



Last Updated: 03/28/2023

Fraud Alert Related to Eligibility Redeterminations

The purpose of this bulletin is to notify providers about a fraud alert related to eligibility redeterminations that are occurring during the “return to normal enrollment” period.

DMAS has been notified that Medicaid members in other states have received fraudulent text messages that seek payment from the member to prevent the loss of their health insurance. Members receive a text message saying that the member is at risk for cancellation of their health insurance benefits, or that their benefits have already been cancelled. The member is asked to call and speak to an “agent” who tells the member that it will cost several hundred dollars to reinstate their insurance. The “agent” asks for credit card or debit card information.

We ask all providers to please be on the lookout for these text messages in Virginia and to communicate to their Medicaid members that **DMAS would never ask for credit or debit card information and does not need a payment of any kind.**

If you hear of any text message like this, please alert DMAS immediately by calling Cover Virginia at 1-855-242-8282 (TTY: 1-888-221-1590) or sending an email to: covervirginia@dmas.virginia.gov.

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.

<https://vamedicaid.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/>



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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 Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.

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

Aetna Better Health of Virginia

www.aetnabetterhealth.com/Virginia

1-855-270-2365

1-866-386-7882 (CCC+)

Anthem HealthKeepers Plus

www.anthem.com/vamedicaid

1-833-207-3120

1-833-235-2027 (CCC+)

Molina Complete Care

1-800-424-4524 (CCC+)

1-800-424-4518 (M4)

Optima Family Care

1-800-643-2273

1-844-374-9159 (CCC+)

www.optimahealth.com/medicaid

United Healthcare

www.Uhccommunityplan.com/VA

www.myuhc.com/communityplan

1-844-284-0149

1-855-873-3493 (CCC+)

Virginia Premier

1-800-727-7536 (TTY: 711), www.virginiapremier.com



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600 East Broad Street
Suite 1300
Richmond, VA 23219

<https://dmas.virginia.gov>

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