New DD Waiver Providers
Register for WaMS Account

Before Developmental Disability Waiver (DD Waiver) providers can access the *Waiver Management System* (WaMS), they must be an approved and active Medicaid provider with the *Department of Medical Assistance Services* (DMAS)[1]. DMAS will send a notification to the provider and thereafter send that provider's details to WaMS. Once WaMS receives the provider's information, the provider will be able to register for a WaMS account.

> **Note**: Only DD Waiver providers enrolled with **Provider Type 056, 059, 062, 063, and 573** appear in WaMS.

> **Note**: It may take up to five business days for WaMS to receive a provider's details from DMAS and be available to register for a WaMS account.

To register for WaMS, follow the steps below:

REGISTER FOR WaMS ACCOUNT

1. Go to: https://www.wamsvirginia.org/WaMS/Ltss.Web/Register

2. At the **Log In** page type:
   - User name or email: **provider**
   - Password: **wpS%5Fwe**

3. Click on **Log In**. The WaMS *User Register* page opens with instructions:[2]

Log In

User name or email
[Username or Email]

Password
[Password]

[Log In]

General Information

Instructions

Please use the form below to register your WaMS account.

All fields highlighted in yellow or with an asterisk (*) next to the field name are required and cannot be left blank:

- **Account Name:** The name added in this filed will be your WaMS "User ID". This is the name you will use to log in to WaMS (e.g., Sunny_Day).

- **Business Title:** If you do not have a title, please enter "N/A," etc.

- **Email Address:** This is an important field. Once the form is complete and saved, an email will be sent to this email address to confirm and set the password to access WaMS. The "Account Name" along with the password chosen will be your login information for WaMS.

- **Tax ID:** This is your organization TAX ID. After entering the TAX ID, click the "Get Organization Unit" button. The "Organization Unit" field will automatically populate with your organization's name. The "User Rolesets" section (at the bottom of the page) will also become available.

- **User Rolesets:** Select one or more role(s). The roles selected determine the functions that will be available for you to perform in WaMS. The "Provider Organization Owner" role must be selected to administer and modify information for your organization. This role also creates and manages user accounts for others in your organization.

- **Attestation:** Each person assigned to the "Provider Organization Owner" role must attest to the following:
  - Their WaMS Login/Password will not be shared
  - Only an organization's owner (and a back-up) will be assigned the "Provider Organization Owner" role
  - There will be no more than two (2) people assigned the "Provider Organization Owner" role at one time

Staff Information

Account Name: *
First Name: *

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[1] For assistance in getting set up as a DMAS provider, contact Provider Enrollment at In-State: 1-804-270-5105, Out-Of-State Toll Free: 1-888-829-5373, Fax Toll Free: 1-888-335-8476 or Email: Gainwell - Provider Enrollment

[2] If you are unable to register for WaMS electronically, call the WaMS Help Desk at 844-4-VA-WaMS (844 482-9267) and provide them with your Tax ID and NPI number.

4. Add **Staff Information**, **Address** and **Phone Number**:

- **Account Name:** This will be your user login name used to login to WaMS; (e.g., mary.jones)

- **Business Title:** If you do not have a title, enter "N/A"

- **Email Address:** Once the form is completed, **an email will be sent to this email address to set up your password to access WaMS**. The *Account Name* along with the *password* chosen should be used to log in to WaMS

- **Tax ID:** *Your organization TAX ID number*

5. Enter your organization Tax ID, then click on **Get Organization Unit**.

Staff Information

Account Name:*	mary.jones
First Name:*	Mary
Last Name:*	Jones
Suffix:	
Business Title:*	Owner
Email Address:*	eight@trainreg.net
Tax Id:*	728299221 [Get Organization Unit]
Organization Unit:*	Eight Days a Week

Note: Fields with red asterisks and/or in yellow are required.

Address

Street Address 1:	6900 FOREST AVE,
Street Address 2:	
City:	Richmond

- o The *Organization Unit* and *Address* fields auto populate

- o The **User Rolesets** section (at the bottom of the page) will also become available

- **Address**: The address provided to DMAS will auto populate in the *Address* field. The address can be edited if necessary

- **Phone**: Add the type of phone (e.g., Work, Mobile, Home), telephone number and an extension, if necessary

Select Your Role(s)

6. Under the *User Rolesets* section select the appropriate **Role(s)**.

The role(s) selected determine the functions that will be available for you to perform in WaMS. The **Provider Organization Owner** is selected by default There must be at least one person in the organization assigned the **Provider Organization Owner** role. This individual is responsible for:

Note: No more than 2 people can be assigned to the Provider Organization Owner role at one time.

- Creating and managing staff user accounts and roles for the organization

- Administering and modifying details for the organization, including, the organization's contact information (e.g., point of contact, address(es), telephone, email, service areas, and bed capacity

- Quality assurance and monitoring of the system to ensure that only individuals who are active in an organization have a WaMS account

- Deactivating any individual that is no longer employed by the organization or no longer needs to have access to WaMS

- Ability to also create and edit Service Authorization and Customized Rate applications, and create Part V and Interim Part V for the Individual Support Plan

It is not necessary to also select the *Provider Admin or Provider ISP Approver* roles as the owner role has the same abilities by default as both roles.

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7. Ensure the *Attestations* options are selected.

8. Click on **Save**. *A message stating your request has been submitted and to check your email to proceed.*

9. **Confirm** your email and **Set your Password**.

> **Note**: Your password must contain at least:
> * 1 uppercase letter(s)
> * 1 lowercase letter(s)
> * 1 digit(s)
> * 8 character minimum.

You can now add staff members and assign roles for your organization. Step-by-step instructions are located on the WaMS Home page under the *Training Manuals, Webinars, and FAQs / Providers / Job Aids* section entitled: **Add New Staff, Assign Role(s) and Manage Logins**.

If you are unable to complete the registration electronically, call the **WaMS Help Desk** at **844-4-VA-WaMS (844-482-9267)** and provide them with your Tax ID and NPI number.

If you are unable to access WaMS **after five business days** of receiving notification of enrollment from DMAS, send an email to **ddwaiver@dmas.virginia.gov** for assistance.

For assistance in getting set up as a DMAS provider, contact **Provider Enrollment** at In-State: **1-804-270-5105**, Out-Of-State Toll Free: **1-888-829-5373**, Fax Toll Free: **1-888-335-8476** or Email: mailto:VAMedicaidProviderEnrollment@gainwelltechnologies.com?subject=Provider Enrollment.

> **Note**: Access to WaMS will be automatically deactivated for anyone who does not log in to the system within 90 Days. If still needed, please reactivate account rather than create a new account.