

# Screening Connections

**Community Based and  
PACE Screening Teams**

**March 10, 2026**

*Office of Community Living*



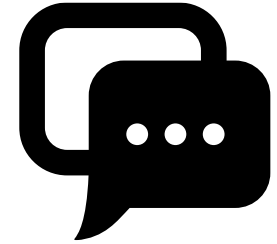


# Welcome!

# Happy New Year!

# 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



Whitney Singleton  
LTSS Screening Supervisor

**Ivy Young**

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

**Dena Schall**

Educational Sessions &  
Technical Assistance for  
Screening Assistance Mailbox/eMLS

**Ruth Robleto**

Screening Quality Review &  
Technical Assistance for  
Screening Assistance Mailbox

Send all LTSS Screening Questions to [ScreeningAssistance@dmas.virginia.gov](mailto:ScreeningAssistance@dmas.virginia.gov)

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

## Welcome New Staff Member

Ruth Robleto is joining as a LTSS Screening Contract Monitor where she will monitor, review and analyze program activities of Long-Term Services conducted by screening entities.

She comes to us with a wealth of knowledge as she previously worked closely with clinical and operational teams to improve Medicaid waiver processing.



# CBT and PACE Teams



**ALL QUESTIONS GO TO SCREENING ASSISTANCE EMAIL**

**Do not send to individual staff members**

**[ScreeningAssistance@dmas.virginia.gov](mailto:ScreeningAssistance@dmas.virginia.gov)**

## **WE NEED**

- Your place of employment
- Your name and contact Information
- Individuals' information including their Medicaid Number or Social
- Details of Issue



# CBT and PACE Teams



## DO NOT PUT:

Name, Date of Birth, Social Security Number, or  
Medicaid Number in the email Subject Line!



**For Health Insurance Portability and Accountability Act (HIPAA) and Protected Health Information (PHI), you must ENCRYPT your emails that contain protected information.**

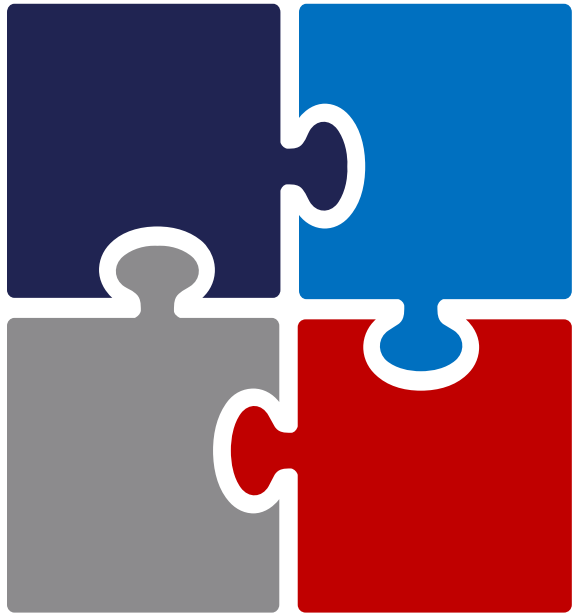


# Need Help?



- **Questions about the LTSS Screening process, policy, eMLS, or requests for copies of screenings go to:**  
[ScreeningAssistance@dmas.Virginia.gov](mailto:ScreeningAssistance@dmas.Virginia.gov)
- All technical questions about the Medicaid LTSS Screening Training Portal or Training Portal account issues go to VCU: [ppdtechhelp@vcu.edu](mailto:ppdtechhelp@vcu.edu)
- **As a LTSS Screener**, you should only contact [MES-ASSIST@dmas.virginia.gov](mailto:MES-ASSIST@dmas.virginia.gov) when you can not log into main Medicaid System MES or can not open the CRMS tile or you are a Delegate Administrator (DA) having issues adding Delegates or regular users.

# Today's Agenda:



- **Data**
- **Reminders and Best Practices**
- **Question and Answer Period**

# Community Based and PACE Team Focus

Presented by Dena Schall,  
LTSS Screening Program Specialist

# CBT and PACE Teams

January 1 to December 31, 2025, Year Totals



## Community Based Teams

Total Screenings	Community based Screening Summary		
	# Over 30 Days	% over 30 Days	Avg # of Days
25,955	1,770	6.82%	20.85

## PACE Teams

Total Screenings	# Over 30 Days	% over 30 Days	Avg # of Days
959	38	3.96%	10.74

Data as of 3-5-2026



# CBT and PACE Teams

January 1 to February 28, 2026 Trend



## Community Based Teams

Month	Feb	Jan
# of Screenings	2251	1929
# of Submitted > 30 Days	223	224
% of Submitted > 30 Days	9.9%	11.6%

Totals	# of Screenings	4180
	# of Submitted > 30 Days	447
	% of Submitted > 30 Days	10.7%

## PACE Teams

Month	Feb	Jan
# of Screenings	90	66
# of Submitted > 30 Days	5	0
% of Submitted > 30 Days	5.6%	0.0%

Totals	# of Screenings	156
	# of Submitted > 30 Days	5
	% of Submitted > 30 Days	3.2%

