

# VA Insider

Winter 2020



# DO YOU REQUIRE A PEER-TO-PEER CONVERSATION?

When a decision is made to deny or reduce a requested service, a provider may telephonically request a Peer-to-Peer (P2P) Conversation with KEPRO's medical director. Your request for a Peer-to-Peer conversation must be made within 30 calendar days from the date of KEPRO's determination by calling 888.827.2884. Providers should note that a Peer-to-Peer conversation is separate from the DMAS Appeals process which must be received within 30 calendar days from the date of the official denial or notification of a reduction in services. Both processes can occur simultaneously.

If you would like to request a Peer-to-Peer conversation please contact KEPRO, and have the Physician's full name, office and/or cell number including area code, and three available dates and times

# WHERE DO YOU SUBMIT AN APPEAL REQUEST?

Request for an appeal should be submitted to Virginia Department of Medical Assistance Services. For appeals resources, <u>click here</u>.

# Ways to submit an appeal:

Email your appeal request to DMAS at appeals@dmas.virginia.gov

Fax your appeal request to DMAS at (804) 452-5454

Call DMAS at (804) 371-8488. TTY 1(800) 828-1120

Mail or bring in your appeal to the Appeals Division:

Department of Medical Assistance Services, 600 E Broad Street, Richmond, VA 23219







# SUBMITTING GRIEVANCES AND/OR COMPLAINTS TO KEPRO

Grievances and/or complaints are reviewed and resolved within five business days. Expedited grievances and/or complaints are reviewed and resolved within seventy-two hours from date of the receipt.

To submit grievances and/or complaints by phone call the KEPRO Customer Service Department at: (888) 827-288.

To submit grievances and/or complaints in writing send an email to: <a href="mailto:vaproviderissues@kepro.com">vaproviderissues@kepro.com</a>.

### **DME: INCONTINENCE CONTRACT**

Effective December 31, 2019 the Sole Source vendor contract for incontinence supplies ended. Any DME provider can now submit for incontinence products effective January 1, 2020. For updates to the DME provider manual, click here.

# **RULES DRIVEN AUTHORIZATION (RDA)**

Rules Driven Authorization is a rules-driven program utilizing system-generated algorithms to reduce errors and facilitate prior authorization for most commonly approved diagnoses and services based on clinical and regulatory requirements.

Your Answer to this question remains very important:

Was the member recently terminated from the Commonwealth Coordinated Care Program (CCCP) or Medallion 4.0 and now approved to receive fee for service (FFS) Medicaid coverage?

Please take a moment and review your questionnaire for accuracy before submitting. Incorrect answers may result in a re-review of your client's case and may result in a change to approved hours.

### LTSS SCREENING

Please remember that per the Code of Virginia, 32.1-330, members must be screened in order to receive long term services and supports (LTSS) in nursing facilities, through the CCC Plus waiver or PACE. Once you have received the LTSS Screening packet from the LTSS screening team please confirm the following:

- Your form indicates "Status: Successfully Processed."
- The Medicaid Authorization section, question 3, indicates "Medicaid Services Authorized: Yes."

For questions regarding LTSS screening, contact <a href="mailto:screeningassistance@dmas.virginia.gov">screeningassistance@dmas.virginia.gov</a>.

### HAS YOUR CLIENT TRANSITIONED FROM CCC PLUS TO FEE-FOR-SERVICE?

If the answer is yes and you have the MCO authorization for the member, please upload the authorization information along with your request for services. This will reduce the delay in processing your request.





### WHERE ARE THE DEMOGRAPHICS?

Having trouble printing the demographics when printing your Atrezzo Questionnaires? Please try right clicking and selecting print. Use this method instead of the print icon while we correct this internal issue. We apologize for this inconvenience and will alert you once it is corrected.

### JOIN US FOR PROVIDER PORTAL TRAININGS

Pre-recorded service specific trainings are located on <u>dmas.kepro.com</u> under the training tab. To review the available trainings, click here.

**Topic: Outpatient Case Creation** 

Date: March 19, 2020 Time: 10:00 AM CST

Register Now >

**Topic: System Navigation** 

Date: April 28, 2020 Time: 10:00 AM CST

Register Now >

Topic: How to Submit Additional Clinical Information

Date: May 21, 2020 Time: 10:00 AM CST

Register Now >

## **CONTACT US**

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