

ePAS Demonstration for Hospitals

ePAS a Tool for Pre-Admission Screenings (PAS)



Process Enhancements in Collaboration Among the Virginia Departments of:
Health (VDH)
Medicaid Assistance Services (DMAS)
Aging and Rehabilitative Services (DARS)

1.2 Medicaid Web Portal – Provider Login Page

After selecting the 'Provider' role in the Web Portal Home Page, the provider and the supporting user community are directed to the Provider Login Page.

The Provider Login Page is reflected below:



Today's Agenda:

Welcome /WebEx Instructions

Michelle Watts

DMAS' Role in UAI

Jeanette Trestrail

DARS' Role in UAI

Paige McCleary

VDH's Role in PAS Improvement

Bill Edmunds

Sentara RMH Medical Center

Brenda Parker

Southside Regional Medical Center

Brittany Hall

Follow Up for Denials

Mickey Ortiz

Final Comments

Bill Edmunds



Session Ground Rules

- All of Today's Presenters are ePAS Users & NOT Professional Trainers
- Each Segment is Limited to a Total of 25 Minutes (Including Q's at the end)
- Please Spend Time Reviewing the ePAS Manual & Using the Software (Our Presenters Did)
- Any Questions Not Answered Send to william.edmunds@vdh.virginia.gov & I will send out a FAQ
- Thanks for all of your efforts with ePAS





Presentation to Hospital Pre-admission Screening Teams

August 7, 2015

Jeanette Trestrail

Division of Long-Term Care



Why go paperless?

The 2015 Session of the Virginia General Assembly directed DMAS to:

- Track and monitor all requests for Pre-Admission Screening (PAS);
- Report screenings not completed within 30 days;
- Require PAS teams and contractors to use the tracking and reimbursement mechanisms established by DMAS;
- Report progress by December 1, 2015 to the Chairmen of the Senate Finance and House Appropriates Committees.
- Authority to proceed prior to the regulatory process.

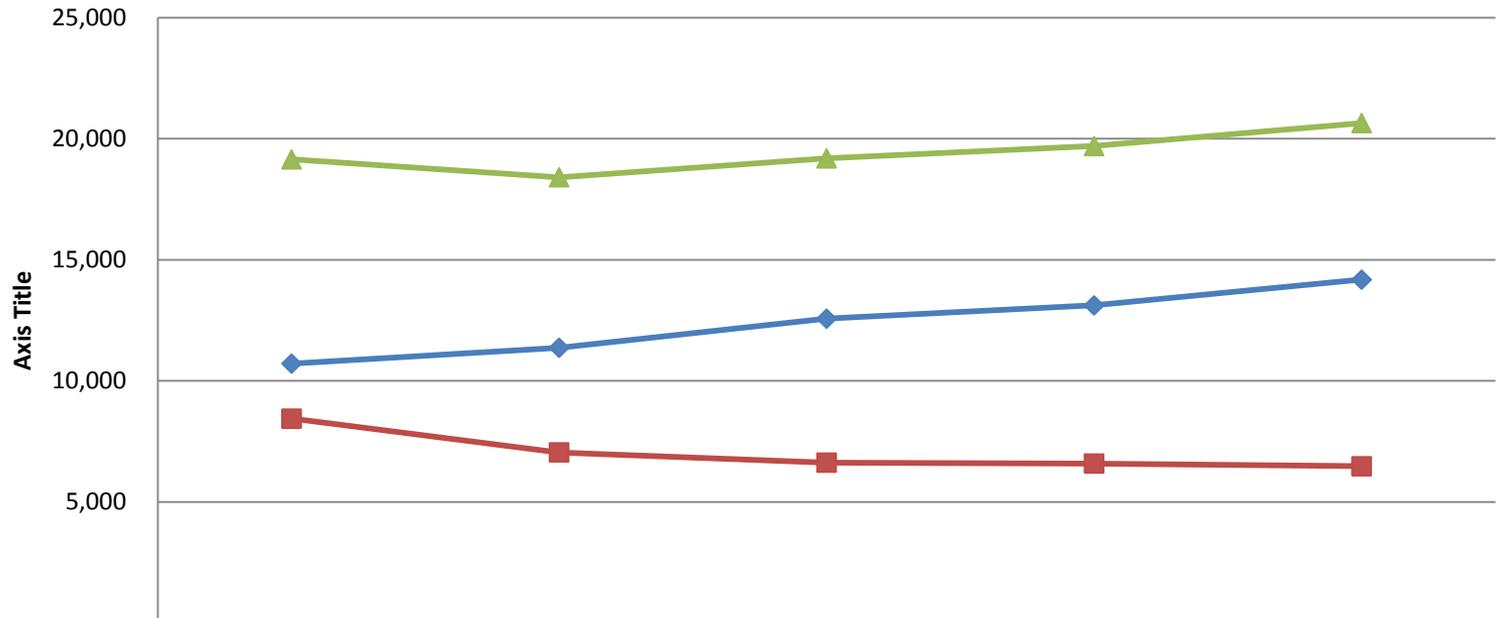
ePAS is the foundation for tracking, monitoring, reporting, and reimbursement activities related to Pre-admission Screenings. There have been no changes to regulations to this point.

