



# Pathways to becoming an Addiction and Recovery Treatment Services (ARTS) Medicaid Provider

October 2022



# Pathways for Providers

## Importance for Preliminary Work

- Executive and Legislative branches fully support the Medicaid substance use disorder system transformation to address the addiction crisis.
- DMAS is using the American Society of Addiction Medicine (ASAM) nationally recognized evidenced based practices.

# Pathways for Providers

## Preliminary work:

1. Review the ARTS webpage for information on the substance use disorder services transformation:  
<https://www.dmas.virginia.gov/for-providers/addiction-and-recovery-treatment-services/>
2. Make sure you have or pursue the correct state license, whether through Virginia Department of Behavioral Health and Developmental Services (DBHDS) and the Department of Health Professions (DHP)
  - The correct licenses are required as part of the credentialing and contracting process with the Medicaid health plans and DMAS Provider Services Solution (PRSS) vendor.
3. Credentialing and contracting requirements are also based on the type of service (ASAM Level of Care) you intend to provide in the ARTS benefit.

# Pathways for Providers

## Preliminary work:

4. Buy/Acquire and review the ASAM Criteria:  
<http://www.asam.org/quality-practice/guidelines-and-consensus-documents/the-asam-criteria/text>
5. If needed, review ASAM training resources:  
<https://www.asam.org/education/live-online-cme/the-asam-criteria-course>
6. Based on the ASAM Criteria evidence based quality standards, determine what substance use disorder related service (or ASAM Level of Care) you provide or want to provide for Medicaid reimbursement.

# Pathways for Providers

## Preliminary work:

7. Determine whether you are already credentialed and contracted with the Medicaid health plans and Magellan.
8. Determine which Medicaid health plans you need to be credentialed and contract with; DMAS encourages participation in all 6 health plans as they are statewide and serve all localities:  
<http://www.virginiamanagedcare.com/choose/compare-plans>
9. All providers should be credentialed and contract with DMAS Provider Services Solution (PRSS) vendor for ARTS coverage for fee-for-service members.

# ASAM Level 4

## Medically Managed Intensive Inpatient

- Acute Care Hospitals licensed by the Virginia Department of Health (VDH) **are not required** to submit an ASAM 2.1-4.0 Attestation.
- Providers with a DBHDS SA Medically Managed Intensive Inpatient Service license must submit an ASAM 2.1-4.0 Attestation.
- DMAS Provider Services Solution (PRSS) vendor and the Medicaid health plans will request any additional documents required for credentialing and contracting.

# ASAM Levels 3.7, 3.5, 3.3, 3.1

## Residential Treatment Services (RTS)

- Providers must submit a completed “ARTS ASAM Attestation Levels 2.1 to 4.0”, “ARTS Organizational Staff Roster” and a copy of the appropriate DBHDS license(s) for the level of care you are looking to provide and send to the DMAS Provider Services Solution (PRSS) vendor and each of the MCOs during the credentialing and contracting process.
- Residential providers **must** have an approved DBHDS license for the relevant ASAM Level of Care.

# ASAM Levels 3.7, 3.5, 3.3

## Pro-forma Reports for Residential Services

- Medically Monitored Intensive Inpatient Services (Adult), Medically Monitored High Intensity Inpatient Services (Adolescent) (ASAM Level 3.7), Clinically Managed High-Intensity Residential Services (Adult) and Clinically Managed Medium-Intensity Residential Services (Adolescent) (ASAM Level 3.5) and Clinically Managed Population-Specific High Intensity Residential Service (ASAM Level 3.3) facilities have rate changes mandated by the 2021 Appropriation ACT. All rate changes are effective July 1, 2021.
- In accordance with Item 313.CC of the 2021 Appropriation ACT, DMAS will revise the per diem rates paid to Virginia-based ARTS Residential ASAM Level 3.3/3.5/3.7 non-hospital-based facilities using the provider's audited cost per day from the facility's cost report for provider fiscal years ending in state fiscal year 2018.
- New Virginia-based residential treatment facilities must submit pro-forma cost report data, which will be used to set the initial per diem rate based on an audited cost report for a 12-month period within the first two years of operation.



