

**TO:** Providers of Home and Community Based Services Waivers (HCBS) and Early Periodic Screening, and Diagnosis and Treatment (EPSDT) services participating in Virginia Medical Assistance Programs and Medicaid Managed Care Organizations (MCOs)

FROM:	Karen Kimsey, Director		
	Department of Medical Assistance Services (DMAS)		

DATE: 6/1/2020

**SUBJECT:** Personal Care Rate Update Effective July 1, 2020

The purpose of this bulletin is to inform providers of an increase, effective July 1, 2020, in the rates for personal care services. Pursuant to Item 313.SSSS(1) of the 2020 Appropriation Act, there will be a 5% increase in the rates for agency and consumer directed personal care, respite and companion services in the home and community based services waivers and Early Periodic Screening, and Diagnosis and Treatment (EPSDT) program.

Agency Directed				
Procedure Code	Service Description	Location	Rates Effective 7/1/2020	
T1019	Personal Care	NOVA	\$16.94	
T1019	Personal Care	ROS	\$14.39	
T1005	Respite Care	NOVA	\$16.94	
T1005	Respite Care	ROS	\$14.39	
S5135	Companion Care	NOVA	\$16.94	
S5135	Companion Care	ROS	\$14.39	

Consumer Directed				
Procedure Code	Service Description	Location	Rates Effective 7/1/2020	
S5126	Personal Care	NOVA	\$12.78	
S5126	Personal Care	ROS	\$9.87	
S5150	Respite Care	NOVA	\$12.78	
S5150	Respite Care	ROS	\$9.87	
S5136	Companion Care	NOVA	\$12.78	
S5136	Companion Care	ROS	\$9.87	

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Waiver rates are posted on the DMAS website at <u>http://www.dmas.virginia.gov/#/longtermwaivers</u>. For questions on personal care reimbursement, please contact Sara Benoit by email: Sara.Benoit@dmas.virginia.gov, or by phone: (804) 786-3673.

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## **Medicaid Expansion Eligibility Verification**

Medicaid coverage for the new expansion adult group began January 1, 2019. Providers may use the Virginia Medicaid Web Portal and the Medicall audio response systems, as shown in the table below, to verify Medicaid eligibility and managed care enrollment, including for the new adult group. In the Virginia Medicaid Web Portal, individuals enrolled in the new adult group are shown as "MEDICAID EXP." If the individual is enrolled in managed care, the "MEDICAID EXP" segment will be shown as well as the "MED4" (Medallion 4.0) or "CCCP" (CCC Plus) managed care enrollment segment. Eligibility and managed care enrollment information is also available through the DMAS Medicall eligibility verification system. Additional Medicaid expansion resources for providers are available on the DMAS Medicaid Expansion webpage at: <u>http://www.dmas.virginia.gov/#/medex</u>.

<b>PROVIDER CONTACT INFORMATION &amp; RESOURCES</b>				
Virginia Medicaid Web Portal Automated	www.virginiamedicaid.dmas.virginia.gov			
Response System (ARS)				
Member eligibility, claims status, payment status,				
service limits, service authorization status, and				
remittance advice.				
Medicall (Audio Response System)	1-800-884-9730 or 1-800-772-9996			
Member eligibility, claims status, payment status,				
service limits, service authorization status, and				
remittance advice.				
KEPRO	https://providerportal.kepro.com			
Service authorization information for fee-for-				
service members.				
Managed Care Programs				
	Plus (CCC Plus), and the Program of All-Inclusive			
	rsed for services provided to a managed care enrolled			
	ive contract with the managed care plan/PACE			
	ent guidelines than those described for Medicaid fee-			
for-service individuals.				
Medallion 4.0 Managed Care Program	http://www.dmas.virginia.gov/#/med4			
CCC Plus Managed Care Program	http://www.dmas.virginia.gov/#/cccplus			
PACE Program	http://www.dmas.virginia.gov/#/longtermprograms			
Magellan Behavioral Health	www.MagellanHealth.com/Provider			
Behavioral Health Services Administrator, check	For credentialing and behavioral health service			
eligibility, claim status, service limits, and service	information, visit:			
authorizations for fee-for-service members.	www.magellanofvirginia.com, email:			
	VAProviderQuestions@MagellanHealth.com,or			
	call: 1-800-424-4046			
Provider HELPLINE	1-804-786-6273			
Monday–Friday 8:00 a.m5:00 p.m. For provider	1-800-552-8627			
use only, have Medicaid Provider ID Number				
available.				