



SCREENING CONNECTIONS FOR LTSS SCREENERS

April 14, 2020

Presented by the Division for Aging and Disability Services

Today's Conversation

- Update on Status of Issues
- Test Your Knowledge
- Reminders
- Questions and Answers

Q: Will this PowerPoint be available after this call?

- Yes

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

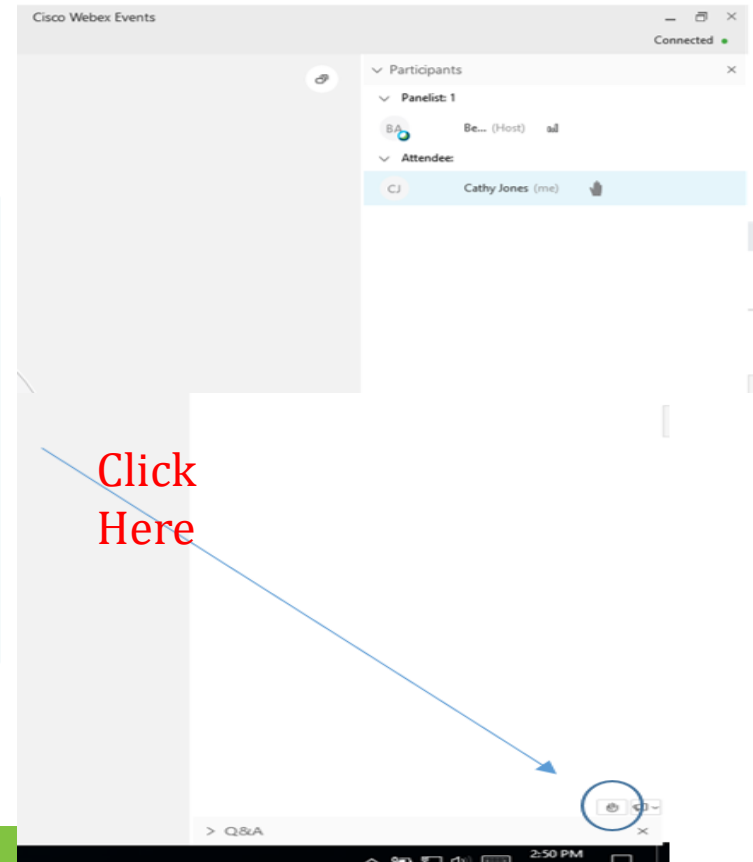
- Choose the tab for Screening for LTSS



TO ASK A QUESTION YOU MUST ELECTRONICALLY RAISE YOUR HAND



Do you have a question? you can "Raise your Hand" in the Participants panel to signal a question during the question and answer session and we will open your microphone.



This Month's Status of Issues

COVID-19 and LTSS Screenings

Physician Training

Technology Changes at DMAS

Are there updates due to COVID-19 and LTSS Screenings?

Please continue to conduct LTSS Screenings

The requirement for LTSS Screenings remains in affect.

- Listen carefully to CDC and public health recommendations
- Hospitals continue per protocol
- Community screenings follow VDH advice

Contact:

ScreeningAssistance@dmas.Virginia.gov

if an unusual situation occurs in your facility/agency/locality

Physician Training

It is available:

<https://medicaidtsstraining.partnership.vcu.edu/intromodule/intro.html>

Physicians can take the entire LTSS Screening training,
Modules 1-4 or Module 5

Final Due Date has not been determined.

Computer System Upgrades

- (VA)MMIS to be replaced by MES – Medicaid Enterprise System
- ePAS to be replaced by new electronic screening portal (ESP)
- Anticipate opportunities to be trained in the new portal, DTBD

Can you answer these questions?

- Why is a Medicaid LTSS Screening needed?
- Why does it matter if a screening is left denied in ePAS?
- True or False?
 - The Medicaid LTSS Screening and the PASRR Level I Screening are the same thing.
 - Nursing facilities can complete both PASRR Level I and Level II screenings themselves.

LTSS Screenings

- It is THE Initial Screening to determine Level of Care Needs but also includes other items for various programs.
- It is used to determine if someone is **AUTHORIZED** for Medicaid to pay for LTSS.

Meeting Level of Care Requirements for Medicaid LTSS

- ONGOING Medical/Nursing Need (should not say ongoing medical/nursing need if someone only requires short-term support/care)
- Someone is at risk of being institutionalized (hospitalization or nursing facility) within the next 30 days
- Meets Functional Need Criteria (there are 3 ways to meet)

Using the Worksheets is Helpful

WORKSHEET TO DETERMINE NEED FOR MEDICAID-FUNDED LTSS

The following worksheet is a helpful tool in determining if an individual, adult or child, meets NF LOC criteria.

Individual being assessed:

Date:

STEP 1: Based on a completed Virginia Uniform Assessment Instrument (UAI) - check how the individual scores in the following categories.
(Definitions in the User's Manual: *Virginia UAI, revised 12/15 found at https://www.dss.virginia.gov/files/division/licensing/alf/intro_page/current_providers/manuals/uai_users_manual.pdf*)

ADLs	Check if Semi-Dependent (d)	Check if Dependent (D)
Bathing		
Dressing		
Toileting		
Transferring		
Eating/Feeding		
Bowel		
Bladder		

STEP 2: Number of "Other" Dependencies
Apply the above responses to the variables below.

