



Screening Connections

Community Based Team Focus

December 12, 2023

Office of Community Living (OCL)

VIRGINIA'S MEDICAID PROGRAM

DMAS



Thank You
You are
appreciated!

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.





Nicole Braxton
OCL Program Manager



Myra Isaacs
Technical Assistance for
Screening Assistance Mailbox
and PASRR for MI/ID/ RC



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

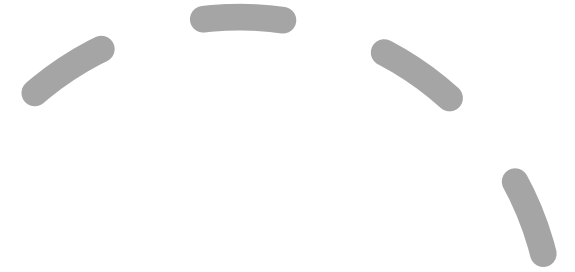


Dena Schall
Technical Assistance for
Screening Assistance Mailbox
and eMLS

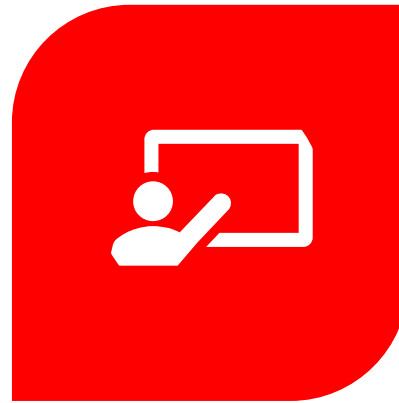
DMAS Office of Community Living (OCL) LTSS Screening Program Staff

Make sure to send all LTSS Screening Questions to ScreeningAssistance@dmas.virginia.gov
Do not send emails to individual staff members

Today's Agenda:



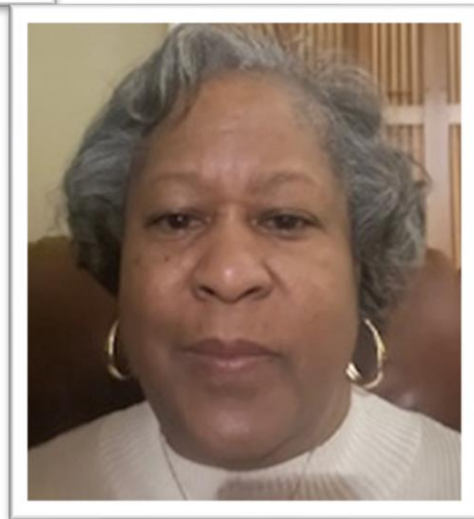
**IMPORTANT UPDATES
AND REMINDERS**



SPECIAL TOPIC: PACE



**QUESTION AND ANSWER
PERIOD**



Today's Screening Team Focus:

Community Based Teams

Presented by Dena Schall, LTSS Screening Unit

and special guest

Judy Tyree, DMAS PACE Supervisor

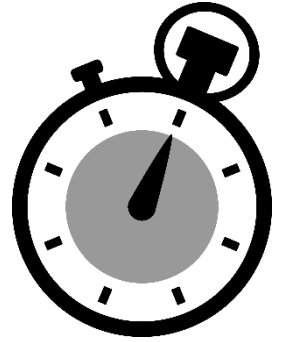
Update:



As of October 1, 2023, the Continuity Guideline changed **from 30 days to 180 days**

- Individuals are now allowed **180** days to transition between providers. After **180** days the individual must re-apply for Medicaid LTSS and a new screening is required.

New 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.

Update:



Updated Enrollment Member Correction Form coming soon.

Start using now

NEW: 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 Form**
- 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 all systems to catch up.
- **Screener** must return to eMLS CANCEL or VOID/DELETE the Screening and re-enter it with all the same dates used in the original Screening.
- Instructions will be written on the form.
- All forms must be completely filled out or they will get sent back.

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, with "Memos/Bulletins Library" circled in red. The main content area features a "Provider Resources" header with a photo of a doctor. Below this, a welcome message states: "Welcome to the MES Provider Resource area! This is the new location for Provider information and resources. The information resources on the legacy Medicaid portal are no longer available, but don't worry - we've got you covered! Links to all of the Medicaid Memos, Bulletins, Forms and Manuals have been updated and are available below. MES will continue to provide the same resources you need to get your job done, and help provide for our Members' health care. We've just finished converting all of our Provider Manuals to PDF, for easier selection and downloading - give it a try." Below the message is a search engine prompt: "Try our new MES search engine:" followed by a search bar with "ENHANCED BY Google" and a search button.