Data as of 3-5-2026



# Team Comparison

2025 Team Total Number of Screenings



Nursing Facility

**5,278**

Hospital

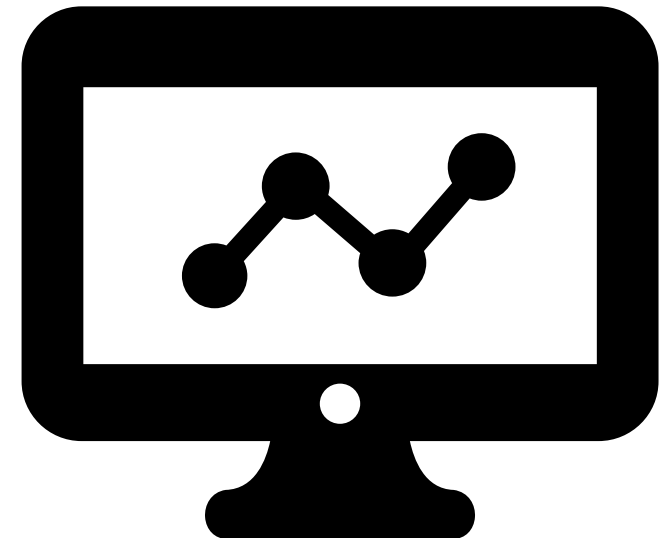
**11,037**

Community Based

**25,955**

PACE

**959**



Data as of 3-5-2026



# CBT and PACE Teams

## Reminders



### **Quality Reviews are being conducted across all Screening Teams**

Not responding or cooperating could result in temporary suspension of Screening certification.



# CBT and PACE Teams

## Reminder



## Security, Passwords, and Certification

- All teams should have access to MES and be signing off in their own screening signature sections (DMAS 96).
- Screeners and Physicians should not be giving their certification number/letter sequences to another staff member to sign off for them. **DO NOT share, it could result in invalidation of Screening.**
- Make sure to check your appropriate title.



This authorization is appropriate to adequately meet the individual's needs and assures that all other resources have been explored prior to Medicaid authorization for this member.

- By checking this box and entering your certification number below as the screener 1, you attest that this authorization is appropriate to adequately meet the individual's needs and assures that all other resources have been explored prior to Medicaid authorization for this member. Any person who knowingly submits this form containing any misinterpretation or any false, incomplete or misleading information may be guilty of a criminal act punishable under law and may be subject to civil penalties.

### Screener 1 Certification Details:

Certification Number \*

Last Name \*

First Name \*

MI



# CBT and PACE Teams

## Reminder



## Please use accurate eMLS Selections

### Type of Screening:

Do any of the following apply to this Screening? (Check all reason(s) that apply)\*

Dept of Corrections Referral       Overturned Appeal       DMAS Variance Given       Not Applicable

### Physician dropdown when screening is past 30 days:

**Appeals:** When Screenings are late due to an overturned appeal

**Correction:** When Screenings are late due to the correction process

**PASRR:** When Screenings are late due to PASRR Process

**Other:** example-Staffing issues, Weather, Agency Closing, or other specific reason

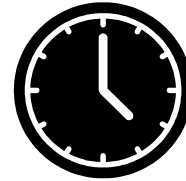


# CBT and PACE Teams

## Best Practice



### eMLS Offline Form-P98



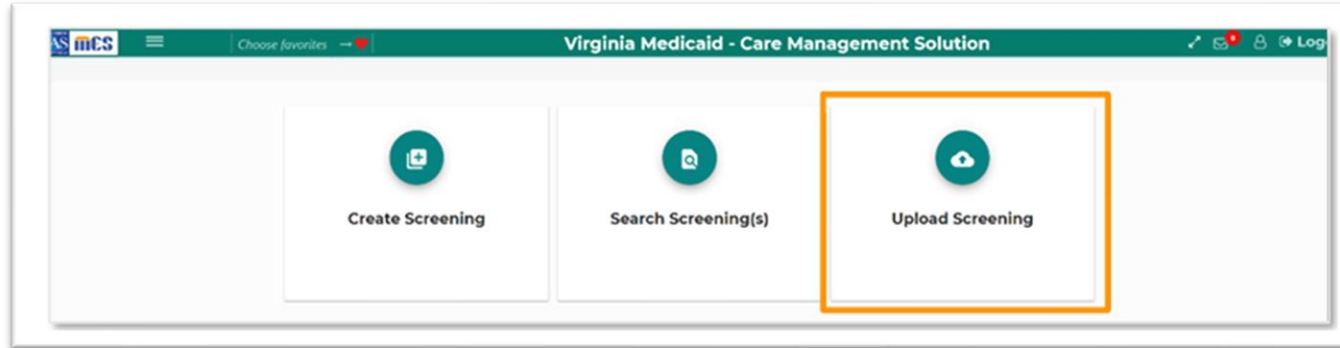
#### Time Management Ideas

- Use the eMLS Offline form to save time coordinating data entry among different team members (ex. RN and SW or Family Service Specialist)
- Each Screener can enter all sections they are responsible for into the offline form without having to go in and out of eMLS multiple times. Once all of the needed data is collected into the spreadsheet then it can be uploaded. Both parties are still responsible for signing off individually on the DMAS 96 tab in eMLS.
- It can expedite the correction process as well when you have them.

# CBT and PACE Teams

## Best Practice

### eMLS Offline Form-P98



Current Offline form can be downloaded from eMLS Upload Screening tile.

