



Last Updated: 11/26/2024

Updates to the CCC+ Waiver Manual, Appendix D

The purpose of this memorandum is to notify providers that Chapter 8 of the CCC+ Waiver Manual, which is titled "Service Authorization" has been updated to include general service authorization information on pages 1 through 14, with CCC Plus Waiver specifics beginning on page 14. In addition, updates were made to reflect current practices and to remove duplicative information.

To avoid disruption to claims payment through FFS and the MCOs providers must periodically check the DMAS provider portal, also known as the Provider Services Solution (PRSS), to ensure that the provider's enrollment, contact information, and license information is up to date, for all of the provider's respective service locations. Under federal rules, MCOs and DMAS are prohibited from paying claims to network providers who are not enrolled in PRSS. Additional information is provided on the [MCO Provider Network Resources webpage](#) and includes links to resources, tutorials and contact information to reach Gainwell with any provider enrollment or revalidation related questions. Dental providers should continue to enroll directly through the DMAS Dental Benefits Administrator, DentaQuest.

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

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/>



MEDICAID MEMO

Managed Care Programs

Cardinal Care Managed Care 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.

Cardinal Care Managed Care PACE

<https://www.dmas.virginia.gov/for-providers/managed-care/cardinal-care-managed-care/>
[Program of All-inclusive Care \(virginia.gov\)](https://www.dmas.virginia.gov/for-providers/managed-care/program-of-all-inclusive-care/)

In-State: 804-270-5105

Provider Enrollment

Out of State Toll Free: 888-829-5373

Email: VAMedicaidProviderEnrollment@gainwelltechnologies.com

Provider HELPLINE

Monday-Friday 8:00

a.m.-5:00 p.m. For

1-804-786-6273

provider use only, have

1-800-552-8627

Medicaid Provider ID

Number available.

Aetna Better Health of Virginia

<https://www.aetnabetterhealth.com/virginia/providers/index.html>

1-800-279-1878

Anthem

<http://www.anthem.com/>

HealthKeepers Plus

1-800-901-0020

Molina Complete Care

1-800-424-4524

<https://www.molinahealthcare.com/providers/va/medicaid/home.aspx>

Sentara Community Plan

1-800-881-2166 <https://www.sentarahealthplans.com/providers>

United Healthcare

www.uhcprovider.com/

1-844-284-0149

Dental Provider

DentaQuest

1-888-912-3456

Fee-for-Service (POS)

<https://www.virginiamedicaidpharmacy.com/>

Prime Therapeutics

1-800-424-4046

Acentra Health

<https://vamedicaid.dmas.virginia.gov/sa>

Behavioral Health and

1-804-622-8900

Medical Service

Authorizations

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