Virginia 2010 -2014

Preadmission Screenings

Total Screenings Regardless of Placement

Local Health Departments (32% Increase overall & 8% Increase last year)
vs. Acute Care Hospitals (23% Decrease overall & -2 % Decrease last year)



	2010	2011	2012	2013	2014
■ Total Acute Hospital	8,437	7,044	6,621	6,582	6,469
◆ Total Local Preadmission Screening	10,710	11,365	12,567	13,116	14,179
▲ Grand Total	19,147	18,409	19,188	19,698	20,648

Location

- Gradual increases are seen in community screenings and gradual decreases are seen in hospital screenings



Implementation of ePAS

A Medicaid Memo was posted April 17, 2015, discussing the phased implementation of ePAS:

- Phase I - Open ePAS to voluntary data entry and claims processing May 1, 2015 *through June 30, 2015*;
- Phase II - Require use of ePAS for submission and claims processing for all requests for community PAS completed with effective dates of service on or after July 1, 2015;



Implementation of ePAS continued

- Phase III – Require use of ePAS and other electronic means for submission of claims for hospital screenings with effective dates of service on or after August 1, 2015:
- “Effective dates of service” mean the date that the physician or licensed health care professional (LHCP)* attests to the screening results.

** Budget language from the 2015 Session provides latitude to use a LHCP as a member of the Community PAS Team.*



Initial ePAS Enhancements

ePAS Enhancements Effective May 1, 2015 include:

- Track timeframe from initial request to physician “sign-off”;
- An electronic physician/licensed health care professional attestation;
- Added capacity to upload documents (fillable forms) into DMAS provider portal; and,
- Enable multiple users to access the same case.

Remember – By implementing ePAS May 1st, we simply moved from a paper system to an electronic system. There are no changes in the questions to be asked or the forms to be completed during the PAS process.



Division of Long-Term Care

Thank You!



DARS

VIRGINIA DEPARTMENT FOR AGING
AND REHABILITATIVE SERVICES

*Supporting Virginians' efforts
to secure independence and employment*



DARS & Preadmission Screening (PAS) Process

August 7, 2015

DARS Adult Protective Services (APS) Division

Administrative oversight of:

- APS Program
- Adult Services (AS) Program*
- Auxiliary Grant Program (benefit program)

*requires local DSS workers to participate in
community based PAS teams (CBT)



Key Points about PAS!

- Important for the individual to receive a timely PAS when he/she or a family requests one.
- Hospitals & community-based teams (CBT) can't refuse a request for PAS.
- Medicaid application is not needed prior to PAS being conducted.



Another Key Point!

- Discharging an individual to a nursing facility (NF) under Medicare skilled days does not negate the need for a PAS. (DMAS PAS Provider Manual, Chapter IV, page 7).



Keeping Focus on the Person who Needs Services

- When an individual isn't screened prior to discharging to a NF, it affects that individual and their family.
- Many individuals stay in an NF for a longer period of time than what Medicare covers. They will eventually become eligible for Medicaid.



When a hospital PAS isn't completed. . .

- If the individual wants to leave the NF in 3 months and go home with a Medicaid waiver, he can't leave the NF until the CBT completes a PAS.
- The individual has to wait for the CBT to come to the NF to conduct the PAS.
- A completed PAS prior to hospital discharge = a smoother transition home to Medicaid community-based services.



Post Screening

- Please ensure the DMAS-96 is provided to the eligibility worker (EW).
- If the provider is responsible for submitting the DMAS-96 to the EW, please take a few moments to help the provider identify the DMAS-96.



DMAS-96

- Header: “Medicaid-Funded Long-term Care Services Authorization Form”
- Ends with MD signature



DMAS-96 starts with. . .

Family Member, Parent, Legal
Guardian, or Authorized
Representative:

Date:

Indicate Applicable Designation:

Medicaid Funded Long-Term Care Service Authorization Form

FORM ID: [REDACTED]

1. Member Information

Last Name: [REDACTED]

Birth Date: [REDACTED]

Social Security: [REDACTED]

Sex:
Female

2. Medicaid Eligibility Information

Is Individual currently Medicaid eligible?: 1-YES



VIRGINIA DEPARTMENT FOR AGING
AND REHABILITATIVE SERVICES

DMAS-96 ends with. . .

By checking this box and entering your name as the Level 1/ALF screener below, you attest that this authorization is appropriate to adequately meet the individual's needs and assures that all other resources have been explored prior to Medicaid authorization for this member. Any person who knowingly submits this form containing any misrepresentation or any false, incomplete or misleading information may be guilty of a criminal act punishable under law and may be subject to civil penalties: **YES**

Level I/ALF Screener:
JENNIFER JONES

Level I/ALF Screener Title:
SW

Date:
03/11/2015

By checking this box and entering your name as the Level 1/Physician below, you attest that this authorization is appropriate to adequately meet the individual's needs and assures that all other resources have been explored prior to Medicaid authorization for this member. Any person who knowingly submits this form containing any misrepresentation or any false, incomplete or misleading information may be guilty of a criminal act punishable under law and may be subject to civil penalties: **YES**

Level I Physician:
HENRY FORD

Date:
03/11/2015



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AND REHABILITATIVE SERVICES

It's a Joint Effort!

