



SCREENING CONNECTIONS

FOR LTSS SCREENERS

February 11, 2020

Presented by the Division for Aging and Disability Services

Today's Conversation

- Hot Topic Issues
- Questions and Answers

Q: Will this PowerPoint be available after this call?

- Yes

<http://www.dmas.virginia.gov/#/longtermprograms>

- Choose the tab for Screening for LTSS

Q: What is the role of the physician and what training do they need to take starting in February?

- Physicians are the FINAL Authorizing Signature on a Medicaid LTSS Screening
 - Review the information and confirm agreement with information and authorization

This Month's Hot Topic Issue

- Physicians' LTSS Screening Training, Module 5 is available
 - Physicians (NP and PA) must register and complete Module 5 by June 1, 2020
 - This training is required by Virginia law

<https://medicaidltss.partnership.vcu.edu/register>

This Month's Hot Topic Issue

VOIDS

Q. What needs to be communicated for a VOID?

- Name of the individual
- SSN
- Medicaid ID
- Reason or issue requiring a VOID
- Send it to
ScreeningAssistance@dmas.Virginia.gov

Q: Were hospitals included in the decision to remove the "3 day allowance" from the law (Medicaid LTSS Screening Regulations 12VAC30-60-306)?

- The decision to retract the 3-day allowance was necessary to assure adherence to federal laws and assurance of completion of screening PRIOR to NF admission.

Q: Can hospitals complete a DMAS-96 without doing a LTSS screening?

- No. In order for someone to be authorized for LTSS the full Medicaid LTSS Screening must be completed.

Q: Why not allow the managed care providers and FFS providers access to pull the screenings from MMIS?

- Different providers and health plans have different levels of access to MMIS. Currently, rules around protected health information prevent unilateral access to health records.

Q: What about a safe plan of care? An individual wants personal care (*this is the CCC Plus waiver*) but that is not appropriate due to safety concerns?

- Individuals' choices should be honored unless there is strong documentation regarding health, safety and welfare.
- The LTSS Screener is the BEGINNING of the LTSS process, not the end.

Q: What happens if someone changes their mind from CCC+ to NF after the screening has been processed?

- This is not a problem. The health plan care coordinator or provider should also be assisting the individual to enable choice to occur.

Q: Confirming that NFs, Health Plans and providers can look into the ePAS system or another system to see if a screening has been done?

- No, they cannot.

Q: Can Health Plans, NFs, and other providers obtain a copy of a screening without calling the CBT's or Hospital?

- No.
- Both Community-based and hospital teams are to be able to pull Medicaid LTSS Screening packets for at least six years after the date of screening.

Q: If we've checked and the names are wrong or does not match on their Medicaid ID, SSN card, or even their ID, what information or identification should we rely on?

- Check

<https://www.coverva.org/materials/Verification%20Documents.pdf>

Q: If it is not an auto-fill problem do we still have to have DSS make the correction?

- ALL situations involving errors in auto-filled fields must come to:
ScreeningAssistance@dmas.Virginia.gov
- Local DSS is not going to be able to assist with ePAS errors or problems.

Q: Can we re-enter a screening while we wait for a void to occur?

- There are a variety of reasons for voids so reentering doesn't always work.
- Screeners may receive error message from ePAS indicating a screening has already occurred for the individual if another screening is entered.
- Most errors involving Medicaid IDs or SSNs will require a new entry for the screening but if it involves problems with auto-filled information, those issues must be resolved first.

Q: How can we see if services were authorized for a patient without having to request the screening?

- As previously mentioned different provider groups have different access to MMIS. It is always best to review the actual LTSS Screening to confirm that it has been successfully processed as well as authorizing LTSS.

Q: Screeners have noted that it takes longer than 72 hours from Screening Assistance.

- We apologize for delays. Depending on the issue or type of VOID - additional research, and involvement of other DMAS staff may be needed.
- In-depth questions often require additional research and careful wording of the response which may require additional time.

Q: ePAS has been freezing and we are having to start over, what can we do?

- Be sure to save frequently. ePAS does time out.
- Check bandwidth and connectivity at your location.
- Periodically completely turn off the computer.
- Ongoing problems, please try using DMAS-Pg8 form – download, complete, then upload

Q. What does “MEDICAID AUTHORIZATION CODE IS INVALID IN CROSS EDIT VALIDATION” mean?

- The authorization of LTSS is not supported by the information provided in the UAI.
- Be sure to use the LTSS Screener Worksheets to review the criteria and compare to the UAI answers.
- Return to the Medicaid LTSS Screening training and manual, Chapter IV for assistance

Who to Contact Regarding Medicaid LTSS Screening Issues?

ScreeningAssistance@dmas.Virginia.gov

Glossary

- Code of Federal Regulations (CFR)
- Community-Based Team (CBT)
- Department of Behavioral Health and Developmental Disabilities (DBHDS)
- Department of Medical Assistance Services (DMAS)
- Fee For Service (FFS)
- Level of Care (LOC)
- Local Department of Social Services (LDSS)
- Local Health Department (LDH)
- Long-Term Services and Supports (LTSS)
- Nursing Facility: NF
- PreAdmission Screening and Resident Review (PASRR)
- Uniform Assessment Instrument (UAI)
- Virginia Administrative Code: (VAC)