


# VIRGINIA

Department of Medical Assistance Services (DMAS) <sup>180, 181, 182</sup>

Assessment & Counseling	Pharmacotherapy	
<p><b>COVERAGE may include:</b></p> <p><b>Preventive Counseling</b> 99385-99387*, 99395-99397*</p> <p><b>Behavioral Assessment/Intervention</b> 96150-96152*, 96154-96155, S9445-S9446*</p> <p><b>Nutritional Consultation &amp; Therapy</b> 97802-97803</p> <p><u>NOTE:</u> <i>DMAS excludes coverage for general screening services and weight loss programs for adults.</i></p> <p><u>NOTE:</u> <i>DMAS fee schedules indicate that additional services may be covered pending individual consideration. (98960-98962, 99078, 99401-99404, 99411-99412, G0270-G0271, S0315-S0316, S9449, S9451, S9452, S9454, S9470)</i></p> <p><u>NOTE:</u> <i>*Service is covered only for recipients under 21 years of age.</i></p>	<p><b>COVERAGE may include:</b></p> <p>Xenical (<i>orlistat</i>)</p> <ul style="list-style-type: none"> <li>- Prior authorization is required.</li> <li>- Patient must have weight 100% above desired level and significant comorbidity</li> </ul> <p><u>Note:</u> <i>Additional criteria/forms available from <b>Disability Criteria for the Coverage of Anorexiant Drugs for Obesity (SSA Publication 64-039)</b> and <b>Pharmacotherapy for Weight Loss (18VAC85-20-90)</b></i></p>	<div style="text-align: center;">  </div> <p>Adults with obesity: <b>29%</b> <sup>3</sup> Adults with diabetes: <b>9%</b> <sup>3</sup></p> <p><b>11%</b> of residents covered by Medicaid/CHIP <b>\$8.1 billion</b> in total Medicaid spending (2015)</p> <p><b>83%</b> enrolled in managed care <b>17%</b> enrolled in fee-for-service <sup>4</sup></p> <p><b>Resources &amp; Contacts:</b></p> <p><b>Virginia State Corporation Commission</b> Phone: 804-371-9741</p> <p><b>Department of Medical Assistance Services</b> Phone: 804-786-7933</p> <p><b>Virginia Department of Health</b> Phone: 804-864-7001</p>
Bariatric Surgery	<p><b>COVERAGE may include:</b></p> <p>Gastric Bypass, Gastric Band, Sleeve Gastrectomy</p> <ul style="list-style-type: none"> <li>- <b>Prior authorization</b> is required.</li> <li>- Patient must have a BMI &gt; 40 kg/m<sup>2</sup> (&gt; 35 w/ a comorbidity), continued obesity despite supervised diet for 6 months, preoperative evaluations (cardiac, dietary, psychiatric); see <b>Bariatric Surgery Checklist</b> for additional criteria.</li> <li>- Providers must submit service authorization requests to KEPRO, DMAS's Service Authorization contractor.</li> </ul>	