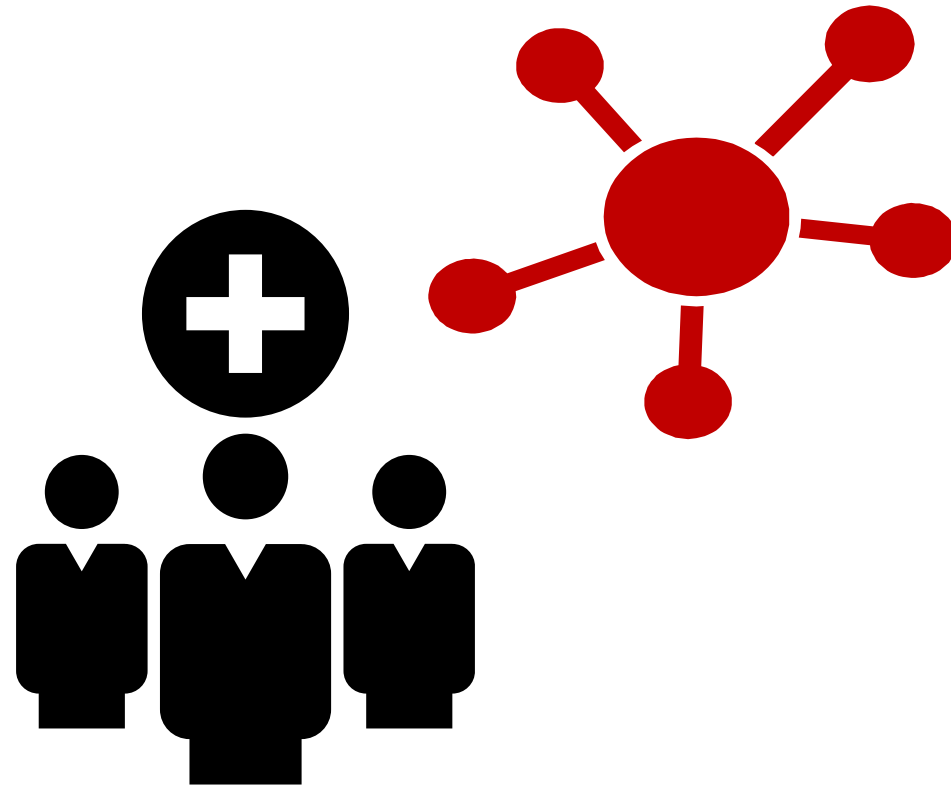
2024				
<u>SCREENING TEAM TYPE</u>	<u>QUARTER 1</u>	<u>QUARTER 2</u>	<u>QUARTER 3</u>	<u>QUARTER 4</u>
Community Based Teams (CBTs)	March	June	September	December
Hospitals	March	June	September	December 11, 2024
Nursing Facilities	March	June	September	December 12, 2024

LTSS Screening Connection Call Schedule

2025				
SCREENING TEAM TYPE	<u>QUARTER 1</u>	<u>QUARTER 2</u>	<u>QUARTER 3</u>	<u>QUARTER 4</u>
Community Based Teams (CBTs)	March 11	June 10	September 9	December 9
Hospitals	March 12	June 11	September 10	December 10
Nursing Facilities	March 13	June 12	September 11	December 11

Share Information with your Team

- Other Screeners
- Supervisors
- Managers
- Administrative Staff

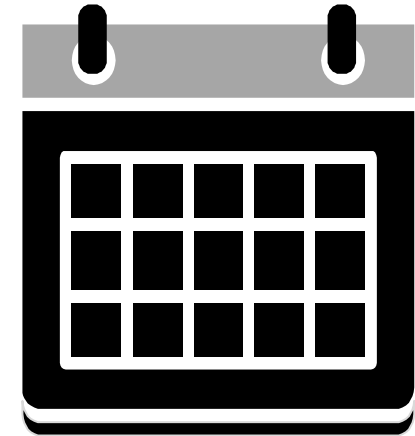


Save the Date:

Community Based and PACE Screening Team Focus

Tuesday, March 11, 2025

Any team can join the call and listen, but the focus will be on the Community Based and PACE Team



Question and Answer

