

**Virginia Medicaid Web Portal
Provider Maintenance
Frequently Asked Questions
Revised 02/20/2015**

FAQ Contents

General Questions Page 1
Provider Maintenance Menu Page 3
Provider Profile Maintenance Page 3
Disclosure Information Page 4
Revalidation Submission Page 5
Revalidation Status Tracking Page 6

General Questions

How do I access the new Virginia Medicaid Web Portal?

The Virginia Medicaid Web Portal can be accessed through the following link:
www.viriniamedicaid.dmas.virginia.gov

Which user roles within an organization will have access to the Provider Profile Maintenance functionality?

Users with the role of Primary Account Holder, Organization Administrator or Authorized User – Provider will have access to this functionality.

Where can I find the Provider Maintenance functionality on the portal?

These are the steps you need to follow in order to access the Provider Profile Maintenance functionality on the portal.

- After successful login to the Portal, you will be directed to the secured provider welcome page.
- From the provider welcome page, click on the 'Profile Maintenance' tab to access the Provider Maintenance Menu functionality.

What provider communities can I change information for?

This is based on the organization your User ID is associated with, but the following communities are accommodated:

- Billing/Group Providers
- Servicing Providers within a Group

What happened to the Provider Profile Maintenance information that previously came up when clicking the Provider Profile Maintenance tab? The tab now takes me to a menu.

With the implementation of the Affordable Care Act, are now subject to revalidating information on record at least every five years. The new Provider Maintenance Menu lets you access the information you may need in order to stay in compliance.

The Provider Profile Maintenance screen is still there, it's under the first menu option.

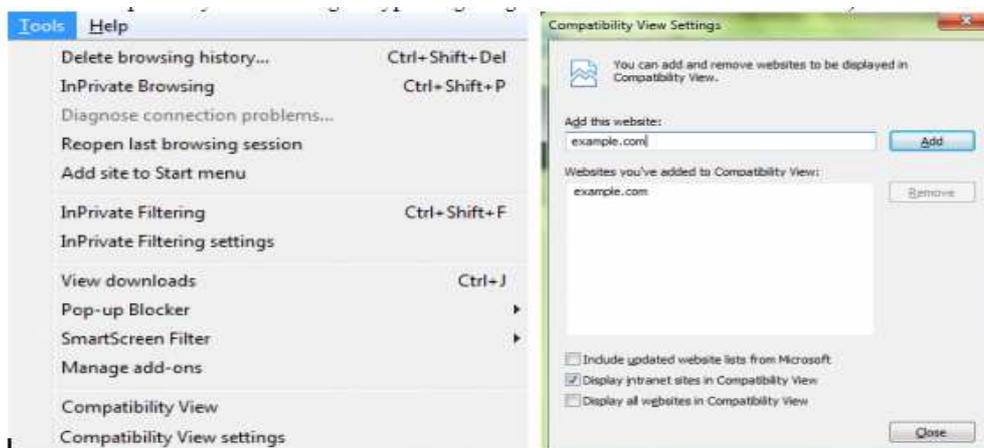
Where can I call to ask a question or address an issue?

Please contact the Virginia Medicaid Provider Enrollment Helpdesk toll-free at 888-829-5373.

My computer has Windows 7 operating system with IE9 and I am having trouble accessing the portal. Is there something I can do?

In order to use IE9 for the Web Portal the following settings are suggested:

- Security settings set to Medium-High
 - Open an IE9 browser session
 - Click Tools->Internet Options.
 - Click the Security Tab
 - Verify/change to Medium-High
- Verify Java is installed
 - Go to www.java.com
 - Press the option that says "Do I have Java?"
 - Once the page refreshes, if Java is installed, the Java version will be displayed.
 - If Java is not installed, press the free java download button.
- Add Virginia.gov to Compatibility View Settings
 - Open an IE9 browser session
 - Click Tools->Compatibility View settings.
 - Type 'virginia.gov' and click 'Add'.
 - Click 'Close'



If you have any questions, please contact the Virginia Medicaid helpdesk at 866-352-0496.

Provider Maintenance Menu

What does each of the menu options help me do?

