



Last Updated: 07/29/2022

## Personal, Respite and Companion Care Rate Increases, Effective July 1, 2019

The purpose of this bulletin is to inform providers that rates for personal care services will increase, effective July 1, 2019. In accordance with Item 303.NNN of the 2019 Virginia Acts of Assembly, Consumer Directed and Agency Directed Personal Care, Respite Care, and Companion Care rates will increase by 2.0%. The rate changes are shown in the tables below and will be posted on the DMAS website at: <http://www.dmas.virginia.gov/#/longtermwaivers>.

<b>Agency Directed Personal Care Services</b>			
<b>Procedure Code</b>	<b>Code Description</b>	<b>Location</b>	<b>Rate Effective 7/1/2019</b>
T1019	Personal Care	NOVA	\$16.13
T1019	Personal Care	ROS	\$13.70
T1005	Respite Care	NOVA	\$16.13
T1005	Respite Care	ROS	\$13.70
S5135	Companion Care	NOVA	\$16.13
S5135	Companion Care	ROS	\$13.70

<b>Consumer Directed Personal Care Services</b>			
<b>Procedure Code</b>	<b>Code Description</b>	<b>Location</b>	<b>Rate Effective 7/1/2019</b>
S5126	Personal Care	NOVA	\$12.17
S5126	Personal Care	ROS	\$9.40
S5150	Respite Care	NOVA	\$12.17
S5150	Respite Care	ROS	\$9.40
S5136	Companion Care	NOVA	\$12.17
S5136	Companion Care	ROS	\$9.40



### **Medicaid Expansion**

New adult coverage begins January 1, 2019. Providers will use the same web portal and enrollment verification processes in place today to verify Medicaid expansion coverage. In ARS, individuals eligible in the Medicaid expansion covered group will be shown as "MEDICAID EXP." If the individual



# MEDICAID BULLETIN

is enrolled in managed care, the “MEDICAID EXP” segment will be shown as well as the managed care segment, “MED4” (Medallion 4.0), or “CCCP” (CCC Plus). Additional Medicaid expansion resources for providers can be found on the DMAS Medicaid Expansion webpage at: <http://www.dmas.virginia.gov/#/medex>.

<b>PROVIDER CONTACT INFORMATION &amp; RESOURCES</b>	
<b>Virginia Medicaid Web Portal Automated Response System (ARS)</b> Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	<a href="http://www.virginiamedicaid.dmas.virginia.gov">www.virginiamedicaid.dmas.virginia.gov</a>
<b>Medicall (Audio Response System)</b> Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	1-800-884-9730 or 1-800-772-9996
<b>KEPRO</b> Service authorization information for fee-for-service members.	<a href="https://dmas.kepro.com/">https://dmas.kepro.com/</a>
<b>Managed Care Programs</b> 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 fee-for-service individuals.	
<b>Medallion 4.0</b>	<a href="http://www.dmas.virginia.gov/#/med4">http://www.dmas.virginia.gov/#/med4</a>
<b>CCC Plus</b>	<a href="http://www.dmas.virginia.gov/#/cccplus">http://www.dmas.virginia.gov/#/cccplus</a>
<b>PACE</b>	<a href="http://www.dmas.virginia.gov/#/longtermprograms">http://www.dmas.virginia.gov/#/longtermprograms</a>
<b>Magellan Behavioral Health</b> Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.	<a href="http://www.MagellanHealth.com/Provider">www.MagellanHealth.com/Provider</a> For credentialing and behavioral health service information, visit: <a href="http://www.magellanofvirginia.com">www.magellanofvirginia.com</a> , email: <a href="mailto:VAProviderQuestions@MagellanHealth.com">VAProviderQuestions@MagellanHealth.com</a> , or call: 1-800-424-4046
<b>Provider HELPLINE</b> Monday-Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available.	1-804-786-6273 1-800-552-8627