



Last Updated: 09/12/2025

Update to Hospital Manual, Chapter 7 (Service Authorization)

The purpose of this memo is to notify providers that the Hospital Manual has been updated. Chapter 7 is being updated to include updated boilerplate text related to service authorization.

In addition, text about kidney transplants and maternity and newborn inpatient care is being moved from the service authorization chapter of the Practitioner Manual to the service authorization chapter of the Hospital manual. Text was also added related to organ transplants that are provided by out-of-state or border state providers.

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



MEDICAID MEMO

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

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/cardinal-care-managed-care/Program%20of%20All-inclusive%20Care%20(virginia.gov))

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 provider use only, have Medicaid Provider ID Number available.

1-804-786-6273

1-800-552-8627

Aetna Better Health of Virginia

<https://www.aetnabetterhealth.com/virginia/providers/index.html>
1-800-279-1878

Anthem HealthKeepers Plus

<http://www.anthem.com/>
1-800-901-0020

Humana Healthy Horizons

Provider Services Call Center

1-844-881-4482 (TTY: 711)
<https://provider.humana.com/medicaid/virginia-medicaid>

Sentara Community Plan

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

United Healthcare

www.uhcprovider.com/
1-844-284-0146

Acentra Health

Behavioral Health and Medical Service Authorizations

<https://vamedicaid.dmas.virginia.gov/sa>
1-804-622-8900

Dental Provider

DentaQuest

1-888-912-3456

Fee-for-Service (POS)

Prime Therapeutics

<https://www.virginiamedicaidpharmacyservices.com/>
1-800-932-6648