MEDICAID BULLETIN

Last Updated: 11/06/2023

Provider Training on How to Register and Submit Successful Service Authorization Requests to Acentra Health (formerly known as Kepro) Effective November 1, 2023

The purpose of this notification is to inform providers on how to successfully submit fee for service requests for service authorization (SA) to Acentra Health, formerly known as Kepro, effective November 1, 2023.

Which Providers are Affected

Acentra Health will begin accepting requests on November 1, 2023 for providers who perform services for the following programs:

- All Behavioral Health and ARTS Services
- Baby Care Program
- Continuous Glucose Monitors
- EPSDT Private Duty Nursing
- EPSDT Private Duty Nursing MCO School Based Carve Out
- Out of State Imaging
- Genetic Testing

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The last day that Magellan BHSA and DMAS will accept requests for service authorization is October 31, 2023. If you submit a request to Magellan BHSA or DMAS, please do not submit a duplicate request to Acentra.

When to Submit Service Authorization Requests to Acentra

For providers with a service authorization end date that spans on or after November 1, 2023, Acentra will honor the service authorization. When the member requires concurrent services past the end date of the approved SA, providers will request SA through Acentra before the end date of the SA. Requests for SA will be made through Atrezzo Next Generation (ANG).

When the behavioral health service authorization end date is prior to November 1, 2023, providers are to submit the continued stay review request to Magellan BHSA.

When the behavioral health service authorization end date is on or after November 1, 2023, providers are to submit concurrent review requests to Acentra.

When the behavioral health service authorization initiated by Magellan BHSA ends on or after November 1, 2023, Acentra will honor the approved Magellan BHSA service authorization. No action is necessary from the provider unless a concurrent review is required. Concurrent review requests will be submitted to Acentra.

As a reminder, providers must submit a *registration request* for BH services prior to the start of any new service or within two (2) business days of the service start date. Acentra will accept registration service requests on and after November 1, 2023.

Timeliness for Submitting Requests to Acentra

Acentra will waive timeliness from November 1, 2023 – December 31, 2023 for BH and other new providers requesting services on and after November 1, 2023. Timeliness will again be in effect starting January 1, 2024 and after.

<u>Training Schedules on How to Register and Submit Requests Successfully in</u>
Acentra's Atrezzo Next Generation (ANG) Platform

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Training Curriculum

All live demonstrations will be supported by training materials, including provider portal user guide, quick reference guides, and recorded training videos which are all available on the Acentra Health Client website or Atrezzo Provider Portal website.

Live demonstration training sessions will be hosted via Microsoft Teams. Each session will have multiple dates and times to allow providers to choose the time that works best with their schedule. These sessions will include a recorded video to demonstrate system functionality to ensure training consistency, avoid technical difficulties, decrease lag time with large group screen share, and ensure scheduled sessions are completed on time. Providers will have ample time to ask questions during these sessions. Registration and attendance are tracked through the Microsoft Teams platform and data will be provided to DMAS upon completion of all training sessions.

Providers must register for each training by signing up at (https://dmas.kepro.com)

Provider Portal System Training Module 1 - Provider Portal Administrator Training and Schedule

45-minute session - providers must register prior to training and need to attend at least one training. This session is repeated to offer 10 sessions to providers.

This session is *mandatoryfor all Administrator users* so that each person associated with the provider has access to submit and review information in ANG.

Date	Time	Module
	(ET)	



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Monday, October 2	10:15am	Provider Portal Registration
Friday, October 6	12:15pm	Provider Multi-Factor Registration
Tuesday, October 10	1:15pm	Provider Administrator Role
Thursday, October 12	2:15pm	1.
Tuesday, October 17	12:15pm	How to add and manage users
Thursday, October 26	1:15pm	2.
Monday, October 30	3:15pm	Reset accounts
Wednesday, November	10:15am	3.
1		Registering multiple provider locations (adding
Monday, November 6	9:15am	multiple NPIs to one account) 4.
Wednesday, November	12:15pm	Setting preferences
8	•	Jetting preferences

Module 2 - Medical/ Provider Portal System Training

75-minute session; This session is repeated to offer 14 sessions to providers. Providers must register prior to training and need to attend at least one training.

