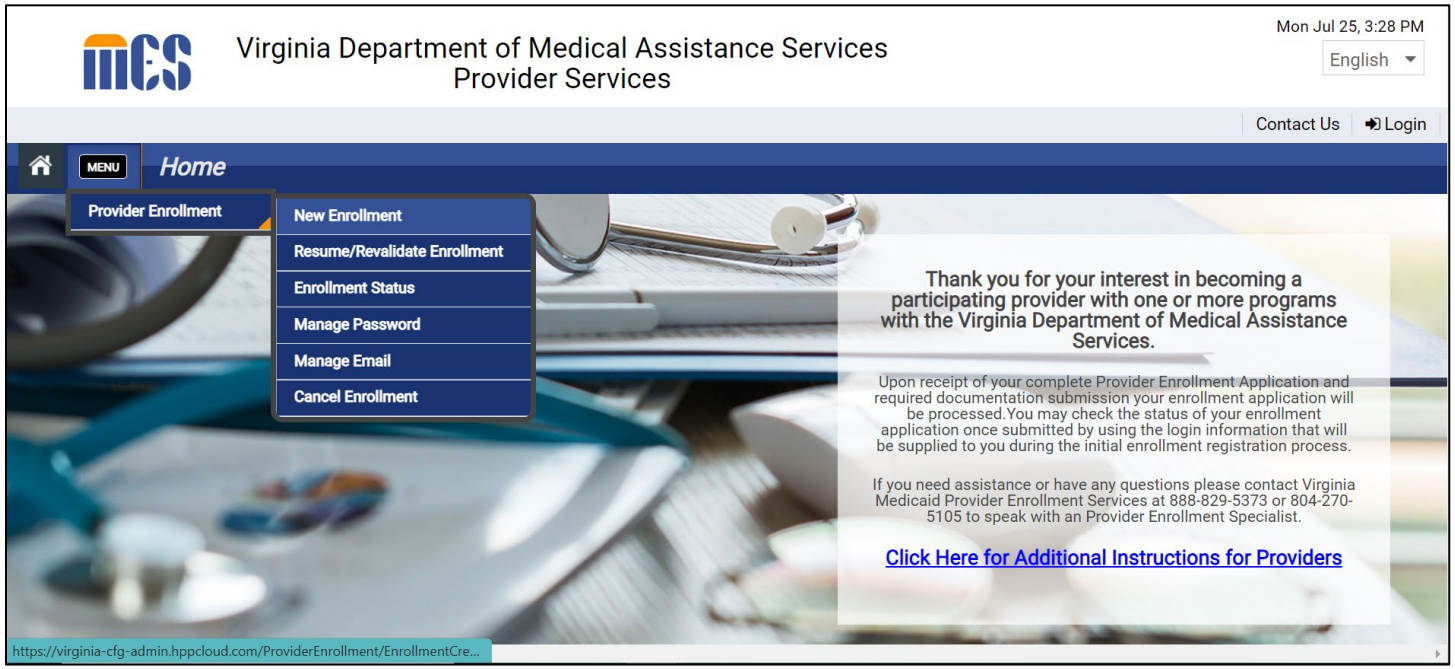
Instructions for Enrolling as an Ordering, Referring or Prescribing (ORP) Provider for School-Based Services*

→ **Go to** https://virginia.hppcloud.com/

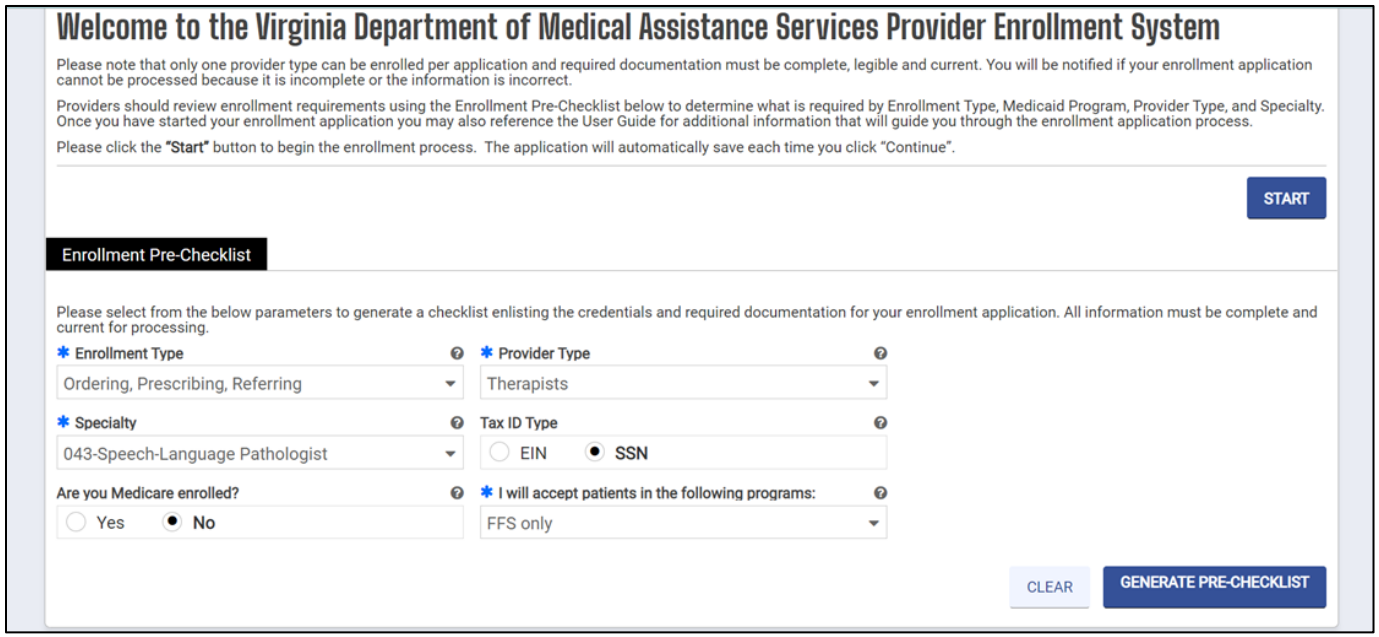


→ **Choose "Menu" > "Provider Enrollment" > "New Enrollment"**

***Note**: These instructions are **applicable for the following provider types** enrolling only for referring for school-based services:

Clinical Psychologists
Clinical Social Workers
Marriage and Family Therapists
Nurse Practitioners
Occupational Therapists
Physical Therapists
Professional Counselors
School Psychologists
Speech-Language Pathologists
School Social Workers (pending federal approval and systems changes)
School Counselors (pending federal approval and systems changes)
Behavior Analysts
Substance Abuse Treatment Practitioners

Pre-Enrollment Checklist



→ **Choose the Enrollment type: "Ordering", "Prescribing", "Referring"**

→ **Choose the Provider Type: "Behavioral Health Practitioner"** (for psychologists, social workers, counselors, applied behavior analysts and other behavioral health professionals licensed by the Virginia Department of Health Professions VDHP) or choose "Therapist" (for rehab specialty providers including speech, physical and occupational therapists – also licensed by VDHP)

*Note: School counselors, school social workers and school psychologists licensed by VDOE **may not** enroll at this time pending federal approval and needed systems changes.*

→ **Choose the Specialty Type:** From the drop-down menu, choose the option that most closely matches your license type. (Note: School social workers, choose "Social Worker".

→ **Choose Tax ID Type: "SSN"**

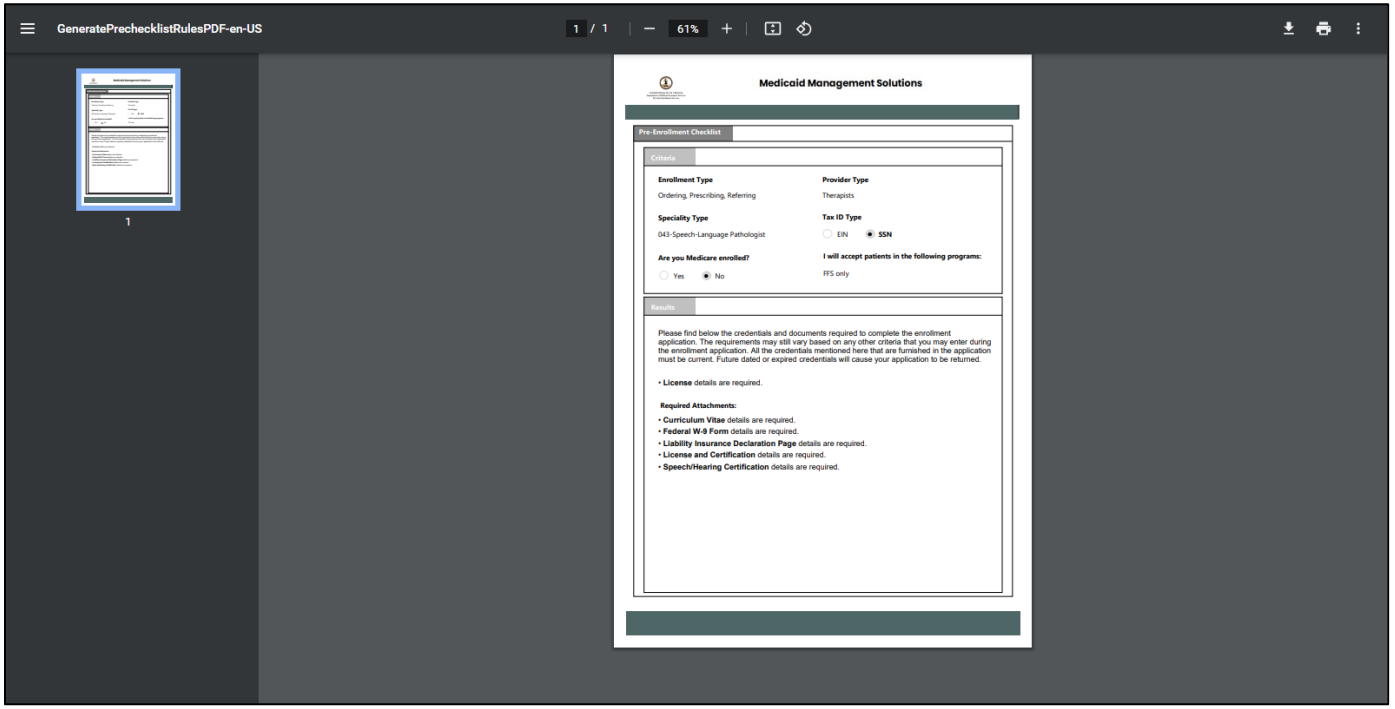
→ **Answer: "Are you Medicare-enrolled?** Choose "**No**"

→ **I will accept patients in the following programs:** Choose "**FFS only**"

→ **Click on "Generate Pre-Checklist"**

Pre-Enrollment Checklist

A separate window will open. You will see a list of required attachments. Ensure that you have all of the attachments available/on-hand prior to proceeding with the application. The types of attachments required will vary based on the provider type.