- Communication is important! Lots of individuals will need long-term care services and supports (LTSS). The number of requests will keep growing!
- Please reach out to the LDSS in your jurisdiction to discuss ways hospitals and CBTs can work together to ensure individuals receive the PAS and other LTSS they need.



Technical Assistance

- DARS and VDH developed a technical assistance document to help CBT.
- Plan to create a similar document for hospital discharge planners.
- If you are interested in reviewing it and providing feedback, please let us know.



Regional Consultants

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Agencies	Agencies	Agencies	Agencies	Agencies
Amelia (007) 14 Buckingham (029) 14 Caroline (033) 16 Charles City (036) 15 Chesterfield (041)/Colonial Heights (570) 15 Cumberland (049) 14 Essex (057) 18 Fluvanna (065) 10 Goochland (075) 15 Hanover (085) 15 Henrico (087) 15 Hopewell (670) 19 King and Queen (097) 18 King William (101) 18 Lancaster (103) 17 Lunenburg (111) 14 Middlesex (119) 18 New Kent (127) 15 Northumberland (133) 17 Nottoway (135) 14 Petersburg (730) 19 Powhatan (145) 15 Prince Edward (147) 14 Richmond City (760) 15 Richmond County (159) 17 Westmoreland (193) 17	Alexandria (510) 8 Arlington (013) 8 Clarke (043) 7 Culpeper (047) 9 Fairfax (059)/Fairfax City (600)/Falls Church (610) 8 Fauquier (061) 9 Frederick (069) 7 Fredericksburg (630) 16 Greene (079) 10 Harrisonburg (660) 6/ Rockingham (165) King George (099) 16 Loudoun (107) 8 Louisa (109) 10 Madison (113) 9 Manassas City (683) 8 Manassas Park (685) 8 Orange (137) 9 Page (139) 7 Prince William (153) 8 Rappahannock (157) 9 Shenandoah (171) 7 Spotsylvania (177) 16 Stafford (179) 16 Warren (187) 7 Winchester (840) 7	Albemarle (003) 10 Alleghany005)/Covington (580) 5/ Clifton Forge (560) 5 Amherst (009) 11 Appomattox (011) 11 Bath (017) 6 Bedford (019) 11 Botetourt (023) 5 Campbell (031) 11 Charlotte (037) 14 Charlottesville (540) 10 Craig (045) 5 Danville (590) 12 Franklin County (067) 12 Halifax (083)/South Boston (780) 13 Henry (089)/Martinsville (690) 12 Highland (091) 6 Lynchburg (680) 11 Mecklenburg (117) 13 Nelson (125) 10 Pittsylvania (143) 12 Roanoke (770) 5 Roanoke Co. (161)/Salem (775) 5 Rockbridge (163)/Buena Vista (530)/ Lexington (678) 6 Shenandoah Valley (Staunton (790)/ Augusta (015)/Waynesboro (820) 6)	Bland (021) 3 Bristol (520) 3 Buchanan (027) 2 Carroll (035) 3 Dickenson (051) 2 Floyd (063) 4 Galax (640) 3 Giles (071) 4 Grayson (077) 3 Lee (105) 1 Montgomery (121) 4 Norton (720) 1 Patrick (141) 12 Pulaski (155) 4 Radford (750) 4 Russell (167) 2 Scott (169) 1 Smyth (173) 3 Tazewell (185) 2 Washington (191) 3 Wise (195) 1 Wythe (197) 3	Accomack (001) 22 Brunswick (025) 13 Chesapeake (550) 23 Dinwiddie (053) 19 Franklin City (620) 23 Gloucester (073) 18 Greenville (081)/ Emporia (595) 19 Hampton (650) 23 Isle of Wight (093)23 James City (095) 23 Mathews (115) 18 Newport News (700) 23 Norfolk (710) 23 Northampton (131) 22 Portsmouth (740) 23 Prince George (149) 19 Southampton (175) 23 Suffolk (800) 23 Surry (181) 19 Sussex (183) 19 Virginia Beach (810) 23 Williamsburg (830) 23 York (199)/Poquoson (735) 23



Thank You!

- For other questions related to:
 - DARS, PAS and LDSS

Please contact paige.mccleary@dars.virginia.gov



VIRGINIA DEPARTMENT FOR AGING
AND REHABILITATIVE SERVICES

ePAS a Tool for Pre-Admission Screenings (PAS)

VIRGINIA UNIFORM ASSESSMENT INSTRUMENT					
Dates	Screening:*	Assessment:*	Reassessment:*	Initial Request:*	
I. IDENTIFICATION/ BACKGROUND					
Name & Vital Information <small>Entry is required</small>					
Member's Name: Last:*	First:*	MI:*	SSN:*		
Address: Street:*	City:*	State:*	Zip Code:*		
Phone Number:*	City/County Code:*				
Directions to House:					
Pets?*					
Demographics					
Member's Date of Birth:*	Age:*	Sex:*	Hearing (impaired):*		
Marital Status:*	Race:*	(If Race - Unknown, enter Ethnic Origin):*			
Communication of Needs:*	Other Language, Specify:*				
Education:*	(If Education - Unknown, please Specify):*				
Primary Caregiver					
Caregiver's Name: Last:*	First:*	MI:*	Relationship:*		
Address: Street:*	City:*	State:*	Zip Code:*		
Phone Number (Home):*	(Work):*				
Emergency Contact					
Emergency Contact's Name: Last:*	First:*	MI:*	Relationship:*		
Address: Street:*	City:*	State:*	Zip Code:*		

1.2 Medicaid Web Portal – Provider Login Page

After selecting the 'Provider' role in the Web Portal Home Page, the provider and the supporting user community are directed to the Provider Login Page.

