MEDICAID BULLETIN

Last Updated: 08/30/2022

Preparations to Resume Normal Eligibility and Enrollment Operations: Member Toolkit and Resource Information

The purpose of this bulletin is to notify providers that DMAS has assembled a toolkit of information and materials to assist Medicaid members as our agency resumes normal eligibility and enrollment operations. Government agencies sometimes refer to this process as "unwinding", the Federal continuous coverage requirements established in response to COVID-19. While DMAS does not yet know the official date for resuming normal operations, we are preparing Virginians through outreach and communications reminding Medicaid members to ensure their contact information is current if they have moved or updated their mailing address/phone number(s).

DMAS will continue to send additional resources prior to and during the unwinding period. The member toolkit and other resources for members and stakeholders are available on the Cover Virginia/Cubre Virginia websites. Please share this information with Medicaid members and display appropriate materials in your office(s).

If you have any questions or require additional information regarding DMAS's plans for resuming normal Medicaid enrollment operations or outreach efforts and resources, please visit https://coverva.org/en, h

PROVIDER CONTACT INFORMATION & RESOURCES		
Virginia Medicaid Web		
Portal Automated Response		
System (ARS)		
Member eligibility, claims	www.virginiamedicaid.dmas.virginia.gov	
status, payment status, service		
limits, service authorization		
status, and remittance advice.		
Medicall (Audio Response		
System)		
Member eligibility, claims	1-800-884-9730 or 1-800-772-9996	
status, payment status, service		
limits, service authorization		
status, and remittance advice.		



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

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KEPRO Service authorization information for fee-for-service members.	https://dmas.kepro.com/
Provider Appeals DMAS launched an appeals portal in 2021. You can use this portal to file appeals and track the status of your appeals. Visit the website listed for appeal resources and to register for the portal.	https://www.dmas.virginia.gov/appeals/

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	www.MagellanHealth.com/Provider
Behavioral Health Services	For credentialing and behavioral health service
Administrator, check eligibility,	information, visit:
claim status and service	<u>www.magellanofvirginia.com</u> , email:
authorizations for fee-for-	<u>VAProviderQuestions@MagellanHealth.com,or</u>
service members.	Call: 1-800-424-4046
Provider HELPLINE Monday-Friday 8:00 a.m5:00 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
Molina Complete Care	1-800-424-4524 (CCC+)
	1-800-424-4518 (M4)
Optima Family Care	1-800-881-2166 www.optimahealth.com/medicaid
United Healthcare	www.Uhccommunityplan.com/VA
	and <u>www.myuhc.com/communityplan</u>
	1-844-752-9434, TTY 711
Virginia Premier	1-800-727-7536 (TTY: 711), <u>www.virginiapremier.com</u>