



Last Updated: 11/09/2023

Mobile Crisis Response (H2011) process changes effective December 15, 2023 per Department of Behavioral Health and Developmental Disabilities (DBHDS) Administrative Instructional Memo

The purpose of this bulletin is to notify providers that DMAS will be updating the [Comprehensive Crisis and Transition Services Appendix \(Appendix G\) of the Mental Health Services Manual](#) to include a link to the DBHDS November 1, 2023 Administrative Instructional Memo titled "Crisis Services Administrative Instructional Memo: Mobile Crisis Process Changes Effective December 15, 2023", available [here](#).

DMAS is collaborating with DBHDS, regional mobile crisis hubs, and Medicaid Managed Care Organizations (MCOs) to ensure coordinated care and access to crisis services during the implementation of these changes. These changes go into effect December 15, 2023.

The below language, included in table #1, from the *Comprehensive Crisis and Transition Services Appendix (Appendix G) of the Mental Health Services Manual* requires that Mobile Crisis Response providers adhere to DBHDS requirements for Mobile Crisis Response services in order to receive reimbursement, which includes requirements outlined in the November 1, 2023, DBHDS notice to Mobile Crisis Response providers.

The DMAS and corresponding DBHDS requirements include:

Table #1



DMAS Comprehensive Crisis and Transition Services Appendix (Appendix G) of the Mental Health Services Manual

From Required Activities, p. 7:

“The provider must engage with the DBHDS crisis data platform as required by DBHDS.”

From Service Authorization, p. 12:

“The registration form must be submitted with the required DBHDS crisis data platform reference number.”

From Provider Qualifications, p. 10:

“Mobile Crisis Response providers must have an active, DBHDS approved Memorandum of Understanding with the regional crisis hubs via DBHDS. This requirement does not apply to CSBs that act as the regional hub or CSBs providing only emergency services pursuant to section §37.2-800 et. seq. and section §16.1-335 et seq. of the Code of Virginia.”

From Provider Qualifications, p. 10:

“Mobile Crisis Response providers must be licensed by DBHDS as a provider of Outpatient Crisis Stabilization services and be enrolled as a provider with DMAS.”

“Mobile Crisis Response providers must follow all general Medicaid provider requirements specified in Chapter II of this manual and complete DBHDS training for this service as required by DBHDS.”

Upcoming Webinar

DBHDS, in coordination with DMAS, will be hosting a webinar related to this update on November 16, 2023, from 11am – 1pm.

1. [Webinar Link](#)
2. Webinar Number: 2425 440 1445
3. Webinar Password: eMducvWE773 (36382893 from phones and video systems)
4. Join by Phone: 1-866-692-4530
5. Access Code: 242 544 01445

Additional Questions?

Questions related to the DBHDS Administrative Instructional Memo may be sent to DBHDS



at crisis_services@dbhds.virginia.gov. Questions related to DMAS requirements may be sent to the DMAS Behavioral Health Division at enhancedbh@dmas.virginia.gov.

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. <https://vamedicaid.dmas.virginia.gov/>

Medicaid (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

Acentra Health

Service authorization information for fee-for-service members. <https://dmas.kepro.com/>

Provider Appeals

DMAS launched an appeals portal in 2021. You can use this portal to file appeals and track the status of your appeals. Visit the website listed for appeal resources and to register for the portal. <https://www.dmas.virginia.gov/appeals/>

Managed Care Programs

Cardinal Care Managed Care 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.

Cardinal Care Managed Care <https://www.dmas.virginia.gov/for-providers/managed-care/cardinal-care-managed-care/>

PACE

<http://www.dmas.virginia.gov/#/longtermprograms>

Magellan Behavioral Health

Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members. www.MagellanHealth.com/Provider
www.magellanofvirginia.com, email: VAProviderQuestions@MagellanHealth.com, or Call: 1-800-424-4046

Provider Enrollment

In-State: 804-270-5105
Out of State Toll Free: 888-829-5373
Email: VAMedicaidProviderEnrollment@gainwelltechnologies.com

Provider HELPLINE

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

Aetna Better Health of Virginia

<https://www.aetnabetterhealth.com/virginia/providers/index.html>
1-800-279-1878

Anthem HealthKeepers Plus

<http://www.anthem.com/>
1-800-901-0020

Molina Complete Care

1-800-424-4524
<https://www.molinahealthcare.com/providers/va/medicaid/home.aspx>

Sentara Family Care

1-800-643-2273

Optima Health

Optima Health 1-844-512-3172



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

<https://dmas.virginia.gov>

MEDICAID BULLETIN

United Healthcare

www.uhcprovider.com/
1-844-284-0149

Dental Provider
DentaQuest

1-888-912-3456