



Department of Medical Assistance Services  
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<http://www.dmas.virginia.gov>

# MEDICAID BULLETIN

**TO:** All Providers Participating in the Virginia Medicaid and FAMIS Programs, including Managed Care, Fee-For-Service, Pharmacies, PACE Providers and HCBS Waiver Services Providers, and Managed Care Organizations and the Behavioral Health Services Administrator

**FROM:** Karen Kimsey, Director  
Department of Medical Assistance Services (DMAS)

**DATE:** 3/4/2022

**SUBJECT:** DMAS Replacing VAMMIS With Medicaid Enterprise System (MES): Key Dates For Providers

This is one of a series of Medicaid memos to be distributed prior to April 4, 2022. The purpose of these memos is to inform Medicaid fee-for-services providers of the upcoming transition of several key information management functions currently handled through the Virginia Medicaid Management Information System (VAMMIS) to a new technology platform called the Medicaid Enterprise System (MES). Beginning April 4, providers will be required to use the new MES to access the functions listed below.

This period of transition requires several functions that are currently part of VAMMIS to be taken temporarily off-line beginning March 30, 2022 through April 3, 2022. (Access to these functions will resume on April 4, 2022. This memo will list those functions impacted, key dates and where to go for assistance during this period. Future memos will provide more detail on how to access the new and improved features offered by MES and will provide additional guidance on the various options for training for MES.

Function	VAMMIS	MES	For assistance
Member eligibility information	Beginning March 30, 2022, providers will not have access to VAMMIS, Medicaid or the Automated Response System (ARS) to check member eligibility information.	Beginning April 4, 2022, providers will access member eligibility information via the new MES Provider Portal	Email DMAS Enrollment and Eligibility Unit at <a href="mailto:vamedicaidquestions@dmas.virginia.gov">vamedicaidquestions@dmas.virginia.gov</a> . Email will be actively monitored March 30, 31 and April 1 between 8 a.m. and 5 p.m. Questions emailed during the evening or weekend hours will

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Function	VAMMIS	MES	For assistance
			receive a response on the next business day.
Provider enrollment	Beginning February 18, 2022, through April 3, 2022, DMAS will not accept new provider requests for enrollment through VAMMIS.	Beginning April 4, 2022, DMAS will accept new provider enrollment requests via the new MES Provider Portal.	Through March 29, 2022, call Conduent Web Support Helpdesk at 866-352-0496  Beginning April 4, 2022, call Gainwell Provider Services at 888-829-5373
Provider management	Beginning February 18, 2022, participating providers will no longer be able to access VAMMIS to update their provider information or perform revalidation steps.	Beginning April 4, 2022, participating providers will be able access their information and complete revalidation steps via the new MES Provider Portal. DMAS will email login information to providers in late March.	Through March 29, 2022, call Conduent Web Support Helpdesk at 866-352-0496  Beginning April 4, 2022, call Gainwell Provider Services at 888-829-5373
Primary account holder assignments/changes	Providers must ensure that their primary account holder contact information is accurate by March 7, 2022 at 5 p.m.	Beginning March 21, 2022, providers/ primary account holders will have access to their provider portal credential/account information in MES.	Through March 29, 2022, call Conduent Web Support Helpdesk 866-352-0496  Beginning April 4, 2022, call Gainwell Provider Services 888-829-5373
Individual provider delegate administrator set up	Not applicable	Beginning March 21, 2022, individual providers with accurate primary account holder information in the system can login and set up delegate administrators.	Beginning April 4, 2022, call Gainwell Provider Services 888-829-5373
Pharmacy benefit management	Beginning March 30, 2022, pharmacies may phone DMAS's pharmacy benefits administrator to verify enrollment status.	Beginning April 4, 2022, pharmacies will have access to Medicaid and ARS.	From March 30 through April 3, call Magellan Pharmacy Benefit Management at 800-932-6648
Direct data entry (DDE)	Beginning March 30, 2022, providers will not be able to access	Beginning April 4, 2022, providers will login to MES to	Call Conduent Claims Support Helpline at 800-552-8627