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

Reminder:



CCC Plus Waiver Private Duty Nursing Cases:

Considerations:

- **“In Correction” status** occurs when a DMAS RN PDN Reviewer returns a CCC Plus Waiver w/PDN screening to the screener for corrections. In Correction allows the screener to make changes to the screening based on information discussed with the DMAS Reviewer or entered as a Comment by the DMAS Reviewer. **Examples: adding additional details to the screening regarding the individual’s medical needs, changing the DMAS 96 to reflect CCC Plus Waiver without PDN if appropriate, etc.**
- CCC Plus Waiver w/PDN screenings must give the DMAS PDN Reviewer **a complete picture** of the individual’s medical complexities and needs. Please make sure all sections of the screening that address an individual’s complex medical condition are completed and provide additional details in the Members Summary that are not previously documented in the screening. **Examples: MUST document all scheduled Medications, tube feeding schedules, ventilator orders, tracheostomy suctioning frequency on the DMAS 108/109 and Members Summary etc.**
- Individual’s who are **already enrolled in CCC Plus Waiver w/PDN do not need a new LTSS Screening when they turn 21 years old.** There are separate processes in place for the completion of the DMAS 108 form to determine if CCC Plus Waiver Adult Private Duty Nursing criteria is met

Reminder:



Scoring and Rating for Children and Babies:

Considerations must be given for Children with Complex medical Needs or equipment.

Example

Rating Criteria for Bathing: 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.

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 the child's situation includes any of these, rate accordingly, as age appropriate.

- 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 age 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 age 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)

Reminder:

Referral process for Screeners once the Screening is conducted and processed in the system

- If the Screening is Accepted-Authorized then a copy of the Screening goes to the individual or legal representative, Health Plan/MCO if they are in one, and the provider of choice.
- The Screening Team must pass along the hard copy of DMAS 97 form that was pen/ink signed by the individual and then keep a copy of the form in the agency record.
- **A copy of the DMAS 96 form only MUST go to the local DSS of the Individual for them to get services.**
- An Approval or Denial Letter must be sent to the individual.

For Children's Screenings with opt out DSS Family Service Specialist, VDH must send 96 form to DSS Eligibility.



Reminder:

Health Plan

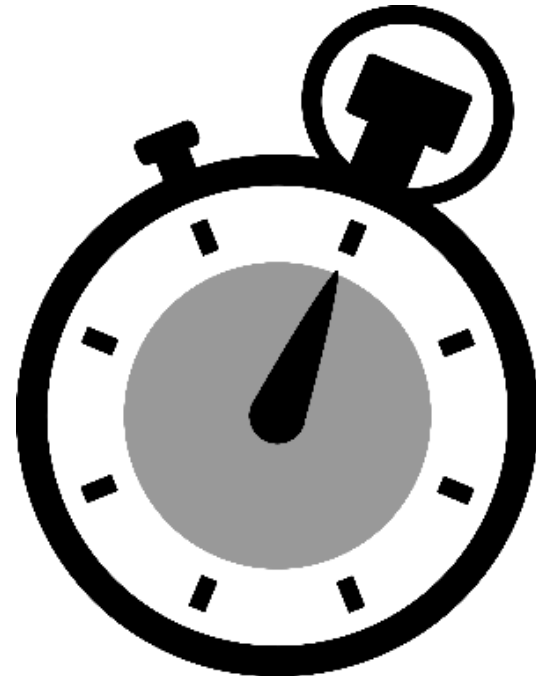
If the individual is in a **Medicaid Health Plan**, then contact the Health Plan for assistance in checking for Validity of the LTSS Screening.

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

Reminder:

- For CBT's, don't forget about the **30**-day timeframe requirement in months that have 31 days. Continuing to see a trend in data for 31-day months making you out of compliance.
- Make sure to account for staffing schedules and State Holiday Leave to stay within your 30-day window.





Time for our special topic!



Program of All-Inclusive Care for the Elderly (PACE)



What is PACE?



PACE is a Medicare and Medicaid program that assists individuals to remain in their homes and communities assuring that their needs for long term services and supports are met. In order to participate individuals must meet the following criteria:

- **55 years of age or older**
- **Reside within a PACE service area,**
- **Be certified as meeting the need for nursing facility level of care, and**
- **Be able to reside safely in the community with the help of PACE services**



PACE is a Place.



PACE services may be provided at the primary PACE site where Adult Day Health Care is offered, and coordination of PACE core services occurs. Individuals may also receive services where they live.



