



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

May 2024



Purpose

- 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.

Preliminary Work

1. Review the ARTS webpage for information on the substance use disorder services transformation: <https://www.dmas.virginia.gov/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.

Preliminary Work, cont.

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.

Preliminary Work, cont.

7. Determine whether you are already credentialed and contracted with the Medicaid health plans and enrolled with 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.

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



Virginia Department of Medical Assistance Services Provider Network Relations Contact Information

Managed Care Organizations (MCO)

- Please refer to the Managed Care Directories located at: <https://www.dmas.virginia.gov/for-providers/managed-care/cardinal-care-managed-care/provider-resources/>



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)

ASAM Level 4 (Medically Managed Intensive Inpatient)

- Acute Care Hospitals licensed by the Virginia Department of Health (VDH) **and** providers with a Virginia Department of Behavioral Health and Developmental Services (DBHDS) SA Medically Managed Intensive Inpatient Service license must submit a copy of the appropriate DBHDS license(s) for the level of care you are looking to provide to the DMAS Provider Services Solution (PRSS) vendor and each of the MCOs 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.

ASAM Levels 3.7, 3.5, 3.3, 3.1 (Residential Treatment)

- Providers must submit a copy of an approved DBHDS license(s) for the Residential 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.
- DMAS Provider Services Solution (PRSS) vendor and the Medicaid health plans will request any additional documents required for credentialing and contracting.

Pro-forma Cost Reports for ASAM Levels 3.7, 3.5, 3.3

- 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.

Pro-forma Cost Reports for ASAM Levels 3.7, 3.5, 3.3, cont.

- 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**
 - 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)

- Providers must submit the appropriate DBHDS license(s) for the level of care you are looking to provide to the DMAS Provider Services Solution (PRSS) vendor and each of the MCOs 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.

ASAM Level 1.0 and 0.5 (Outpatient and SBIRT)

- Must be licensed or credentialed by the Department of Health Professions (DHP); licensure as an ASAM Level 1.0 provider with DBHDS **is permitted**.
- 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 Programs (OTP)

- Must be licensed by DBHDS and submit a copy of an approved DBHDS license 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.

Preferred Office-Based Addiction Treatment (OBAT)

- The prescriber must be licensed under Virginia law as an addiction-credentialed physician or physician with experience or training in addiction medicine **OR** physician extenders with experience or training in addiction medicine per 12VAC30-130-5020. Please see the following link for more details:
<https://www.dhp.virginia.gov/Boards/Medicine/MedicineHomepageItems/News/Content-734001-en.html>
- Effective July 1, 2022, a nurse practitioner to whom a license is issued by endorsement may practice without a practice agreement with a patient care team physician (per §54.1-2957).

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 Supervisee **under supervision of a licensed provider** must be co-located at the same practice site.

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 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 prescriber including working together to develop and monitor individualized and personalized treatment plans that are focused on the best outcomes for the patient.

Preferred OBAT Credentialing Process

Verify that your team has a prescriber and behavioral health professional to meet the requirements on 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.



The “Preferred OBAT Attestation Packet” is posted on the DMAS ARTS webpage: <https://www.dmas.virginia.gov/for-providers/addiction-and-recovery-treatment-services/credentialing/office-based-addiction-treatment/>

Peer Recovery 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);
- 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 Recovery Support Services, cont.

Providers must submit an active registration from the Department of Health Professions' Board of Counseling 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.

- Complete “ARTS and Mental Health Services Registration Form”:

<https://www.dmas.virginia.gov/for-providers/addiction-and-recovery-treatment-services/credentialing/peer-recovery-supports-services/>

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, cont.

Providers must submit an active license from DBHDS 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.

- 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/>

Questions?

Email: SUD@dmas.virginia.gov

