



Last Updated: 07/28/2022

DMAS Recognition of Certified Substance Abuse Counselor Supervisees

The purpose of this memorandum is to notify providers that the Department of Medical Assistance Services (DMAS) recognizes Certified Substance Abuse Counselor (CSAC) Supervisees as approved providers within the scope of their practice within the Addiction and Recovery Treatment Services (ARTS) benefit, effective August 1, 2019.

CSAC Supervisees shall be registered by the Virginia Board of Counseling as a CSAC Supervisee and practice within their scope of practice as a CSAC, defined in 18 VAC 115-30-10 et seq., to meet provider requirements for DMAS. DMAS recognizes CSAC Supervisees in the following levels of care: American Society of Addiction Medicine (ASAM) Level 2.1 (Intensive Outpatient Programs); ASAM Level 2.5 (Partial Hospitalization Programs); ASAM Level 3 (Residential/Inpatient Programs); Preferred Office-Based Opioid Treatment Programs and Opioid Treatment Programs. CSAC Supervisees scope of practice aligns with CSACs and is further clarified in the following guidance document developed by the Board of Counseling:

<https://www.dhp.virginia.gov/counseling/guidelines/115-11.docx>.

Updates to the ARTS Provider Manual and the Opioid Treatment Services Supplemental Manual are forthcoming to reflect the policy change noted in this memo.

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 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>.

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



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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
KEPRO Service authorization information for fee-for- service members.	https://dmas.kepro.com/
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 fee-for-service individuals.	
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 Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.	www.MagellanHealth.com/Provider For credentialing and behavioral health service information, visit: www.magellanofvirginia.com , email: VAProviderQuestions@MagellanHealth.com , or call: 1-800-424-4046
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



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