



Last Updated: 12/02/2022

## **12 Months Postpartum Continuous Coverage; removal of co-payments; Behavioral Health services; technical updates to Emergency Services and Appeals sections**

The purpose of this memorandum is to notify providers of changes to Chapters I (General Information) and III (Member Eligibility) of all DMAS provider manuals, Appendix D of the Physician/Practitioner provider manual (Service Authorization Information), and the Newborn Eligibility Form.

In addition to changes made to update language for clarity, the following changes have been made to these chapters:

- Updates to information and language in accordance with Item 304.QQ of the 2022 Appropriations Act to reflect the implementation of 12 months postpartum continuous coverage.
- Updates to language in accordance with Item 304.FFFF of the 2022 Appropriations Act to reflect the elimination of co-payments for Medicaid and FAMIS enrollees.
- Changes to reflect updates to the following behavioral health services available to Medicaid and FAMIS members, pursuant to Item 304.PP of the 2022 Appropriations Act: assertive community treatment, multisystemic therapy, functional family therapy, mobile crisis response, community stabilization, residential crisis stabilization, mental health intensive outpatient and partial hospitalization. In addition, language was added to clarify that substance use care coordination is a covered service when provided as part of Opioid Treatment Program or Office-Based Addiction Treatment services.
- Updates to Emergency Services information and language to reflect system changes and clarify coverage available under the FAMIS Prenatal Coverage program.
- Updates to the Client Appeals text to add definitions, distinguish between managed care and fee-for-service procedures, and incorporate information about the new Appeals Information Management System.
- Updates to the covered services list in Chapter 1 to include doula services and clinical trials.

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# MEDICAID MEMO

<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="https://vamedicaid.dmas.virginia.gov/">https://vamedicaid.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>Provider Appeals</b> 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.	<a href="https://www.dmas.virginia.gov/appeals/">https://www.dmas.virginia.gov/appeals/</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
Aetna Better Health of Virginia	<a href="http://www.aetnabetterhealth.com/Virginia">www.aetnabetterhealth.com/Virginia</a> 1-855-270-2365 1-866-386-7882 (CCC+)
Anthem HealthKeepers Plus	<a href="http://www.anthem.com/vamedicaid">www.anthem.com/vamedicaid</a> 1-833-207-3120 1-833-235-2027 (CCC+)



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# MEDICAID MEMO

Molina Complete Care	1-800-424-4524 (CCC+) 1-800-424-4518 (M4)
Optima Family Care	1-800-643-2273 1-844-374-9159 (CCC+) <a href="http://www.optimahealth.com/medicaid">www.optimahealth.com/medicaid</a>
United Healthcare	<a href="http://www.Uhcommunityplan.com/VA">www.Uhcommunityplan.com/VA</a> <a href="http://www.myuhc.com/communityplan">www.myuhc.com/communityplan</a> 1-844-284-0149 1-855-873-3493 (CCC+)
Virginia Premier	1-800-727-7536 (TTY: 711), <a href="http://www.virginiapremier.com">www.virginiapremier.com</a>