NOTE: Those enrolling as ordering, referring or prescribing (ORP) providers only (professionals that do not intended to bill Medicaid) are **not** required to submit the following documents:

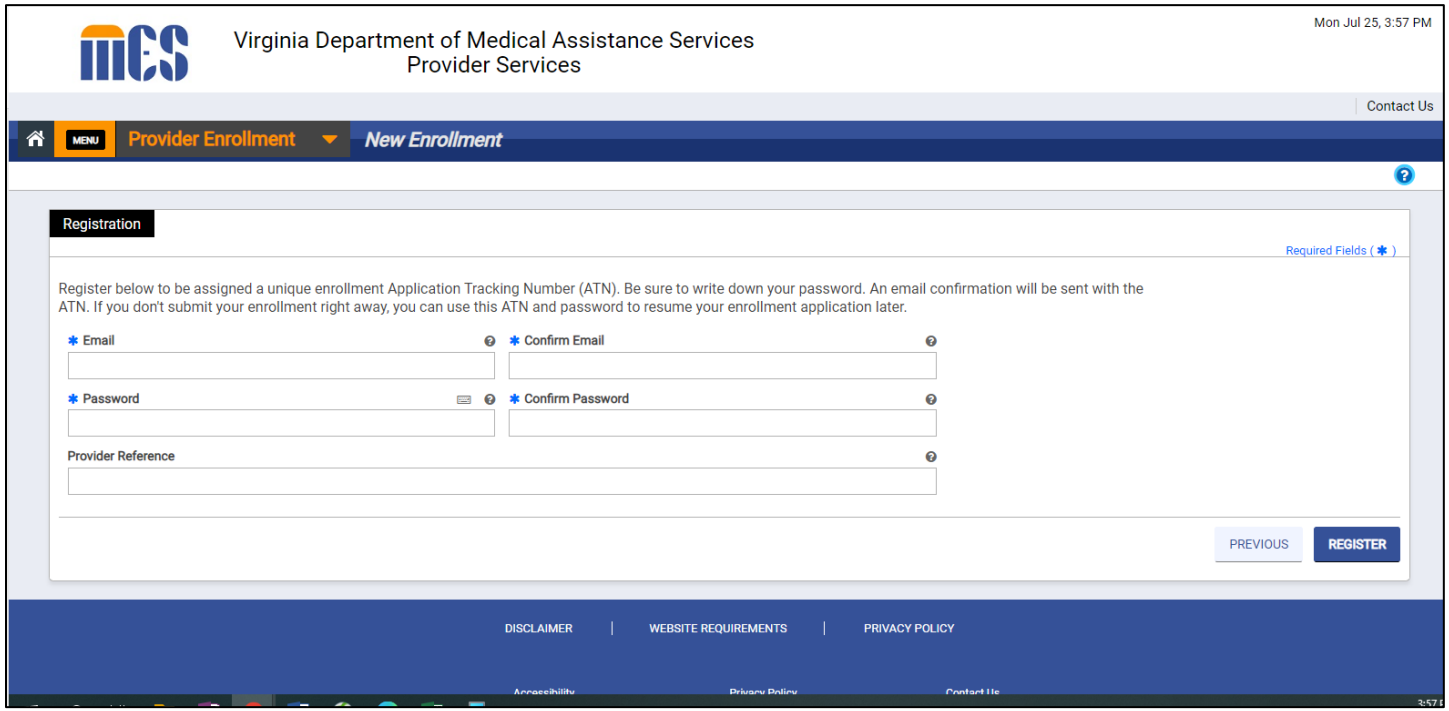
Liability Insurance Declaration Page
Federal W-9 Form
Curriculum Vitae
Medical Board Certification

Reference page 23 and 27 for additional instructions on this topic.

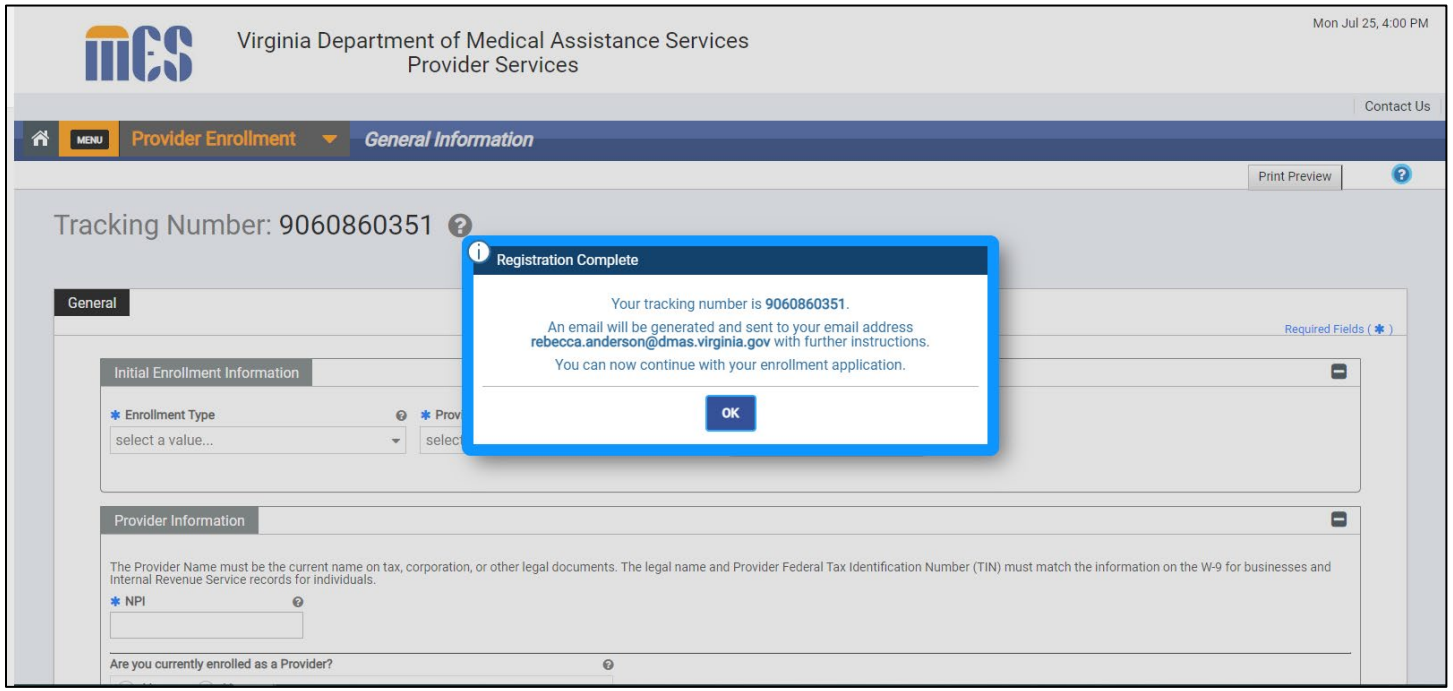
→ When you have compiled electronic (scanned) versions of the required documents, click on "**Start**".

Enrollment System Registration

→ You must register with the on-line enrollment system. You will insert your email and create a password. With this access, you will be able to Save and return later to complete your application. You will also be able to check the status of your application once submitted.

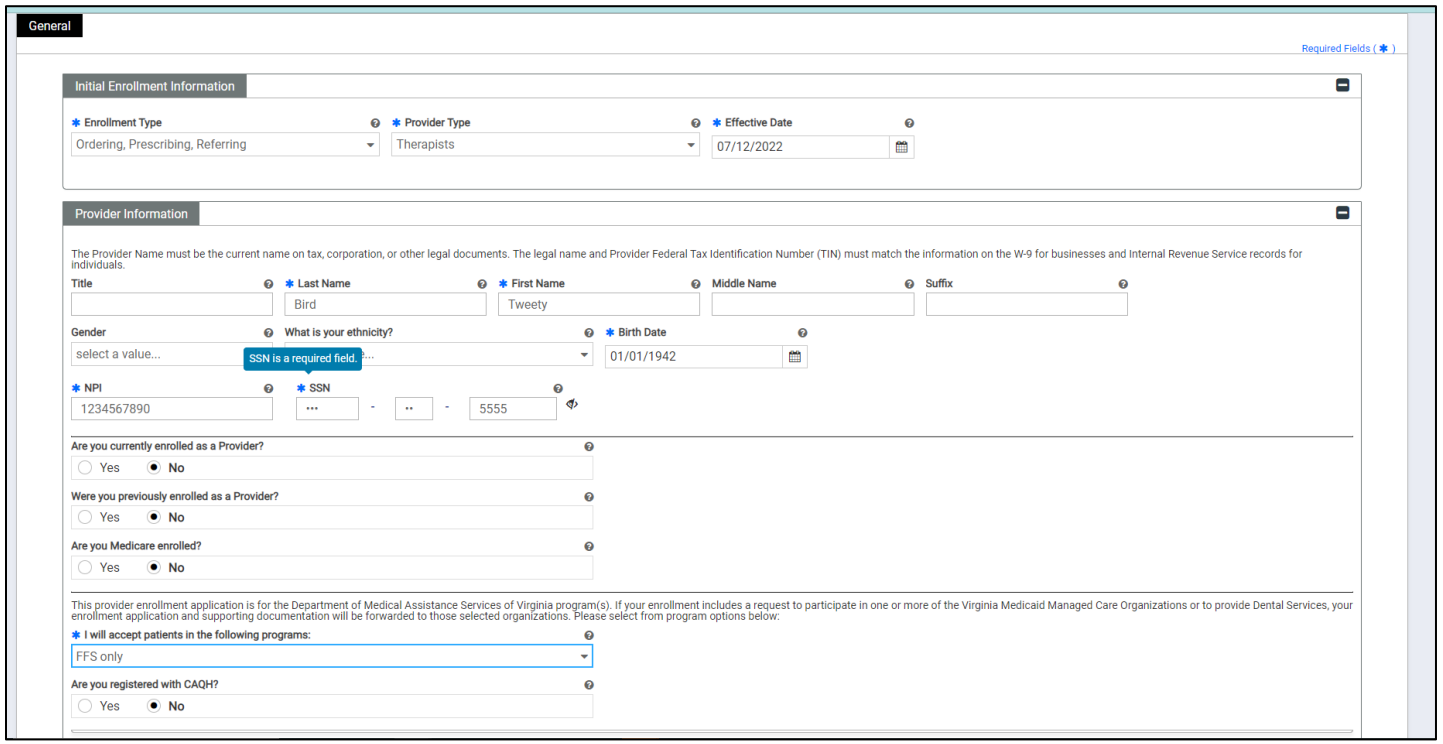


→ Make note of your tracking number.



