



## Cardinal Care Facts

1. Virginia Medicaid rebranded its programs as Cardinal Care on January 1, 2023. Cardinal Care follows a phased implementation that is anticipated to be fully operational by July 1, 2023.
2. **Cardinal Care does not make any changes to coverage or services for members.** Members and providers do not need to take any action to enroll in Cardinal Care, and members can stay with their MCO and keep their same doctors.
3. Cardinal Care includes members *currently* served through the Medicaid Family Access to Medical Insurance Security (FAMIS) fee-for-service programs and managed care programs, including Medallion 4.0 and Commonwealth Coordinated Care Plus (CCC Plus).
4. Beginning January 1, 2023, you may see new Cardinal Care ID cards with the Cardinal Care logo. Fee-for-service (FFS) members can continue to use their current blue-and-white cards. Members will get a new Virginia Medicaid Cardinal Care fee-for-service card if they become newly eligible on/after January 1, 2023, or if their current card is lost or damaged. *Samples of FFS ID cards are on the DMAS Website.* Members in Cardinal Care managed care will receive new ID cards (with the Cardinal Care logo) from their Managed Care Organization (MCO) through mid-2023.
5. Beginning January 1, 2023, our eligibility verification systems (ARS, Medicall, and 270/271 EDI transaction) reflect MCO or fee-for-service enrollment, and no longer list CCC Plus or Medallion 4.0 (see Attachment 1). Additionally, all MCOs will accept Medallion and CCC Plus service authorizations and claims through either previous submission process.
6. Beginning in January 2023, open enrollment for all Medicaid MCO members follows a regional schedule, based on where the member lives.
7. DMAS will consolidate the Medallion 4.0 and CCC Plus contracts, under a single Cardinal Care MCO Contract – *effective upon approval by the Centers for Medicare and Medicaid Services (CMS); the contract is anticipated to become effective July 1, 2023.*
8. The Cardinal Care MCO Contract will include all populations and services historically included in Medallion and CCC Plus. It excludes all populations and services that had been excluded from managed care.
9. The Cardinal Care MCO contract improves continuity of care and members will no longer transition between the two managed care programs. For example, Medallion members transitioning into hospice or long-term services and supports will no longer drop to fee-for-service before enrolling in managed care.

10. DMAS is making changes to the DMAS and enrollment broker websites. Until complete, all Managed Care members will continue to use the existing enrollment websites and enrollment helplines.
11. DMAS and the MCOs will gradually discontinue use of the Medallion 4.0 and CCC Plus program names and will replace with Cardinal Care Managed Care.
12. Additional information, including sample member ID cards, and the latest program updates about Cardinal Care are posted on the *Cardinal Care Transition* page of the [DMAS website](#).

MCO Provider Services Contact Information	
MCO	Phone/Website
Aetna Better Health of Virginia	1-800-279-1878 <a href="https://www.aetnabetterhealth.com/virginia/providers/index.html">https://www.aetnabetterhealth.com/virginia/providers/index.html</a>
Anthem HealthKeepers Plus	Medallion - 1-800-901-0020 CCC Plus – 1-855-323-4687 <a href="https://www.anthem.com/">https://www.anthem.com/</a>
Molina Healthcare	1-800-424-4518 <a href="https://www.molinahealthcare.com/providers/va/medicaid/home.aspx">https://www.molinahealthcare.com/providers/va/medicaid/home.aspx</a>
Optima Health	Medical - 1-800-229-8822 Behavioral Health – 1-800-648-8420 <a href="https://www.optimahealth.com/providers/">https://www.optimahealth.com/providers/</a>
UnitedHealthcare	Medallion: 1-844-284-0146 CCC Plus: 1-877-843-4366 <a href="http://www.uhcprovider.com/">www.uhcprovider.com/</a>
Virginia Premier Health Plan	1-800-727-7536 <a href="https://www.virginiapremier.com/providers/medicaid/providerresources/">https://www.virginiapremier.com/providers/medicaid/providerresources/</a>

**Attachment 1: Identifying MCO Program in ARS and Medicaid Using MCO Provider ID Number**

Providers should continue to use the DMAS eligibility verification systems, including the web based automated response system (ARS), Medicaid telephonic system, and 270/271 EDI transactions to verify member eligibility and managed care enrollment. As of January 1, 2023, DMAS’ eligibility verification systems were modified to simply reflect the member’s fee-for-service or MCO enrollment. The eligibility verification systems will continue to include the member’s MCO name and phone number, MCO provider ID, and the member’s MCO enrollment dates. MCOs have transitioned to accept managed care service authorizations and claims through either program submission process. However, if providers have a separate business need to identify the CCC Plus and Medallion 4.0 programs during this transition, they can do so from the MCO provider ID listed in ARS, Medicaid and 270/271 EDI transaction. Each MCO has a separate Provider ID number for CCC Plus and Medallion 4.0, as shown in the table below. The ARS screen shot below shows where the MCO Provider ID number is located. The

MCO Provider ID number is also shared in Medicaid and the 270/271 eligibility verification transaction.

MCO	Medallion 4.0 Provider ID	CCC Plus Provider ID
Aetna	0562425543	0247726596
Anthem	0562425972	0247726836
Molina	0575325995	0247725432
Optima	0562427754	0247719971
United	0575326118	0247725788
Virginia Premier	0562425717	0247726240

MCO Provider ID Number



ARS Screen-Shot

**Benefit Plan**

Plan Description - CoPay Indicator - Aid Category	Plan From	Plan To	Provider ID	Provider Name	Provider Phone
MEDICAID FFS - C -- 029	11/01/2022	11/30/2022			
MCO NTHWIN -- 029	11/01/2022	11/30/2022	0247725788	UNITED HEALTHCARE COMMUNITY PLAN	877-843-4366
MED CO & DED -- 029	11/01/2022	11/30/2022			

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**TPL Spans**

Carrier Code	Carrier Name	Coverage Type	CoPay Amount	Policy Number	Policy Begin Date	Policy End Date
00001	MEDICARE	47	0.00		03/01/2013	12/31/9999
00001	MEDICARE	96	0.00		03/01/2013	12/31/9999
00001	MEDICARE	88	0.00		03/01/2013	12/31/9999

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**Patient Pay Information**

Begin Date	End Date	Patient Pay	Status

No patient pay info

CoPay Amounts Service Limits Choose a Different Member