

**VIRGINIA ADMINISTRATIVE CODE**  
**DMAS LONG-TERM CARE STATE REGULATION SUMMARY (8/2015)**

**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM**

- 12VAC30-10-220 Amount, duration, and scope of services: home health services
- 12VAC30-10-230 Amount, duration, and scope of services: Assurance of transportation
- 12VAC30-10-250 Amount, duration, and scope of services: Methods and standards to assure quality of services
- 12VAC30-10-490 Free choice of providers
- 12VAC30-10-520 Required provider agreement
- 12VAC30-10-530 Utilization and quality control

**ADMINISTRATION OF MEDICAL ASSISTANCE SERVICES**

- 12VAC30-20-10 et seq.

**GROUPS COVERED AND AGENCIES RESPONSIBLE FOR ELIGIBILITY DETERMINATION**

- 12VAC30-30-10 et seq.

**ELIGIBILITY CONDITIONS AND REQUIREMENTS**

- 12VAC30-40-10 et seq.

**AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE SERVICES**

- 12VAC30-50-130 Skilled nursing facility services, EPSDT, school health services and family planning
- 12VAC30-50-160 Home health services
- 12VAC30-50-165 Durable medical equipment (DME) and supplies suitable for use in the home
- 12VAC30-50-170 Private duty nursing services
- 12VAC30-50-200 Physical therapy and related services
- 12VAC30-50-225 Rehabilitative services; intensive physical rehabilitation
- 12VAC30-50-240 Intermediate care services and intermediate care services for institutions for mental disease and mental retardation
- 12VAC30-50-270 Hospice services (in accordance with §1905 (o) of the Act)

**PROGRAM FOR ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)**

- 12VAC30-50-320 Program of All-Inclusive Care for the Elderly (PACE)
- 12VAC30-50-321 Eligibility for PACE enrollees
- 12VAC30-50-325 Rights and responsibilities
- 12VAC30-50-328 PACE enrollment and disenrollment
- 12VAC30-50-330 PACE definitions
- 12VAC30-50-335 General PACE requirements
- 12VAC30-50-340 Criteria for PACE enrollment
- 12VAC30-50-345 PACE enrollee rights
- 12VAC30-50-350 PACE enrollee responsibilities
- 12VAC30-50-355 PACE plan contract requirements and standards
- 12VAC30-50-360 PACE sanctions

**STANDARDS ESTABLISHED AND METHODS USED TO ASSURE HIGH QUALITY CARE**

- 12VAC30-60-30 Utilization control: Long-stay acute care hospitals
- 12VAC30-60-40 Utilization control: Nursing facilities
- 12VAC30-60-70 Utilization control: Home health services
- 12VAC30-60-75 Durable medical equipment (DME) and supplies
- 12VAC30-60-120 Utilization control: Intensive physical rehabilitative services
- 12VAC30-60-130 Hospice services
- 12VAC30-60-145 Mental retardation utilization criteria
- 12VAC30-60-150 General outpatient physical rehabilitation services
- 12VAC30-60-300 Nursing facility criteria
- 12VAC30-60-303 Preadmission screening criteria for long-term care
- 12VAC30-60-307 Summary of pre-admission nursing facility criteria
- 12VAC30-60-312 Evaluation to determine eligibility for Medicaid payment of NF or HCBC services
- 12VAC30-60-320 Adult ventilation/tracheostomy specialized care criteria
- 12VAC30-60-340 Pediatric and adolescent specialized care criteria
- 12VAC30-60-350 Criteria for coverage of specialized treatment beds
- 12VAC30-60-360 Criteria for care in facilities for mentally retarded persons

## **METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES FOR LONG-TERM CARE**

- 12VAC30-90-10 et seq.