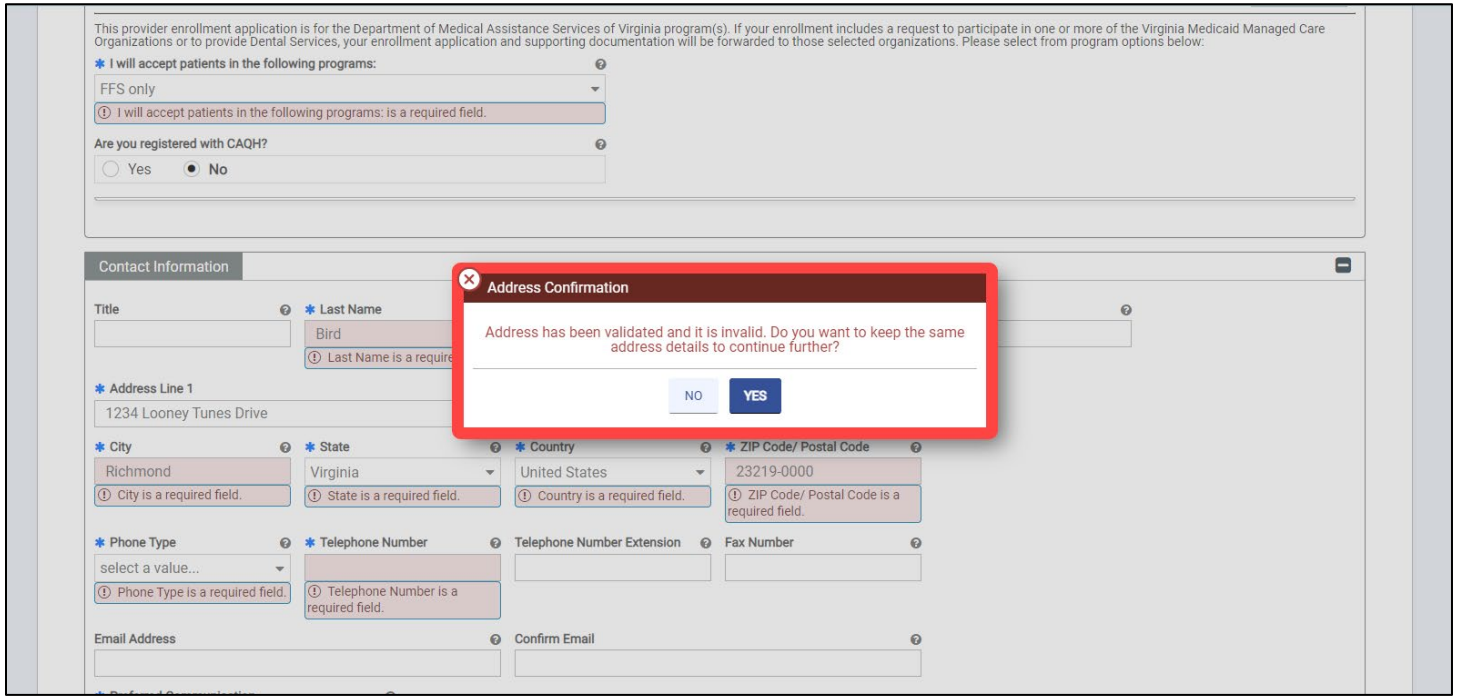
Initial Enrollment Information and Provider Information

- → **Choose Enrollment type:** "Ordering, Prescribing, Referring"
- → **Choose Provider Type:** "Behavioral Health Practitioner" or "Therapist" (for rehab specialty providers including speech, physical and occupational therapists)
- → **Enter the Effective Date:** This is the first date for which services associated with your National Provider Identifier (NPI) as the referring provider may be billed by your school division(s). ***This date can be retroactive within the most recent 365-day period or a date that is no longer than 90 days in the future.*** You must be licensed and otherwise eligible to enroll with DMAS on the effective date used.
- → **Choose Program Selection:** I will accept patients in the following programs: Choose "FFS Only"
- → Fill out the remaining page of the form. Items with a **blue* are required**.



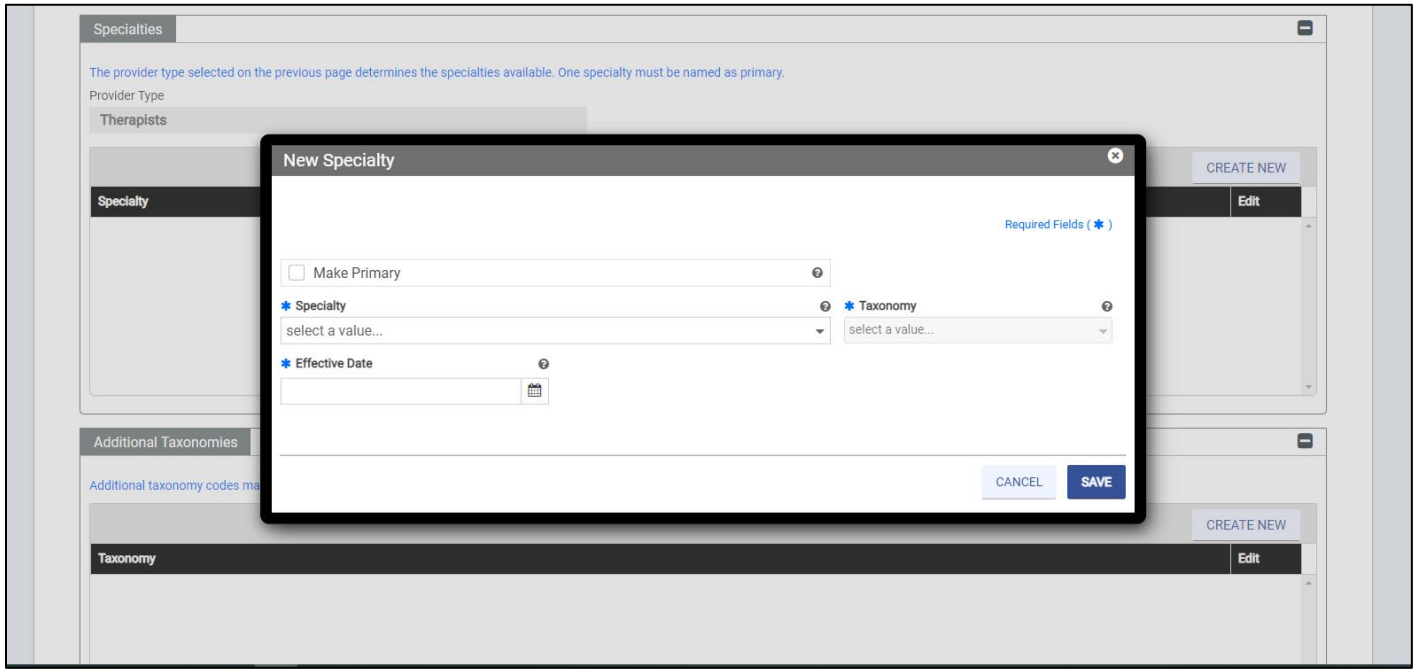
Initial Enrollment Information and Provider Information (cont'd)

Note: **Address confirmation** may indicate "**invalid**". Double-check the address, and if the address information is correct, choose "**Yes**".



New Specialties

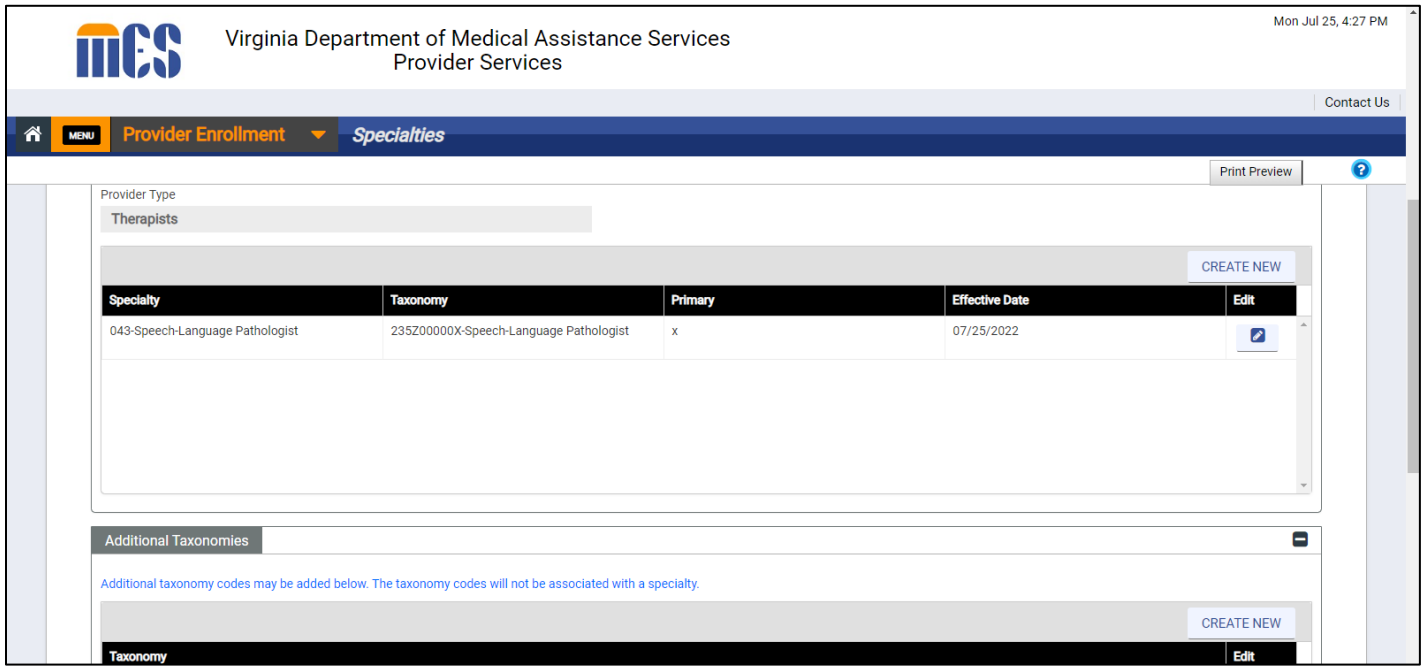
- → **Choose "Create New"**
- → **Choose Specialty Type:** From the drop-down menu, choose the option that most closely matches your license type
  - Be sure to check box marked "**Make Primary**"
- → **Enter Taxonomy:** This taxonomy code should match the specialty you chose.
- → **Enter Effective Date:** Enter **the effective date of your current applicable professional license**.



