Department of Medical Assistance Services
600 East Broad Street
Suite 1300
Richmond, VA 23219

https://dmas.virginia.gov

MEDICAID BULLETIN

Last Updated: 07/13/2022

Update for Lawful Permanent Residents: 40 Work Quarter Requirement Removed

The purpose of this bulletin is to alert Medicaid providers to a change in a Virginia healthcare coverage (Medicaid) policy that was made in the 2020 Appropriations Act, which could impact patients who are residing in the United States as lawful permanent residents (LPRs). In the past, LPRs who had met the five-year federal residency rule were also required to show proof of at least 40 quarters of employment for which Social Security taxes were paid prior to meeting Medicaid eligibility requirements.

In accordance with Item 313.XXX of the Act, as of April 1, 2021, LPRs who entered the U.S. on or after August 26, 1996 and have five years of residency may now be eligible for healthcare coverage with no requirement to have accumulated work quarters. All other Medicaid eligibility requirements must still be met.

Individuals who have been denied Medicaid coverage in the past due to the lack of work quarters and LPRs with at least five years of residence in the U.S. are encouraged to apply for Medicaid through one of the following ways:

How to Apply for Health Insurance Programs in Virginia

Apply online at CommonHelp

Go to https://commonhelp.virginia.gov.

OR

Call 1-855-242-8282 (toll free).

Translation and interpreter services are available.

OR

OR

Through their local department of social services.

Go to https://www.dss.virginia.gov/localagency/index.cgi for contact information.

For an individual's eligibility to be accurately determined, a full eligibility determination must be completed. Anyone needing healthcare coverage is strongly encouraged to apply using one of the ways listed above.

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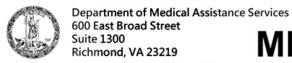
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PROVIDER CONTACT INFORMATION & RESOURCES

Virginia Medicaid Web Portal Automated Response System (ARS) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	www.virginiamedicaid.dmas.virginia.gov
Medicall (Audio Response System) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	1-800-884-9730 or 1-800-772-9996
KEPRO Service authorization information for fee-for-service members.	https://dmas.kepro.com/

Managed Care Programs
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 provider. The managed care plan may utilize different guidelines than those described for Medicaid fee-for-service individuals.

Medallion 4.0	http://www.dmas.virginia.gov/#/med4
CCC Plus	http://www.dmas.virginia.gov/#/cccplus
PACE	http://www.dmas.virginia.gov/#/longtermprograms
Magellan Behavioral Health Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.	www.MagellanHealth.com/Provider [For credentialing and behavioral health service information, visit:](http://www.magellanofvirginia.com) www.magellanofvirginia.com, email: [VAProviderQuestions@MagellanHealth.com,or](mailto:VAProviderQuestions@MagellanHealth.com) Call: 1-800-424-4046
Provider HELPLINE Monday–Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available.	1-804-786-6273 1-800-552-8627
Aetna Better Health of Virginia	www.aetnabetterhealth.com/Virginia 1-800-279-1878
Anthem HealthKeepers Plus	www.anthem.com/vamedicaid 1-800-901-0020
Magellan Complete Care of Virginia	www.MCCofVA.com 1-800-424-4518 (TTY 711) or 1-800-643-2273
Optima Family Care	1-800-881-2166
United Healthcare	www.Uhccommunityplan.com/VA and www.myuhc.com/communityplan 1-844-752-9434, TTY 711
Virginia Premier	1-800-727-7536 (TTY: 711), www.virginiapremier.com

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