



Last Updated: 03/13/2025

## Updates to All Provider Manuals, Chapter 3 (Member Eligibility)

The purpose of this memo is to notify providers that the Chapter 3 of all Provider Manuals has been updated to remove the exhibits, which included sample Medicaid cards and insurance company codes. The exhibit information is not needed in this chapter, and the removed information may be found elsewhere, such as on the DMAS website.

**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.

#### **Medicall (Audio Response System)**

Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.

#### **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.

#### **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**



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Richmond, VA 23219

<https://dmas.virginia.gov>

# MEDICAID MEMO

## **Provider Enrollment**

### **Provider HELPLINE**

Monday-Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available.

**Aetna Better Health of Virginia**  
**Anthem HealthKeepers Plus**  
**Molina Complete Care**

**Sentara Community Plan**  
**United Healthcare**  
**Dental Provider**

DentaQuest

**Fee-for-Service (POS)**  
Prime Therapeutics

### **Acentra Health**

Behavioral Health and Medical Service Authorizations