A screenshot of the "DMAS-P98 Virginia Uniform Assessment Survey (UAI)" form. The form is titled "DMAS-P98" and "Virginia Uniform Assessment Survey (UAI)". It contains several sections: "Dates" with fields for "Initial Request Date" and "Screening Date"; "IDENTIFICATION/ BACKGROUND" with "Name & Vital Information" (Member's Name, Address, Work Phone, Directions to House, Pets?, Email); "Demographics" (Member's Date of Birth, Marital Status, Communication of Needs, Education, Age, Race, Other Language, Gender, SSN, Hearing Impaired); "Primary Caregiver" (Name, Address, Phone Number, Relationship, Zip Code, Email); "Emergency Contact" (checkbox to populate with Primary Caregiver info, Name, Address, Phone Number, Relationship, Zip Code, Email); and "Primary Physician" (Name, Address, Phone, Relationship, Zip Code, Email). The form is mostly blank with yellow highlights on some input fields. At the bottom, there are navigation tabs for "UAI-A", "UAI-B", "At-Risk", "DMAS-95-MI-ID-RC", "DMAS-95-MI-ID-SUPL", "DMAS-97", "DMAS-96", "DMAS-108", "DMAS-109", and a "+" sign.

# CBT and PACE Teams

## Best Practices



### Screening Requests and Appointment Scheduling

- Each entity has the autonomy to set up an intake and scheduling process that is conducive to their locality's main intake process, however LTSS Screening timelines must be followed if they are more stringent than your general processes.

**Example:** Each CBT shall contact the individual or his representative within seven (7) calendar days of the request date for a LTSS Screening to schedule the LTSS Screening with the individual. The "request date for a LTSS Screening" means "the date that an individual, an emancipated child, the individual's representative, an Adult or Child Protective Services Worker, physician, CSB Support Coordinator, or individual's health plan contacts the LTSS Screening entity in the jurisdiction where the individual resides asking for assistance with LTSS." For Referrals, 7 days to contact the individual, see if they are interested, and schedule.

- Please make sure the entity that is doing intake for LTSS Screenings has a clear process for individuals making a request. This includes automated call program selections, hot lines, and other staff that answer the main lines. Individuals should not have to call around to make a request.

**Example:** If an individual calls the main number for local PACE site, VDH or DSS, it should be clear what selection they need to push to make a request for a LTSS Screening or Medicaid LTSS (NF, CCC Plus Waiver, or PACE) and general staff who answer the phones should be familiar with LTSS Screenings to recognize when an individual is trying to make a request.

# CBT and PACE Teams

## Best Practices



- **Questions that are needed for home-visiting safety are allowed.** If the entity needs to ask a certain set of preliminary questions to ensure safety of the home visit and screeners, this is encouraged.
- **Pre-Screening** is discouraged such as asking specific questions about the individual's ADLs or discussing whether the individual might meet criteria or not.

# CBT and PACE Teams

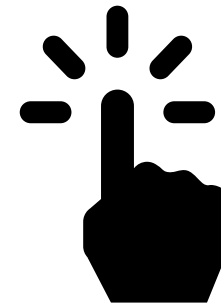
## Best Practices



- **Appointment Reminders:**

Individuals should be reminded of what types of things to have ready at their appointment.

- Social Security and Medicaid Cards
- List of Medications
- Dates of last primary care and specialist appointments
- Dates of Hospitalizations
- Health issues and dates of Diagnosis
- Physician notes documenting Medical Nursing Needs and Risk

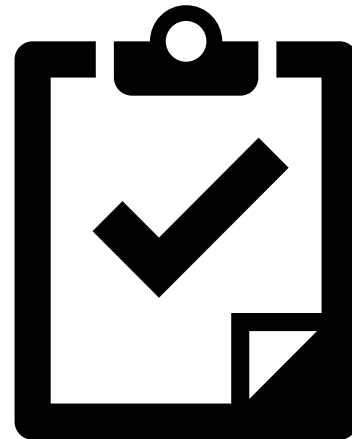


# CBT and PACE Teams

## Best Practices



- **Intake staff are encouraged to share general Medicaid LTSS Program information**  
Information can be shared at intake about Medicaid Long Term Services and Supports (LTSS) Program and the Screening process.



# CBT and PACE Teams

## Best Practices



### General Medicaid LTSS Program information

#### Medicaid LTSS Overview

- Medicaid LTSS includes medical and non-medical care for people with chronic conditions, illness, or disability.
- Provided to individuals who require a level of care equivalent to that received in a Nursing Facility, Specialized Care Nursing Facility, or Long Stay Hospital.
- LTSS helps meet medical, nursing, or personal care needs.
- LTSS can be provided at home in the Community or in a Nursing Facility.

#### Medicaid LTSS Options

- Commonwealth Coordinated Care (CCC) Plus Waiver and CCC Plus Waiver with Private Duty Nursing (PDN)
- Program of All-Inclusive Care for the Elderly (PACE)
- Custodial Nursing Facility, Specialized Care Nursing Facility or Long Stay Hospital

#### Medicaid LTSS Overview

- Individuals with an interest or need for Medicaid LTSS can be evaluated for Nursing Facility Level of Care criteria via a LTSS Screening. Screenings are conducted by designated LTSS Screening Teams across the Commonwealth.
- Once the NF Level of Criteria is met, the individual can initiate Medicaid LTSS. However, Medicaid LTSS can not start until financial Medicaid eligibility has been determined and approved.

