

insider

A KEPRO QUARTERLY NEWSLETTER • VIRGINIA MEDICAID SERVICE AUTHORIZATION • SUMMER 2011

Coming this fall . . . the new KePRO Provider Portal!

Coming this fall, Virginia Medicaid providers will have an exciting new platform where they can submit authorization requests, letters, correct errors, and check on responses. KePRO is thrilled to unveil its new KePRO Provider Portal. Unquestionably an improvement from the current system, iEXCHANGE, the KePRO Provider Portal will increase functionality, accuracy, and timeliness for providers and DMAS.

The single entry point of KePRO's system makes it easier and more efficient to use. The available features of the platform make it easy for users to tailor the program to fit their individual needs.

The system includes features that make it more intuitive and workflow-driven, making it easier for providers to complete their part of the service authorization process in a timely and more efficient manner.

Security, accuracy, and integrity of information are top priorities for consumers, providers, DMAS, and

in this edition

Coming this Fall	1
Soft Cap Implementation.....	2
CMHRS Update.....	2
Provider Satisfaction Survey.....	2



KePRO alike. The KePRO Provider Portal ensures accuracy of information and reduction of errors by featuring internal rules-based data input mechanisms which maintain data integrity throughout the review and determination process. This reduction in errors allows for speedier processing by getting it right the first time.

Internal data editing of codes, eligibility, rules, service type, procedure, and status, including the complex connections between all types of data, ensures uniformity and consistency, making the review process easier and quicker, with fewer keystrokes for all.

Fewer keystrokes, more uniform data, and greater functionality all lead to quicker processing for service authorization requests. Providers spend less time inputting their vital information and reviewers spend less time making corrections, while greater decision accuracy is also met. Because the application is completely owned and operated by KePRO, changes to the system will be controlled from within, making it tailored to DMAS and their providers.

The exciting new KePRO Provider Portal platform will be available this fall, so get ready for speedier and even more accurate service authorization. KePRO Provider Portal users will enjoy:

continued on page 2

- Tailored features and functionality specific for DMAS use
- A unified single point of entry providing greater accuracy and complete data
- Reduced errors
- Improved processing times
- More intuitive and workflow-driven processes
- Enforced data integrity throughout the review and determination process through internal rules-based data input mechanisms, facilitating fewer errors and “do-overs”
- Internal data editing of such information as codes, eligibility, rules, service type, procedure, and status, including the intricate connections among all these types of data input.
- Internal rules-driven controls early in the review and determination process, ensuring consistency and uniformity and making the review process easier (with fewer keystrokes)

Training for the new system will be offered beginning in September. Watch your e-mail for more information about trainings coming to your area or online soon.



Personal Care Soft Cap Implementation

Providers of Personal Care Services and Service Facilitation under the Elderly or Disabled with Consumer Directed Services (EDCD) and AIDS Waiver Programs should check the Virginia Medicaid Web Portal for the Medicaid Memo dated 7/8/2011.

In particular note the following requirement contained in the memo:

For those individuals currently receiving over 56 hours per week, in order to continue receiving reimbursement for these hours for dates of service September 1, 2011 and forward.

- The most recent DMAS 97A/B that reflects the current Level of Care B or C AND;
- One or more of the items listed in items 1-3 of the memo which documents the increased risk of institutionalization.

CMHRS Independent Clinical Assessment Update

Providers of Community Mental Health Rehabilitative Services should be aware of the June 16, 2011 Medicaid Memo announcing the independent clinical assessment requirement implemented July 18, 2011 for new requests for service for Intensive In-Home, Therapeutic Day Treatment and Mental Health Support Services for individuals up to the age of 21.

Please note that, “effective September 1, 2011, a completed independent clinical assessment will be required for those individuals up to the age of 21 who are currently receiving services and whose service re-authorization is due for request submitted on or after September 1, 2011 for IIH, TDT, and MHSS. CSBs/ BHAs will conduct independent clinical assessments on and after August 1, 2011 for service re-authorizations with dates of service continuing on and after September 1, 2011.”

Provider Satisfaction Survey

The week of August 5th NRC/Picker mailed out KePRO's annual Provider Satisfaction Survey. Please take this opportunity to let us know what you think. The letter accompanying the survey provides a web link and access code if you would like to respond online.

2810 North Parham Road, Suite 305
Henrico, VA 23294
Toll-free: 888.827.2884
Tel: 804.622.8900
Fax: 877.652.9329
<http://dmas.kepro.com>