# ASAM Levels 3.7, 3.5, 3.3

## Pro-forma Reports for Residential Services

- In-state and out-of-state provider per diem rates shall be subject to a \$423.32 rate ceiling based on the statewide weighted average cost per day based on data from fiscal year 2018 cost reports.
- Virginia-based Residential Treatment and ARTS Residential/non-hospital based facilities not included on the report that do not submit pro forma cost reports by July 1, 2021, shall be paid at 75 percent of the established rate ceiling.
- Providers who are new or did not have the option to participate in the 2018 rate study included in this report will have rates retroactively applied to July 1, 2021.
  - **Any facilities who file pro-forma cost reports can submit them to [ARTSproforma@mslc.com](mailto:ARTSproforma@mslc.com)**
  - Drugs and professional services must be billed directly to the MCO, DMAS, or the BHSA (Magellan Medicaid Administration), depending on the member's benefit.

# ASAM Levels 2.5 and 2.1

## Partial Hospitalization and Intensive Outpatient

- Requires DBHDS ASAM Level of Care license
- Complete “ARTS Attestation Form for ASAM Level 2.1 to 4.0” and “ARTS Organizational Staff Roster” and submit along with a copy of the appropriate DBHDS license(s) to the DMAS Provider Services Solution (PRSS) vendor and each of the Medicaid health plans to start the credentialing and contracting process if not already in-network.

# ASAM Level 1.0 and 0.5

## Outpatient and SBIRT

- Must be licensed or credentialed by the Department of Health Professions.
- May be licensed as ASAM Level 1.0 with DBHDS.
- Contact the DMAS Provider Services Solution (PRSS) vendor and each of the Medicaid health plans to start the credentialing and contracting process if not already in-network.
- DMAS Provider Services Solution (PRSS) vendor and the Medicaid health plans will request any additional documents required for credentialing and contracting.

# Opioid Treatment Services

## Opioid Treatment Programs (OTP)

- Must be licensed by DBHDS as OTP
- Complete “ARTS OTP Attestation Form” and “ARTS Organizational Staff Roster” and submit to the DMAS Provider Services Solution (PRSS) vendor and the Medicaid health plans to start the credentialing and contracting process if not already in-network.
- DMAS Provider Services Solution (PRSS) vendor and the Medicaid health plans will request any additional documents required for credentialing and contracting.

# Addiction Treatment Services

## Preferred Office-Based Addiction Treatment (OBAT)

- The buprenorphine-waivered practitioner licensed under Virginia law must have the DEA-X waiver and have options pursuing it through the customary **or** the alternative Notice of Intent. Please see the following link for more details: <https://www.samhsa.gov/medication-assisted-treatment/become-buprenorphine-waivered-practitioner>
- Effective July 1, 2021, a nurse practitioner to whom a license is issued by endorsement may practice without a practice agreement with a patient care team physician if such application provides an attestation to the Boards that the applicant has completed the equivalent of **at least two years** of full-time clinical experience, as determined by the Boards, in accordance with the laws of the state in which the nurse practitioner was licensed (defined in §54.1-2957).

# Addiction Treatment Services

## Preferred Office-Based Addiction Treatment (OBAT) cont.

- Licensed behavioral health provider (licensed psychiatrist, licensed clinical psychologist, licensed clinical social worker, licensed professional counselor, licensed psychiatric clinical nurse specialist, licensed psychiatric nurse practitioner, licensed marriage and family therapist, licensed substance abuse treatment practitioner)
- Certified Substance Abuse Counselor (CSAC) or CSAC Supervisor **under supervision of a licensed provider** must be co-located at the same practice site.

# Addiction Treatment Services

## Preferred Office-Based Addiction Treatment (OBAT) cont.

- The licensed behavioral health provider must be employed or contracted by the same organization and providing counseling to patients within the OBAT.
- They must engage in interdisciplinary care planning with the buprenorphine-waivered practitioner including working together to develop and monitor individualized and personalized treatment plans that are focused on the best outcomes for the patient.

# ASAM Level Opioid Treatment Services

## Preferred Office-Based Addiction Treatment (OBAT) cont.

- Complete “ARTS Preferred-OBAT Attestation Form”, “OBAT Credentialing Checklist” and “OBAT Organizational Staff Roster” and submit DMAS Provider Services Solution (PRSS) vendor and the Medicaid health plans to start the credentialing and contracting process if not already in-network.
- DMAS Provider Services Solution (PRSS) vendor and the Medicaid health plans will request any additional documents required for credentialing and contracting.