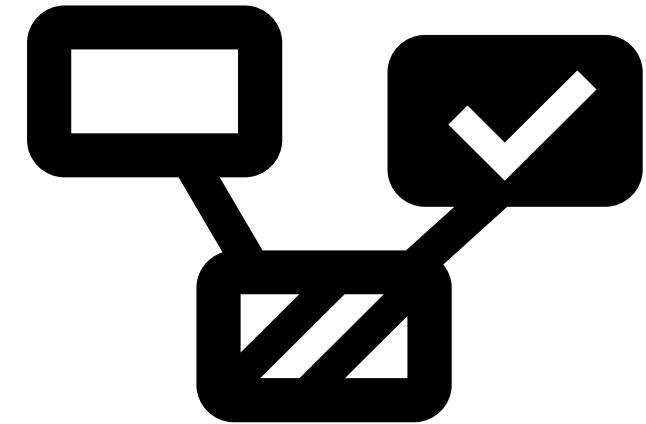


# CBT Teams

## Best Practices

### Ideas for finding solutions within your Community Based Team:

- Discuss issues among your counterpart team first (LHD or DSS).
- Notify and discuss with local Management (LHD and DSS) for attempted resolution.
- Contact and work with your state liaisons for a resolution.



**Make sure you try to problem solve locally or within your CBT before reaching out to Screening Assistance**

# CBT Teams

## Best Practices

### Continuing Ideas

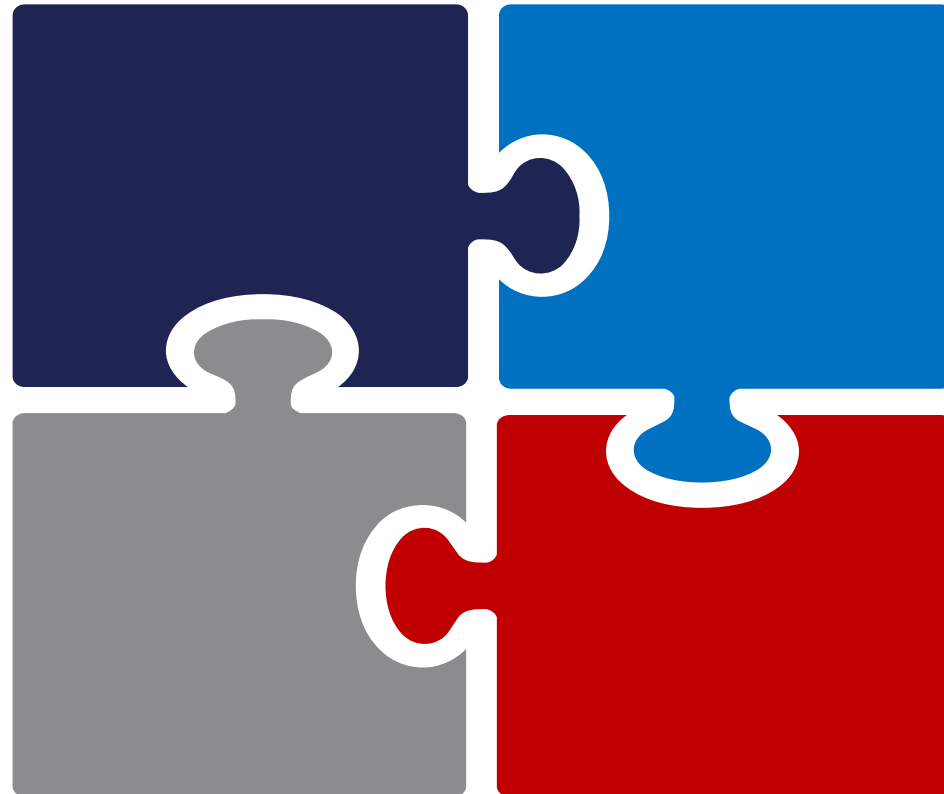


#### **Team/Program Evaluations:**

- Set up a meeting between VDH/DSS management and screening staff periodically to brainstorm ideas for streamlining processes that are within the LTSS Screening Guidelines.
- Discuss things that are working well, barriers, and possible solutions within Guidelines.
- Plan out what sections of the LTSS Screening the SW/FSS and RN conducts based off of medical and social work skillset.
- Map out screening process from initiation of call to final steps.
- Develop reminders to be sent out to individuals before their appointment.

Communication is key to a well working team!

# Resources:



# Connection Call Power Points

Posted on the DMAS Website:  
[www.dmas.virginia.gov](http://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

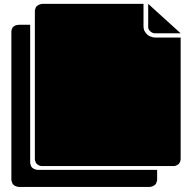
Look down the page for list of Screening Connection calls

**Connection Call Power Point slides will be emailed after each meeting to those who attended the call.**

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 this, the main heading is 'Benefits & Services for Providers'. A red arrow points to a grid of service categories: Behavioral Health, Dental, Long Term Care, and Pharmacy and Drug Formularies. Below this grid is another row of categories: School Based, Telehealth, Transportation, and Waivers.

<b>Behavioral Health</b> 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.	<b>Dental</b> Virginia's Medicaid Smiles For Children program offers comprehensive dental services to children, adults, and pregnant members.	<b>Long Term Care</b> Nursing Facilities, Specialized Care Nursing Facilities, Long-Stay Hospitals, Home Health and more.	<b>Pharmacy and Drug Formularies</b> Reference site for the Preferred Drug List and Prior Authorization Programs, as well as for information on upcoming changes.
<b>School Based</b>	<b>Telehealth</b>	<b>Transportation</b>	<b>Waivers</b>

# MES Homepage: Resources



The screenshot shows the MES homepage with a navigation menu on the left and a main content area. The navigation menu includes links for PROVIDER HOME, Claims & Billing, CRMS Resources (highlighted), CRMS Training, EDI Resources, EPS Resources, Forms & Downloads, Login/Password Help, Manuals Library, Memos/Bulletins Library, MCO Provider Home, Provider Contacts/Resources, Provider FAQ, Provider Training, and SA/Acentra. The main content area features a banner for Care Management CRMS with a photo of a woman and a child. Below the banner, there is a description of CRMS, a search bar, and a list of downloadable forms and documents.