The objective of this session is to demonstrate how to submit a prior authorization request, upload supporting clinical documentation, view determination letters, and all provider portal functions. This session will be for all users who will have access to the provider portal to submit or review prior authorization requests.

All Medical Providers will need to dedicate a Provider Administrator that needs to attend Module 1 – Provider Portal Administrator Training to learn how to register the provider portal account.

Date	Time (ET)	Module	
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Wednesday, October 4 Wednesday, October 11 Monday, October 16 Wednesday, October 18 Monday, October 23 Tuesday, October 24 Friday, October 27 Monday, October 30 Tuesday, October 31 Tuesday, October 31 Wednesday, November 1 Thursday, November	2:00pm 10:00am 10:00am 12:00pm 2:00pm 10:00am 10:00am 10:00am 2:00pm 12:00pm 9:00am	Provider Portal Login Submitting New Requests Completing Saved Requests Submitted Request Status Viewing Determination Letters Uploading Additional Clinical Documentation Extending Approved Request Copy Current Request Requesting Authorization Revisions Sending/Receiving Messages Requesting Reconsideration or Peer to Peer Understanding Admin Set Preferences Changing Provider Context Forgot/Reset Password
Thursday, November 2	9:00am	
Friday, November 3 Tuesday, November 7	12:00pm 11:00am	

Module 3 - Behavioral Health Provider Dedicated System Training Session

75-minute session; This session is repeated to offer 14 sessions to providers. Providers must register prior to training and need to attend at least one training.

The objective of this session is to demonstrate how to submit a prior authorization request, upload supporting clinical documentation, view determination letters, and all provider portal functions. This session will be for all users who will have access to the provider portal to submit or review prior authorization requests.

All Behavioral Health Providers will need to dedicate a Provider Administrator that needs to attend Module $\bf 1$ – Provider Portal Administrator Training to learn how to register the provider portal account.

Date	Time (ET)	Module





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Tuesday, October 10 Thursday, October 12 Friday, October 13 Thursday, October 19 Monday, October 23 Tuesday, October 24 Wednesday, October 25 Friday, October 27 Tuesday, October 31 Wednesday, November 1 Thursday, November 2 Friday, November 3 Monday, November 6	10:00am 9:00am 12:00pm 12:00pm 10:00am 12:00pm 10:00am 2:00pm 3:00pm 2:00pm	Provider Portal Login Submitting New Requests Completing Saved Requests Submitted Request Status Determination Letters Uploading Additional Clinical Documentation Extending Approved Request Copy Current Request Requesting Authorization Revisions Sending/Receiving Messages Requesting Reconsideration Requesting Peer to Peer Understanding Admin Set Preferences Changing Provider Context Forgot/Reset Password
6 Tuesday, November 7	2:00pm	

Module 4 - CSB/Independent Provider Dedicated System Training Session

75-minute session; This session is repeated to offer 3 sessions to providers. Providers must register prior to training and need to attend at least one training.

The objective of this 60-minute training session is to demonstrate how to submit a prior authorization request, upload supporting clinical documentation, view determination letters, and all provider portal functions. This session will be for all users who will have access to the provider portal to submit or review prior authorization requests.

All CSB/Independent Providers will need to dedicate a Provider Administrator that needs to attend Module 1 - Provider Portal Administrator Training to learn how to register the provider portal account.

Date	Time (ET)	Module
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Wednesday, October 11	12:00pm	Provider Portal Login Submitting New Requests Completing Saved Requests Submitted Request Status Determination Letters
Friday Ostahar 20	2.000000	Uploading Additional Clinical Documentation
Friday, October 20	2:00pm	Extending Approved Request Copy Current Request
		Requesting Authorization Revisions
Wednesday, October	9:00am	Sending/Receiving Messages
25		Requesting Reconsideration
		Requesting Peer to Peer
		Understanding Admin Set Preferences

Module 5 - Heath Department Dedicated System Training Session

75-minute session; This session is repeated to offer 3 sessions to providers. Providers must register prior to training and need to attend at least one training.

Changing Provider Context Forgot/Reset Password

The objective of this session is to demonstrate how to submit a prior authorization request, upload supporting clinical documentation, view determination letters, and all provider portal functions. This session will be for all users who will have access to the provider portal to submit or review prior authorization requests.

