



STATE OF WEST VIRGINIA
DEPARTMENT OF HUMAN SERVICES
BUREAU FOR MEDICAL SERVICES

Christina Mullins, MA
Acting Cabinet Secretary

Christy D. Donohue, CMC
Commissioner

MEMORANDUM

To: Substance Use Disorder Waiver Residential Adult Services Providers, ASAM
Levels 3.1/3.5/3.7/3.7 Enhanced

From: Cynthia Parsons, Director
Community & Long-Term Care Services

Date: May 29, 2026

RE: Substance Use Disorder Waiver Form for Service Authorization Review

The Bureau for Medical Services (BMS) is requiring all Substance Use Disorder Waiver Residential Adult Services (RAS) providers to use the attached Service Authorization Review Form when submitting an initial request for RAS, an extension request, a change of ASAM level of care, or discharge to a member's managed care plan. The Form is required as of July 1, 2026, and applies to all ASAM levels of RAS.

The Service Authorization Review Form supports submission of individualized clinical documentation that aligns with ASAM 4th Edition guidance. RAS providers must conduct an updated, individualized ASAM assessment, document the member's scores across the five ASAM dimensions, and provide brief, individualized and updated summaries of the member's needs and strengths.

Standardized or boilerplate language, and/or referring the reviewer to "attached clinical information" is not sufficient. BMS reserves the right to allow health plans to deny an RAS stay if providers do not complete the updated ASAM assessment and/or fail to provide appropriate and individualized documentation on the Service Authorization Review Form.

Initial requests for RAS, extension requests, change of ASAM level of care, and discharges must be submitted using the Substance Use Disorder Waiver Form for Service Authorization Review beginning on **July 1, 2026**.



Substance Use Disorder Waiver Form for Service Authorization Review

Date: May 29, 2026

Page 2

If you have any questions concerning the Service Authorization Review Form or process, please use the following contact information below:

Aetna: ABHWV-ProviderRelations@aetna.com
1-888-348-2922

Highmark: HHOWVPR@highmarkhealth.org
1-833-957-0020

The Health Plan: pdq@healthplan.org
1-888-613-8385

Wellpoint: wv-networkrelations@wellpoint.com
1-800-782-0095

