

Notification of a Procedural Change for Out of State Providers Submitting Requests for Service Authorization through KePRO  
Questions and Answers

#	Question	DMAS Response
1.	Where is the DMAS Memo for the Out-of-State Provider requirement located?	<a href="https://www.virginiamedicaid.dmas.virginia.gov/wps/myportal/MedicaidMemostoProviders">https://www.virginiamedicaid.dmas.virginia.gov/wps/myportal/MedicaidMemostoProviders</a> Memo Dated Feb. 6, 2013.
2.	What date is the change effective?	March 1, 2013
3.	Are MSU (Medical Support Unit) Services included with this memo?	Yes, please refer the chart of services impacted on Page 2 of the DMAS Feb. 6, 2013 Memo entitled, "Notification of a Procedural Change for Out of State Providers Submitting Requests for Service Authorization through KePRO — <i>Effective March 1, 2013</i> ".
4.	What other services are included with this out-of-state requirement?	All services impacted are included on Page 2 of the above memo.
5.	Do providers have to document evidence and submit to KePRO all four criteria indications on the Out-of State Provider Policy?	No, out-of-state providers should include one of the four criteria indications when submitting requests for service authorization to KePRO.
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6.	Are "border providers" included in the out of state provider requirement?	"Border providers" are included in the out of state (OOS) provider requirement. DMAS identifies "border providers" as providers in 50 miles of the Virginia border. Out of state providers are determined by their FIPS code, not by their provider class type. Refer to the DMAS Memo dated 2/6/2013 for details and services included in the requirement.
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