### **CASE MANAGEMENT**

- 12VAC30-50-440 Case management for individuals with mental retardation
- 12VAC30-50-450 Case management for individuals with mental retardation and related conditions who are participating in the Home and Community-based waivers for such individuals
- 12VAC30-50-490 Case management for individuals with developmental disabilities

### **MONEY FOLLOWS THE PERSON (MFP)**

- 12VAC30-120-90 Covered services and provider requirements.
- 12VAC30-120-211 Definitions (ID/MR)
- 12VAC30-120-700 Definitions (IFDDS Waiver)
- 12VAC30-120-758 Environmental modifications.
- 12VAC30-120-762 Assistive technology.
- 12VAC30-120-900 Definitions (EDCD).
- 12VAC30-120-2000 Transition coordinator
- 12VAC30-120-2010 Transition services

### **TECH WAIVER**

- 12VAC30-120-1700 Definitions
- 12VAC30-120-1705 Waiver description and legal authority
- 12VAC30-120-1710 Individual eligibility requirements; preadmission screening
- 12VAC30-120-1720 Covered services; limits; changes to or termination of services
- 12VAC30-120-1730 General requirements for participating providers
- 12VAC30-120-1740 Participation standards for provision of services
- 12VAC30-120-1750 Payment for services
- 12VAC30-120-1760 Quality management review; utilization reviews; level of care (LOC) reviews
- 12VAC30-120-1770 Appeals; provider and recipient

### **ID WAIVER**

- 12VAC30-120-1000 Definitions
- 12VAC30-120-1005 Waiver descriptions and legal authority
- 12VAC30-120-1010 Individual eligibility requirements
- 12VAC30-120-1020 Covered services; limits on covered services
- 12VAC30-120-1030 Reserved
- 12VAC30-120-1040 General requirements for participating providers
- 12VAC30-120-1060 Participation standards for provision of services; providers' requirements
- 12VAC30-120-1070 Payment for services
- 12VAC30-120-1080 Utilization review; level of reviews
- 12VAC30-120-1088 Waiver waiting list
- 12VAC30-120-1090 Appeals

### **EDCD WAIVER**

- 12VAC30-120-900 Definitions
- 12VAC30-120-905 Waiver description and legal authority
- 12VAC30-120-920 Individual eligibility requirements
- 12VAC30-120-924 Covered services; limits
- 12VAC30-120-930 General requirements for home and community-based participating providers
- 12VAC30-120-935 Participation standards for specific covered services
- 12VAC30-120-990 Quality management review
- 12VAC30-120-995 Appeals

### **DAY SUPPORT WAIVER**

- 12VAC30-120-1500 Definitions
- 12VAC30-120-1520 Individual eligibility requirements
- 12VAC30-120-1530 General requirements for home and community-based participating providers
- 12VAC30-120-1540 Participation standards for home- and community-based waiver services participating providers
- 12VAC30-120-1550 Services: day support services, prevocational services, and supported employment services

### **ALZHEIMER'S WAIVER**

- 12VAC30-120-1600 Definitions
- 12VAC30-120-1605 Waiver description and legal authority
- 12VAC30-120-1610 Individual eligibility requirements
- 12VAC30-120-1620 Covered services
- 12VAC30-120-1630 General requirements for enrolled providers
- 12VAC30-120-1640 Participation standards for provision of services
- 12VAC30-120-1650 Payment for services
- 12VAC30-120-1660 Utilization review
- 12VAC30-120-1670 Waiver waiting list
- 12VAC30-120-1680 Appeals

### **IFDDS WAIVER**

- 12VAC30-120-700 Definitions
- 12VAC30-120-710 General coverage and requirements for all home and community-based programs
- 12VAC30-120-720 Qualification and eligibility requirements; intake
- 12VAC30-120-730 General requirements for home and community-based programs
- 12VAC30-120-740 Participation standards for home and community-based programs
- 12VAC30-120-750 In-home residential support services
- 12VAC30-120-752 Day support services
- 12VAC30-120-753 Prevocational services
- 12VAC30-120-754 Supported employment services
- 12VAC30-120-756 Therapeutic consultation
- 12VAC30-120-758 Environmental modifications
- 12VAC30-120-760 Skilled nursing services
- 12VAC30-120-762 Assistive technology
- 12VAC30-120-764 Crisis stabilization services
- 12VAC30-120-766 Personal care and respite care services
- 12VAC30-120-770 Consumer-directed model of service delivery
- 12VAC30-120-772 Family/caregiver training
- 12VAC30-120-774 Personal Emergency Response System (PERS)
- 12 VAC30-120-776 Companion services

*Updated 8/2015*