All Health Department Providers will need to dedicate a Provider Administrator that needs to attend Module 1 - Provider Portal Administrator Training to learn how to register the provider portal account.

Date	Time (ET)	Module	
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Department of Medical Assistance Services 600 East Broad Street Suite 1300 Richmond, VA 23219

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Tuesday, October 17	10:00am	Provider Portal Login Submitting New Requests Completing Saved Requests
Thursday, October 26	9:00am	Submitted Request Status Determination Letters Uploading Additional Clinical Documentation Extending Approved Request Copy Current Request
Monday, October 30	12:00pm	Requesting Authorization Revisions Sending/Receiving Messages Requesting Reconsideration Requesting Peer to Peer Understanding Admin Set Preferences Changing Provider Context Forgot/Reset Password

October - November 2023 Provider Training - Calendar Version

No	Monday	Tuesday	Wednesday	Thursday	Friday
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	OCT 30	OCT 31	GO LIVE Nov 1	Nov 2	Nov 3



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Suite 1300 Richmond, VA 23219 https://dmas.virginia.gov

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MODULE 2 Medical - 10AM

MODULE 2 Medical - 10AM and repeated at

MODULE 1 Administrator -10AM

MODULE 2 Medical - 9AM MODULE 3 BH -

10AM

MODULE 5 Health Dept - 12PM

2PM

MODULE 2 Medical - 12PM MODULE 3 BH -2PM

MODULE 2 Medical

- 12PM

MODULE 1

NOV 6

Administrator - 3PM

MODULE 3 BH -2PM

MODULE 3 BH -

3PM NOV 8

NOV 9 NOV 10

MODULE 1 Administrator - 9AM

MODULE 2 Medical - 11AM MODULE 1 Administrator -12PM

MODULE 3 BH -

NOV 7

MODULE 3 -12PM 2PM

Provider Contact Information & Resources

Virginia Medicaid Web Portal **Automated Response System**

Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.

https://vamedicaid.dmas.virginia.gov/

Medicall (Audio Response System)

Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.

1-800-884-9730 or 1-800-772-9996

Acentra Health

Service authorization information for fee-for-service members.

https://dmas.kepro.com/

Provider Appeals

DMAS launched an appeals portal in 2021. You can use this portal to file appeals and track the status of your appeals. Visit the website listed for appeal resources and to register for the portal.

https://www.dmas.virginia.gov/appeals/

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https://dmas.virginia.gov

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Managed Care Programs

Medallion 4.0, Commonwealth Coordinated Care Plus (CCC Plus), and Program of All-Inclusive Care for the Elderly (PACE). In order to be reimbursed for services provided to a managed care enrolled individual, providers must follow their respective contract with the managed care plan/PACE provider. The managed care plan may utilize different guidelines than those described for Medicaid fee-for-service individuals.

Medallion 4.0 http://www.dmas.virginia.gov/#/med4 **CCC Plus** http://www.dmas.virginia.gov/#/cccplus

PACE http://www.dmas.virginia.gov/#/longtermprograms

Magellan Behavioral Health

Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-

service members.

www.MagellanHealth.com/Provider www.magellanofvirginia.com,

email: VAProviderQuestions@MagellanHealth.com,or

Call: 1-800-424-4046

In-State: 804-270-5105

Provider Enrollment Out of State Toll Free: 888-829-5373

Email: <u>VAMedicaidProviderEnrollment@gainwelltechnologies.com</u>

Provider HELPLINE

Monday-Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number

available.

1-804-786-6273 1-800-552-8627

Aetna Better Health of Virginia www.aetnabetterhealth.com/Virginia

1-855-270-2365

1-866-386-7882 (CCC+)

Anthem HealthKeepers Plus www.anthem.com/vamedicaid

1-833-207-3120

1-833-235-2027 (CCC+) 1-800-424-4524 (CCC+)

Molina Complete Care 1-800-424-4518 (M4)

Optima Family Care 1-800-643-2273

1-844-374-9159 (CCC+)

www.optimahealth.com/medicaid United Healthcare www.Uhccommunityplan.com/VA

www.myuhc.com/communityplan

1-844-284-0149

1-855-873-3493 (CCC+)

Dental Provider 1-888-912-3456

DentaQuest