

Screening Connections

Hospital Screening Teams February 13, 2024

Presented by the Office of Community Living (OCL)





Happy New Year!

We

Thank You for your hard work this past year!



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.



Nicole Braxton OCL Program Manager



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



Dena Schall Technical Assistance for Screening Assistance Mailbox and eMLS



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



Make sure to send all LTSS Screening Questions to <u>ScreeningAssistance@dmas.virginia.gov</u> <u>Do not</u> send emails to individual staff members

Todays Agenda:



IMPORTANT UPDATES

AND REMINDERS

FREQUENT HOSPITAL TOPICS QUESTION AND ANSWER PERIOD



Todays Screening Team Focus:

HOSPITALS

Presented by Dena Schall, LTSS Screening Unit



Start using now



Updated Enrollment Member Correction Form coming soon.

NEW: For demographic corrections, all Enrollment Member Corrections Forms are to be sent to PatientPay@dmas.virginia.gov

- EMAIL Subject Line should read: LTSS Screening Member Information Change Form
- Allow at least 14 Business days for all Corrections
- Once the change has been completed by the Enrollment Division, it can take up to 48 hours for all systems to catch up.
- Screener must return to eMLS CANCEL or VOID/DELETE the Screening and re-enter it with all the same dates used in the original Screening.
- Instructions will be written on the form.
- All forms must be completely filled out or they will get sent back.



Reminder:

Bulletins and Memos can be found on the MES Home Page in the Provider Menu at:

https://vamedicaid.dmas.virginia.gov/

solution. This collection of advanced technologies directly and efficiently supports the business needs of



DMAS and our Providers.

Appeals

CRMS EDI EPS MESTraining Providers

Designate someone on your team to check periodically for new Bulletins and Memos that may provide updates on the LTSS Screening Process.



Reminder and Update:



As of October 1, 2023, the Continuity Guideline changed from 30 days to 180 days

• Individuals are now allowed **180** days to transition between providers. After **180** days the individual must re-apply for Medicaid LTSS and a new screening is required.



New Screening Timelines:

- Individuals who have a screening conducted have 1 year of the date of the physician's signature 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.
- Individuals are allowed 180 days to transition between providers. After 180 days the individual must re-apply for Medicaid LTSS and a new screening is required.
- If the individual is terminated because they didn't meet NF LOC requirements, then the individual would need a new LTSS Screening to reapply for Medicaid LTSS.
- When in doubt, screen the individual.





Reminder:

Health Plan

If the individual is in a Medicaid Health Plan, then contact the Health Plan for assistance in checking for Validity of the LTSS Screening.

Once you have contacted the Health Plan, if you have continued deputes contact: cccplus@dmas.virginia.gov

CardinalCare

Fee For Service

If the individual is Fee For Service or is not in a Medicaid Health Plan, then contact the DMAS LTSS Screening Unit at: ScreeningAssistance@dmas.virginia.gov



If an individual is not able to make decisions for themself then their legal representative must give permission and be involved in the LTSS Screening Process.

This may mean that you will need to:

- Provide an option for the legal representative to be present while the Screening is being conducted.
- Make special arrangements via telephone conference calls if the legal representative lives out of state.
- Send the DMAS 97 Choice Form to the representative for them to sign and send back if they can't be there in person.



Hospital Admissions for more than 30 days

 If an individual has Medicaid LTSS (Custodial NF) and then goes into the hospital, they have <u>180 days</u> before they would get terminated and need a new LTSS Screening.



In the hospital, when do we conduct the screening:

- As close to discharge as possible so that the medical assessment is accurate
- Before Discharge (*Physicians should be signing off before discharge*)

Make sure not to include equipment that the individual is not going to be discharging with such as Catheter, Medications, etc.

Do not score on institutional dependencies (ex. medication administration-how would they take it if they were at home)





If an individual is leaving the Acute Care Hospital and going to a Rehabilitation Hospital who does the Screening?

- Remember the individual is supposed to be screened as close to discharge as possible for an accurate assessment.
- Acute Care Hospitals AND Rehabilitation Hospitals are both required by law to have a LTSS Screening Team and to conduct Screenings

An individual can improve during their stay in rehab, so it is best practice for the later hospital to conduct the Screening.