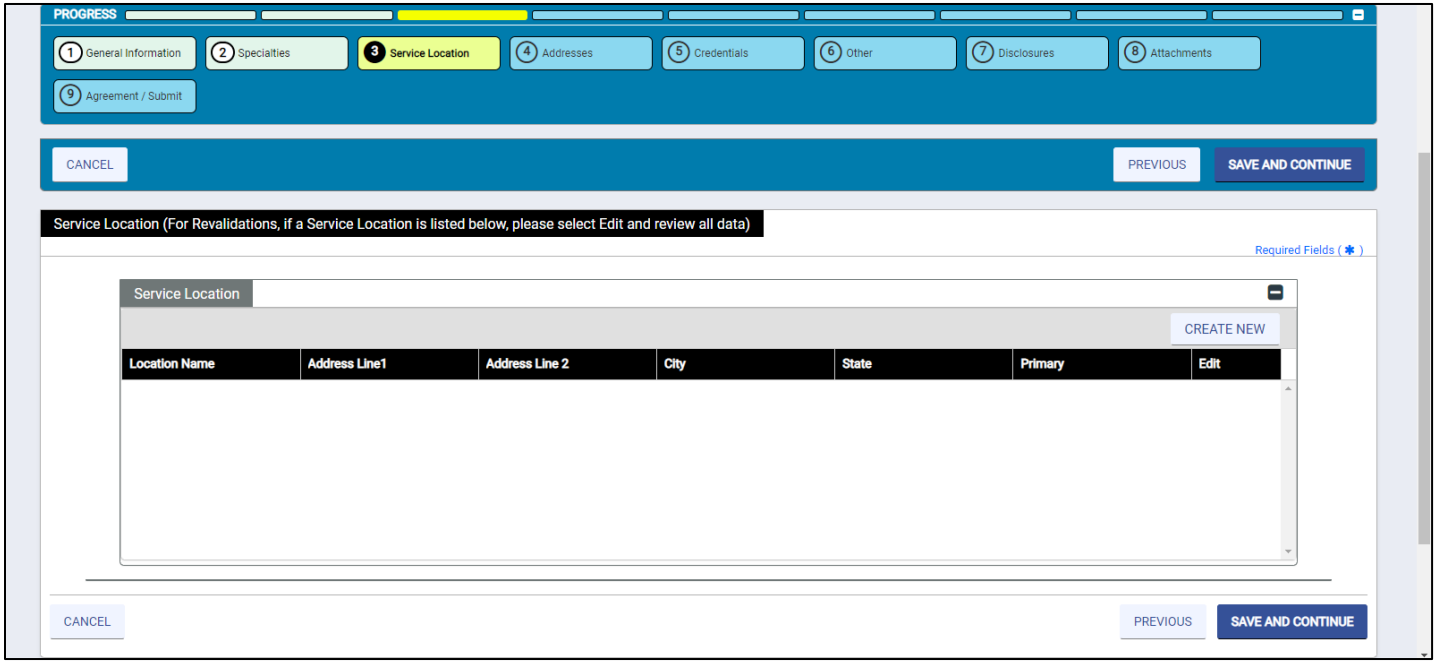
→ **Enter additional taxonomies, if applicable.**

This system requires a "primary" specialty/taxonomy. You may enter additional taxonomies, if applicable.

Note: Additional taxonomies are not required**.** In most cases this will not be applicable.



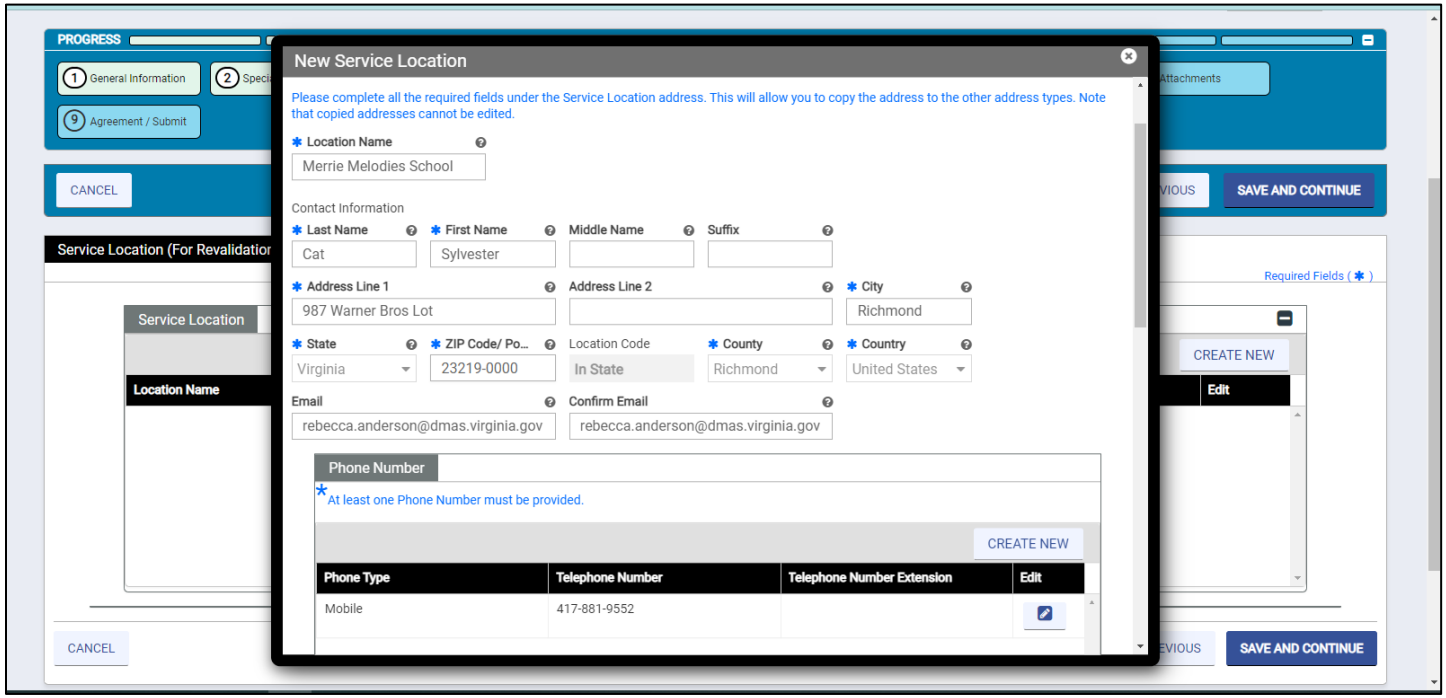
Service Location



→ **Choose "Create New".** Your service location will be the main business address for your school division, regardless of the specific school buildings where you may provide services to students.

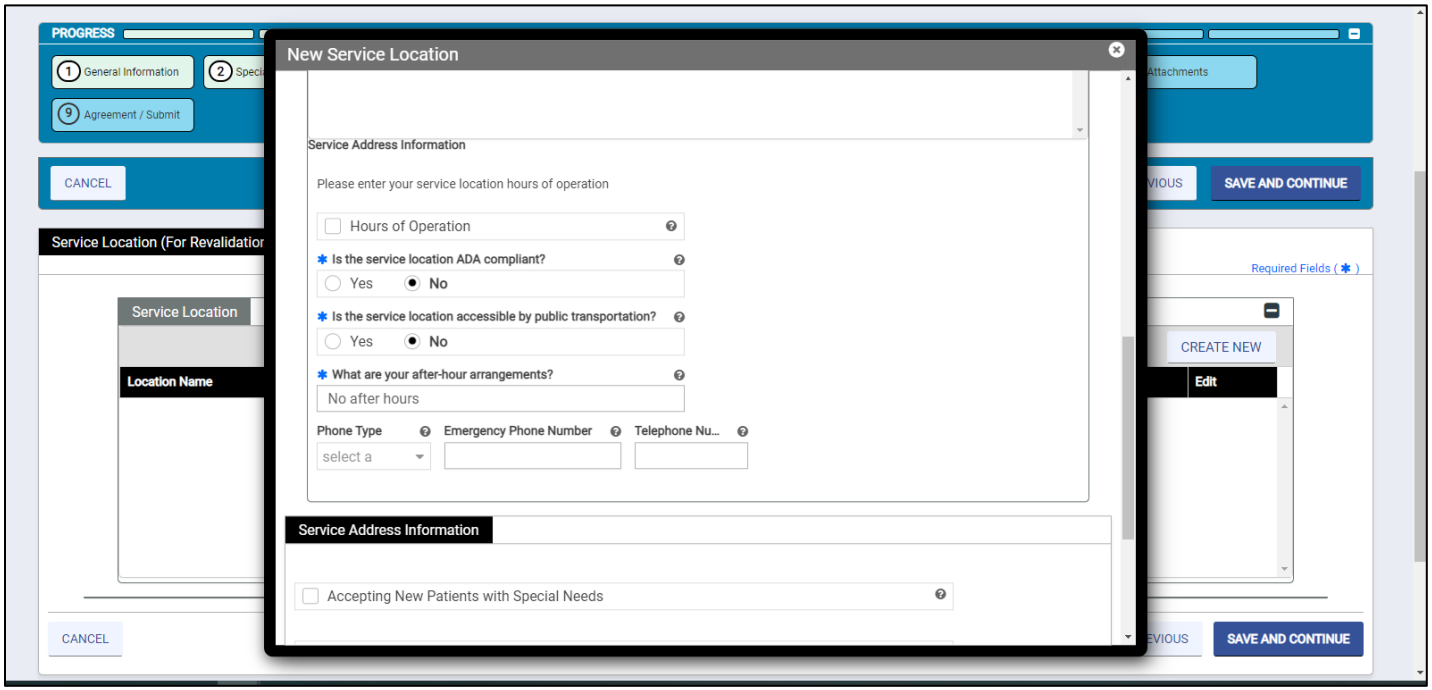
- You are able to enter multiple locations, for example, if you work for more than one school division.

Note: Be sure to click the "**Make Primary**" box to advance to the next screen <u>even if you only have one service location</u>.



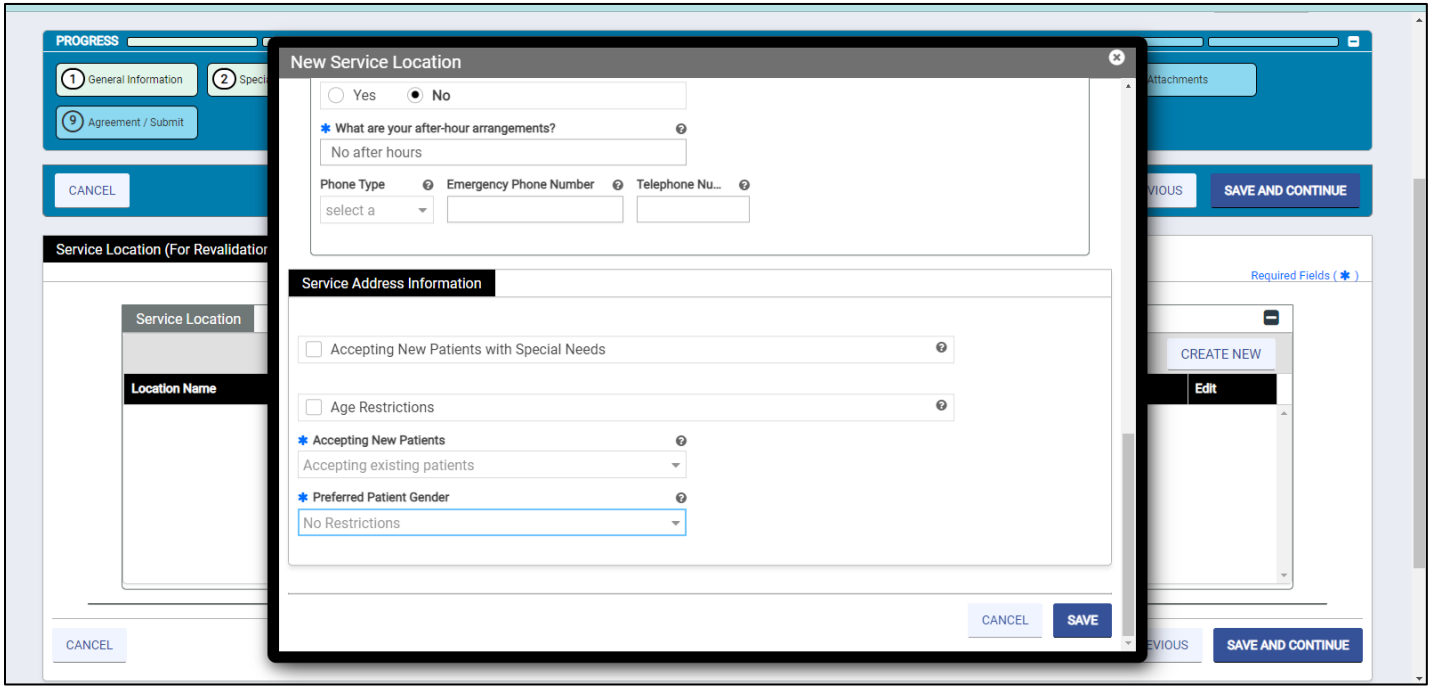
Service Location (Cont'd)

Some of these prompts may not be applicable. Enter "no" if "not applicable". (It is acceptable to indicate "no".)
For example, it is acceptable to indicate "No after-hours". Note that the emergency phone number is not required.



