



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



MEDICAID BULLETIN

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 *mandatory* for all Administrator users so that each person associated with the provider has access to submit and review information in ANG.

Date	Time (ET)	Module
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MEDICAID BULLETIN

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 1	10:15am	3.
Monday, November 6	9:15am	Registering multiple provider locations (adding multiple NPIs to one account)
Wednesday, November 8	12:15pm	4.
		Setting 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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MEDICAID BULLETIN

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

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
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MEDICAID BULLETIN

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

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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MEDICAID BULLETIN

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
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MEDICAID BULLETIN

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



Department of Medical Assistance Services
600 East Broad Street
Suite 1300
Richmond, VA 23219

<https://dmas.virginia.gov>

MEDICAID BULLETIN

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

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/>



MEDICAID BULLETIN

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.magellanoofvirginia.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.Uhcommunityplan.com/VA

www.myuhc.com/communityplan

1-844-284-0149

1-855-873-3493 (CCC+)

Dental Provider

DentaQuest

1-888-912-3456