

Department of Medical Assistance Services 600 East Broad Street, Suite 1300 Richmond, Virginia 23219

http://www.dmas.virginia.gov

MEDICAID MEMO

TO: Addiction and Recovery Treatment Service Providers, Managed Care

Organizations (MCOs), and Magellan of Virginia Participating in the Virginia

Medical Assistance Program

FROM: Karen Kimsey, Director MEMO: Special

Department of Medical Assistance Services (DMAS)

DATE: TBD

SUBJECT: Changes to the Service Delivery Hour Requirements for Addiction and

Recovery Treatment Services (ARTS) Intensive Outpatient Services (IOPs):

Effective March 5, 2020

The purpose of this memorandum is to notify providers of changes made to the ARTS regulations (12VAC30-130-5090) effective March 5, 2020. Specifically, DMAS changed the intensive outpatient services requirements (American Society of Addiction Medicine Level 2.1) to clarify that providers must offer a minimum of three service hours per service day for adults to achieve an *average* of nine to 19 hours of services per week for adults and a minimum of two service hours per service day for children and adolescents to achieve an *average* of six to 19 hours of services per week. The changes were made to align with the Mental Health Parity and Addiction Equity Act (MHPAEA), which requires that any limitations applied to mental health/substance use disorder benefits be no more restrictive than the limitations applied to medical/surgical benefits.

These changes will be reflected in the next ARTS Provider Manual update.

PROVIDER CONTACT INFORMATION & RESOURCES		
Virginia Medicaid Web Portal Automated Response System (ARS) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	www.virginiamedicaid.dmas.virginia.gov	
Medicall (Audio Response System) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	1-800-884-9730 or 1-800-772-9996	

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KEPRO Service authorization information for fee-for-service members.	https://dmas.kepro.com/
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Managed Care Programs

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 feefor-service individuals.

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Medallion 4.0	http://www.dmas.virginia.gov/#/med4
CCC Plus	http://www.dmas.virginia.gov/#/cccplus
PACE	http://www.dmas.virginia.gov/#/longtermprograms
Magellan Behavioral Health	www.MagellanHealth.com/Provider
Behavioral Health Services	For credentialing and behavioral health service information,
Administrator, check eligibility, claim	visit:
status, service limits, and service	www.magellanofvirginia.com, email:
authorizations for fee-for-service	VAProviderQuestions@MagellanHealth.com,or
members.	Call: 1-800-424-4046
Provider HELPLINE	
Monday–Friday 8:00 a.m5:00 p.m.	1-804-786-6273
For provider use only, have Medicaid	1-800-552-8627
Provider ID Number available.	
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 Virginia	www.MCCofVA.com
	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 www.myuhc.com/communityplan
	1-844-752-9434, TTY 711
Virginia Premier	1-800-727-7536 (TTY: 711),