**MES**

[PROVIDER HOME](#)

[Claims & Billing](#)

[CRMS Resources](#)

[CRMS Training](#)

[EDI Resources](#)

[EPS Resources](#)

[Forms & Downloads](#)

[Login/Password Help](#)

[Manuals Library](#)

[Memos/Bulletins Library](#)

[MCO Provider Home](#)

[Provider Contacts/Resources](#)

[Provider FAQ](#)

[Provider Training](#)

[SA/Acentra](#)

## 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](#)
- [LDSS Eligibility Fax number document for the LTSS Screening](#)

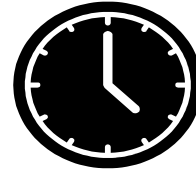
**Updated eMLS Offline Screening Upload Form**

Please use the new eMLS Offline Screening Upload form when uploading into CRMS-eMLS. [Download the new form](#)

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

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

# Screening Timelines



- Individuals who have a screening conducted have 1 year of the physician's date 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.
- **If the individual is terminated for any of the following then a new LTSS Screening is required to reapply for Medicaid LTSS: Moving out of state Code 002, Not Meeting NF Level of Care Criteria Code 003, having an overdue LOCERI Code 431, or not having services Code 504.**
- Individuals are allowed 180 days to transition between Medicaid LTSS Choices (NF, CCC Plus Waiver, or PACE). After 180 days the individual must re-apply for Medicaid LTSS and a new screening is required.
- When in doubt, screen the individual.

# CBT and PACE Teams



## Checking Terminations

- If the individual is in a Health Plan, then the Health Plan should confirm the termination codes.
- Individuals, Eligibility Workers, and Service Providers should consult with the Health Plan before asking for a new LTSS Screening.
- Some CBTs may have access for checking the termination or end codes in the system, but not all have access.
- If the individual is FFS, then you can contact [ScreeningAssistance@dmas.virginia.gov](mailto:ScreeningAssistance@dmas.virginia.gov).

MMIS Reason Codes for CCC+ Waiver Termination	
002	Moved out of state
003	NF LOC criteria not met
431	Overdue LOCERI
504	No services



# CBT and PACE Teams

## Reminder



### 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 (except for rare circumstances in adoption cases-contact SA for these cases). 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 (previous slide).
- If the individual already has Medicaid LTSS and this is a transition from one LTSS to another then the original Screening used to enroll the individual into LTSS is used and passed onto the new provider. Keep in mind Screenings conducted prior to July 1, 2019, may or may not have a tangible screening to pass on and are grandfathered in.
- The only way to check for Medicaid LTSS continuity is to have access to the Medicaid System's Eligibility tabs. If the individual is in a Health Plan, they should be contacted and can help with this information.

# CBT Teams

## Reminder



## Timeframes for CBT Requests and Referrals



### Requests:

- Contact the individual or his representative within seven (7) calendar days.

### Referrals:

- Must attempt to contact the individual or their representative within seven (7) days of the referral date.

**All LTSS Screenings should be scheduled within 21 days, conducted, entered into eMLS, all signatures attested to, screening submitted by Physician, and dated within 30 days of the request date.**

# CBT Teams

## Reminder



**There are certain situations that may occur that is of no fault of the CBT that may affect the screening appointment. Request dates can ONLY be adjusted in the following scenarios:**

- Agency closure due to inclement weather
- Individual cancels appointment
- Individual is not at home when the screening team arrives
- Individual requests a later date even though earlier appointments were available
- Individual does not respond to repeated contact attempts to schedule the screening.



The new request date would be the date of next successful contact with the individual.

# PACE Teams

## Reminder



## PACE Requests and Referrals

The PACE Screening Team conducts screenings on those individuals who are interested in PACE or who are referred to them by the CBT.

However, the PACE Screening Team must always provide information on all Medicaid LTSS options and provide the individual with a choice between Custodial NF Institution, PACE, or CCC Plus Waiver.

**All LTSS Screenings should be scheduled and entered into eMLS as soon as possible. Best Practice is less than 30 days.**

# CBT and PACE Teams

## Reminder



### **Hospice and APS Cases:**

Special considerations in scheduling should be given to individuals under Hospice or APS cases where the individual is deemed to be in immediate danger or need without services.



# Required:



## 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. DSS Eligibility Fax numbers are listed on the MES Homepage.**

# 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.

# CBT and PACE Teams

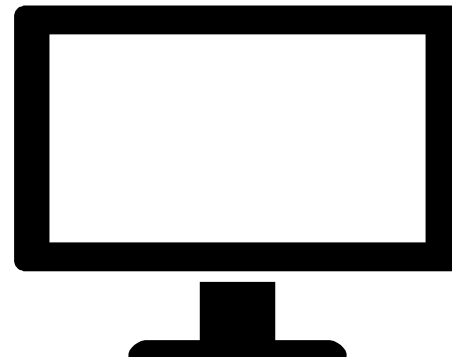
## Resource



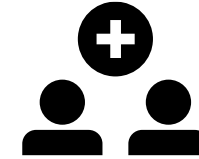
### eMLS Overview

The electronic Medicaid Long Term Services and Supports Screening (eMLS) portal is the web-based tool that certified LTSS screeners use to create and submit individual screenings for Virginia Medicaid Long Term Services and Supports (LTSS).

The eMLS portal is located on the Virginia Medicaid Enterprise System (MES) in the Care Management Solutions (CRMS) module.



