



Virginia Medicaid Providers: Fiscal Agent Transition Time Is Here

Earlier this year, we issued the [first](#) and [second](#) in a series of Client Advisories regarding the pending transition of Fiscal and Provider Enrollment functions for the Virginia Department of Medical Assistance Services (“DMAS”) from First Health Services Corporation (“First Health”) to ACS State Healthcare (“ACS”). Transition time has now arrived, and with it, a new DMAS Memorandum (the “Memorandum”) with important instructions for all providers who transact business with Virginia Medicaid (http://www.dmas.virginia.gov/downloads/pdfs/mm-prov_enr_trans.pdf). We advise all providers to read this memorandum carefully, in its entirety, as some enrollees will be impacted more significantly than others, depending on their billing and business practices. In the meantime, all providers should review the Memorandum’s key points regarding the transition.

What Will Change

DMAS has reiterated from the outset that this transition should be one of “minimal disruption” to providers. Just how minimal depends, however, on just how prepared providers are to access Virginia Medicaid’s new transactional tools:

- All Medicaid and FAMIS business will now be conducted through one central internet location, the Virginia Medicaid Web Portal (the “Portal”), now open for viewing at: <http://www.virginiamedicaid.dmas.virginia.gov/>. The portal will provide access to Provider Manuals and Medicaid Memoranda, as well as provider

enrollment applications, training, education, and provider search capabilities.

- On June 28, 2010, registered users will be able to utilize the Portal to: check Medicaid and FAMIS member eligibility; check Medicaid and FAMIS member service limits; check the status of a submitted claim; check a weekly Medicaid and FAMIS payment amount; or check on a member service authorization.
- The Delegated Administrator on file with each provider’s NPI will receive a letter describing how to access the new Portal. This person should access the Portal and change his or her password before June 27, 2010, and will be able to add additional users beginning June 28, 2010.

The Portal will have a different look, but provider can acclimate themselves to its functions through WebEx training sessions, available 24/7 on the Portal website. For details, please visit the portal’s FAQ section.

What Will Stay The Same

Providers should be pleased with the basic billing and payment functions ACS will keep intact through and after the transition:

- The process for submission of paper claims will not change.
- The process for submission of electronic claims will also remain largely the same. (By now, each provider or designee should have been given a new user ID and password, and a new FTP address for electronic submission of files to



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ACS. If you did not receive this information, please contact the ACS Call Center at 1-800-786-6273).

- The process for requesting service authorizations (formerly prior authorizations) will not change.
- The process for submitting pre-admission screening assessments will not change.
- Current users of the First Health Services User Administration Console ("UAC") can continue to access the UAC through June 27, 2010.

What May Be Inconvenient in the Meantime

Despite the efficiencies promised by the new Portal, its implementation will result in a few planned delays:

- New registrations to the UAC were discontinued as of May 26, 2010. New registrations to the Portal will not be allowed until the transition to ACS on June 28, 2010.
- Paper claims received from June 22, 2010 to June 28, 2010 will be held for processing until June 28, 2010. Claims held will not be available for inquiry until at least June 28, 2010, and will not be on a provider's remittance advice until July 9, 2010. DMAS expects that

processing of claims will return to normal timeframes on July 9, 2010.

- PAS assessments received from June 22, 2010, through June 27, 2010, will be held for processing. Processing of these assessments will not occur until June 28, 2010. Processing of PAS assessments should return to normal timeframe(s) beginning June 28, 2010.
- Virginia Medicaid has scheduled downtime for the Medicaid Point of Sale ("POS") system from 5 PM Sunday, June 27, 2010 until 7 AM Monday, June 28, 2010. DMAS has asked pharmacies to hold all POS claims until the system is operational. If the system is not operational by 9 AM on June 28, 2010, and eligibility cannot be verified through the Automated Response System website or MediCall, providers should follow the Virginia Medicaid Emergency Fill Provisions.

If you have questions regarding the DMAS Fiscal Agent transition, please contact Mary Malone (mmalone@hdjn.com), Emily Towey (etowey@hdjn.com) or Elizabeth Trende (etrende@hdjn.com) at 804-967-9604, or visit our website at www.hdjn.com.

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