The Provider Login Page is reflected below:

The screenshot shows the Virginia Medicaid web portal interface. At the top, there is a navigation bar with links for Home, Provider Registration, Account Activation, My Request, Assessment Plan, My Evaluation Progress, and PAS. Below this is a large banner image depicting healthcare workers. The main content area is divided into two primary sections: 'New User Registration' and 'Provider Login'. The 'New User Registration' section includes detailed instructions for providers, such as 'If you are a new provider... you must complete a new registration...'. The 'Provider Login' section contains input fields for 'Username' and 'Password', along with a 'Forgot Your Password?' link. The page footer includes the text '© 2013 Commonwealth of Virginia'.

August 7, 2015

Bill Edmunds, CHS Director of Process & Evaluation

Excel Template- Best UAI Tool?

VIRGINIA UNIFORM ASSESSMENT INSTRUMENT

Dates	Screening:*	Assessment:*	Reassessment:*	Initial Request:*
I. IDENTIFICATION/ BACKGROUND				
Name & Vital Information				
Entry is required				
Member's Name: Last:*	First:*	MI:	SSN:*	
Address: Streets:*	City:*	State:*	Zip Code:*	
Phone Number:*	City/County Code:*			
Directions to House:				
Pets?				
Demographics				
Member's Date of Birth:*	Age:*	Sex:*	Hearing Impaired:*	
Marital Status:*	Race:*	(If Race - Unknown, enter Ethnic Origin):		
Communication of Needs:*	Other Language, Specify:			
Education:*	(If Education - Unknown, please Specify):			
Primary Caregiver				
Caregiver's Name: Last:*	First:*	MI:	Relationship:*	
Address: Streets:*	City:*	State:*	Zip Code:*	
Phone Number* (Home):	(Work):			
Emergency Contact				
Emergency Contact's Name: Last:*	First:*	MI:	Relationship:*	
Address: Streets:*	City:*	State:*	Zip Code:*	

Question:

- Physician Log into ePAS?
- Physician sign paper copy?
- Is all info available at one time?
- Need to Print Before Submit?

Excel

- No
- Yes
- No
- Yes

Direct Access

- Yes
- No
- Yes
- No

Which Method works best for you?

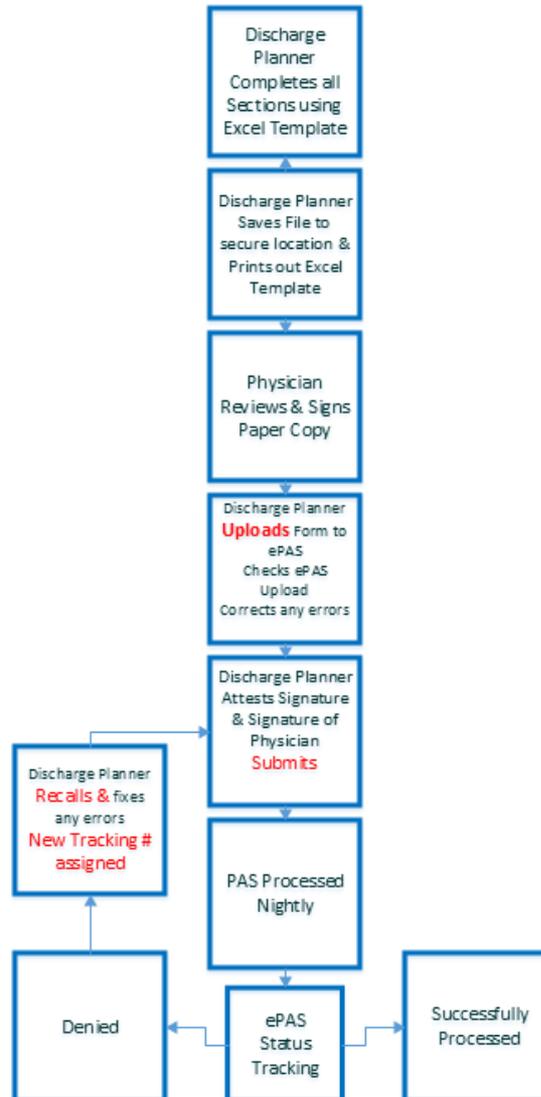
ePAS – Success Factors

- Excel or Direct Access?
- Use the Product
- Find a “Power User”
- Ensure that your Physician is On-board
- Adjust to:
 - Character Limitations
 - Exact Dates
- Denials:
 - Nightly Action
 - Assigns New #
 - Who will monitor?
 - Who will resubmit?

