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

https://dmas.virginia.gov

MEDICAID BULLETIN

Last Updated: 10/02/2026

Provider Appeal Requirements Effective November 5, 2026

The purpose of this bulletin is to explain upcoming changes to the provider appeal process. The General Assembly directed DMAS to promulgate regulations to require providers to utilize DMAS' appeal portal for the appeal process unless a good cause exception is requested and granted (Item 292 QQ of the 2025 Appropriations Act). These regulations will go into effect on November 5, 2026. Additionally, Chapter II of all Provider Manuals will be revised with an effective date of November 5, 2026.

The DMAS appeal portal is known as the Appeals Information Management System ("AIMS"). It first launched in May 2021, allowing Medicaid providers and clients to file their appeals online, upload documents, and track the status of their cases. Information about AIMS is available at https://dmas.virginia.gov/appeals/.

At the present time, DMAS accepts appeals filed by AIMS, U.S. Mail/delivery, email, and fax. With the regulatory change, AIMS will be the only method that appeals will be accepted and processed, unless a good cause exception is requested and granted. Since this alters long-standing practice, DMAS is affording providers approximately a two-month grace period and will continue to accept appeals through all methods until the end of 2026. **Strict enforcement of the online requirements will begin on January 1, 2027.** Documents sent by mail/delivery, email, and fax, and received by DMAS on and after January 1, 2027, will not be processed unless the submission includes a good cause request that is granted by DMAS. Unless the exception is granted, providers must use AIMS to file the appeal, upload documents, and receive notifications from DMAS about the appeal process.

Providers requesting an exception must do so before the appeal deadline by sending the exception request by mail (DMAS, Attn: Appeals Division, 600 East Broad Street, Richmond, VA 23219) or email (appeals@dmas.virginia.gov). The request must have a subject of "Exception Request for Portal Filing." For emails, this must be in the subject line. For delivered requests, this must be underneath the address block on the cover letter. Exceptions will be granted for good cause shown. Examples of good cause include:

1. The infrastructure necessary to support electronic submission is not available in the provider's geographic region;
2. The disability of all members of a provider's staff prevents their use of AIMS; or
3. The provider cannot transmit documents through AIMS due to unusual or unavoidable circumstances.

Because exception requests will only be permitted in those limited circumstances, DMAS encourages all providers to immediately begin utilizing AIMS if they are not already doing so.

The first step is to register for an AIMS account. In order to comply with the Health Insurance Portability and Accountability Act (HIPAA), DMAS must verify that the individual registering is affiliated with the requested provider(s). Therefore, to allow DMAS time to process the request, providers should submit a registration request well in advance of the appeal deadline. DMAS recommends that provider staff who may need to file an appeal in the future submit a registration request upon receipt of this Bulletin.

Once a registration request is approved, that individual will be able to log into AIMS to create a new appeal, upload documents to existing appeals, and track the status of appeals for the providers/firms for which they have been approved. File sizes greater than one gigabyte may not be able to be uploaded to AIMS. Providers can, however, break up a large file into multiple small files and upload them individually that way. Once an appeal has been filed, AIMS will send an email when new documents have been added to the appeal by DMAS or a DMAS contractor.

In summary, providers who have not yet used AIMS should take the following actions as soon as possible:

1. Disseminate this memo to all staff and contractors who file appeals on their behalf.
2. Ensure staff and contractors register for AIMS at https://appeals-registration.dmas.virginia.gov/provider as soon as possible.
3. Become familiar with the AIMS dashboards and appeal filing experience.
4. Contact DMAS' AIMS Help via email at AIMSHelp@DMAS.Virginia.Gov, or by phone at (804) 486-2865, if there are any technical difficulties.

DMAS is committed to making sure this is a smooth transition for all providers. However, as this is a General Assembly mandate, DMAS must ensure full compliance by January 1, 2027.

Please note: The online requirements do not apply to Medicaid applicants, members, and their authorized representatives who request State Fair Hearings.

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 Effective November 5, 2026, providers must use the online appeal portal to file appeals and track the status of 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.

Cardinal Care Managed Care	https://www.dmas.virginia.gov/for-providers/managed-care/cardinal-care-managed-care/
PACE	Program of All-inclusive Care (virginia.gov)
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	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/ 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

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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/ 1-844-284-0146
Acentra Health Behavioral Health and Medical Service Authorizations	https://vamedicaid.dmas.virginia.gov/sa 1-804-622-8900
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