# Preferred OBAT Credentialing Process

Verify that your team of a buprenorphine-waivered practitioner and behavioral health professional meets the requirements of the “ARTS Preferred OBAT Credentialing Checklist”



Providers will need to be recognized by DMAS and credentialed with DMAS Provider Services Solution (PRSS) vendor and the Medicaid health plans as an Preferred OBAT to bill for the higher reimbursement for opioid counseling and payment for substance use care coordination.



Preferred “OBAT Attestation Packet” is posted on the DMAS ARTS webpage.

# Peer Support Services

The Peer Recovery Support Specialist (PRSS) must:

- Be employed by or have a contractual relationship with a provider enrolled/credentialed with Medicaid or its contractor
- Have the qualifications, education, and experience established by the Department of Behavioral Health and Developmental Services (DBHDS);
- In order for Peer Recovery Support Services to be reimbursed by Medicaid, the Peer Recovery Specialist (PRS) must be actively registered with the Department of Health Professions Board of Counseling;
  - PRSS services are available to assist individuals in achieving sustained recovery from SUD, mental health or comorbidities
- Have supervision provided by qualified supervisor

<https://www.dmas.virginia.gov/media/3797/recovery-resiliency-wellness-plan-guidance-document.pdf>

# Peer Support Services

Submit the following to the MCOs and DMAS Provider Services Solution (PRSS) vendor:

- “ARTS and Mental Health Services Registration Form” (MCO) and “Virginia DMAS Registration Form” (BHSA)”
- “Mental Health and ARTS Peer Recovery Services Organizational Staff Roster”

<https://www.dmas.virginia.gov/for-providers/addiction-and-recovery-treatment-services/authorization-and-registration/>

# Substance Use Case Management

Substance Use Case Management services are for individuals who have a primary diagnosis of substance use disorder. Provider qualifications for a substance use case management shall meet the following criteria:

- The enrolled provider must have the administrative and financial management capacity to meet state and federal requirements;
- The enrolled provider must have the ability to document and maintain individual case records in accordance with state and federal requirements;
- The enrolled provider must be licensed by the Department of Behavioral Health and Developmental Services (DBHDS) as a provider of substance abuse case management services.

# Substance Use Case Management

Substance use case management services shall be provided by a professional or professionals who meet at least one of the following criteria:

- A bachelor's degree in one of the following fields (social work, psychology, psychiatric rehabilitation, sociology, counseling, vocational rehabilitation, human services counseling) and has at least either 1) one year of substance use related direct experience providing services to individuals with a diagnosis of substance use disorder or 2) a minimum of one year of clinical experience working with individuals with co-occurring diagnoses of substance use disorder and mental illness; or
- Licensure by the Commonwealth as a registered nurse with at least either: 1) one year of substance use related direct experience providing services to individuals with a diagnosis of substance use disorder; or 2) a minimum of one year of clinical experience working with individuals with co-occurring diagnoses of substance use disorder and mental illness; or
- Board of Counseling Certified Substance Abuse Counselor (CSAC), CSAC-Assistant, or CSAC-Supervisees under supervision as defined in 18VAC115-30-10 et seq. Community Service Boards that have CSACs, CSAC-Assistants, or CSAC-Supervisees performing Substance Use Case Management Services shall be under supervision according to the supervision requirements of the Board of Counseling which allows for supervision by another person with substantially equivalent education, training, and experience, or such counselor shall be in compliance with the supervision requirements of a licensed facility, as long as they are in compliance with the supervision requirements of the licensed facility (§54.1-3507.1 and §54.1-3507.2).

# Substance Use Case Management

Submit the following to the MCOs and DMAS Provider Services Solution (PRSS) vendor:

- DBHDS license for Substance Use Case Management.
- Contact DMAS Provider Services Solution (PRSS) vendor and each of the Medicaid health plans to start the credentialing and contracting process if not already in-network.
- Complete “ARTS and Mental Health Services Registration Form ” (MCO) and “Virginia DMAS Registration Form” (BHSA):

<https://www.dmas.virginia.gov/for-providers/addiction-and-recovery-treatment-services/authorization-and-registration/>

# Virginia Department of Medical Assistance Services Provider Network Relations Contact Information

- **Provider Services Solution (PRSS)**
  - Phone: 804-270-5105 (**in-state**) or 1-888-829-5373 (**out-of-state**)
  - Fax: 1-888-335-8476
  - Email: [VAMedicaidProviderEnrollment@gainwelltechnologies.com](mailto:VAMedicaidProviderEnrollment@gainwelltechnologies.com)