PACE services include:



- Adult Day Health
- Home Health Care
- Primary Care
- Medical Specialty Services
- Outpatient Rehabilitation
- Prescription Medications
- Emergency Services
- Lab/X-ray Services
- Personal Care Services
- Dental Services
- Outpatient Surgery Services
- Transportation
- Case Management
- Outpatient Psychiatric Services
- Durable Medical Equipment Services
- Nursing Facility Care
- Respite Care
- And More!

In PACE, the focus is on the person.



- PACE provides the individual with an Interdisciplinary team of healthcare professionals, doctors, nurses and others who work together to provide coordinated, person-centered care.
- The team is focused on getting to know the person as an individual, gearing care toward personal goals and preferences.
- The individual and the family are encouraged to participate with the team in the development and updating of the individual's Plan of Care.



The PACE Team Includes:



Each of these team members work together to ensure comprehensive healthcare services are provided to meet the needs and preferences of the individual.

Although most services are provided by the staff at the PACE site, PACE also works with many specialists and other community providers to assure that needed care is provided to the individual.

Nursing Facility Care

Sometimes a higher level of care is necessary, either on a temporary or long-term basis. In such cases, PACE will cover the cost of nursing facility care and spend time in the facility with the PACE participant.



PACE Transportation



PACE provides medically necessary transportation to individuals for the PACE site for activities and services and/or to medical appointments within the community.



PACE and Quality of Care



PACE programs are required to submit data on various quality indicators. Additionally, site visits are typically made annually by either Medicare and/or the Medicaid PACE Reviewer team to evaluate each PACE site's operations.

This team is composed of clinical and administrative specialists, that work closely with the PACE programs to provide oversight and technical support on an ongoing basis.



In Virginia...

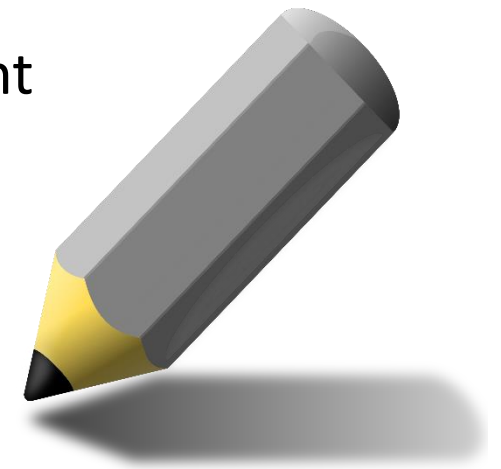


- PACE programs have been in operation 16 years, since 2007.
- There are currently 6 PACE organizations, with a total of 13 individual PACE sites serving 1900+ participants.
- With two more sites currently in the CMS application process.

Points to consider:



- PACE is the Medicaid/Medicare health plan
- PACE provider has to submit the LTSS screening and applicant information to DMAS by the 25th of the month. PACE only enrolls on the 1st of the month.



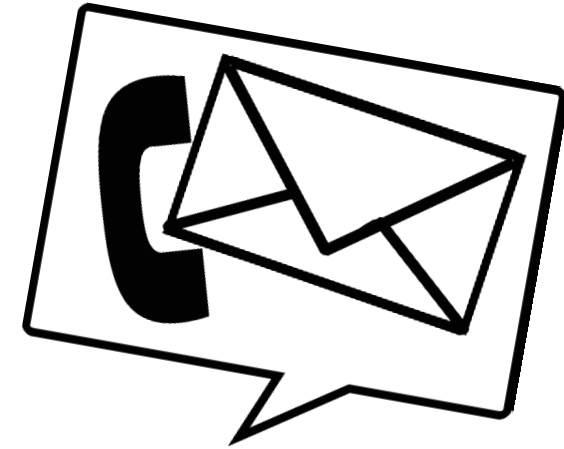
PACE Contact:

