

Weekly Friday Provider Call Agenda

(10/27/2017)

Program updates/announcements from today's meeting:

Announcement # 1: *Clarification on Residential Levels of Care in ARTS Benefits Memo

**Note this was an email blast sent to providers on 10/23/2017 on behalf of DMAS:*

DMAS posted to its website a [Medicaid Memo](#) to help clarify residential treatment services in the Addiction and Recovery Treatment Services (ARTS) program including ASAM Level 3.1, 3.3, 3.5 and 3.7. This will be updated in the ARTS Provider manual as well. Specific information and links are located in the provider communication.

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Announcement # 2:

***Note this was announced on last week's Friday Provider Call. This is a reminder as we have been receiving several questions about this information. This information has NOT changed.:**

*On behalf of DMAS in regards to the draft manuals for CMHRS, Psychiatric Services and ARTS:
The draft manuals will be edited to allow the LMHP-R, LMHP-S and LMHP-RP to function as they always have been. The first drafts excluded these qualifications and DMAS will be revising to include them. Please refer to the notice that went out to the provider community on 9/21/17 in reference to the draft manuals. This communication contains links to the draft manuals. This can be accessed on the Magellan of VA provider website, For Providers, Communications, titled: Virginia Regulatory Town Hall View General Notice-RTS-CMHRS-Psy manual posted for comment*

Questions/Topics to be Covered in Today's Call (10/27/2017)

**Please note, all questions covered on the call are global questions. Global questions submitted by COB each Wednesday that are not listed below require additional research and will be covered on a future call. If you submitted a question that was specific in nature, you will receive an email with a direct response.*

Topic 1: Intensive In Home/EPSDT

Question # 1: In terms of requesting an extension for Intensive In Home services under EPSDT, does it matter if the client is currently receiving TDT services that were initiated just prior to the EPSDT request for IIH to continue?

Is there guidance on what specifically qualifies a member for an EPSDT request?

Topic 2: Outpatient Psychiatric Therapy Services

Question # 2: We recently came across the provider notice on the Magellan website indicating that Outpatient Therapy no longer requires authorization after 7/26/17. Does this mean going forward no authorization is ever required, even if we provide more than 26 sessions in a single year?

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Topic 3:Supervision

Question # 3: What are the supervision requirements for outpatient MH services and crisis intervention? We are wondering if the new changes with Medicaid will impact this and if so, when? We have unlicensed clinicians billing (under clinical supervision by licensed staff).

Topic 4:Mental Health Skill Building Services

Question # 4: For Mental Health Skill Building (H0046), is there a cap to the amount of units that can be billed for each week?

Question # 5: If the facility no longer exists how can we meet criteria for proof of prior hospitalization for Mental Health Skill Building?