The Provider Maintenance Menu contains the following four options:

- Provider Profile Maintenance
 - Allows you to review and/or update demographic information associated with addresses, phone numbers, contacts, etc.
- Disclosure Information
 - Allows you to review and/or update ownership and control information for disclosing entities
- Revalidation Submission
 - Allows you to submit or view you revalidation information, when due
- Revalidation Status Tracking
 - Gives you the ability to monitor the status of your revalidation from submission through final conclusion, during the revalidation period

Provider Profile Maintenance

What types of information can be updated within the Provider Profile Maintenance functionality?

For Billing or Group Providers the following information can be updated:

- Languages accommodated at that location
- Social Security Number (adds only - for individual providers who have not previously entered this information)
- Date of Birth (adds only - for individual providers who have not previously entered this information)
- Servicing Address information, with the exception of address, for some provider types. If your servicing address is not updatable and needs to be modified, please contact the Virginia Medicaid Provider Enrollment Helpdesk toll-free at 888-829-5373.
- Correspondence Address information
- Pay To Address information
- Remittance Advice Address information (if different from Pay To Address)

For Servicing Providers the following information can be updated (but only for the sites associated with the affiliated group provider):

- Languages accommodated at that location
- Social Security Number (adds only - for individual providers who have not previously entered this information)
- Date of Birth (adds only - for individual providers who have not previously entered this information)
- Servicing Address information, with the exception of address, for some provider types. If your servicing address is not updatable and needs to be modified, please contact the Virginia Medicaid Provider Enrollment Helpdesk toll-free at 888-829-5373.

- There is also a mechanism for group providers to remove a servicing provider who is no longer part of the group at that servicing site

Can I update this information for any of my sites?

For Billing or Group Providers this information can be updated for any active site.
For Servicing Providers this information can only be updated for active sites where services are performed for the affiliated group provider.

If I have multiple sites and change information will it be changed for all sites?

Yes. The following rules apply:

- Any Servicing Address information change will only be reflected on the site in which it was entered
- Any Correspondence Address information change will be reflected on all active sites
- Any Pay To Address information change will be reflected on all active sites
- Any Remittance Advice Address information change will be reflected on all active sites

If I have not enrolled in EFT previously or need to update my financial information, can I do it through Provider Maintenance?

Yes. Go to the Electronic Funds Transfer (EFT) section and complete or update the appropriate information.

If I have not requested ERA previously or need to update my service center information, can I do it through Provider Maintenance?

Yes. Go to the Electronic Remittance Advice (ERA) section and complete or update the appropriate information.

Disclosure Information

What constitutes a Disclosing Entity?

Any provider entity that has managing employees and/or individual(s) or organization(s) with ownership or controlling interests of 5% or more need to be noted.

Disclosing entities are any individual or organization that is an owner, has a controlling interest, is a managing employee, subcontractor, etc. with a vested interest in the provider's business.

Our provider organization doesn't have managing employees with ownership or controlling interest but we do operate under a Board of Directors. Do I need to disclose that?

On question one in the disclosure section, if you respond 'no' regarding any managing employees with ownership or controlling interest, a second question will display with regards to a Board of

Directors. If you answer 'yes' to that question, an 'Attach' button display and you will be required to submit a list of the Board of Directors.

Do I have to disclose criminal offenses? If so, what types?

You need to identify any individual or organization who has any ownership or controlling interest in the provider entity that has been convicted or assessed fines or penalties for any health related crimes or misconduct or has been excluded from any Federal or State health care program due to fraud, obstruction of any investigation, a controlled substance violation or any other crime or misconduct.

When I entered information on questions 5, 6 or 7, an 'Attach' button displays. What am I supposed to submit?

For answers to questions involving legal actions, you will be required to supply the name(s) of the people involved and then attach a copy of the final disposition associated with that person.

Note: For questions 5 & 6, you will need to add at least one attachment for each row entered, though multiple attachments can be included for a row. For question 7, only one attachment is allowed for the final disposition.

I submitted disclosure information. After pulling it back up it doesn't appear to have been updated. Did I do something incorrectly?

Information entered for disclosure needs to be screened against federal databases. Updates will not be made until the data has been processed and approved.

Revalidation Submission

Do I have to revalidate my data?