The screenshot displays the Virginia Medicaid ePAS system interface. At the top, there is a navigation menu with links for Home, Claims, Member, Service Authorization, Payment History, LHR Incentive Program, Provider Maintenance, Provider Enrollment, and RA Messages. The main content area is titled "UAI-A" and "Virginia Uniform Assessment Instrument Part A". It includes a section for "Dates" with fields for Screen Date, Assessment Date, Re-Assessment Date, and Initial Request Date, each with a calendar icon. Below this is the "Identification/Background" section, which contains a "Member Name & Vital Information" sub-section with fields for Last Name, First Name, MI, SSN, Address, City, State, Zip, Phone, and City/County Code. There is also a "Directions to House" text area and a "Pets?" checkbox. The bottom of the form shows a "250 Characters Remaining" indicator.

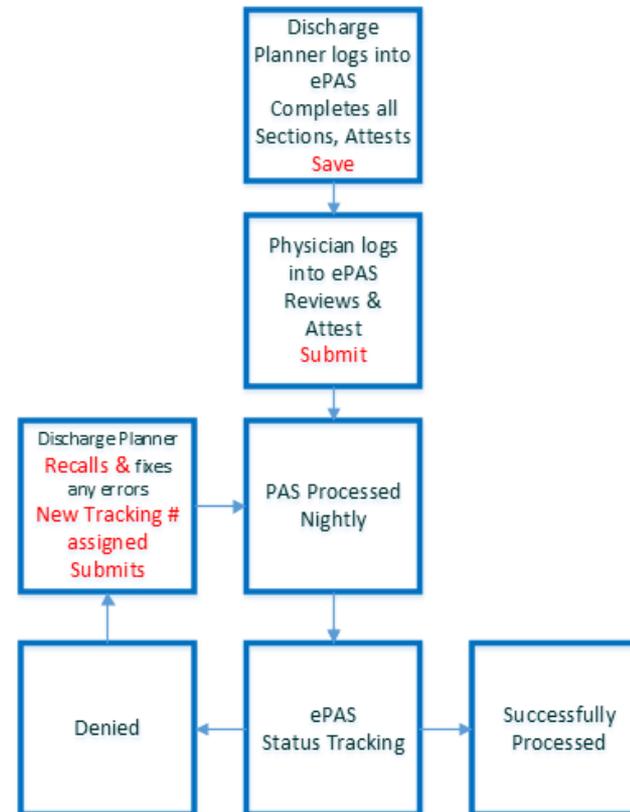
ePAS - Excel Template

Hospital ePAS Process Flow – Excel Form



ePAS - Direct Access

Hospital ePAS Process Flow – Direct Access



Questions?



Sentara RMH Medical Center



Brenda J. Parker, CM Nephrology Case Manager



About Sentara RMH Medical Center

- Sentara RMH Medical Center began as Rockingham Memorial Hospital in 1912.
- The hospital serves a seven-county area with a population of close to 218,000 residents.
- Sentara RMH is a 238-bed community hospital that partnered with the Sentara Healthcare system in May of 2010.
- There are 6 discharge planners completing ePAS.
- There are 2 discharge planners on the BHU still to be trained.
- Started doing ePAS in May 2015.

Approach to ePAS

- All Sentara RMH discharge planners have been doing UAIs for several years. We have been doing the WV PAS electronically for many years. This makes completing the VA ePAS less difficult.
- When the need for a UAI is determined the discharge planners know what questions to ask which saves time.
- Discharge planners complete ePAS at their desk. We have asked for dual monitors for our computers next year.
- Physician signature for the DMAS-96 is obtained 2 ways:
 1. Verbal review with the physician and then acknowledgement of their signature.
 2. Hard-copy signature on the DMAS-96.
- Once the ePAS is successfully processed it is printed out and scanned into eDischarge.
- From eDischarge the UAI is faxed to the appropriate provider.

Pressing Questions/Concerns:

- The only barrier we have experienced is when a request for a UAI is made and the patient does not meet criteria. DSS and/or the nursing facilities are not pleased with us.

General ePAS Questions/Concerns

- It would be nice not to have to re-enter the demographic information on each of the various screens.
- It would be helpful if the UAI look-up screen was longer range than 30 days.
- Is it really necessary to know when the patient's last hearing/eye exam was? Majority of patients can't remember. If they have a hearing aid or wear glasses this becomes a required field.
- How do you update the electronic UAI after 6 months?
- Which 10 medications are chosen when a patient has >10?
- PCP and caregiver fields are mandatory on ePAS. What if the patient does not have one or the other?

Demo

Questions?



Southside Regional Medical Center



Brittany Hall RN, CM Registered Nurse Case Manager

Our Facility

- Located in Petersburg, Virginia
- We are licensed for 300 beds but our average census is around 200
- We have 6 RNs and 4 MSW's who participate in discharge planning and complete UAIs in our facility

ePAS Process Work Flow

- Most of us use a paper copy of the UAI and go into patients rooms and fill them out by hand and then enter them into ePAS.
- A few of the social workers recently logged into ePAS and then the asked questions in the room with the patient/ family member and said it was actually easier
- Its typically by the Case Managers preference in our facility

Questions/Concerns About the Current Process:

- UAI's are time consuming and we do not have the staff to complete them on request
- Vendors (SNFs, Home Health, and Assisted Living) are asking for UAIs and patients are not meeting the criteria.
- UAI's are being requested prior to discharge, sometimes on the day of discharge and there is not enough time to complete one
- People in the community that need services are being asked to come to our hospital and ask for a case manager to complete a UAI for them to use and they are not even a patient of ours
- We, as hospital case managers, are lacking the knowledge about how and when to complete UAIs, therefore end up with denials

Demo

Questions?



