



Last Updated: 08/30/2022

## Medicaid Long Term Services and Support Screening (LTSS) Training for Physicians

The purpose of this memorandum is to alert Long Term Services and Supports (LTSS) Screening Teams including all community based teams, and teams in facilities of the availability of the Physician focused training module that is now available for use by the LTSS Screening Teams. The Physician Module must be completed by all physicians (including nurse practitioners and physicians' assistants) who approve LTSS Screenings by August 1, 2022.

All physicians (and those authorized to sign for a physician per the Code of Virginia, 54.1-2957.02 and 54.1-2952.2) who have not yet been certified for the Medicaid LTSS Screening, and who are responsible for reviewing and final authorization or denial of the Medicaid LTSS screenings must complete the physicians' training, Module 5. Physicians should allow approximately 30 minutes for the training including taking the quiz at the end of the module and reviewing the resource handout LTSS Key Knowledge Points for Physicians. A certification number and certificate will be provided following successful completion. Beginning on August 1, 2022, physicians will be required to have completed the training and to enter their certification number when approving screenings; otherwise, the screening will not be processed by the electronic Medicaid LTSS Screening system. Completion of the training is required every three years.

Registration and access to the Medicaid LTSS Screening Training can be found at <https://medicaidtss.partnership.vcu.edu/register>

### Background

The Code of Virginia in § 32.1-330 requires a LTSS screening of all Medicaid members or Medicaid eligible individuals applying for admission to a certified nursing facility, as defined in § 32.1-123, or enrollment in the Commonwealth Coordinated Care Plus Waiver or Program for All-inclusive Care for the Elderly (PACE).

Per Virginia regulation **12VAC30-60-310 Competency Training and Testing Requirements**, beginning July 1, 2019, each individual conducting screenings and providing authorization for approval of Medicaid LTSS shall have completed required training and passed competency tests achieving a score of at least 80%. Authorizing screeners are individuals who sign and attest to the *DMAS-96 Medicaid LTSS Authorization* form, including nurses, social workers, and physicians.

Questions and inquiries regarding this bulletin should be directed to: [ScreeningAssistance@dmas.virginia.gov](mailto:ScreeningAssistance@dmas.virginia.gov).

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### PROVIDER CONTACT INFORMATION & RESOURCES



# MEDICAID BULLETIN

<p><b>Virginia Medicaid Web Portal Automated Response System (ARS)</b> Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.</p>	<p><a href="http://www.virginiamedicaid.dmas.virginia.gov">www.virginiamedicaid.dmas.virginia.gov</a></p>
<p><b>Medicall (Audio Response System)</b> Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.</p>	<p>1-800-884-9730 or 1-800-772-9996</p>
<p><b>KEPRO</b> Service authorization information for fee-for-service members.</p>	<p><a href="https://dmas.kepro.com/">https://dmas.kepro.com/</a></p>
<p><b>Provider Appeals</b> DMAS launched an appeals portal in 2021. You can use this portal to file appeals and track the status of your appeals. Visit the website listed for appeal resources and to register for the portal.</p>	<p><a href="https://www.dmas.virginia.gov/appeals/">https://www.dmas.virginia.gov/appeals/</a></p>
<p><b>Managed Care Programs</b> Medallion 4.0, Commonwealth Coordinated Care Plus (CCC Plus), and Program of All-Inclusive Care for the Elderly (PACE). In order to be reimbursed for services provided to a managed care enrolled individual, providers must follow their respective contract with the managed care plan/PACE provider. The managed care plan may utilize different guidelines than those described for Medicaid fee-for-service individuals.</p>	
<p><b>Medallion 4.0</b></p>	<p><a href="http://www.dmas.virginia.gov/#/med4">http://www.dmas.virginia.gov/#/med4</a></p>
<p><b>CCC Plus</b></p>	<p><a href="http://www.dmas.virginia.gov/#/cccplus">http://www.dmas.virginia.gov/#/cccplus</a></p>
<p><b>PACE</b></p>	<p><a href="http://www.dmas.virginia.gov/#/longtermprograms">http://www.dmas.virginia.gov/#/longtermprograms</a></p>
<p><b>Magellan Behavioral Health</b> Behavioral Health Services Administrator, check eligibility, claim status and service authorizations for fee-for-service members.</p>	<p><a href="http://www.MagellanHealth.com/Provider">www.MagellanHealth.com/Provider</a> <a href="#">For credentialing and behavioral health service information, visit:</a> <a href="http://www.magellanofvirginia.com">www.magellanofvirginia.com</a>, email: <a href="mailto:VAProviderQuestions@MagellanHealth.com">VAProviderQuestions@MagellanHealth.com</a>, or Call: 1-800-424-4046</p>
<p><b>Provider HELPLINE</b> Monday-Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available.</p>	<p>1-804-786-6273 1-800-552-8627</p>



Department of Medical Assistance Services  
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Suite 1300  
Richmond, VA 23219

<https://dmas.virginia.gov>

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Aetna Better Health of Virginia	<a href="http://www.aetnabetterhealth.com/Virginia">www.aetnabetterhealth.com/Virginia</a> 1-800-279-1878
Anthem HealthKeepers Plus	<a href="http://www.anthem.com/vamedicaid">www.anthem.com/vamedicaid</a> 1-800-901-0020
Molina Complete Care	1-800-424-4524 (CCC+) 1-800-424-4518 (M4)
Optima Family Care	1-800-881-2166 <a href="http://www.optimahealth.com/medicaid">www.optimahealth.com/medicaid</a>
United Healthcare	<a href="http://www.Uhcommunityplan.com/VA">www.Uhcommunityplan.com/VA</a> and <a href="http://www.myuhc.com/communityplan">www.myuhc.com/communityplan</a> 1-844-752-9434, TTY 711
Virginia Premier	1-800-727-7536 (TTY: 711), <a href="http://www.virginiapremier.com">www.virginiapremier.com</a>