Judy Tyree, DMAS PACE Supervisor

804-773-1211

judy.tyree@dmas.virginia.gov or

PACE@dmas.virginia.gov



Resources

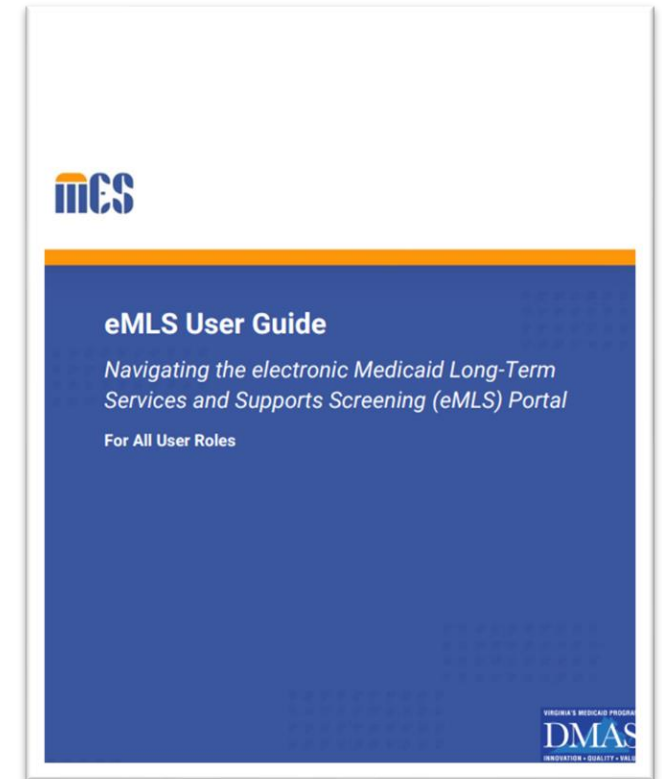


eMLS User Guide and Training

- 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



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'. The 'Providers' tab is highlighted with a red arrow pointing upwards. 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 left towards it. Below the banner, the text reads: 'Electronic Visit Verification, Program of All-Inclusive Care, Civil Monetary Penalty, Screening'. Below this is a section titled 'Resources - Programs and Initiatives' which contains four cards. The first three cards are 'Electronic Visit Verification', 'Program of All-Inclusive Care', and 'Civil Monetary Penalty'. The fourth card is 'Screening', which is highlighted with a red arrow pointing left towards it. The 'Screening' card contains the text: 'Screening ensures Medicaid-eligible individuals, and those who will become eligible for Medicaid within six months, meet the required level of care criteria.'

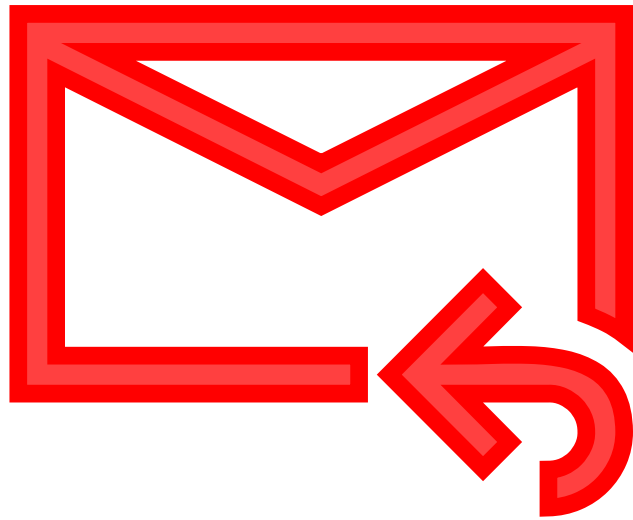
Need a Refresher?

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

The screenshot shows the login page for the VCU Medicaid LTSS Screening Training. The page has a purple header with the VCU logo and navigation links: Menu, Medicaid Long-Term Services and Supports (LTSS) Screening Training, Login, and Register. The main content area is white and contains a login form. The form has a 'Login' button highlighted in yellow. Below the form, there is a 'Remember me' checkbox and a 'Forgot Your Password?' link. The footer is purple and contains the VCU logo, the text 'Virginia Commonwealth University Partnership for People with Disabilities School of Education 700 East Franklin Street', and a 'Helpful links' section with links for 'eLearning Modules', 'Partners', and 'Feedback'. A yellow arrow points to the 'eLearning Modules' link.



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

Upcoming Connection Call Schedule and Team Focus

| 2024 | | | | |
|-------------------------------------|------------------|------------------|------------------|------------------|
| <u>SCREENING TEAM TYPE</u> | <u>QUARTER 1</u> | <u>QUARTER 2</u> | <u>QUARTER 3</u> | <u>QUARTER 4</u> |
| Nursing Facility | January 9 | April 9 | July 9 | October 8 |
| Hospitals | February 13 | May 14 | August 13 | November 12 |
| Community Based Teams (CBTs) | March 12 | June 11 | September 10 | December 10 |

SHARE INFORMATION WITH YOUR TEAM

- Other Screeners
- Supervisors, Managers, Directors





Next Call:

- Skilled Nursing Facility Screening Team Focus
- January 9, 2023 at 3:30
- Any team can join the call and listen, but the focus will be on SNF Screening Issues



Question and Answer Time