MMIS Virginia Web Portal ePAS (Pre-Admission Screening)

August 7, 2015

ePAS Training - Agenda

- Portal Access
- Reference Material
- Helpdesk support
- Pre-Admission Status Tracking Screens
- Denial Process
- ePAS Error Message Reference Guide

ePAS Training – Portal Access

- URL <https://www.virginiamedicaid.dmas.virginia.gov/wps/myportal>



Nov 19, 2014

[Home](#) | [Contact Us](#)



Welcome

Welcome to the Virginia Web Portal. For log in or first time user registration, please go to the 'Login' section to the far right.

Physician Primary Care Increase

Information regarding increased payments for physician primary care services effective January 1, 2013 through December 31, 2014 are below:

- Board Certified Allergists and Immunologists
- Medicaid Memo - 06/07/2013
- Medicaid Memo - 03/22/2013
- Medicaid Memo - 12/28/2012
- Physician Primary Care Attestation Form
- FAQs
- Provider Attestation Report
- Medicare Enhanced Rates 2013

Web Announcements

Facility Crossover Claims and Edit 142
Some Medicare crossover claims submitted electronically by facility providers may have incorrectly denied for edit 0142 (Medicare allowance missing or invalid). DMAS is working to correct this issue. These providers will have to return to submitting their crossovers via direct data entry (DDE) or paper claims until further notice. DMAS apologizes for this inconvenience and we anticipate correcting this issue as soon as possible.

Electronically submitted UB-04 claims adjudication updates:
For providers submitting fee for service (FFS) claims in which Medicare is the primary payer, the November 14th and 21st remittances include some FFS claims incorrectly identified as crossover and therefore denied. These claims will be reprocessed with the appropriate claim type, adjudicated as such and included on the November 21, 2014 remit. We apologize for any inconvenience this has caused.

Claims Adjudication Updates
Due to the effort to correct the multiple 11/14 remittances, all claims submitted Monday, November 10 and Tuesday, November 11 were withheld from adjudication. These claims were reprocessed November 12 and are available for viewing. Some claims that should have been included in the November 14 remittance were adjudicated November 10 and will be included

Quick Links

- Provider Services
- Provider Resources
- EDI Support
- Documentation
- EHR Incentive Program
- FAQ
- Search for Providers
- Provider Forms Search
- Web Registration Reference Material
- DMAS Web Site
- ICD-10
- DME and Pharmacy Audits

Login

Log in to the system or register by selecting your role below:

- Providers
- Internal Users

ePAS Training – Supporting Documentation

- Provider Resources Tab: Pre-Admission Screening

The screenshot displays the Virginia Medicaid ePAS website interface. At the top left is the 'Virginia Medicaid' logo. A navigation bar contains the following tabs: Home, Provider Services, Provider Resources (selected), EDI Support, Documentation, and EHR Ince. The 'Provider Resources' dropdown menu is open, listing the following options: Provider Manuals, Provider Links, Provider Training, Web Registration, Automated Response System (ARS), Claims Direct Data Entry (DDE), Provider Maintenance, Search For Providers, Level of Care Review Instrument(LOCERI), Provider Enrollment Resources, Provider Screening and Fee Rpt, ICD-10, and Pre-Admission Screening. The 'Pre-Admission Screening' option is highlighted with a red box. Below the navigation bar, there are two main content areas. The left area features a 'Welcome' message and a 'Physician Primary Care Increase' announcement with a link to 'Board Certified Allergists and Immunologists'. The right area contains two news items: 'Facility Crossover Claims and Edit 142' and 'Electronically submitted UB-04 claims adjudication upd:'. The background of the page includes a hand with a bandage on the index finger and a group of four healthcare professionals in white coats.

ePAS Training – Supporting Documentation

- Provider Resources Tab: Pre-Admission Screening



Quick Links	Pre-Admission Screening
<ul style="list-style-type: none">▶ Provider Services▶ Provider Resources▶ EDI Support▶ Documentation▶ EHR Incentive Program▶ FAQ▶ Search for Providers▶ Provider Forms Search▶ Web Registration Reference Material▶ DMAS Web Site▶ ICD-10▶ DME and Pharmacy Audits	<p>The following is the list of available options within this category. Please make a selection for the link/documentation desired.</p> <ul style="list-style-type: none">• Pre-Admission Screening FAQ• Pre-Admission Screening User Guide• Pre-Admission Screening Tutorial

ePAS Training – Supporting Documentation

- Virginia Medicaid Web Support Help Desk
 - Monday – Friday 8:00AM – 5:00PM
 - 866-352-0496
- Also available on the home page ‘Contact Us’

Apr 30, 2015
Home | [Contact Us](#)

Home Provider Services Provider Resources EDI Support Documentation EHR Incentive Program FAQ Provider Enrollment

Welcome
Welcome to the Virginia Web Portal.
For log in or first time user registration, please go to the 'Login' section to the far right.

