



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

<http://www.dmas.virginia.gov>

MEDICAID BULLETIN

TO: All Providers Participating in the Virginia Medicaid and FAMIS Programs

FROM: Cheryl J. Roberts, Director
Department of Medical Assistance Services (DMAS)

DATE: 3/24/23

SUBJECT: Information on the Eligibility Renewal Process

The purpose of this bulletin is to provide information about the eligibility renewal process over the next 12 months, including how Medicaid and FAMIS members can determine when their renewals will occur.

Renewal dates are grouped according to the date of the member's last renewal, as shown in the chart below.

Member's Case Renewal Month	➔	Renewal Process Start
May 2023		March 2023
March – October 2020 & June 2023		April 2023
November 2020 – March 2021 & July 2023		May 2023
April – September 2021 & August 2023		June 2023
October 2021 & September 2023		July 2023
November 2021 & October 2023		August 2023
December 2021 & November 2023		September 2023
January – February 2022 & December 2023		October 2023
March – May 2022 & January 2024		November 2023
June – October 2022 & February 2024		December 2023
November 2022 – February 2023 & March 2024		January 2024
March – April 2023 & April 2024		February 2024

If a member does not know their renewal date, they can call their local Department of Social Services (go to the following link to identify that office: <https://www.dss.virginia.gov/localagency/index.cgi>), or Cover Virginia (1-855-242-8282) (TTY: 1-888-221-1590).

If a provider would like to determine the renewal date for a Medicaid member that they are serving, they can go to the Member Eligibility Inquiry page in the Provider Services Solution (PRSS) system. The response will show the member's renewal date as demonstrated by the red box below. Once the provider has the "case review date" the provider should review the chart above to determine when the renewal will occur.

The screenshot displays the 'Eligibility Inquiry MES' interface. At the top, it shows the Virginia Medicaid logo and the system title. Below the title, there are fields for 'Service Date From: 08/01/2022', 'Service Date To: 08/31/2022', and 'Confirmation Number: 202307410671'. The 'Member Information' section includes fields for Name, Date of Birth, Member ID, and Member SSN. A red box highlights the 'Case Review Date: 07/31/2022'. The 'Benefit Plan' section contains a table with columns for Plan Description, CoPay Indicator, Aid Category, Plan From, Plan To, Provider ID, Provider Name, and Provider Phone. The table shows one entry: 'FAMIS MOMS - A -- 005' with a Plan From of 08/01/2022 and Plan To of 08/31/2022. Below the table, it says 'Showing 1 - 1 of 1'. The 'TPL Spans' section shows a table with columns for Carrier Code, Carrier Name, Coverage Type, CoPay Amount, Policy Number, Policy Begin Date, and Policy End Date, with the text 'No TPL spans' below it. The 'Patient Pay Information' section shows a table with columns for Begin Date, End Date, Patient Pay, and Status, with the text 'No patient pay info' below it. At the bottom right, there are buttons for 'CoPay Amounts', 'Service Limits', and 'Choose a Different Member'.

If providers have any difficulties accessing this screen, they are encouraged to visit the Helpful Links tab in PRSS and review the Provider Reference Material, especially the User Guide, Frequently Asked Questions (FAQ), and Computer Based Training (CBT).

Starting now, some Medicaid and FAMIS members will receive a letter in the mail informing them that their renewal was completed. If DMAS needs more information to complete the renewal, the member will receive a packet in the mail with options for submitting the renewal online, via phone, or by completing the documentation and returning it in person or by mail/fax.

For more details about the return to regular renewal operations, providers are encouraged to access the following resources on the Cover Virginia Website: [Renewal Process Flowchart](#), [Renewal Process Flow Sheet: Step-By-Step](#), [Renewal Process Flow Sheet: Where Are You?](#), and [Toolkits and Materials](#).

For questions, additional help, or language assistance services or large-print, Medicaid and FAMIS members are encouraged to call Cover Virginia at 1-855-242-8282 (TTY: 1-888-221-1590) or send an email to: covervirginia@dmas.virginia.gov.

PROVIDER CONTACT INFORMATION & RESOURCES	
<p>Virginia Medicaid Web Portal Automated Response System (ARS) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.</p>	<p>https://vamedicaid.dmas.virginia.gov/</p>
<p>Medicall (Audio Response System) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.</p>	<p>1-800-884-9730 or 1-800-772-9996</p>
<p>KEPRO Service authorization information for fee-for-service members.</p>	<p>https://dmas.kepro.com/</p>
<p>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.</p>	<p>https://www.dmas.virginia.gov/appeals/</p>
<p>Managed Care Programs Medallion 4.0, Commonwealth Coordinated Care Plus (CCC Plus), 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.</p>	
<p>Medallion 4.0</p>	<p>http://www.dmas.virginia.gov/#/med4</p>
<p>CCC Plus</p>	<p>http://www.dmas.virginia.gov/#/cccplus</p>
<p>PACE</p>	<p>http://www.dmas.virginia.gov/#/longtermprograms</p>
<p>Magellan Behavioral Health Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.</p>	<p>www.MagellanHealth.com/Provider For credentialing and behavioral health service information, visit: www.magellanofvirginia.com, email: VAProviderQuestions@MagellanHealth.com, or Call: 1-800-424-4046</p>

Medicaid Bulletin: Information on the Eligibility Renewal Process

DATE: 3/24/2023

Page 4

Provider Enrollment	In-State: 804-270-5105 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	www.aetnabetterhealth.com/Virginia 1-855-270-2365 1-866-386-7882 (CCC+)
Anthem HealthKeepers Plus	www.anthem.com/vamedicaid 1-833-207-3120 1-833-235-2027 (CCC+)
Molina Complete Care	1-800-424-4524 (CCC+) 1-800-424-4518 (M4)
Optima Family Care	1-800-643-2273 1-844-374-9159 (CCC+) www.optimahealth.com/medicaid
United Healthcare	www.Uhccommunityplan.com/VA www.myuhc.com/communityplan 1-844-284-0149 1-855-873-3493 (CCC+)
Virginia Premier	1-800-727-7536 (TTY: 711), www.virginiapremier.com
Dental Provider DentaQuest	1-888-912-3456