

DMAS Pharmacists as Providers FAQs

Q: Where do I start if I want to enroll to provide services for DMAS members?

A: All pharmacists must enroll with DMAS through Gainwell at the link below. Once that is complete, enrollment must be completed with each Managed Care Organization (MCO) individually that you wish to provide services for their members <https://virginia.hppcloud.com/ProviderEnrollment/EnrollmentCreate>

Q: Do I have to enroll with DMAS, or can I just enroll with the MCOs?

A: The Federal law known as the 21st Century Cures Act requires all providers to enroll and periodically revalidate directly with DMAS through its provider services solution (PRSS) portal. Providers are not able to enroll with any MCO until enrollment with DMAS is complete.

Q: What are the requirements for enrollment with DMAS?

A: Pharmacists wishing to enroll with DMAS must have an active NPI number, liability insurance, a Virginia address, and an active Virginia pharmacist license. Submission of a Federal W-9 form is also required.

Q: How does a pharmacist get an NPI number?

A: Pharmacists must create an account and apply for an NPI at <https://nppes.cms.hhs.gov/#/>

Q: The enrollment site is asking for a DEA number when I try to register. How do I get one?

A: Pharmacists are not required to complete the DEA number field on the application at this time.

Q: How do I know whether I want to enroll as an individual, an individual within a group, or a group?

A: Individual: When you plan to bill and receive payment directly

Individual Within a Group: When you work in a setting in which the facility will receive payment

Group: Facilities in which pharmacists practice (ex: ambulatory clinics, pharmacies, etc.)

Q: I would like to enroll as an individual within a group, but my group is not listed. How do I proceed?

A: Your group must complete their enrollment before you can enroll as an individual within that group. Once the group has completed enrollment, they will get a service location ID that you will need for individuals within a group enrollment.

Q: How do I enroll with the MCOs?

A: Each MCO will have their own enrollment policies and procedures. Please contact the MCO directly for more information.

Aetna:

https://www.aetnabetterhealth.com/virginia/providers/joinnetwork.html#acc_link_content_section_accordion_1

Molina:

<https://www.molinahealthcare.com/providers/va/medicaid/resources/pharmacy.aspx>

Anthem:

<https://www.anthem.com/provider/getting-started/>

United:

<https://app.smartsheet.com/b/form/55ef1ef0d5b34851b7548304718d2057>

Sentara:

<https://www.optimahealth.com/providers/provider-support/join-our-network>

Q: Is telehealth permitted for these services?

A: At this time, reimbursement will be limited to those services performed face to face for pharmacists using published BOP Statewide Protocols. Pharmacists that have a current CPA may continue to bill under the collaborating provider's NPI for telehealth visits

Q: Do these services have to be provided in a pharmacy setting?

A: Services may be provided in practice settings other than pharmacies for this program (i.e. ambulatory care clinics).

Q: If I practice in multiple locations, do I have to enroll more than once?

A: Enrollment is specific to practice site. If you practice in multiple locations, a separate enrollment must be completed for each site.

Q: Are we able to utilize the vaccine protocol published by the Virginia Board of Pharmacy to bill vaccines for Medicaid recipients under 18?

A: Vaccine counseling for members under 18 can be billed under the pharmacists as providers program, but the vaccine itself will have to go through the VFC program.

Q: If I have a collaborative practice agreement (CPA) in place with a collaborating provider, can I start billing my services under my own NPI after I enroll with DMAS?

A: Pharmacists that have a current CPA on file do not need to enroll with DMAS to continue providing services. If the pharmacist chooses to enroll, only E/M codes associated with the published Board of Pharmacy (BOP) protocols can be billed under the pharmacist's NPI. Any services provided by a pharmacist with a CPA in which there is no published BOP protocol must continue to be billed under the collaborating provider's NPI.

Q: Are pharmacists with a collaborative practice agreement (CPA) permitted to bill the same E/M codes as an enrolled pharmacist?

A: DMAS does not restrict E/M codes 99202, 99211, 99212, and 99213 for a pharmacist with a CPA if the billing NPI is that of the collaborating provider and the service is within the scope of their CPA. Please refer to the standards of your facility and CPA.

Q: I am interested in providing a service in which The Board of Pharmacy does not currently have a protocol published. Will DMAS be developing new protocols?

A: All protocols are developed by the Virginia Board of Pharmacy in collaboration with the Board of Medicine and Department of Health. DMAS is not directly involved in this process.

Q: What is the reimbursement for the proposed codes?

A: All reimbursement can be found by searching the DMAS fee file at:

<https://www.dmas.virginia.gov/for-providers/rates-and-rate-setting/procedure-fee-files-cpt-codes/>

Q: Does this initiative allow for no show billing?

A: No, DMAS does not pay a no-show fee to the pharmacy. A face-to-face encounter is required to for billing.

Q: Can I bill Medicare for these services?

A: This program does not apply to Medicare

Q: What additional requirements are required for test-to-treat protocols?

A: Each Virginia Board of Pharmacy Protocol should be reviewed for individual requirements. For protocols that involve testing, a CLIA waiver must be obtained from the Virginia Department of Health (VDH).

Q: I have done my individual enrollment and am now working on my group enrollment for my facility. The DMAS provider enrollment system is not allowing me to log in.

A: A separate email address must be used for all enrollments. If you attempt to provide one email for multiple enrollments, you will not be able to log in to view all enrollments.