Best Practice for Individuals with Developmental Disabilities (IDD)

Ask individual or family:

- Do you have a Support Coordinator or Case Manager at their local Community Service Board (CSB)?
- Do you have a Developmental Disability (DD) Waiver Slot?

Just as it is important to find out if the individual already has Medicaid LTSS in the Community (CCC Plus Waiver or PACE), it is also important to know if they have other types of Waivers as well such as the DD Waiver with DBHDS.





Best Practice for Individuals with Developmental Disabilities (IDD)

- Remember, individuals can only be in one Waiver at a time.
- An individual can not be in the CCC Plus Waiver and the DD Waiver at the same time.
- An individual can not be in a DBHDS Residential facility and have the CCC Plus Waiver.
- They will have to make a choice, which should be done with their case manager if they have one.

If the individual or family does not completely understand they could lose or delay their DD Waiver spot. The DD Waiver has more specialized services for individuals who are eligible.





Corrections to LTSS Screenings in eMLS

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To make a Demographic Correction (Name, DOB, Race, Gender, Social Security Number, or Medicaid Number), the first step is to know the status of the Screening:

- <u>IN PROGRESS:</u> Screeners create and work on Screening
- IN APPROVAL: Waiting on the Physician Authorizer to review, electronically sign, and submit.
- ACCEPTED-AUTHORIZED OR ACCEPTED-NOT AUTHORIZED: Fully processed Screening in eMLS

For a full status list, go to the eMLS User Guide

Use eMLS User Guide and Training

- Access, System Requirements, User Access Roles, and Logging In
- Navigation and Functions of System
- Error Message Meaning
- Searching of an Existing Screening
- Data Entry and Submission of New Electronic LTSS Screenings
- Screening Status and Watermarks
- Voiding and Corrections of Existing Screenings
- Printing Screenings
- Uploading and Downloading the P-98 offline form
- And many more concepts



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

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

Corrections to LTSS Screenings in eMLS

Demographic Corrections that are "In Progress" Status:

If you start a new screening and information in the demographic field auto populates wrong or with an error, then you:

- STOP and "CANCELL" the initiated screening which will delete it (open the screening and look for the gear icon in the top right-hand corner).
- Send in a Member Enrollment Correction Form to the Enrollment Division.
- Wait for a response back from the Enrollment Division that the demographic information has been corrected in the MMIS system which can take 24-48 hours for the information to catch up in the systems (eMLS does not auto correct the Screening, you must cancel and start over).
- Create a new LTSS Screening and check to make sure that the demographic information is auto-populating with the correct information.

If you the Screener typed in the wrong demographic information on a new Screening (and it is greyed out), then you:

• "CANCELL" the newly initiated screening and start over, using the correct information.

Always double check your information after each page for accuracy and typos!



Last Name:			
First Name:			
Date of Birth:			
Medicaid ID:			
SSN:			
NPI:	_		

3. Select the gear icon (Figure 88).

Figure 88: Gear Icon

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Corrections to LTSS Screenings in eMLS

Demographic Corrections that are in <u>"Accepted" Status:</u>

If you find an auto-populated error or realize that you made an error in the demographic field on an already submitted and processed screening, you will:

- Make a copy of the Screening.
- **"VOID and DELETE"** the Screening in the eMLS System (open the screening and look for the gear icon in the top right-hand corner).
- Send in a Member Enrollment Correction Form to the Enrollment Division.
- Wait for a response back from the Enrollment Division that the demographic information has been corrected in the MMIS system which can take 24-48 hours for the information to catch up in the systems (eMLS does not auto correct the Screening, you must void/delete and re-enter).
- Create a new Screening and check to make sure that the demographic information is auto-populating with the correct information.

MAKE SURE TO USE all of the same Request, Screener, and Physician dates that were used in the original Screening (unless they are incorrect) to resubmit. If you do not, then potential payment issues can occur for providers.





