

Provider Notice

The [Virginia Medicaid Web Portal](#) allows providers to view the Commonwealth Coordinated Care Plus (CCC Plus) plan, Medallion 4.0 plan, or fee-for-service plan in which a member is enrolled as well as the effective date and termination date of enrollment. It is important for providers to verify a member's Medicaid eligibility at each point of service. Providers are strongly encouraged to frequently check a member's enrollment to ensure authorization and registration requests as well as claims are submitted to the correct plan.

Verification of a member's participation in CCC Plus, Medallion 4.0, or fee-for-service plan can be done through the Department of Medical Assistance Services (DMAS) MediCall audio response system (1-800-884-9730 or 1-800-772-9996) or the DMAS web-based internet option, available on the [Virginia Medicaid Web Portal](#). As members are assigned to a CCC Plus or Medallion 4.0 health plan, the status of the enrollment is reflected in the member eligibility information data available on the 21st of every month for the first of the following month.

Both options are available at no cost to the provider. The web-based, automated response system (ARS) limits the provider's verification submission to 10 members at a time. CCC Plus and Medallion 4.0 enrollment can also be verified through the member's health plan. Providers should no longer check eligibility on www.magellanprovider.com. If after verifying eligibility using the DMAS Medicall line or DMAS web-based internet option, you are unable to submit an authorization or registration request on www.magellanprovider.com for a service that Magellan of Virginia manages, please call 1-800-424-4046.

If you have any questions, please use the [Contact Us](#) page on www.magellanofvirginia.com or call 1-800-424-4046.