# eMLS Log-In Access



## How do we add new users to eMLS?

- All entities or providers that use our MES Medicaid System have a Primary Account Holder (PAH) and can issue Delegate Administrators (DAs) to provide access to the system. This is through the NPI or API. Both DSS and VDH have a general facility NPI/API for doing DSS and VDH normal business transactions (example: Clinics, etc.).
- **For LTSS Screenings**, the Community Based Team (CBT) has been given a special joint API that allows both the DSS and VDH agencies to work in the same LTSS Screening and the CBT has DMAS as their Primary Account Holder (PAH).
- Both DSS and VDH has designated certain staff from each locality to be Delegate Administrators that are responsible for setting up and providing MES-CRMS-eMLS Log-in access to their Screeners and Physicians.
- Screeners and other staff are set up in CRMS with Creator Role access and Physicians are set up with an Approver Role. Other staff who will just view or print screenings should be set up with Viewer Role.

Specific training for your DAs only, on how to add Delegates or Users can be found at: [Provider Training Resources | MES \(virginia.gov\)](#) PRSS 118. If you have DA issues, contact [MES-Assist@dmass.virginia.gov](mailto:MES-Assist@dmass.virginia.gov)

# Use eMLS User Guide and Training

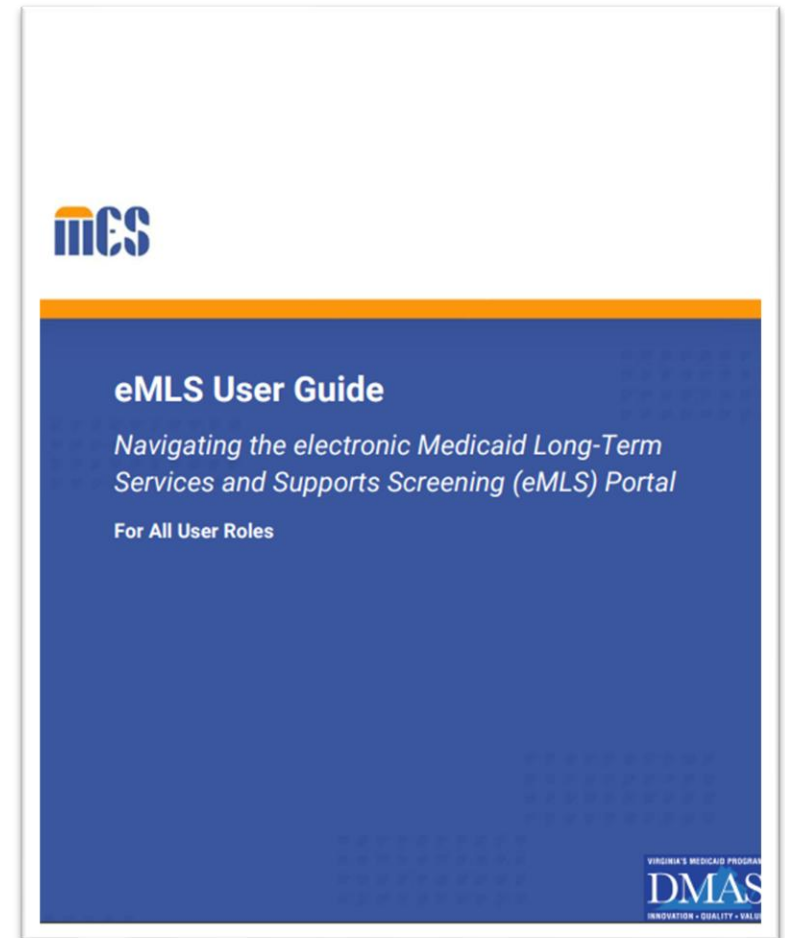
Screening Team staff should take the eMLS training and have a copy of the User Guide on hand if they use eMLS.

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

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

**Outlines the steps for navigating, creating, and managing LTSS screenings in the eMLS portal in MES, including the following tasks:**

- Accessing and logging in
- Navigating eMLS features and functions
- Searching for existing Medicaid individuals and screenings
- Creating and submitting new LTSS screenings
- Resolving pre- and post-submission screening errors
- Managing screening status
- Reviewing and approving screenings