# Medallion 4.0 Managed Care Plans Provider Network Relations Contact Information

- **Aetna Better Health of Virginia**
  - Phone: 1-855-652-8249
  - [Aetnabetterhealth-VAProviderRelations@aetna.com](mailto:Aetnabetterhealth-VAProviderRelations@aetna.com)
  
- **Anthem HealthKeepers Plus**
  - Deborah Tankersley
  - Phone: 540-830-2481
  - Email: [deborah.tankersley@anthem.com](mailto:deborah.tankersley@anthem.com)
  
- **Molina Complete Care of Virginia**
  - Molina Complete Care Network Department
  - Email: [MCCVA-Provider@molinahealthcare.com](mailto:MCCVA-Provider@molinahealthcare.com)
  - Phone: 1-800-424-4518
  - Fax: (888)-656-5098



**MEDALLION 4.0**

*Growing Strong*



# Medallion 4.0 Managed Care Plans

## Provider Network Relations Contact Information

- **Optima Family Care**
  - Contracting: 877-865-9075 x 4 or [OptimaContract@sentara.com](mailto:OptimaContract@sentara.com)
  - Credentialing: Visit "Join Our Network" on [www.optimahealth.com/providers](http://www.optimahealth.com/providers)
  
- **United Healthcare**
  - Email : [VACCCBH@optum.com](mailto:VACCCBH@optum.com)
  - Web : [www.providerexpress.com](http://www.providerexpress.com) and then select: Quick Links >> Join Our Network
  
- **Virginia Premier**
  - Email: [networkdevelopment@virginiapremier.com](mailto:networkdevelopment@virginiapremier.com)
  - Provider Call Center 877-719-7358
  - Visit [www.vapremier.com](http://www.vapremier.com) and select "Join our Network" under the Provider tab, complete the recruitment request form and forward to the contracting team.

# CCC Plus Managed Care Plans

## Provider Network Relations Contact Information

- **Aetna Better Health of Virginia**
  - Email: [Aetnabetterhealth-VAProviderRelations@aetna.com](mailto:Aetnabetterhealth-VAProviderRelations@aetna.com)
  - Phone: 855-652-8249
  
- **Anthem HealthKeepers Plus**
  - Deborah Tankersley
  - Phone: 540-830-2481
  - Email: [deborah.tankersley@anthem.com](mailto:deborah.tankersley@anthem.com)



# CCC Plus Managed Care Plans

## Provider Network Relations Contact Information

- **Molina Complete Care of Virginia**
  - Molina Complete Care Network Department
  - Email: [MCCVA-Provider@molinahealthcare.com](mailto:MCCVA-Provider@molinahealthcare.com)
  - Phone: 1-800-424-4524
  - Fax: (888)-656-5098
  
- **Optima Family Care**
  - Contracting: 877-865-9075 extension 4 or [OptimaContract@sentara.com](mailto:OptimaContract@sentara.com)
  - Credentialing: Visit "Join Our Network" on [www.optimahealth.com/providers](http://www.optimahealth.com/providers)

# CCC Plus Managed Care Plans

## Provider Network Relations Contact Information

- **United Healthcare**
  - Email: [VACCCBH@optum.com](mailto:VACCCBH@optum.com)
  - Web: [www.providerexpress.com](http://www.providerexpress.com) and then select: Quick Links >> Join Our Network
  
- **Virginia Premier Health Plan**
  - Email: [networkdevelopment@virginiapremier.com](mailto:networkdevelopment@virginiapremier.com)
  - Provider Call Center 877-719-7358
  - Visit [www.vapremier.com](http://www.vapremier.com) and select “Join our Network” under the Provider tab, complete the recruitment request form and forward to the contracting team.

# Additional Documentation to Submit to DMAS Provider Services Solution (PRSS) vendor and the Medicaid Health Plans

- Recent State Site Survey
- Certificate of Insurance (Malpractice and General Liability)
- Current Business License
- State License(s) (DBHDS) and Federal DEA License
- Copy of W-9
- Full Disclosure of Ownership Form (CMS 1513)
- CLIA certification for laboratories
- JCAHO or CARF accreditations (as requested)



## Questions?

**ARTS Helpline: (804) 593-2453**

**Email: [SUD@dmas.virginia.gov](mailto:SUD@dmas.virginia.gov)**