Web Announcements
ICD-10 Testing with Providers
On May 1, 2015 Virginia Medicaid will begin a second phase of ICD-10 end-to-end testing with providers, clearinghouses, and other trading partners. The tests will simulate production processing as closely as possible, starting with the receipt of provider test claims, processing in the Virginia Medicaid system and the issuance of test HIPAA 835 electronic remittances to providers. All Virginia Medicaid providers are strongly encouraged to test with DMAS to ensure that your claims will be

Quick Links
Provider Services
Provider Resources
EDI Support
Documentation
EHR Incentive Program
FAQ

Login
Log in to the system or register by selecting your role below:
Providers
Internal Users

ePAS Training – Supporting Documentation

- Contact Us link

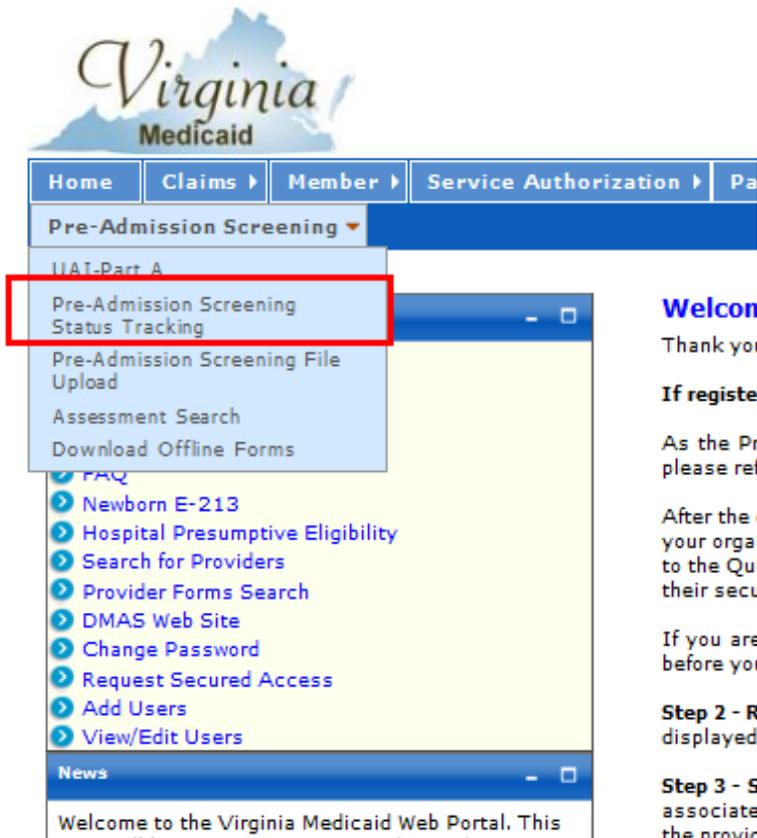
Contact Us Information	
Topic / Issue	Contact Name / Number
Virginia Medicaid Contact Information	
Provider Helpline (8am-5pm, Mon-Fri) <ul style="list-style-type: none"> • Assistance with claims status and adjudication inquiries • Assistance with Member eligibility, covered services and limitations • Assistance with regulations, Memos and other communications • Assistance with claims and billing instructions 	Virginia Medicaid Provider Helpline Phone (In-State) - 800-552-8627 Phone (Out of State) 804-786-6273
Member Helpline (8am-5pm, Mon-Fri) <ul style="list-style-type: none"> • Assistance with covered services and limitations • Assistance with claim/payment information 	Virginia Medicaid Member Helpline Phone - 804-786-6145
Provider Enrollment Services (8am-5pm, Mon-Fri) <ul style="list-style-type: none"> • Online application submittal • Paper application submittals • Application status tracking • All other Provider Enrollment inquiries 	Virginia Medicaid Provider Enrollment Helpdesk Phone - 804-270-5105 or 888-829-5373 Fax - 804-270-7027 or 888-335-8476
Web Systems (8am-5pm, Mon-Fri) <ul style="list-style-type: none"> • Web Registration (new and registered providers) • Web User Management (user maintenance - passwords, roles, etc) • Provider Profile Maintenance • Claims Direct Data Entry (DDE) • Web Portal technical issues • All other Web Portal inquiries 	Virginia Medicaid Web Support Helpdesk Phone - 866-352-0496
Medicall - Automated Voice Response System (24 hours a day x 7 days a week) Automated Provider access to the following Information:	Automated Services Phone (Richmond Area) - 800-772-9996 Phone (USA) - 800-884-9730

ePAS Training – Supporting Documentation

- If Help Desk is unable to resolve your issue, please contact me directly with a detailed explanation of the issue (i.e. Form, field, error message, navigation, etc.) at:
 - Mickey Ortiz Michaela.ortiz@xerox.com
- For users that are not in a locality (i.e. hospitals, medical facilities) please include your email address, your NPI, the ATN/Form ID you're having the issue with, along with at least one of the following: the member's Medicaid ID, or SSN or the user id currently associated with the ATN.
- I'll follow up on each issue and also work with the help desk to ensure they have the resolution for future inquiries.

ePAS Training – Pre-Admission Screening Status Tracking

- Drop Down Option: Pre-Admission Screening Status Tracking



Status Tracking is important to ensure the completion of the assessment.

After UAI submission, please follow up the next day to ensure that the assessment has been successfully processed.

