

1. What should providers do when they are not receiving follow-up from the VAProviderIssues@Kepro.com email address or from supervisors at the customer service phone number?
  - Acentra Health will take immediate action to address this issue with the Customer Service Leadership. In the future, please call us 888-827-2884 and ask to speak to a manager. To help improve our future service, please send an email with details of your call to vaproviderissues@kepro.com.
2. Which procedure codes should providers be using?
  - Please refer to <https://dmas.kepro.com/reference-material> for the correct procedure codes.
3. How many authorization requests should providers submit to Acentra Health when the original authorization was approved by Magellan but did not transition from Magellan to Acentra Health?
  - First, please call our customer service to confirm if we received the authorization. If we receive the authorization, we can provide you with the Authorization Number. If we did not receive the authorization, please contact us for guidance on submitting an authorization request that will replicate the previous authorization that was approved by Magellan,
4. Was the historical data from Magellan transferred to Acentra Health and how can providers follow-up on IACCT inquiries?
  - Acentra Health does have transition data from Magellan regarding in-process IACCTs. Please email Acentra Health at vaproviderissues@kepro.com with specific cases, and we will research them for you.
5. Is there an indication as to when all information from Magellan will be transferred to Acentra Health and what is the process when there is no information available on the Atrezzo portal for a resident in house that discharges?
  - Acentra Health is working on implementing a discharge form into Atrezzo. It's best to contact our customer service team at 888-827-2884 and notify them of the discharge and a task will be sent to the appropriate team member to review and update eligibility in MMIS, if applicable.
6. What are modifiers and when should they be used?
  - Certain procedure codes require a modifier. Those codes can be found on the crosswalk grid on Acentra's website under "FAQ/Reference Materials" <https://dmas.kepro.com>
7. Is there an IACCT timeline that could be provided?
  - The IACCT Roadmap, which breaks down IACCT timelines can be found at <https://dmas.kepro.com/iacct-inquiry-form>.
8. How will provider know when an IACCT was received/submitted?

- Acentra Health will send a confirmation email to inform the referral source the inquiry has been received. Providers may contact our customer service number at 888-827-2884 and select option "4" if you would like to speak to an IACCT Team Member to confirm the referral was received.
9. Where do providers send incident reports?
- Incident Reports should be submitted via the Atrezzo Portal. On the Acentra Home page there is an instruction document ([How to submit a Seclusion and Restraint Report](#)).
10. Can the formatting on the CON be updated?
- As of 11/28/23, the CON formatting has been updated to allow for easier input of information.
11. What should the provider do if the IACCT link doesn't allow them to complete the process and submit at the end?
- If you are having difficulty submitting the IACCT, please call our Customer Service at 888-827-2884 for assistance.
12. What is the disenrollment process, it used to be automatic with Magellan?
- Acentra Health will update the member eligibility in MMIS to reflect disenrollment from the MCO during the period between the completion of the IACCT Assessment and the member being admitted to the facility.
13. Will this information be available for providers after the meeting?
- Yes, a FAQ will be uploaded to the Acentra Health website to reflect common questions. under "FAQ/Reference Materials" <https://dmas.kepro.com>.
14. Will there be training to teach providers how to submit a retrospective case?
- Providers are currently able to submit retrospective cases in Atrezzo by selecting the request type "retrospective" from the dropdown, which will designate the request for retrospective submission. If you would like to receive 1:1 training on submitting retrospective case requests, please contact our customer service at 888-827-2884 or send an email to [vaproviderissues@acentra.com](mailto:vaproviderissues@acentra.com)
15. Should providers resubmit IAACCT inquiries that were sent to Magellan that are over 30 days old?
- Please submit an IACCT Inquiry via our website to ensure that we have received the inquiry and have started the IACCT Process. Please contact our customer service 888-827-2884 and select option (4) if you would like to speak with someone directly regarding the IACCT.
16. What is the notification system for PRTF provider when IACCT is completed?

- Acentra needs clarity on what notification a PRTF provider will need as there are instances in which placement has not been secured prior to the completion of the IACCT. Contact Customer Service and press option 4 to speak with a Team Member.
17. How should seclusion and restraint requests be submitted?
- All seclusion and restraints must be submitted electronically in Atrezzo.
18. For previous seclusion and restraint requests older than 24 hours, what should providers do to prevent a negative report?
- Please submit all documentation into the Atrezzo system from 11/1/2023. This ensures that Acentra Health has the most complete record. Providers will not be penalized for those submissions. Moving forward, providers should be submitting to Acentra Health.
19. What should a provider do if an error message populates stating the procedure code must be 99231 and/or 99221, the code is entered, but still unable to submit?
- For initial requests, 99221 is only submitted for 1 unit on Day 1., and 99231 is submitted for the remaining days.
20. Is there a remedy to ensure that a Transition Foster Care (TFC) case management is no longer an issue for providers when calling Acentra Health customer service?
- Our customer service team has been informed this is a MCO carved-out service. Please request a supervisor if you run into this issue in the future.
21. For a CSA review, how do providers prevent them from being pended due to no locality?
- FIPS should be entered at Step 8, "Request/Request Details".
22. To prevent longer wait times for patients, is there another process to prevent the IACCT from expiring while waiting for the FAPT to be approved?
- The IACCT is valid for 30 days. Please review the DMAS Residential Treatment Services Provider Manual for more information on IACCT Timelines. This information is contained in Appendix D: Independent Assessment, Certification, and Coordination. Unfortunately, in these instances, a new IACCT will need to be completed.
23. Will the prior Magellan authorizations cross over or does the facility need to initiate a new one for services prior to 11/01/2023?
- Yes, when applicable the Providers need to submit a continued stay request to Acentra Health. For continuity of care, Magellan authorizations that transitioned over on 11/01/2023 are honored by Acentra Health.
24. Why is the out of state form showing up on the PRTF question page when it has already asked if they are from out of state?

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- If this section is not applicable, providers may skip this section or enter N/A in the texts box.