https://dmas.virginia.gov

MEDICAID MEMO

Last Updated: 07/08/2022

Availability of Physician Training for Medicaid Long Term Services and Supports Screening

The purpose of this memorandum is to alert physicians who review and provide final authorization or denial of Medicaid Long Term Services and Supports (LTSS) Screenings of the availability of the training module specific for physicians.

Please note: None of the requirements in this memo shall be implemented during the COVID-19 emergency declaration period. Once the period is over, additional guidance regarding this requirement will be provided.

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 will be provided following successful completion. Physicians will be required to enter this code when approving screenings; otherwise, the screening will not be valid in the Medicaid information system and potentially jeopardize Medicaid payment for services the individual receives. Completion of the training is required every three years.

Specific information regarding registration and the web accessible link for the training is available on the DMAS website, located under "Long Term Care" in the "Screening for LTSS" tab. The link for long-term care programs is: http://www.dmas.virginia.gov/#/ltss.

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 <u>12VAC30-60-310</u>. Competency <u>Training and Testing Requirements</u>, 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.



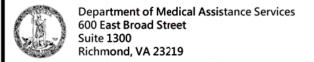
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	ACT INFORMATION & RESOURCES
Medicaid Web	
Portal	
Automated	
Response	
System (ARS)	
Member	
eligibility, claims	www.virginiamedicaid.dmas.virginia.gov
status, payment	
status, service	
limits, service	
authorization	
status, and	
remittance	
advice.	
Medicall (Audio	
Response	
System)	
Member	
eligibility, claims	
status, payment	1-800-884-9730 or 1-800-772-9996
status, service	
limits, service	
authorization	
status, and	
remittance	
advice.	
KEPRO	
Service	https://dmag.lroppe.com/
authorization	https://dmas.kepro.com/
information for fee-for-service	
members.	
	ograma.
Managed Care Pr	ograms Imonwealth Coordinated Care Plus (CCC Plus), and
	usive Care for the Elderly (PACE). In order to be
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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.

Medallion 4.0	http://www.dmas.virginia.gov/#/med4
CCC Plus	http://www.dmas.virginia.gov/#/cccplus
PACE	http://www.dmas.virginia.gov/#/longtermprograms



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Magellan Behavioral Health Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.	www.MagellanHealth.com/Provider For credentialing and behavioral health service information, visit: www.magellanofvirginia.com, email: VAProviderQuestions@MagellanHealth.com,or Call: 1-800-424-4046
Provider HELPLINE Monday-Friday 8:00 a.m5:00 p.m. For provider use only, have Medicaid Provider ID Number available.	1-804-786-6273 1-800-552-8627
Aetna Better Health of Virginia	www.aetnabetterhealth.com/Virginia 1-800-279-1878

Anthem HealthKeepers Plus	www.anthem.com/vamedicaid
	1-800-901-0020
Magellan Complete Care of	www.MCCofVA.com
Virginia	1-800-424-4518 (TTY 711) or 1-800-643-2273
Optima Family Care	1-800-881-2166
United Healthcare	www.Uhccommunityplan.com/VA
	and <u>www.myuhc.com/communityplan</u>
	1-844-752-9434, TTY 711
Virginia Premier	1-800-727-7536 (TTY: 711),