

# Virginia Medicaid Mental Health and Addiction and Recovery Treatment Services (ARTS) Confidential Staff Roster for Peer Support Services

This roster is for Medicaid Mental Health and Addiction and Recovery Treatment Services (ARTS) Providers who are credentialed with the Medicaid Managed Care Organizations (MCOs) or Magellan of Virginia to add the Peer Recovery Support (PRS) staff who has the qualifications, education, and experience established by the Department of Behavioral Health and Developmental Services (DBHDS) and who has received certification in good standing by a certifying body recognized by DBHDS.

These providers and practitioners must be enrolled as a mental health or substance use Medicaid provider or who is working in an agency or facility enrolled as a mental health or substance use Medicaid provider. The initial roster should be a full listing of PRS providers and their supervisors. You may submit subsequent staff rosters with additions/terminations and updates to the roster by marking the appropriate request in the first column of this document. Providers must be credentialed with the Medicaid MCOs and Magellan of Virginia and. **Please send copy of the Peer Recovery Support (PRS) Services Attestation Checklist, PRS Staff Roster, PRS Certification for all employed/contracted certified peers as well as the PRS Supervisor Certification to the MCOs and Magellan of Virginia**

Organizations shall notify the Medicaid health plans and Magellan of Virginia in writing within 10 days in the event of: (a) any change in the licensure or privileges of any Organization staff member, including but not limited to suspension, revocation, condition, limitation, qualification or other restriction, or upon initiation of any action that could reasonably lead to such restriction of such Organization's staff member's license, certification and permit by federal authorities or by any state in which such Organization's staff member is authorized to provide health care services; (b) any suspension, revocation or restriction of staff privileges at any licensed hospital or other Organization at which an Organization staff member employed by or under contract with the Organization has staff privileges.

With the exception of the above circumstances, this roster shall be updated as necessary to reflect changes in staff status, but no less than quarterly.

Provider Change of Status (List: Add, Term, Update or N/A)	Peer Recovery Specialist (PRS) Name	Last 4 digits of Social Security #	Date of Birth	(M/ F)	Name of PRS Direct Supervisor	Supervisor's Professional Licensure or Credential	License Number as applicable	Medicaid Billing Agency/ Organization Name	Billing NPI