Medication Administration: Check if Dependent (D)
Behavior Pattern & Orientation: Check if Semi-dependent (d) or Dependent (D)
Mobility: Check if Semi-dependent (d) or Dependent (D)
Joint Motion: Check if Semi-dependent (d) or Dependent (D)

STEP 3: Apply the responses in Step 2 to the criteria below.

To be considered to meet the functional capacity requirements for NF level of care an individual must meet the minimum requirements of one of the following three categories.

CATEGORY 1: Individuals must meet items #1 and #2 in category 1; plus either item #3 or #4.

- 1) Rated dependent in 2 to 4 ADLs: **YES; PLUS**
(If individuals are rated dependent in MORE THAN 4 ADLs it counts as a yes)
- 2) Rated semi-dependent or dependent in behavior pattern and orientation: **YES; PLUS**
- 3) Rated semi-dependent or dependent in joint motion: **YES; OR**
- 4) Rated dependent in medication administration: **YES.**

CATEGORY 2: Individuals must meet all items in this category.

- 1) Rated dependent in 5 to 7 ADLs: **YES; PLUS**

- 2) Rated dependent in mobility: **YES.**

CATEGORY 3: Individuals must meet all items in this category.

- 1) Rated semi-dependent or dependent in 2-7 ADLs: **YES; PLUS**
(If individuals are rated as **DEPENDENT** and/or **SEMI-DEPENDENT** (combination) in 2-7 ADLs it counts as a yes)
- 2) Rated dependent in mobility: **YES, PLUS**
- 3) Rated dependent in behavior and orientation: **YES.**

STEP 4: Individuals **MUST** have a medical or nursing need to meet criteria for long-term services and supports.

This means:

- 1) the individual's medical condition requires observation and assessment to assure evaluation of needs due to an inability for self-observation or evaluation; OR
- 2) the individual has complex medical conditions that may be unstable or have the potential for instability; OR
- 3) the individual requires at least one ongoing medical or nursing service. (See the Screening for LTSS manual section for examples and additional explanation.)

Does individual does have medical nursing needs?

If **YES** (*briefly describe*):

STEP 5: Determination of whether the individual meets criteria for long-term services and supports.

1. Individual meets at least one of the three categories in Step 3: **YES;**
2. Individual has medical or nursing needs as defined in Step 4: **YES.**
3. Individual is seeking waiver services and meets the definition of "at risk" for institutionalization within 30 days: **YES**

This individual meets NF LOC criteria (i.e., 1, 2, and 3. above are answered "YES"):
YES NO

Assessor:

Date:

Screeners Need to Confirm Processing

- Screenings are validated by the computer system this is NOT the same as Authorization!
 - Submitted for Processing
 - Successfully Processed:
 - Authorized and Non-Authorized for LTSS, Q. 3 on Medicaid Authorization Form
 - Denied

Denied means something went WRONG. The Screener must review the screening to determine why it was denied and FIX it.

Screenings for Nursing Facility Admissions

Medicaid Long-term Services and Supports Screening

- Documents the Level of Care Required for nursing facility services (Uniform Assessment Survey).
- Assures Individual Choice for providers of services and settings (DMAS-97).
- Provides individuals with information regarding their appeal rights.
- Includes the PASRR Process on the DMAS-95 form.
- Documents authorization of Medicaid LTSS or denial on the DMAS-96.

Completed by authorized and certified Screeners for Medicaid LTSS (hospitals and community-based teams per the Code of Virginia, § **32.1-330**) for Medicaid Members or those individuals financially eligible for Medicaid within six months of admission to a NF.

*Not completed for anyone who meets the Special Circumstances cited in 12VAC30-60-302.

PreAdmission Screening and Resident Review (PASRR) process

- Assures the individuals with POTENTIAL mental illness, intellectual disability or a related condition receive specialized services in the least restrictive setting possible.
- Level I - Completed by a Medicaid LTSS Screener IF the individual is a Medicaid member or likely to be Medicaid-eligible within six months at NF Admission and a Special Circumstance per 12VAC30-60-302 does NOT exist.
- IF the individual is private pay, paid from another source or meets one of the six Special Circumstances per 12VAC30-60-302, DMAS authorizes the NF to complete the PASRR process, NF staff completes the DMAS-95 or similar form and if needed send information to Ascend/Maximus for Level II Evaluation and Determination
- Level II completed by DBHDS Contractor, Ascend/Maximus

Completed for **everyone** prior to admission to a Medicaid-certified facility regardless of payer source or reason for NF admission.

NFs are to have written policies and procedures on managing the PASRR process per Medicaid Memo Dated, 11.9.2018. DMAS allows that NFs may use qualified staff to complete the Level I Screening prior to NF admission. Level II must be referred, NFs cannot complete Level II.

Reminders

- The online Medicaid LTSS Screening training is available for review. It was not intended to be a one and done process but a place to which screeners can return again and again!
 - Review modules by enter **“User”** as ID and **“Itss”** as password.

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)