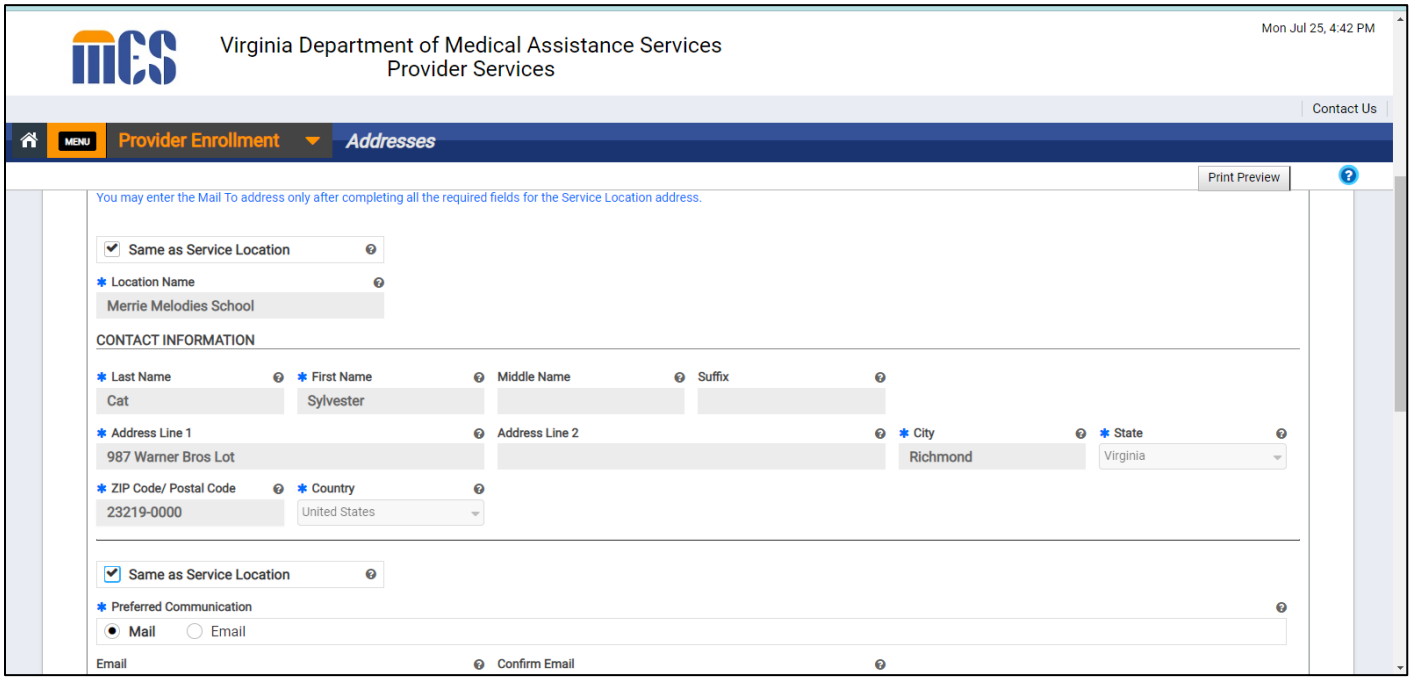
Service Location (Cont'd)

What you enter for these prompts under "**Service Address Information**" **will not** affect your application.



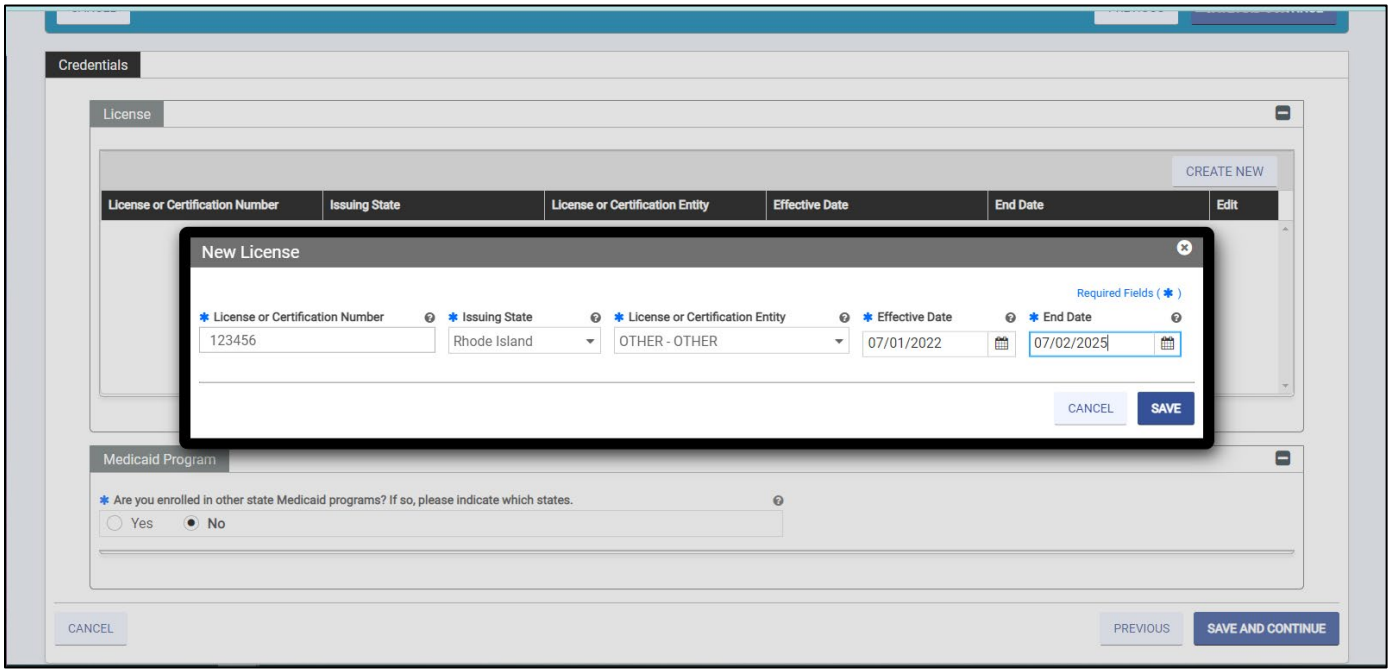
Mailing address

- Where do you want information related to your enrollment sent?
    - This **may or may not** be the same as your service location.
- Indicate your preferred method of contact – land mail **or** email.

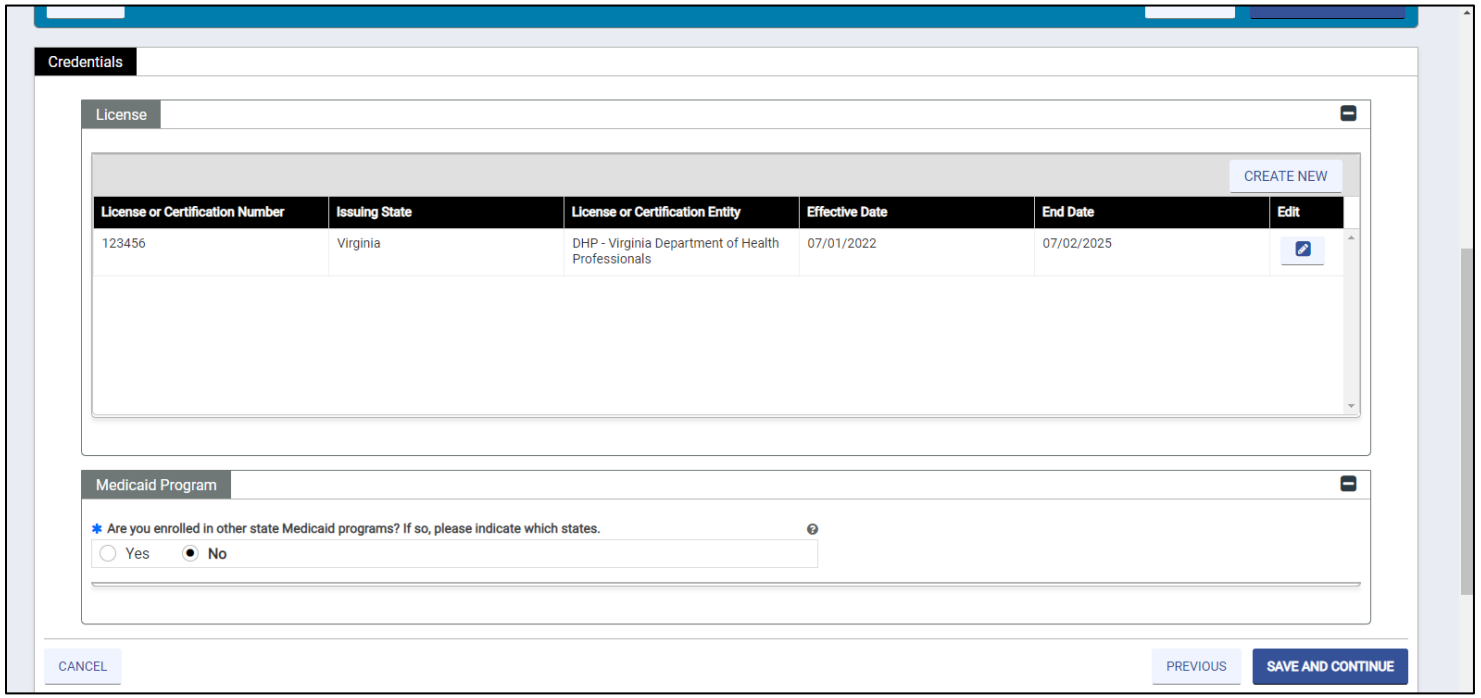


License Information

→ A Virginia license **must** be entered.

