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Updates to the Procedures for Service Authorization Appendix (Appendix C) of the Residential Treatment Services Manual

The purpose of this bulletin is to notify providers that the Procedures for Service Authorization Appendix (Appendix C) of the Residential Treatment Services Manual has been updated with the following changes:

- The Appendix has been updated to reflect changes in the processing of behavioral health fee-for-service (FFS) service authorizations. Information related to this change was previously announced in the following DMAS Memos: "Notice of Award for RFP 2022-06 Service Authorization and Specialty Services Contract" dated April 10, 2023; "Changes to Claims/Payment Process for Behavioral Health Providers – effective November 1, 2023" dated August 17, 2023; and, Provider Training on How to Register and Submit Successful Service Authorization Requests to Acentra Health (formerly known as Kepro) Effective November 1, 2023", dated September 18, 2023.
- A process for requesting an EPSDT Specialized Service in residential treatment settings has been added.
- Clarifications have been made to timeframes for submitting a continued stay service authorization request for residential treatment services.

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/
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

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	Program of All-inclusive Care (virginia.gov)
Acentra Health Behavioral Health Services	https://vamedicaid.dmas.virginia.gov/sa
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 Community Plan	1-800-881-2166 https://www.sentarahealthplans.com/providers
United Healthcare	www.uhcprovider.com/ 1-844-284-0149
Dental Provider DentaQuest	1-888-912-3456