

Governor's Access Plan for the Seriously Mentally Ill (GAP)

NON-COVERED SERVICES

The following is a list of services that are not covered by the *Virginia Governor's Access Plan for the Seriously Mentally Ill (GAP)*:

Non-covered Medical Services

- Any medical service not otherwise defined as covered in Virginia's State Plan for Medical Assistance Services.
- Abortions
- Ambulance (land, air, and water)
- Ambulatory surgical centers
- Assisted living
- Chemotherapy
- Colonoscopy
- Comprehensive Inpatient/Outpatient Rehabilitation facilities
- Cosmetic procedures
- Dental
- Dialysis
- Durable medical equipment (DME) and supply items (other than those required to treat diabetes)
- Early and Periodic Screening Diagnosis and Treatment (EPSDT) services
- Emergency room treatment
- End-Stage Renal Disease treatment facilities
- Hearing aids
- Home health (including home IV therapy)
- Hospice
- Inpatient treatment
- Long-term care including home and community based waiver services, custodial care facilities, and Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Military treatment facilities
- Nursing Facilities, skilled and intermediate
- Nutritional supplements
- OB/maternity care including birthing centers (gynecology services are covered)
- Orthotics and prosthetics
- Outpatient hospital procedures (other than the following diagnostic procedures)
 - Diagnostic ultrasound procedures
 - EKG/ECG, including stress
 - Radiology procedures (excludes PET and Radiation Treatment procedures)
- PT, OT, and speech therapies
- Private duty nursing
- Radiation therapy
- Routine eye exams (to include contact lenses and eyeglasses)
- Services from non-enrolled Medicaid providers
- Services not deemed medically necessary
- Services that are considered experimental or investigational
- Sterilization (vasectomy or tubal ligation)
- Transportation – emergency and non-emergency

Non-covered Behavioral Health Services

- Any behavioral health or substance abuse treatment services not otherwise defined as covered in Virginia's State Plan for Medical Assistance Services

- Day treatment partial hospitalization
- Electroconvulsive therapy and related services (anesthesia, hospital charges, etc.)
- Emergency room services
- EPSDT services including multi-systemic ABA treatment
- Hospital observation services
- Intensive in-home services
- Intensive community treatment (PACT)
- Inpatient hospital or partial hospital services
- Mental health skill-building services
- Psychiatric residential treatment centers
- Psychological and neurophysiological testing
- Residential treatment services (Level A, B and C)
- Residential substance abuse treatment facilities
- Services specifically excluded under the State Plan for Medical Assistance
- Services not deemed medically necessary
- Services that are considered experimental or investigational
- Services from non-enrolled Medicaid providers
- Smoking and tobacco cessation and counseling
- Substance abuse crisis intervention
- Substance abuse day treatment
- Substance abuse day treatment for pregnant women
- Substance abuse residential treatment for pregnant women
- Substance abuse targeted case management services
- Therapeutic day treatment
- Treatment foster care case management (TFC-CM)
- Transportation – emergency and non-emergency
- VICAP assessments