



Last Updated: 07/26/2022

Inflation for Outpatient Rehabilitation Rates, Effective July 1, 2020

The purpose of this bulletin is to inform you that effective July 1, 2020, the rates for outpatient rehabilitation providers will be increased to reflect a 2.8% inflation adjustment.

This action is in accordance with Chapter 12 of the Virginia Administrative Code, Section 30-80200(C), which mandates the annual inflation adjustment for outpatient rehabilitation providers.

Outpatient Rehabilitation rates, which are effective as of July 1, 2020, are posted on the DMAS web site at <http://www.dmas.virginia.gov/#/ratesetting> under ribbon entitled, "Rehab Agencies".

For questions, please contact Taryn Gulkewicz by phone: (804) 786-0037, or by email: Taryn.Gulkewicz@dmas.virginia.gov.

Medicaid Expansion Eligibility Verification

Medicaid coverage for the new expansion adult group began January 1, 2019. Providers may use the Virginia Medicaid Web Portal and the Medcall audio response systems, as shown in the table below, to verify Medicaid eligibility and managed care enrollment, including for the new adult group. In the Virginia Medicaid Web Portal, individuals enrolled in the new adult group are shown as "MEDICAID EXP." If the individual is enrolled in managed care, the "MEDICAID EXP" segment will be shown as well as the "MED4" (Medallion 4.0) or "CCCP" (CCC Plus) managed care enrollment segment. Eligibility and managed care enrollment information is also available through the DMAS Medcall eligibility verification system.

Additional Medicaid expansion resources for providers are available on the DMAS Medicaid Expansion webpage at: <http://www.dmas.virginia.gov/#/medex>.

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
Medcall (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://providerportal.kepro.com



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

<https://dmas.virginia.gov>

MEDICAID BULLETIN

Managed Care Programs

Medallion 4.0, Commonwealth Coordinated Care Plus (CCC Plus), and the 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 Managed Care Program

<http://www.dmas.virginia.gov/#/med4>

CCC Plus Managed Care Program

<http://www.dmas.virginia.gov/#/cccplus>

PACE Program

<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:

www.magellanofvirginia.com, email: VAProviderQuestions@MagellanHealth.com, or 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