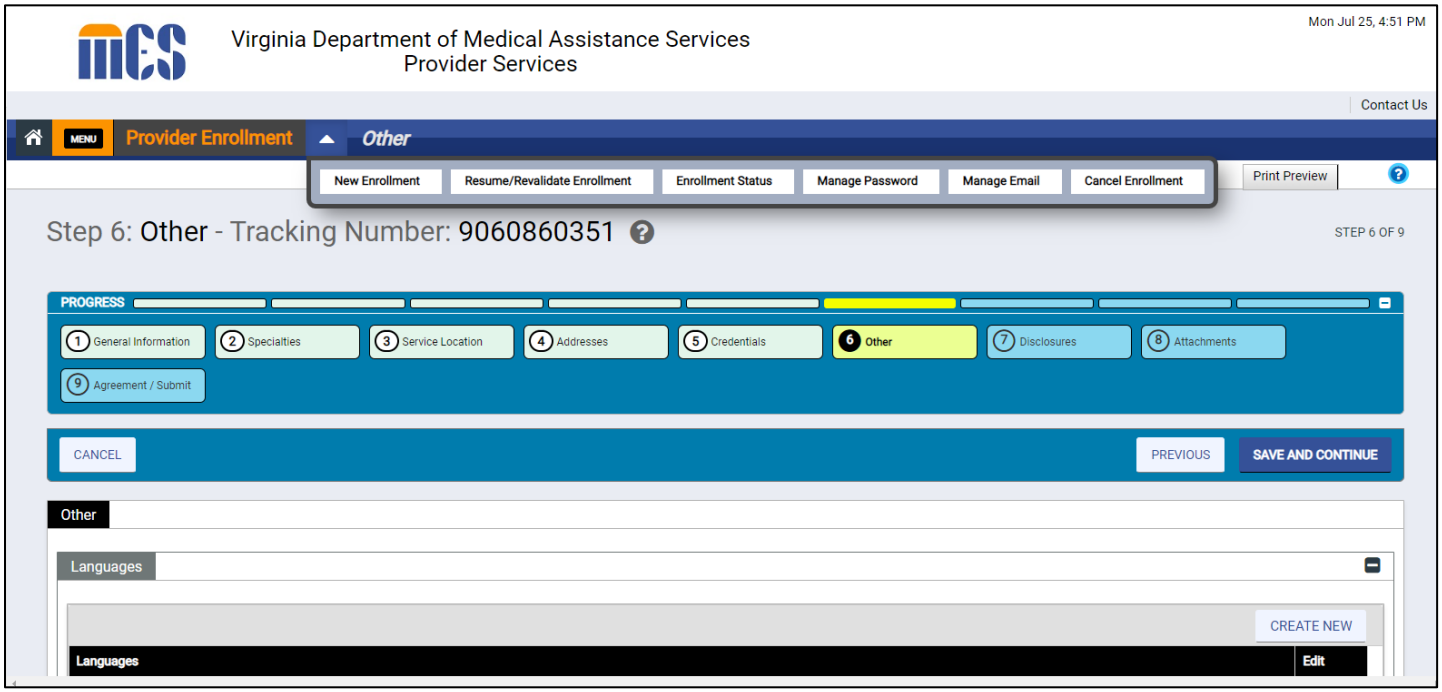


→ Indicate if you are enrolled in any other state Medicaid programs. (**The licensing state must be the same as the service location state.**)



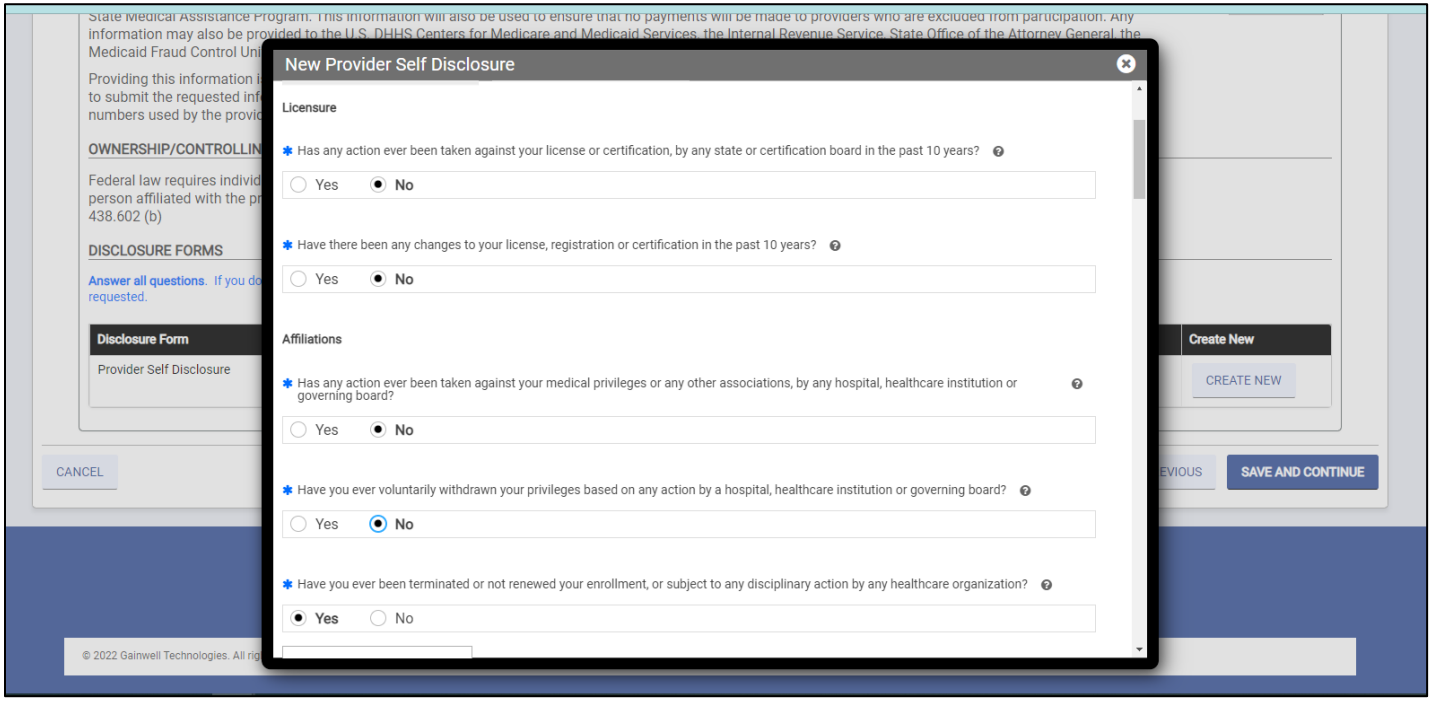
Other Information

- You **may** enter other optional information including a provider website, medical facility ownership information, as applicable.
- This information **is not required**.



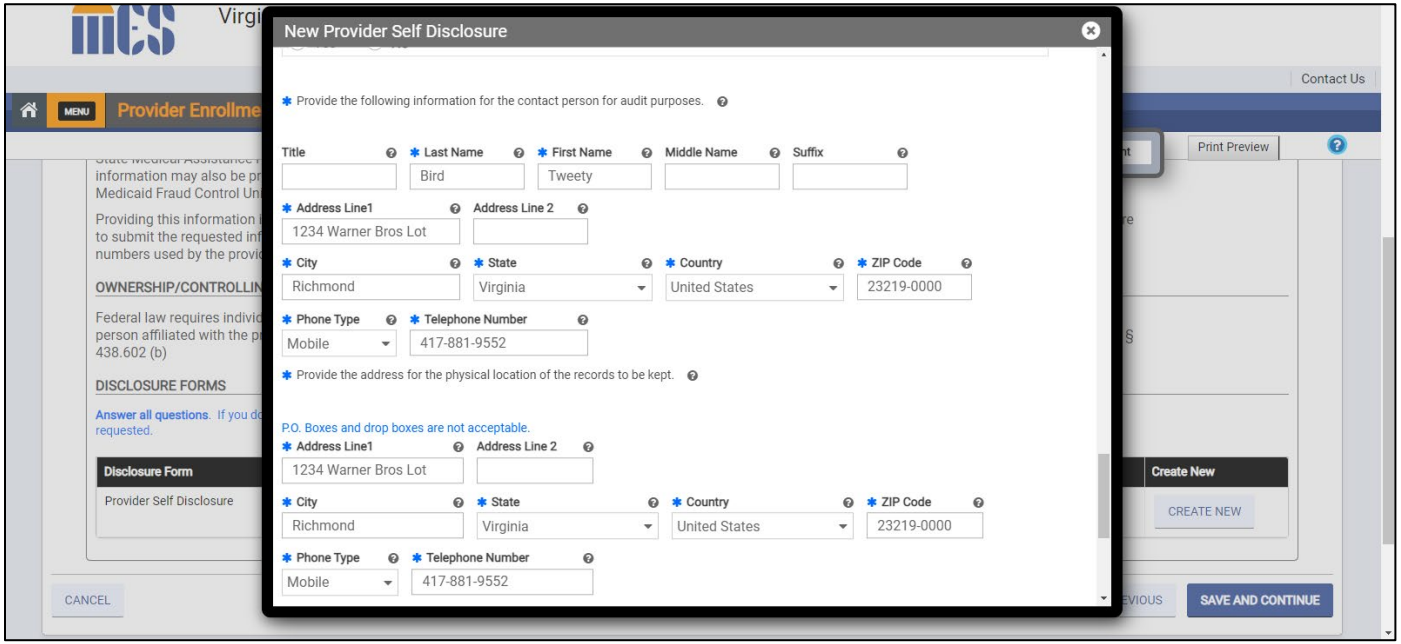
Disclosures

You **will disclose** any issues with your licensure or education, any disciplinary actions taken against you, etc. If a topic is not applicable, indicate "**no**".

