Department of Medical Assistance Services
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https://dmas.virginia.gov

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

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.

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

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 (ET)	Module

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

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

Wednesday, October 4	2:00pm	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
Wednesday, October 11	10:00am	
Monday, October 16	10:00am	
Wednesday, October 18	12:00pm	
Monday, October 23	2:00pm	
Tuesday, October 24	10:00am	
Friday, October 27	12:00pm	
Monday, October 30	10:00am	
Tuesday, October 31	10:00am	
Tuesday, October 31	2:00pm	
Wednesday, November 1	12:00pm	
Thursday, November 2	9:00am	
Friday, November 3	12:00pm	
Tuesday, November 7	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 1 – Provider Portal Administrator Training to learn how to register the provider portal account.

Date	Time (ET)	Module

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

Wednesday, October 11	12:00pm	Provider Portal Login Submitting New Requests Completing Saved Requests Submitted Request Status Determination Letters Uploading Additional Clinical Documentation
Friday, October 20	2:00pm	Extending Approved Request Copy Current Request Requesting Authorization Revisions
Wednesday, October 25	9:00am	Sending/Receiving Messages Requesting Reconsideration Requesting Peer to Peer Understanding Admin Set Preferences Changing Provider Context Forgot/Reset Password

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.

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

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

October – November 2023 Provider Training - Calendar Version

Monday	Tuesday	Wednesday	Thursday	Friday
REGISTRATION OPEN Oct 2 MODULE 1 Administrator Training 10AM	**OCT 3**	**OCT 4** MODULE 2 Medical - 2PM	**OCT 5**	**OCT 6** MODULE 1 Administrator – 12 PM
OCT 9 **COLUMBUS DAY**	**Oct 10** MODULE 3 BH - 10AM MODULE 1 Administrator – 1PM	**OCT 11** MODULE 2 Medical – 10AM MODULE 4 CSBs - 12P	**OCT 12** MODULE 3 BH - 9AM MODULE 1 Administrator - 2PM	**OCT 13** MODULE 3 BH - 12PM
OCT 16 MODULE 2 Medical - 10AM	**OCT 17** MODULE 5 Health Dept – 10AM MODULE 1 Administrator - 12PM	**OCT 18** MODULE 2 Medical - 12PM	**OCT 19** MODULE 3 BH - 12PM	**OCT 20** MODULE 4 CSBs - 2PM
OCT 23 MODULE 3 BH – 10AM MODULE 2 Medical - 2PM	**OCT 24** MODULE 2 Medical – 10AM MODULE 3 BH - 12PM	**OCT 25** MODULE 4 CSBs – 9AM MODULE 3 BH - 12PM	**OCT 26** MODULE 5 Health Dept – 9AM MODULE 1 Administrator - 1PM	**OCT 27** MODULE 3 BH – 10AM MODULE 2 Medical - 12PM
OCT 30	**OCT 31**	**GO LIVE Nov 1**	**Nov 2**	**Nov 3**

MODULE 2 Medical – 10AM MODULE 5 Health Dept – 12PM MODULE 1 Administrator - 3PM	MODULE 2 Medical – 10AM and repeated at 2PM MODULE 3 BH - 2PM	MODULE 1 Administrator – 10AM MODULE 2 Medical – 12PM MODULE 3 BH - 3PM	MODULE 2 Medical – 9AM MODULE 3 BH - 2PM	MODULE 3 BH – 10AM MODULE 2 Medical - 12PM
NOV 6	**NOV 7**	**NOV 8**	NOV 9	NOV 10
MODULE 1 Administrator – 9AM MODULE 3 BH - 12PM	MODULE 2 Medical - 11AM MODULE 3 – 2PM	MODULE 1 Administrator - 12PM		

Provider Contact Information & Resources

Virginia Medicaid Web Portal Automated Response System (ARS) 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/

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
Provider Enrollment	In-State: 804-270-5105 Out of State Toll Free: 888-829-5373 Email: VAMedicaidProviderEnrollment@gainwelltechnologies.com
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+)
Molina Complete Care	1-800-424-4524 (CCC+) 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 DentaQuest	1-888-912-3456