Corrections to LTSS Screenings in eMLS



Other Non-Demographic Corrections that are in <u>"Accepted" status:</u>

If you find that you need to make a correction in a non demographic field on an already submitted and processed screening, you will:

- "Void and Clone/Correct" the Screening in the eMLS System (open the screening and look for the gear icon in the top right-hand corner).
- Make your edits to the Screening.

MAKE SURE TO USE all of the same Request, Screener, and Physician dates that were used in the original Screening (unless they are incorrect) to resubmit. If you do not, then potential payment issues can occur for providers.



How to get a new Physician/Nurse Practitioner/Physician Assistant to be able to sign off on Screenings in eMLS

- Find your Hospitals Primary Account Holder or Delegate Administrator (Usually a Business Manager). You will have to ask around.
- The PAH or DA will provide the Physician with log in to MES-eMLS that is associated with the Hospitals NPI.
- The PAH or DA will need to set them up in an "Approver Role" in MES-CRMS.
- The Physician will be required to take the Medicaid LTSS Screening Training Module 5 only and pass with an 80% score. They should receive a Certificate with a Certificate Number/Letter Sequence that will be used for electronically signing off in eMLS.

Screening Assistance has a Cheat Sheet for Physicians if needed





How to get Hospital Screeners set up with a login to create Screenings in eMLS

- Find your Hospitals Primary Account Holder or Delegate Administrator (Usually a Business Manager). You will have to ask around.
- The PAH or DA will provide the Screener with a log in to MES-eMLS that is associated with the Hospitals NPI.
- The PAH or DA will need to set them up in a "Creator Role" in MES-CRMS.
- The LTSS Screener (RN, SW, Discharge Planners, etc.) will be required to take the Medicaid LTSS Screening Training Modules 1-4 and pass with an 80% score. They should receive a Certificate with a Certificate Number/Letter Sequence that will be used for electronically signing off in eMLS.







Resources

Connection Call PowerPoints

Posted on the DMAS Website Under the Provider Tab:

Long Term Care:

https://www.dmas.virginia.gov/for-providers/long-termcare/programs-and-initiatives/

SCREENING FOR LTSS

Look down the page for Screening Connection call information





Resources - Programs and Initiatives

Electronic Visit Verification (2)

The federal 21st Century CURES Act of 2016 requires states to implement Electronic Visit Verification (EVV).

Program of All-Inclusive Care () PACE helps adults ages 55+ who are and/or disabilities to receive

living with chronic health care needs community-based services and support

Civil Monetary Penalty O

Civil Monetary Penalty (CMP) funds help improve the quality of life for individuals residing in Nursing Facilities within the Commonwealth

Screening ()

Screening ensures Medicaid-eligible individuals, and those who will become eligible for Medicaid within six months, meet the required level of care criteria.

Need a Refresher?

VCU Medicaid LTSS Screening Training

- at: <u>https://medicaidltss.partnership.vcu.edu/login</u>
- Log-in Using your email address and created password
- To Access the Training Modules go to helpful Links eLearning Modules

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	Partnership for People with Disabilities	eLearning Modules Partners	
	School of Education	Feedback	





Need Help?

- Questions about the LTSS Screening process, policy or requests for copies of screenings go to: <u>ScreeningAssistance@dmas.Virginia.gov</u>
- Questions about MES (computer system issues) , CRMS, eMLS go to: <u>MES-Assist@dmas.Virginia.gov</u>
- All technical questions about accessing the Medicaid LTSS Screening Training go to VCU: <u>ppdtechhelp@vcu.edu</u>

Connection Call Schedule and Team Focus

2024						
SCREENING TEAM TYPE	<u>QUARTER 1</u>	<u>QUARTER 2</u>	<u>QUARTER 3</u>	<u>QUARTER 4</u>		
Nursing Facility		April 9	July 9	October 8		
Hospitals		May 14	August 13	November 12		
Community Based Teams (CBTs)	March 12	June 11	September 10	December 10		

SHARE INFORMATION WITH YOUR TEAM

- Other Screeners
- Supervisors
- Managers
- Directors



Next Call:

- Community Based Team Focus
- March 12, 2024 at 3:30
- Any team can join the call and listen, but the focus will be on the Community Based Team Issues





Question and Answer Time