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Key Points to Understanding the Governor's Access Plan



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GAP is a new Medicaid plan that will provide limited medical and behavioral healthcare coverage for mental health and substance use disorder services, medical doctor visits, medications, access to a 24-hour crisis line, recovery navigation services, and case management.

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To get GAP benefits, you must meet ALL of the following :

- Adult age 21 through 64 years old;
- U.S. Citizen or lawfully residing immigrant;
- No health insurance, including Medicaid, Children's Health Insurance Program (CHIP/FAMIS), Medicare, or TriCare;
- Resident of Virginia;
- Household income that is below 100% of the Federal Poverty Level (FPL) (about \$11,670 per year for a single adult);
- Not residing in a long term care facility, mental health facility, or penal institution; and
- Screened and meet the criteria for GAP Serious Mental Illness



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Applying for GAP Medicaid is a 2 step process. You can start at either step.

1. Completing a GAP application for financial/non-financial determination; and
2. Having a GAP SMI Screening done

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There are 2 ways to submit a Gap Application to Cover Virginia:

1. By telephone at 1-855-869-8190 or TDD at 1-888-221-1590; or
2. Online with the help of the person who does your GAP SMI Screening. Submitting online may only be done with the help of the GAP SMI Screener. This is the preferred method for application.



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You may call the Community Services Board (CSB) or the nearest Federally Qualified Health Center (FQHC) to have a GAP SMI Screening done. You do not need to wait until your GAP Application has been reviewed before scheduling this screening and the Screener may help you complete the GAP Application if you need assistance. You may call Magellan at 1-800-424-GAP9 for the number of the nearest CSB or FQHC.

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Individuals who meet the requirements are enrolled for a period of 12 continuous months. After 12 months you will need to update your financial information however you will not need a new SMI Screening.

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There are three areas covered by the GAP Medicaid Plan: Outpatient Medical Services, Outpatient Behavioral Health Services, and Additional Services covered by Magellan

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Medical Services	Behavioral Health Services	Magellan Only Services
<ul style="list-style-type: none"> • Primary and Specialty Care • Pharmacy / Medications • Laboratory • Diagnostic Services <ul style="list-style-type: none"> • Physician’s Office • Outpatient hospital coverage is limited to diagnostic ultrasound, diagnostic radiology (excluding PET scans), and EKG including stress. • Diabetic Supplies 	<ul style="list-style-type: none"> • GAP Case Management • Psychiatric Evaluation, Management & Treatment • Crisis Stabilization • Crisis Intervention • Psychosocial Rehabilitation • Outpatient Psych & Substance Abuse Treatment Services • Substance Abuse Intensive Outpatient (IOP) • Methadone & Opioid 	<ul style="list-style-type: none"> • Care Coordination including Community Wellness and Community Connection • Crisis Line available 24/7 and staffed by licensed mental health professionals • Recovery Navigation Services including a state wide warm telephone line staffed by trained peers and limited, local, voluntary, in-person supports.



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GAP members can call a Magellan care manager toll free at 1-800-424-4279 or 1-800-424-GAP9. Magellan will have someone there 24 hours, 7 day per week to provide information about covered benefits, how to find a provider, and who to call for medical, pharmacy, and behavioral health needs.

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GAP Members can call the Magellan Recovery Navigation Line at 1-800-424-4520. This telephone number will be answered by a trained peer who has been through the mental health system who can help you navigate the system as well.