Yes, at every five year interval the Affordable Care Act now requires review and confirmation of data entered.

Every revalidation cycle you will be required to respond to each disclosure question with a yes/no response. For a 'yes' response data will need to be provided. If data already is present, please verify for accuracy. For a 'no' response no data should be provided. If data is already present, confirmation to remove the data will be requested.

Can I revalidate my data at any time?

No, you only need to revalidate your data every five years. The resubmission options will only be available 90 days prior to your revalidation date. Outside of the 90 days prior to your revalidation, you will receive a message letting you know when your revalidation is due so you can return in advance of that date.

Please note though that you can update demographic information at any time utilizing the 'Provider Profile Maintenance' functionality. If you have demographic and/or disclosure

information that needs to be updated, that can be done at any time using the 'Disclosure Information' option.

I've heard some providers need to be screened and/or pay a revalidation fee. How do I know if I need to?

As part of the Revalidation Submission we check to see if you are subject to either a screening and/or a revalidation fee. Based on that, the appropriate screening and revalidation fee question(s) may or may not display.

If the revalidation fee question does not appear on your revalidation screen then you are not subject to pay an application fee.

If I don't need to be screened or pay a fee, do I still need to complete the revalidation submission?

Yes, revalidation is also the process to ensure the accuracy of all data associated with disclosing entities, demographics, etc.

Every revalidation cycle you will be required to respond to each disclosure question with a yes/no response. For a 'yes' response data will need to be provided. If data already is present, please verify for accuracy. For a 'no' response no data should be provided. If data is already present, confirmation to remove the data will be requested.

I've recently been screened by another Medicaid agency (or Medicare). Do I need to be screened again?

No, as part of the revalidation process, if you're liable for a screening, you will have the opportunity to note where and when you were screened.

I've recently paid a revalidation fee to another Medicaid agency (or Medicare). Do I need to pay again?

No, as part of the revalidation process, if you're liable for a revalidation fee, you will have the opportunity to note when and to whom you made this payment.

You will see an 'Attach' button when you indicate a previous payment and will be required to submit proof of this payment.

Revalidation Status

How can I tell where my revalidation is in the review and approval process?

The revalidation tracking information available to providers includes the "status" of the revalidation (e.g., In Review, Submitted, Rejected, Approved, etc...) as well as a "percent complete" value that is based upon the progression of the revalidation through the Provider Enrollment revalidation approval process.

My revalidation period has expired but I still have my revalidation in a 'Not Submitted' status on the Revalidation Status screen. Can I still submit it?

The Revalidation Status Tracking screen is available to the user at all times. Please note that any revalidation that was previously save in a 'Not Submitted' status or one that was previously rejected and not resubmitted revalidations cannot be submitted after the revalidation period has expired.

What are the various status that I might see in the Revalidation Status portal?

The following is a chart of the various Status and % Complete that could be encountered during the revalidation process.

Portal Status	% Value
Submitted	0%
Awaiting Payment	0%
Awaiting Payment – Prior Payment Not Processed	0%
Awaiting Hardship Exception Response	0%
Sent for Verification	20%
Rejected - Hardship Exception Denied	0%
Rejected - Pending Hardship Appeal Approval	0%
In Review	50%
In Review	50%
In Review	70%
Awaiting Approval	75%
Awaiting Screening Completion	5%
Awaiting Criminal Background Check Results	75%
In Review	75%
Approved	100%
Rejected	100%
Denied	100%
Revalidation Invalid	100%
Application Invalid	100%

My revalidation is listed in 'Rejected' status and a 'Resubmit' link is appearing. What is this for?

When the revalidation status is 'Rejected', the system displays the 'Resubmit' link in the action column of the status portlet. Clicking this link will allow a provider to make a 'copy' the rejected revalidation under a new Revalidation Tracking Number. Once the 'Resubmit' link is clicked, the copied revalidation (containing information as it was previously submitted) will display. The user can make the appropriate updates and submit again.

'Not Submitted' status revalidation rows display a 'Recall' button. When the provider clicks on the 'Recall' button it will pull up previously saved (or copied) information from the portal database and display it in the revalidation screen. Users can continue their revalidation from where they left off and then submit.

