Department of Medical Assistance Services
600 East Broad Street
Suite 1300
Richmond, VA 23219

https://dmas.virginia.gov
MEDICAID BULLETIN

Last Updated: 06/20/2024

Changes to LTSS Screenings: PACE Sites Performing Screenings Effective 6/1/2024

The purpose of this bulletin is to notify PACE providers, LTSS screening teams, and Managed Care Organizations of new allowances for PACE providers to conduct LTSS screening resulting from the 2024 General Assembly passing of House Bill 729 and Senate Bill 620.

Effective June 1, 2024, qualified PACE staff are permitted to conduct LTSS screenings when community-based teams are unable to complete the screening within 30 days or the individual has requested enrollment in a PACE program. Qualified PACE staff include at a minimum, a registered nurse; social workers and other staff may participate with the registered nurse to conduct the screening. All screenings must be reviewed by a physician, physician's assistant, or nurse practitioner.

When a PACE provider conducts an LTSS screening, the individual must be offered a choice between institutional or home and community-based services. This includes the Commonwealth Coordinated Care Plus (CCC Plus) Waiver, PACE, and nursing facility. A choice must be offered to all individuals found to meet the nursing facility's level of care.

Qualified PACE staff must register and complete online LTSS training provided by Virginia Commonwealth University. The link to register for the training is: https://medicaidltss.partnership.vcu.edu/register. The PACE provider's NPI will be needed to complete the registration. Registered nurses and other staff who will assist in conducting the screening must complete modules 1 through 3 and the corresponding assessment for each module. Physicians, Physician Assistants, and Nurse practitioners must complete Module 5 and the corresponding assessment. All staff must receive a score of at least 80% to receive certification for the LTSS screening. Each staff member completing the training will receive a certificate and a certificate number to be used when conducting a screening. The certificate should also be placed in the staff member's employment file. Each screener must be recertified every three years.

LTSS screenings must be entered into the eMLS portal. For staff to gain access to the eMLS portal, the Primary Account Holder (PAH) or Delegate Administrators (DAS) will need to add the roles of staff by assigning staff one of the following roles: Creator, Viewer, or Approver. Resources on delegate management are listed here: Provider Training Resources | MES (virginia.gov). Specifically, PRSS-118 Introduction to Provider and MCO Portal Delegate Management and PRSS-118 User Guide can support efforts in managing delegates. For questions related to delegate administration, contact MES-Assist@dmas.virginia.gov.

Once the user role has been assigned, the staff will have access to the portal. Training on eMLS and a user guide is found

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at: https://vamedicaid.dmas.virginia.gov/training/crms#gsc.tab=0. Users should complete the courses under the heading: How to Perform Screenings in eMLS; this includes CRMS-101, CRMS-103, CRMS-104, and CRMS-106.

For questions, please email screeningassistance@dmas.virginia.gov

PROVIDER CONTACT INFORMATION & RESOURCES

Virginia Medicaid Web Portal Automated Response System (ARS) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	https://vamedicaid.dmas.virginia.gov/
Medicall (Audio Response System) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	1-800-884-9730 or 1-800-772-9996
Provider Appeals 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.	https://www.dmas.virginia.gov/appeals/

Managed Care Programs

Cardinal Care Managed Care 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.

Cardinal Care Managed Care	https://www.dmas.virginia.gov/for-providers/managed-care/cardinal-care-managed-care/
PACE	Program of All-inclusive Care (virginia.gov)
Acentra Health Behavioral Health Services	https://vamedicaid.dmas.virginia.gov/sa
Provider Enrollment	In-State: 804-270-5105 Out of State Toll Free: 888-829-5373 Email: VAMedicaidProviderEnrollment@gainwelltechnologies.com
Provider HELPLINE Monday–Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available.	1-804-786-6273 1-800-552-8627

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Aetna Better Health of Virginia	https://www.aetnabetterhealth.com/virginia/providers/index.html 1-800-279-1878
Anthem HealthKeepers Plus	http://www.anthem.com/ 1-800-901-0020
Molina Complete Care	1-800-424-4524 https://www.molinahealthcare.com/providers/va/medicaid/home.aspx
Sentara Community Plan	1-800-881-2166 https://www.sentarahealthplans.com/providers
United Healthcare	www.uhcprovider.com/ 1-844-284-0149
Dental Provider DentaQuest	1-888-912-3456