Denied assessments could impact a member's care if not resubmitted timely.

ePAS Training – PAS Status Tracking Summary

- Assessment Reference # works as hyperlink to tracking detail



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Pre-Admission Screening

Pre-Admission Screening Status Summary

Virginia Pre-Admission Screening Status Tracking - Summary

Assessment Date	Initial Request Date	Assessment Ref #	Member's Medicaid ID	Member's SSN	User ID	Assessment Type	Status	Action
03/23/2015	03/01/2015	2015104001053				UAI – Part B (long)	Incomplete	Recall Delete
03/23/2015	03/01/2015	2015104001052				UAI – Part B (long)	Incomplete	Recall Delete
03/23/2015	03/01/2015	2015103001051				UAI – Part B (long)	Incomplete	Recall Delete
03/21/2015	01/20/2015	201511001240				UAI – Part B (long)	Successfully Processed	Recall Print
03/19/2015	03/02/2015	2015091000988				UAI – Part A (short)	Incomplete	Recall Delete
03/17/2015	03/01/2015	2015091000989				UAI – Part A (short)	Incomplete	Recall Delete
03/15/2015	02/21/2015	2015110001221				UAI – Part B (long)	Successfully Processed	Recall Print
03/14/2015	03/01/2015	2015114001345				UAI – Part B (long)	Submitted for Processing	Recall Print
03/14/2015	03/01/2015	2015113001319				UAI – Part B (long)	Denied	Recall Print
03/14/2015	12/20/2014	2015081000941				UAI – Part A (short)	Incomplete	Recall Delete

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ePAS Training – PAS Status Tracking Detail

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Pre-Admission Screening Status Summary

Virginia Pre-Admission Screening Status Tracking - Detail

Assessment Ref #: 2014295000439	Assessment Date: 06/29/2014	Assessment Approval Code: Denied
Assessment Type: UAI - Part B (long)	PAS Medicaid Authorization Code: 01	
NPI(s): [REDACTED]		

Member's Information

Medicaid ID: [REDACTED]	SSN: [REDACTED]
Name: [REDACTED]	

Error Messages:

FRACTURES/DISLOCATIONS CODE IS INVALID.MEDICAID AUTHORIZATION CODE IS INVALID IN CROSS EDIT VALIDATION.

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ePAS Training – Recall, Fix, Resubmit



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Pre-Admission Screening Status Summary

**Virginia Pre-Admission Screening
Status Tracking - Summary**

Assessment Date	Initial Request Date	Assessment Ref #	Member's Medicaid ID	Member's SSN	User ID	Assessment Type	Status	Action
10/10/2014	10/21/2014	2014296000463	[REDACTED]	[REDACTED]	superuser	UAI - Part A (short)	Successfully Processed	Recall Print
10/09/2014	10/21/2014	2014294000425	[REDACTED]	[REDACTED]	kimsmid2	UAI - Part A (short)	Successfully Processed	Recall Print
10/07/2014	10/18/2014	2014295000442	[REDACTED]	[REDACTED]	kimsmid2	UAI - Part B (long)	Denied	Recall Print
10/05/2014	09/04/2014	2015218002200	112233445566	123-65-4789	mortiz2	UAI - Part A (short)	Incomplete	Recall Delete
10/05/2014	09/04/2014	2015218002199	112233445566	123-65-4789	mortiz2	UAI - Part A (short)	Incomplete	Recall Delete
10/02/2014	09/04/2014	2015218002201	112233445566	123-65-4789	mortiz2	UAI - Part A (short)	Incomplete	Recall Delete
10/02/2014	09/04/2014	2014324000714	111111111111	123-45-6789	mortiz2	UAI - Part A (short)	Submitted for Processing	Recall Print
10/02/2014	09/04/2014	2014292000406		369-85-2147	mortiz2	UAI - Part A (short)	Incomplete	Recall Delete
10/02/2014	09/04/2014	2014292000404	112233445566	123-65-4789	mortiz2	UAI - Part A (short)	Denied	Recall Print
10/02/2014	09/04/2014	2014292000402		147-85-2369	mortiz2	UAI - Part A (short)	Incomplete	Recall Delete

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ePAS Training – ePas Denial Cross Reference

ePAS Denial Message	Business Explanation	Possible Resolution
JOINT MOTION DISORDER CODE IS INVALID	UAI-Part B - Physical Status - Joint Motion selection missing	<p>Forms: UAI-Part B</p> <p>Section: Physical Status</p> <p>Question: Joint Motion (drop down)</p> <p>Action Needed: Ensure one of the options in the Joint Motion drop down is selected</p> <ul style="list-style-type: none"> ● Within normal limits or instability corrected (0) ● Limited Motion (1) ● Instability uncorrected or immobile (2)
LEVEL 1 PROVIDER IS INVALID.	DMAS96 Level 1 Provider Information is missing	<p>Forms: DMAS96</p> <p>Section: Pre-Admission Screening Information (to be completed only by Level I, Level II or ALF screeners);</p> <p>Question: Level I/ALF Screening Identification?*</p> <p>Action Needed: Ensure response is Yes and the following two entries (at a minimum) are complete:</p> <ul style="list-style-type: none"> ● Name of Level 1/ALF screener agency: * ● Level 1/ALF screener provider number: *

ePAS Training – ePas Denial Cross Reference





Ready For Real Business

Questions?



Thanks To All of Our Presenters!!



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