Department of Medical Assistance Services
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https://dmas.virginia.gov
MEDICAID MEMO

**Last Updated: 09/24/2026**

# Service Authorization (Appendix D) Update

The purpose of the memorandum is to inform providers that the following provider manuals, Appendix D – Service Authorization, has been updated.

- ARTS
- CCC Plus
- DMEPOS
- Home Health
- Hospital
- Practitioner
- Rehabilitative Services

The following updates have been incorporated in the update.

- CMS Interoperability Rule Mandate, Effective January 1, 2026

- Single Sign On (SSO) through DMAS MES Portal to access Acentra Health's ANG platform.

***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**

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| **Virginia Medicaid Web Portal**<br>**Automated Response System (ARS)**<br>Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice. | https://vamedicaid.dmas.virginia.gov/ |
| **Medicall (Audio Response System)**<br>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**<br>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.

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| **Cardinal Care Managed Care** | https://www.virginiamanagedcare.com/en |
| **PACE** | Program of All-inclusive Care |
| **Provider Enrollment** | In-State: 804-270-5105<br>Out of State Toll Free: 888-829-5373<br>Email: VAMedicaidProviderEnrollment@gainwelltechnologies.com |
| **Provider HELPLINE**<br>Monday–Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available. | 1-804-786-6273<br>1-800-552-8627 |
| **Aetna Better Health of Virginia** | https://www.aetnabetterhealth.com/virginia/providers/index.html<br>Prior Auth requests can be faxed or called to the following numbers:<br>Phone: 1-800-279-1878<br>Med4/ FAMIS Fax: 1-866-669-2454<br>CCC Plus Fax: 1-855-661-1828 |
| **Anthem HealthKeepers Plus** | http://www.anthem.com/<br>Prior Authorization information can be found here: https://providers.anthem.com/virginia-provider/resources/prior-authorization-requirements<br>Call Provider Services: 1-800-901-0020 TTY: 711<br>Fax medical prior authorization request forms to:<br>Inpatient fax: 1-866-920-4095<br>Outpatient fax: 1-800-964-3627<br>LTSS fax: 1-844-864-7853 |

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| **Humana Healthy Horizons** Provider Services Call Center | https://provider.humana.com/medicaid/virginia-medicaid<br>Prior Authorization information can be found here:<br>https://provider.humana.com/medicaid/virginia-medicaid/prior-authorization<br>Submit request via Availaty porta, phone or fax:<br>Phone requests:<br>1-855-223-9868 or 1-844-881-4482 (TTY: 711)<br>Fax complete form to:<br>1-877-486-2621. |
| **Sentara Community Plan** | 1-800-881-2166 https://www.sentarahealthplans.com/providers<br>Submit authorizations via portal or phone<br>Portal information can be found here: https://www.sentarahealthplans.com/en/providers/claims-authorizations/authorizations<br>Phone request:<br>1-757-552-7474 or 1-800-229-8822 |
| **United Healthcare** | www.uhcprovider.com/<br>1-844-284-0146<br>To notify UHC or request a medical prior authorization:<br>Portal information can be found here: UHCprovider.com/priorauth<br>or call provider services 1-844-284-0146 |
| **Acentra Health** Behavioral Health and Medical Service Authorizations | https://vamedicaid.dmas.virginia.gov/sa<br>1-804-622-8900 |
| **Dental Provider** DentaQuest | 1-888-912-3456 |
| **Fee-for-Service (POS)** Prime Therapeutics | https://www.virginiamedicaidpharmacyservices.com/<br>1-800-932-6648 |