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Function	VAMMIS	MES	For assistance
	DDE through the VAMMIS portal.	complete DDE of claims or check status of claims submitted.	
Electronic and paper remittance advices (RAs)	Providers that receive only paper RAs will continue to receive paper RAs for claims submitted through 8 p.m. March 25, 2022.	Beginning April 4, 2022, providers will only be able to access RAs electronically through the Provider Portal. Newly enrolled providers may submit a hardship request to receive paper RAs.	Call Conduent Claims Support Helpline at 800-552-8627
Claims payment	Beginning at 8 p.m. on March 25, 2022, DMAS will pause claims payment processing.	All claims submitted between 8 p.m. March 25 and 8 p.m. April 8 will be processed beginning April 4, 2022, and included in the financial cycle that has a payment date of April 15, 2022.	Call Conduent Claims Support Helpline at 800-552-8627
Medical Services Unit (MSU) service authorization	Providers should continue submitting fee-for-service authorization requests according to timely filing requirements via fax to 804-452-5450.	DMAS Medical Services Unit staff will not <i>process</i> authorization requests between March 30, 2022, and April 3, 2022. Beginning April 4, 2022, DMAS Medical Services Unit will process service authorization requests submitted in the order in which they were received.	Call DMAS MSU at 804-786-8056
Kepro service authorizations	Providers should continue submitting fee-for-service authorization requests to Kepro according to timely filing requirements.		Call Kepro at 888-827-2884
Department of Behavioral Health and Developmental Services (DBHDS) service authorizations	Providers should continue submitting fee-for-service authorization requests to DBHDS according to timely filing requirements.		Call DBHDS at 804-663-7290
Magellan behavioral health service authorizations	Providers should continue submitting fee-for-service, behavioral health authorization requests to Magellan according to timely filing requirements through Magellan's portal.		Check Magellan BHSA website at <a href="https://www.MagellanHealth.com/Provider">https://www.MagellanHealth.com/Provider</a>

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Function	VAMMIS	MES	For assistance
			<p>Email Magellan BHSA at  VAProviderQuestions@MagellanHealth.com,</p> <p>Or call  800-424-4046</p>
Magellan behavioral health services provider enrollment	Providers currently enrolled with Magellan BHSA need to take no action.	Beginning April 4, 2022, newly enrolling fee-for-service behavioral health services providers must enroll directly with DMAS using the Provider Portal. Magellan BHSA will continue to perform service authorizations and claims adjudication for these services.	Email Magellan BHSA VAProviderQuestions@MagellanHealth.com,
DMAS Provider Manuals, Memos and Bulletins	Beginning March 30, 2022, Medicaid Provider Manuals, Memos and Bulletins will not be available in MMIS.	Beginning April 4, 2022, Medicaid Provider Manuals, Memos and Bulletins will be available through the Provider Portal and the MES Public Portal.	March 30, 2022 through April 3, 2022, providers may email Emily McClellan, at <a href="mailto:emily.mcclellan@dmavirginia.gov">emily.mcclellan@dmavirginia.gov</a> to request copies of Manuals, Memos and Bulletins.
Providers that participate through an MCO and are not enrolled in Medicaid Fee-for Service	For providers who participate with one or more MCOs and are not currently enrolled in Medicaid Fee-for-Service, your contracted MCO(s) will provide information about how the Medicaid Enterprise System will affect you. The system change does not affect your current contractual relationship with the MCO(s).		
Service Center ID and Provider Associations with Transactions	Beginning Wednesday, March 30, 2022, providers will not be able to access the EDI Service Center to make changes to their existing association of Service Center ID and Transactions.	Beginning April 4, 2022, providers will use a link located in the Provider Portal to make changes to the existing association of Service Center ID and Transactions.	Additional information to follow.

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Function	VAMMIS	MES	For assistance
Electronic Data Interchange (EDI)	No change. Service Centers should continue to submit claims and other HIPAA compliant transactions as usual.		

For additional information:

Medicaid Enterprise System Information for Fee-for-Service Providers at

<https://www.dmas.virginia.gov/for-providers/medicaid-enterprise-system/fee-for-service-providers/>, and

Medicaid Enterprise System Provider Portal Pre-Launch FAQs at

<https://vamedicaid.dmas.virginia.gov/provider/faq>

Medicaid Enterprise System Provider Training at <https://vamedicaid.dmas.virginia.gov/training/providers>

Email your Medicaid Enterprise System general questions to [AskMES@dmas.virginia.gov](mailto:AskMES@dmas.virginia.gov).