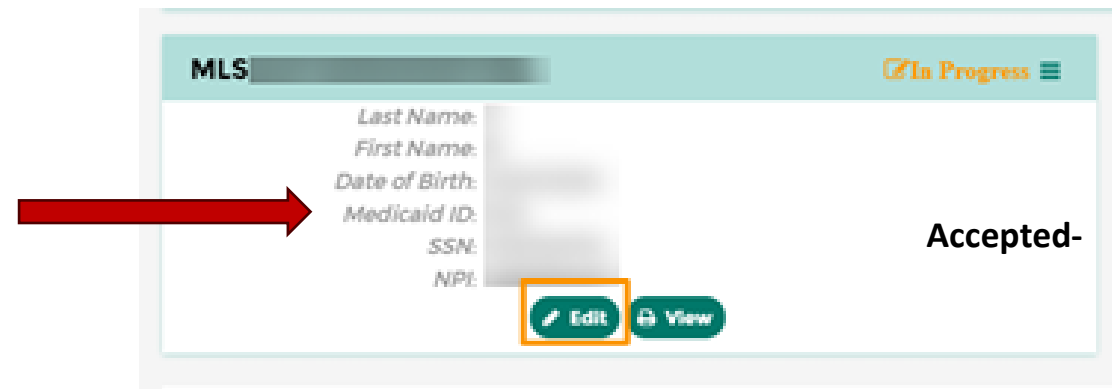
# CBT and PACE Teams

## Reminder



### eMLS and generated Medicaid Numbers

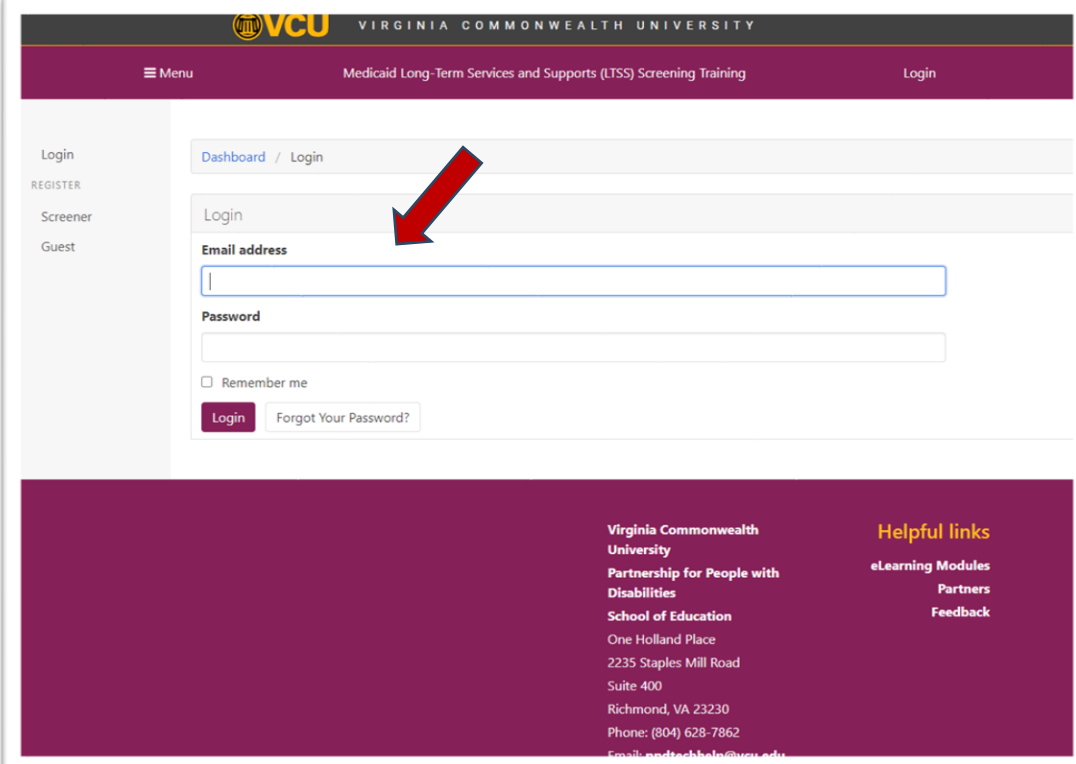
- If the individual has never applied for Medicaid before and has a LTSS Screening submitted (Accepted status), eMLS will generate a 975 Medicaid number in MMIS Medicaid System through the screening process. You can find this newly generated Medicaid Number on the Screening Information card in eMLS.
- The Medicaid Number and Social are linked in every record in MMIS and eMLS.



# 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



The screenshot shows the login interface for the VCU Medicaid Long-Term Services and Supports (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 "Dashboard / Login" breadcrumb, a "Login" heading, and two input fields: "Email address" and "Password". Below the "Password" field is a "Remember me" checkbox. At the bottom of the form are two buttons: "Login" and "Forgot Your Password?". A red arrow points to the "Email address" input field. The footer is purple and contains contact information for the Virginia Commonwealth University Partnership for People with Disabilities, School of Education, and helpful links for eLearning Modules, Partners, and Feedback.

# 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 form from Maximus. The form is titled "Fax" in the top left and "maximus" in the top right. The subject line reads "Subject: Virginia PASRR Level II Referral". The form contains several fields: "To Name:" with "Assessment Pro" entered; "To Fax Number#:" with "(877) 431-9568" entered; "Reason for referral:" with "check one" entered; "From Name:" with a blank line; "From Fax #:" with a blank line; "Resident Review:" with an unchecked checkbox; and "Preadmission Screening:" with an unchecked checkbox. A large QR code is positioned in the lower right quadrant 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 interface includes the following fields and options:

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

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

**Search** **Reset**

Glossary of Terms  
Translation Services      Privacy Policy  
Nondiscrimination/Accessibility      Copyright© 2020 DIMAS

© 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  
Translation Services Privacy Policy  
Nondiscrimination/Accessibility Copyright© 2020 DMAS

© 2024 ALL RIGHTS RESERVED

# LRI Questions



**If families have questions about LRI, they can discuss with the following resources:**

- Cardinal Care MCO Care Manager
- Provider (Agency Nurse Supervisor or Services Facilitator)
- DD Waiver Support Coordinator