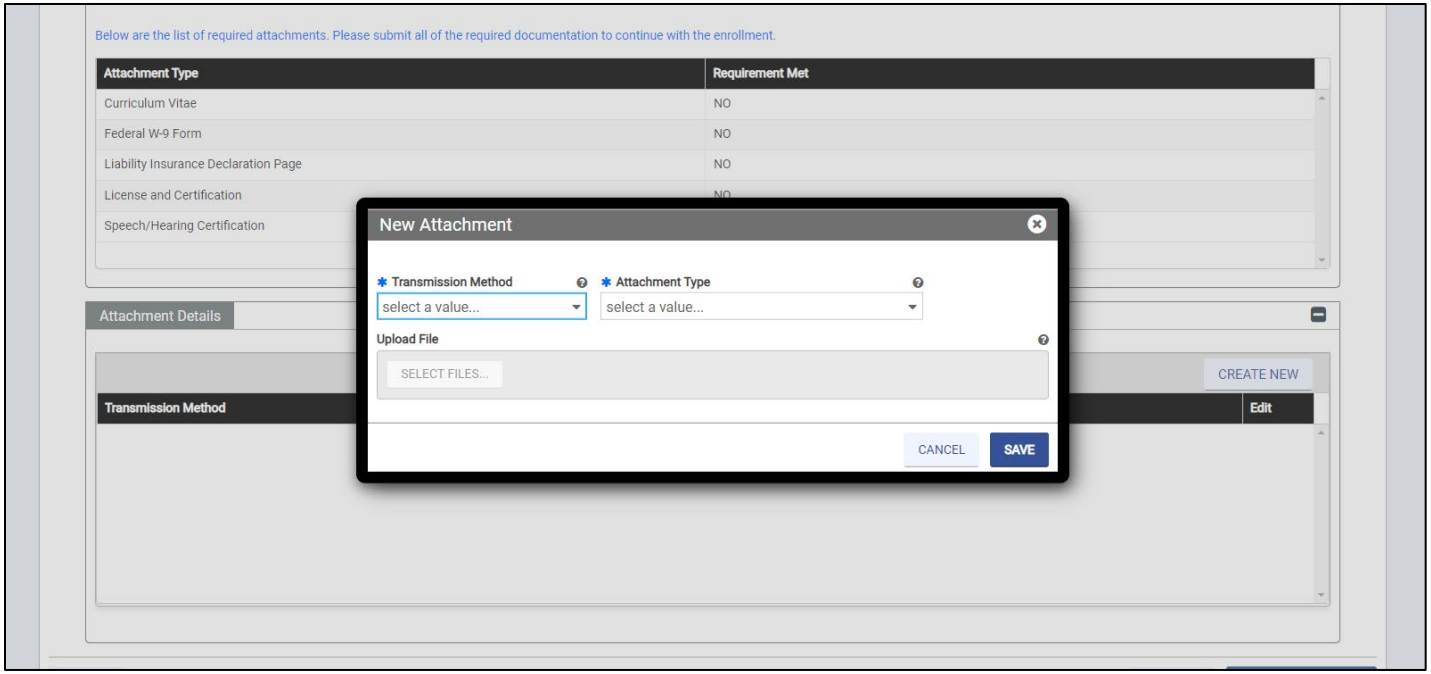


Contact for audit purposes

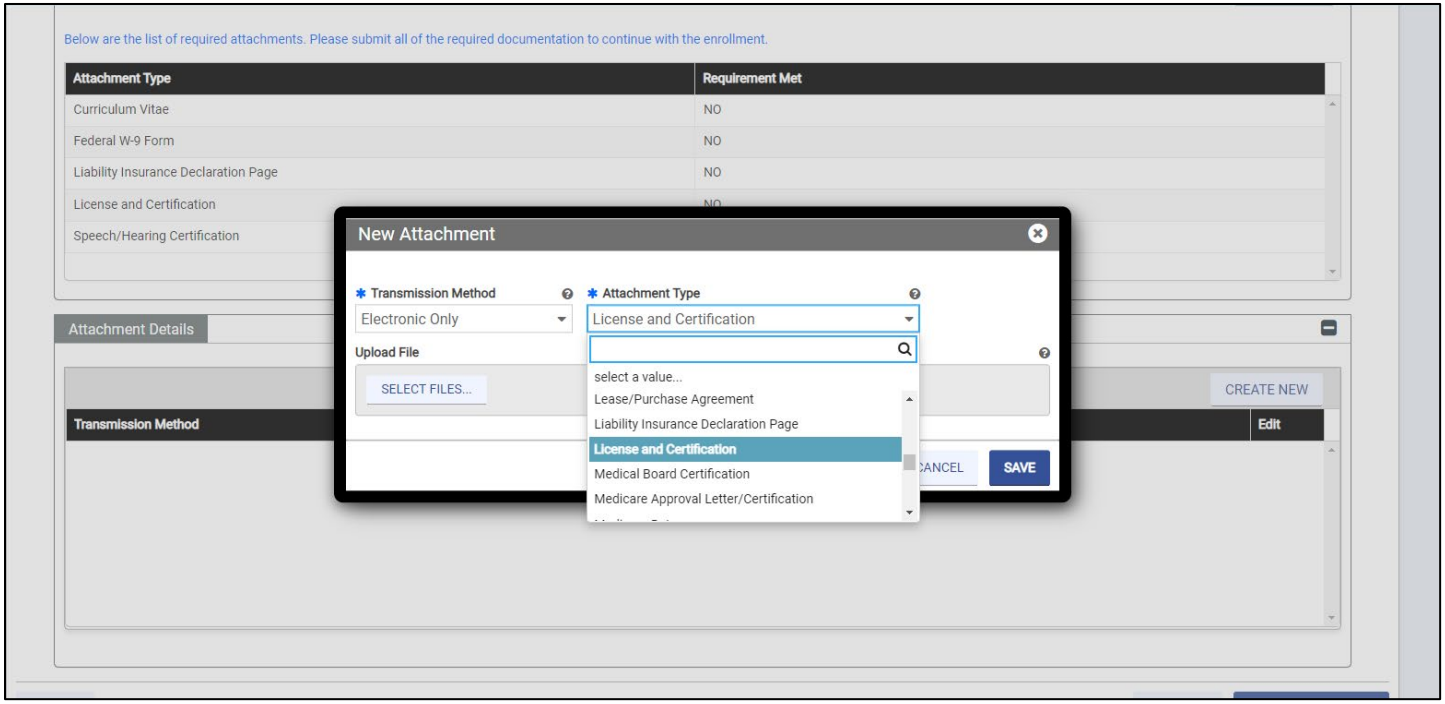
Enter the physical address of where student service records are maintained. Provide a key contact for purposes of accessing student service records for audit purposes. Check with your Medicaid Coordinator if you are unsure.



Submitting Required Attachments



Attach an Electric Copy of Your License and/or Certification



Attachments NOT Required for ORP Providers

When prompted to upload the forms listed below, you may instead upload a document simply stating that you are enrolling as an ORP provider and these forms are not required. You may use the same document (see sample on the next page), but the document must be uploaded in place of each of the documents listed as required on your Pre-Enrollment Checklist (see page 3).

Liability Insurance Declaration Page

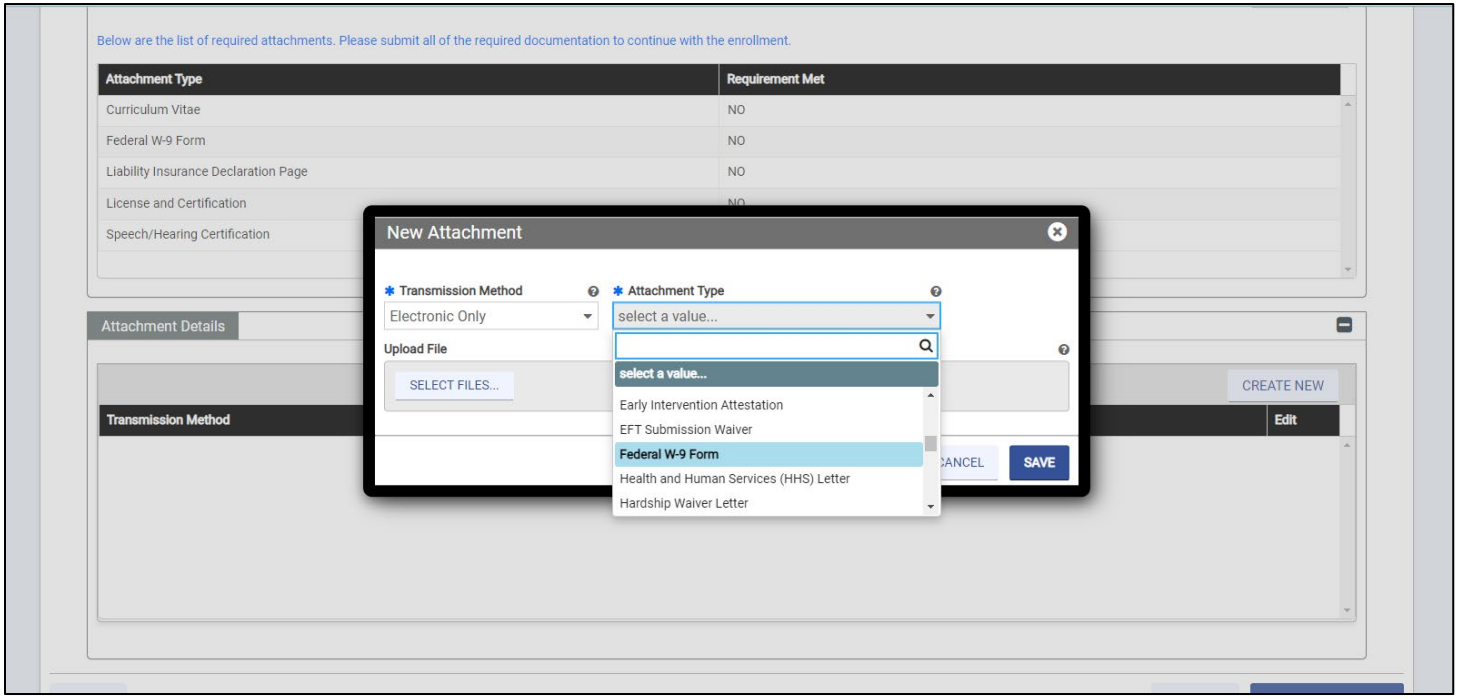
Federal W-9 Form (please state on the document that you are enrolling using your social security number)

Curriculum Vitae

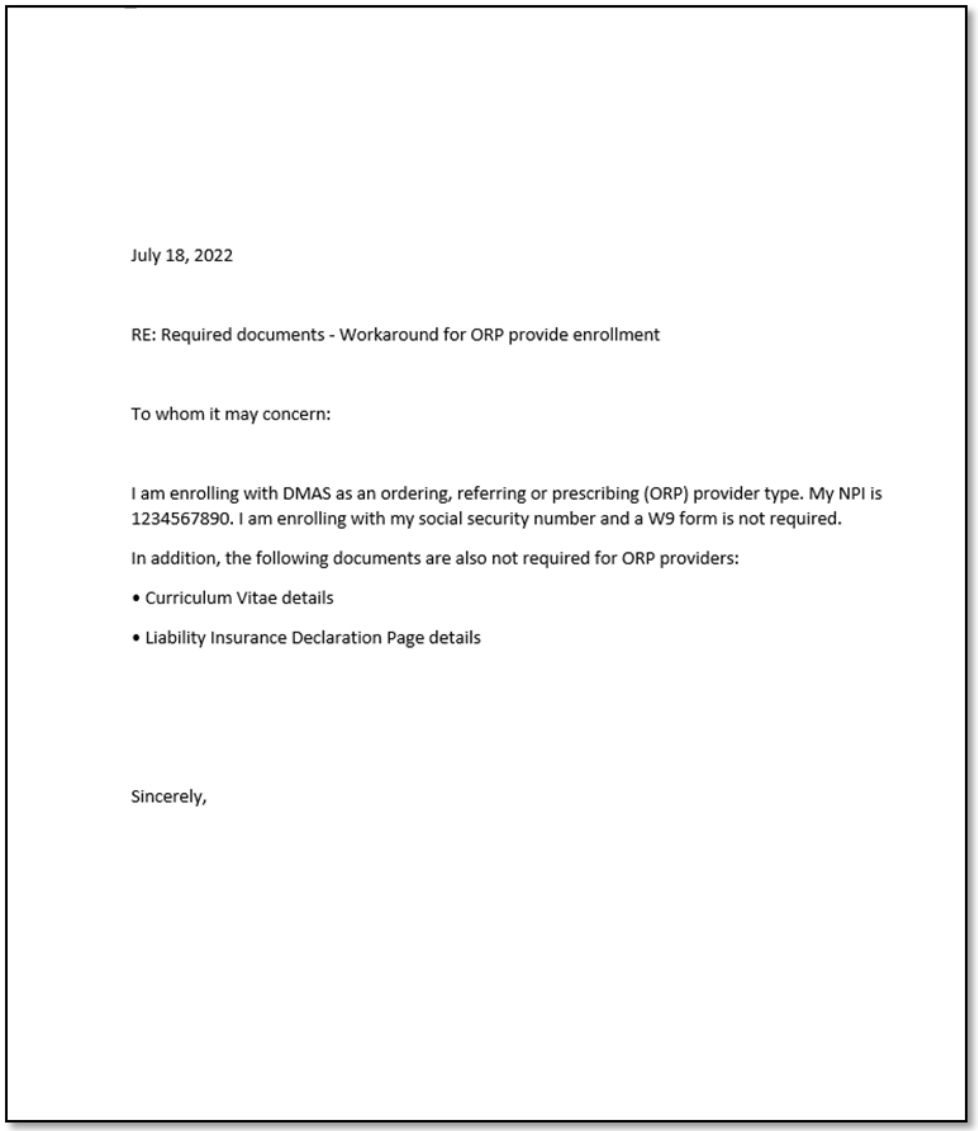
Medical Board Certification

DEA License

Certification (SLP certification is NOT required for DMAS ORP enrollment)



Sample:



July 18, 2022

RE: Required documents - Workaround for ORP provide enrollment

To whom it may concern:

I am enrolling with DMAS as an ordering, referring or prescribing (ORP) provider type. My NPI is 1234567890. I am enrolling with my social security number and a W9 form is not required.