**MCO Participating Only Providers**

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<b>PROVIDER CONTACT INFORMATION &amp; RESOURCES</b>	
<p><b>Virginia Medicaid Web Portal Automated Response System (ARS)</b> Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.</p>	<p>Through March 29: <a href="http://www.virginiamedicaid.dmas.virginia.gov">www.virginiamedicaid.dmas.virginia.gov</a></p> <p>As of April 4, 2022: <a href="https://login.vamedicaid.dmas.virginia.gov/">https://login.vamedicaid.dmas.virginia.gov/</a></p>
<p><b>Medicall (Audio Response System)</b> Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.</p>	<p>1-800-884-9730 or 1-800-772-9996</p>
<p><b>KEPRO</b> Service authorization information for fee-for-service members.</p>	<p><a href="https://dmas.kepro.com/">https://dmas.kepro.com/</a></p>
<p><b>Provider Appeals</b> 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.</p>	<p><a href="https://www.dmas.virginia.gov/appeals/">https://www.dmas.virginia.gov/appeals/</a></p>
<p><b>Provider Audits</b> Please continue to adhere to all instructions provided via DMAS or its contractors as it relates to complying with audit processes and procedures. Conversion to MES will not affect audit protocol.</p>	
<p><b>Managed Care Programs</b> 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</p>	

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<p>provider. The managed care plan may utilize different guidelines than those described for Medicaid fee-for-service individuals.</p>	
<p><b>Medallion 4.0</b></p>	<p><a href="https://www.dmas.virginia.gov/for-providers/managed-care/medallion-40/">https://www.dmas.virginia.gov/for-providers/managed-care/medallion-40/</a></p>
<p><b>CCC Plus</b></p>	<p><a href="https://www.dmas.virginia.gov/for-providers/managed-care/ccc-plus/">https://www.dmas.virginia.gov/for-providers/managed-care/ccc-plus/</a></p>
<p><b>PACE</b></p>	<p><a href="https://www.dmas.virginia.gov/for-providers/long-term-care/programs-and-initiatives/program-of-all-inclusive-care/">https://www.dmas.virginia.gov/for-providers/long-term-care/programs-and-initiatives/program-of-all-inclusive-care/</a></p>
<p><b>Magellan Behavioral Health</b> Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.</p>	<p><a href="http://www.MagellanHealth.com/Provider">www.MagellanHealth.com/Provider</a> For credentialing and behavioral health service information, visit: <a href="http://www.magellanofvirginia.com">www.magellanofvirginia.com</a>, email: <a href="mailto:VAProviderQuestions@MagellanHealth.com">VAProviderQuestions@MagellanHealth.com</a>, or Call: 1-800-424-4046</p>
<p><b>Provider HELPLINE for claims assistance only as of March 26, 2022</b> Monday–Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available.</p>	<p>1-804-786-6273 1-800-552-8627</p>
<p><b>Provider Enrollment and Management Help Desk</b> Monday–Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available.</p>	<p>1-804-270-5105 1-888-829-5373</p>
<p>Aetna Better Health of Virginia</p>	<p><a href="http://www.aetnabetterhealth.com/Virginia">www.aetnabetterhealth.com/Virginia</a> 1-800-279-1878</p>
<p>Anthem HealthKeepers Plus</p>	<p><a href="http://www.anthem.com/vamedicaid">www.anthem.com/vamedicaid</a> 1-800-901-0020</p>
<p>Molina Complete Care</p>	<p>1-800-424-4524 (CCC+) 1-800-424-4518 (M4)</p>
<p>Optima Family Care</p>	<p>1-800-881-2166 <a href="http://www.optimahealth.com/medicaid">www.optimahealth.com/medicaid</a></p>
<p>United Healthcare</p>	<p><a href="http://www.Uhccommunityplan.com/VA">www.Uhccommunityplan.com/VA</a> and <a href="http://www.myuhc.com/communityplan">www.myuhc.com/communityplan</a> 1-844-752-9434, TTY 711</p>
<p>Virginia Premier</p>	<p>1-800-727-7536 (TTY: 711), <a href="http://www.virginiapremier.com">www.virginiapremier.com</a></p>