**For questions on the CCC Plus Waiver:**

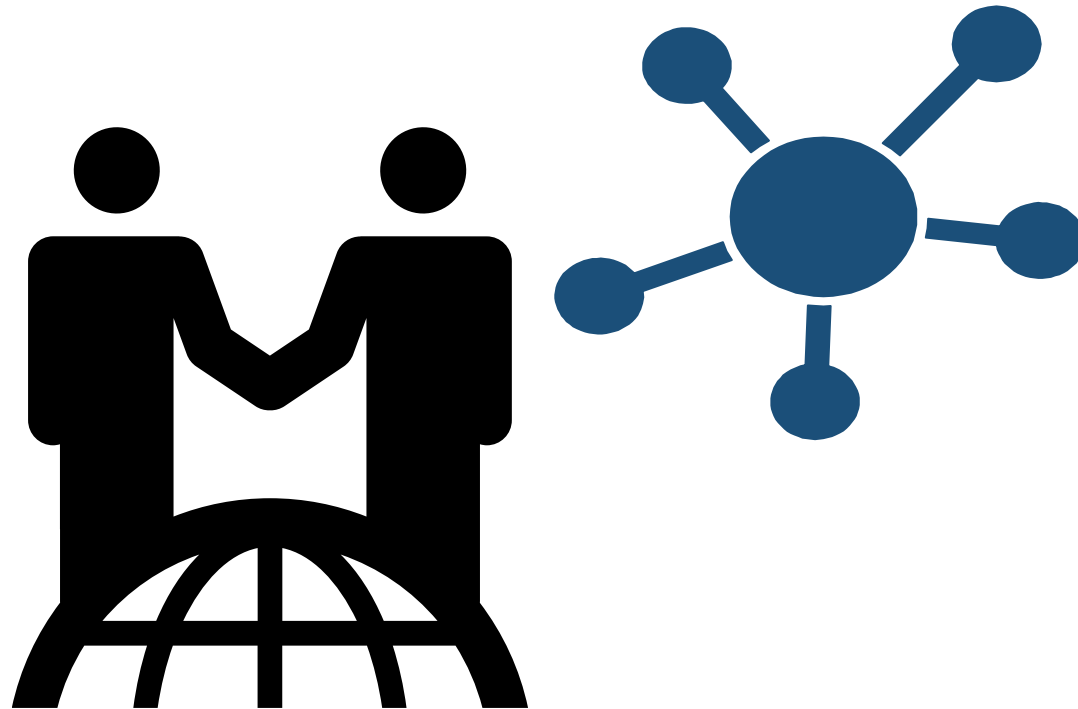
- [cccpluswaiver@dmas.virginia.gov](mailto:cccpluswaiver@dmas.virginia.gov) can answer questions from a fee-for-service perspective

# LTSS Screening Connection Call Schedule

2026				
<u>SCREENING TEAM TYPE</u>	<u>QUARTER 1</u>	<u>QUARTER 2</u>	<u>QUARTER 3</u>	<u>QUARTER 4</u>
<b>Community Based Teams (CBTs) &amp; Program of All-Inclusive Care for the Elderly (PACE)</b>		<b>June 9, 2026</b>	<b>September 8, 2026</b>	<b>December 8, 2026</b>
<b>Hospitals &amp; Nursing Facilities</b>	<b>March 11, 2026</b>	<b>June 10, 2026</b>	<b>September 9, 2026</b>	<b>December 9, 2026</b>
<b>Nursing Facilities</b>	<b>March 12, 2026</b>	NA	NA	NA

# Share Information with your Team

- Other Screeners
- Supervisors
- Managers
- Administrative Staff

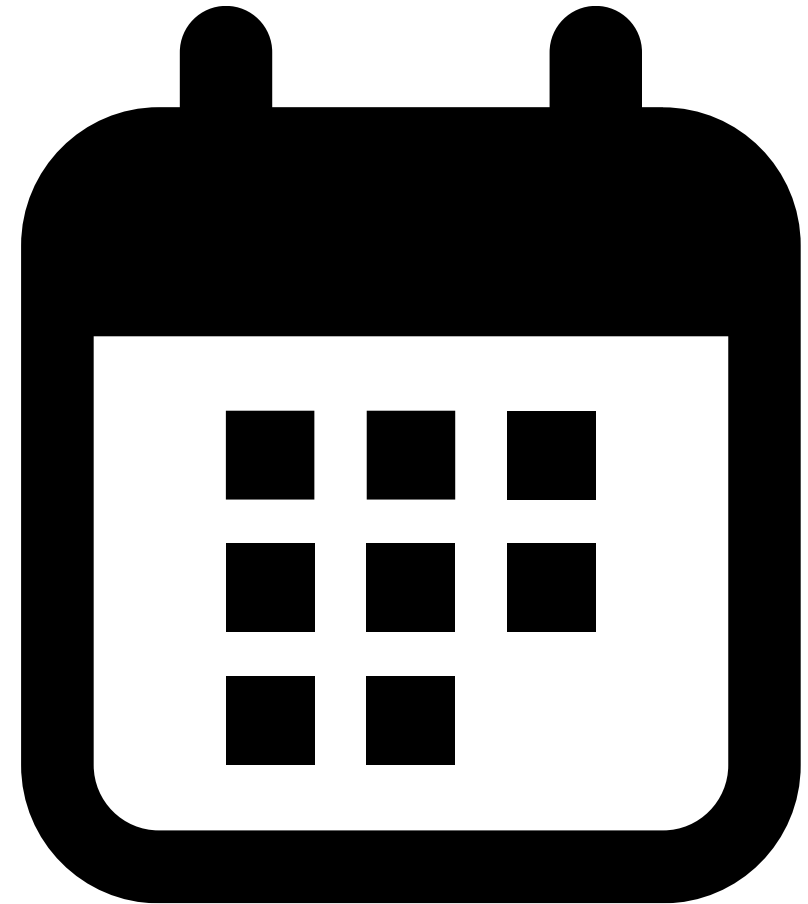


# Save the Date:

Community Based and PACE  
Screening Team Focus

**Tuesday, June 9, 2026**

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



# Question and Answer