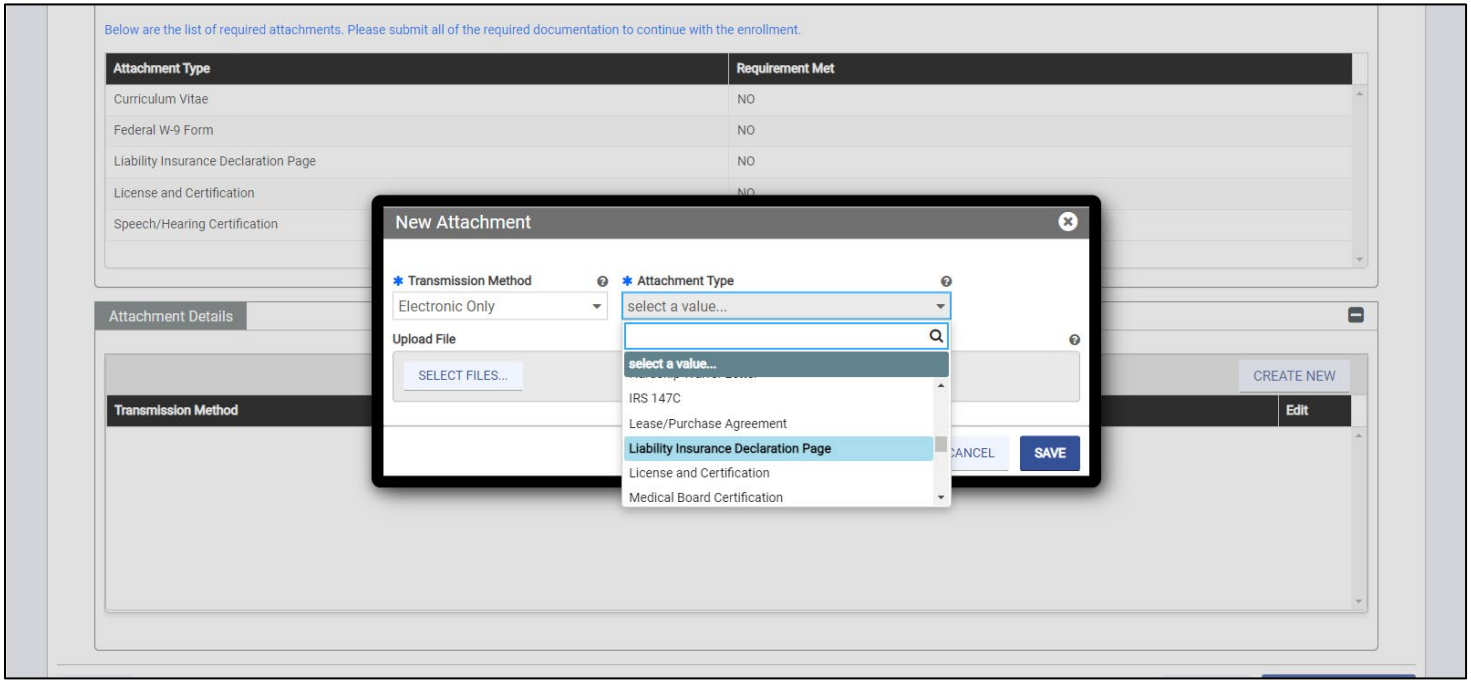
In addition, the following documents are also not required for ORP providers:

- Curriculum Vitae details
- Liability Insurance Declaration Page details

Sincerely,

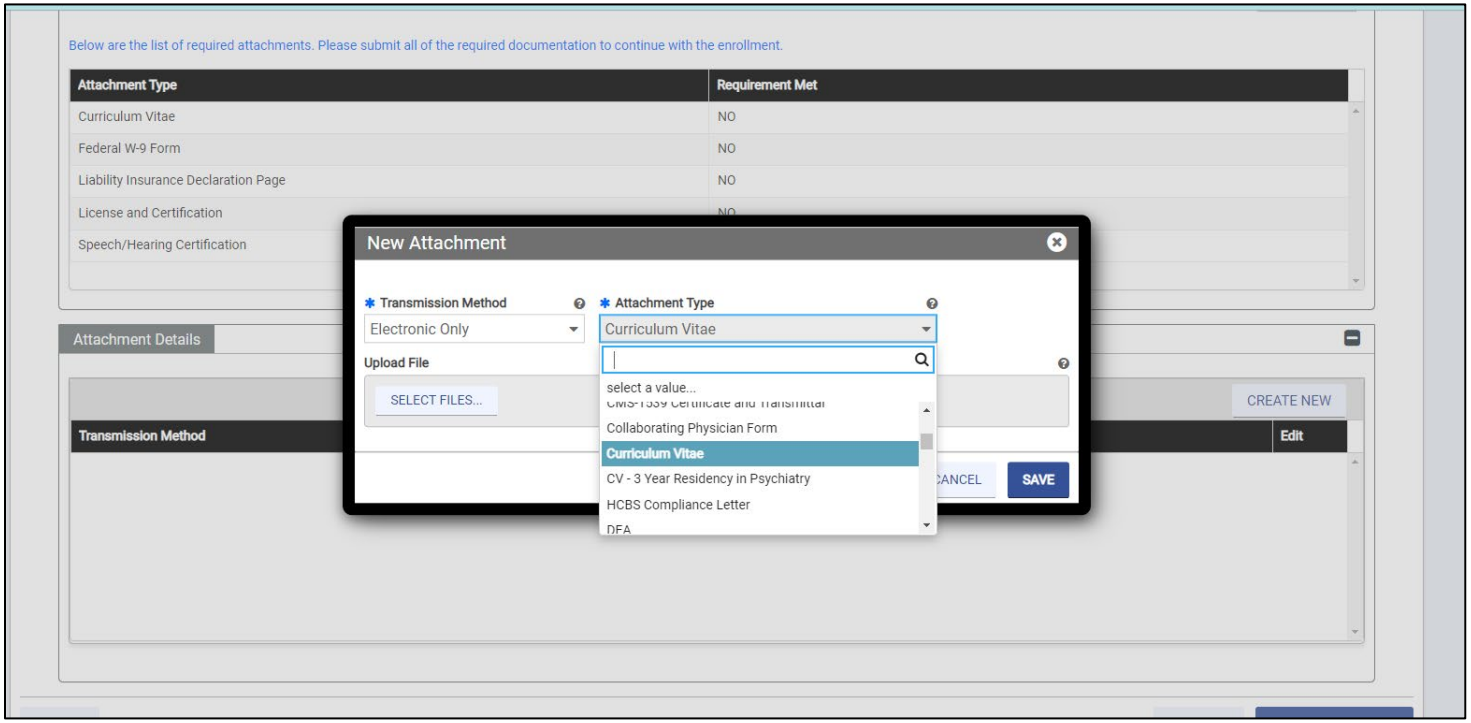
Liability Insurance Declaration

Not required for ORP enrollments. Submit a document that indicates this document is not required for ORP enrollment.



CV

Not required for ORP enrollments. Submit a document that indicates this document is not required for ORP enrollment.



Once you have uploaded all required documents you will proceed to the final section.

Complete the Agreement and Submit.

You will be notified within 10 business days by email or land mail of the results of your application. The mode of notification will depend on the preference indicated in the ***Addresses*** section (reference page 14).

Revalidating Enrollment as an Ordering, Referring or Prescribing (ORP) Provider for School-Based Services

Validation of **enrollment as an ORP provider**

- All enrolled providers must complete a ***revalidation*** of their enrollment information at least every 5 years. (Timing may vary depending on provider specialty.)
- DMAS will mail or email revalidation information and instructions directly to the providers, depending on the communication preference noted in their initial ORP application. The first notification will be sent approximately 90 days prior to the deadline for revalidation.
- ORP providers do not have to be registered with the ***MES Provider Portal*** to receive notifications, but they do have to make sure to keep their contact information updated with DMAS. For those not registered with the portal, this can be done via email, land mail or fax to the following:

Virginia Medicaid Provider Enrollment Services

PO Box 26803

Richmond, VA 23261-6803

vamedicaidproviderenrollment@gainwelltechnologies.com

Fax 804-270-7027 or 888-335-8476

IMPORTANT: Validation of **professional licensure** is separate from provider enrollment revalidation.

- For those licensed through the Virginia Department of Health professions - licensure information is updated automatically. No action is required on the part of the enrolled ORP provider.
- For those licensed through the Virginia Department of Education, the person must mail, fax or email any updated license information directly to DMAS using one of the methods for contact listed above.

Workaround Procedures for Ordering, Referring, Prescribing (ORP) Provider Enrollment Type

The provider online enrollment application system requires the following forms to be submitted at the end of the application. The information below outlines the workaround to allow enrolling ORP provider to replace the documents that are not required for ORP enrollment. The highlighted documents below are not required for ORP enrollment.

- Curriculum Vitae details. **Not required for ORP enrollments. ORP providers can submit a document outlining that this is not required for ORP enrollment for school-based services and submit this in place of the Curriculum Vitae.**

- Federal W-9 Form details. **Not a required document for ORP enrollments. Please submit a document indicating that the W9 is not required since they are enrolling with their Social Security Number.**

- Liability Insurance Declaration Page details. **Not required for ORP enrollments. Submit a document that indicates this document is not required for ORP enrollment for school-based services.**

- Certification. **Not required for ORP enrollments of school based services. Submit a document that indicates this document is not required for ORP enrollment for school-based services.**

- DEA license. **For providers that do not prescribe medications, submit a document that indicates this document is not required for ORP enrollment of your provider type.**

- License and Certification details are required. **License is required for ORP providers. Include certification information if certification is required for your enrollment type.**

The document used in place of the non-required documents highlighted above can be a single document that lists all of the applicable documents and reasons why they are not required. It will need to be uploaded for each of the required documents, however.

Enrollment Fees

There is no enrollment fee for school divisions or for school-based providers enrolling for ORP purposes. Disregard any email or letter received regarding an enrollment fee.