



Last Updated: 10/30/2025

## Updates to Rehabilitation Manual Chapter V

The purpose of the Rehabilitation Manual update is to clarify inpatient billing for inpatient rehabilitation services when members transition between Fee For Service (FFS) and Managed Care Organizations (MCO) during the inpatient hospitalization. These services are reimbursed using a per-diem rate per day of eligibility.

**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/>

##### **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.



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

<https://dmas.virginia.gov>

# MEDICAID MEMO

**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))

**Provider Enrollment**

In-State: 804-270-5105  
Out of State Toll Free: 888-829-5373  
Email: [VAMedicaidProviderEnrollment@gainwelltechnologies.com](mailto: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/](http://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