

VIRGINIA ADMINISTRATIVE CODE
DMAS LONG-TERM CARE STATE REGULATION SUMMARY (11/13)

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

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

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.

TECH WAIVER

- 12VAC30-120-70 Definitions
- 12VAC30-120-80 General coverage and requirements for technology assisted waiver services
- 12VAC30-120-90 Covered services and provider requirements
- 12VAC30-120-100 Provider reimbursement
- 12VAC30-120-110 Assessment and plan of care requirements
- 12VAC30-120-115 Reevaluation requirements and utilization review
- 12VAC30-120-120 Appeal of denied coverage

MR/ID WAIVER

- 12VAC30-120-211 Definitions
- 12VAC30-120-213 General coverage and requirements for MR waiver services
- 12VAC30-120-215 Individual eligibility requirements
- 12VAC30-120-217 General requirements for home and community-based participating providers
- 12VAC30-120-219 Participation standards for home and community-based waiver services participating providers
- 12VAC30-120-221 Assistive technology
- 12VAC30-120-223 Companion services
- 12VAC30-120-225 Consumer-directed model of service delivery
- 12VAC30-120-227 Crisis stabilization services
- 12VAC30-120-229 Day support services
- 12VAC30-120-231 Environmental modifications
- 12VAC30-120-233 Personal assistance and respite services
- 12VAC30-120-235 Personal Emergency Response System (PERS)
- 12VAC30-120-237 Prevocational services
- 12VAC30-120-241 Residential support services
- 12VAC30-120-245 Skilled nursing services
- 12VAC30-120-247 Supported employment services
- 12VAC30-120-249 Therapeutic consultation

EDCD WAIVER

- 12VAC30-120-900 Definitions
- 12VAC30-120-910 General coverage and requirements for Elderly or Disabled with Consumer Direction waiver services
- 12VAC30-120-920 Individual eligibility requirements
- 12VAC30-120-925 Respite coverage in children's residential facilities
- 12VAC30-120-930 General requirements for home and community-based participating providers
- 12VAC30-120-940 Adult day health care services
- 12VAC30-120-950 Agency-directed personal care services
- 12VAC30-120-960 Agency-directed respite care services
- 12VAC30-120-970 Personal emergency response system (PERS)
- 12VAC30-120-980 Consumer-directed services: personal care and respite services

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

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

Updated 11/12 ees