

Georgia Medicaid Fair Highlights

April 20, 2023

I. **Opening Session** led by Talecia Hodge-Thompson, Interim Account General Manager and Technical Director

- **Payee Enhancement**- starting on **April 27, 2023**, enhanced access to web portal for agents and billing agents acting on behalf of the payees. They will have access to Eligibility, Prior Authorization lookup and submission, Claims Submission and more. Reference guide on how to use- "Payee Selection Quick Reference Guide" and can be found on our "Web Portal Training" page.
- **End of Continuous Member Enrollment Notice**- starting **April 1, 2023** all Georgia Medicaid and PeachCare for Kids members will go through eligibility redetermination. This process will take approximately 14 months. A member's date for redetermination may be anytime between April 2023 and March 2024.
- **Need Assistance**: Provider Relations Rep, In House Rep, Provider Enrollment/CVO Reps, Provider Relations Manager. Please see the list in slide deck on <http://www.mmis.georgia.gov> go to Provider Information→Provider Notices→Spring Medicaid Fair/Opening Session- April 2023
- **Provider Relations Monthly Webinars**
 - May- Nursing Facility Services
 - June- CCSP
 - July- GAPP Services
 - August- CIS
 - September- NOW & COMP
 - October/November- Medicaid Fair
 - November- Physician Services
 - December- Hospital Services
- **Reminders**: All presentations are located on gammis website. Recorded videos will be posted by **May 1, 2023**. For access to presentations, please visit www.mmis.georgia.gov
- **Medicaid Resources**
 - GAMMIS Banner messages**
www.mmis.georgia.gov
 - DCH-i Newsletter**
<https://dch.georgia.gov/dch-i>
 - To subscribe or request to be added to the DCH-i distribution**
use link or e-mail dch-i@dch.ga.gov

II. **Opening Session continued- Georgia Department of Community Health (DCH)** led Lynette Rhodes Executive Director

- **Enrollment Trends-** there was an enrollment increase because they could not disenroll members during the Public Health Emergency (COVID).

March 2020- 2,115,439 March 2021- 2,334,119 March 2023- 2,804,252

- **Current Priorities**

Medicaid and CHIP Redeterminations- Get help with Medicaid Redetermination

<https://staycovered.ga.gov> (redetermination will align with SNAP & TANF)

Procurements & New Initiatives

Pathways to Coverage 1115 Waiver

Public Health Emergency “Unwinding”

- **Procurements**

Care Management Organization (CMO)

Fee for Service Pharmacy Benefit manager (PBM)

Medicaid Management Information System (MMIS)- They will be breaking this out in different modules, will be asking Providers to help with testing.

- **New Initiatives & Programs to Increase Access**

Certified Community Behavioral Health Centers (CCBHC)

Behavioral Support Services and Therapeutic Care Model

Department of Education: Medicaid Direct Certification for free/reduced school meals

Centering Pregnancy- working with Grady hospital

- **Pathways to Coverage- those that will not normally receive Medicaid**

Proposed Implementation date: **7-1-2023**

Who qualifies? Age 19-64 with incomes of up to 100% FPL

Must meet qualifying activities

Must opt in

- **PHE Unwinding- start back on May 11th**

Provider Revalidation Requirements will resume

They will keep Telehealth

Site visits will resume

All Prior Auth requirements resume

Applications fees will be reinstated

Pre-Admission Screening and Annual Resident Review (PASRR) Level I and Level II Assessments will resume

III. **Care Source**- Presentation is on www.mmis.georgia.gov go to Provider information→Provider notices

IV. **AmeriGroup**- Presentation is on www.mmis.georgia.gov go to Provider information→Provider notices

V. **Peach State**- Presentation is on www.mmis.georgia.gov go to Provider information→Provider notices

VI. **Common claim denials**

- **Member Eligibility**- it is the provider's responsibility to verify eligibility on each date of service
Edit 2003 - Member Ineligible on Detail Date of Services

This edit is triggered when the claim detail dates of service do not fall within or are equal to the beginning and ending dates in any recipient eligibility segment.

EDIT 2078/2077 - Member has Partial Eligibility for Detail DOS

This edit is triggered when only partial eligibility was found on detail DOS.

Edit 2017/2019 - Member Services are Covered by CMO Plan

This edit is triggered when a member has a lock-in segment with one of the CMOs (Amerigroup, PeachState, Caresource)

Edit 6704 - Medicare Part-B Deductible greater than yearly allowed amount

This edit is triggered when a member has met the yearly deductible amount.

Method of Correction - Verify the provider number, member number, date of service, and diagnosis code were captured correctly. Please check and double check to ensure that the Part B deductible amount has not exceeded the yearly limit of \$226.

- **Procedure Code Common Denials**

Edit 4801 - Billing Rule Not Found for Billed Proc

This edit is triggered when there are no billing rules for the procedure under the provider contract for the date of service in GAMMIS.

Edit 4871 - Claim Type Restriction on Proc Billing Rule

This edit is triggered when claim type is not within the claim type restriction of the billing rule for the Procedure Code in GAMMIS.

- **What you need to know**- www.mmis.georgia.gov got to Provider Information→Provider Messages. **Provider Manuals** are a great resource- found under provider information also.

- **Working Your denied Claims-** Claims Management Tips
 - Assign dedicated staff person to denials if possible.
 - Document receipt of denials, reasons for denied payment and deadline for resubmission.
 - Always review denial reasons (read twice, act once.)
 - Make corrections involving missing or inaccurate info.
 - Review clinical reasons for denial (service, diagnosis, etc.) with treating provider.
 - Make any corrections possible.
 - Resubmit claims in a timely manner.
- **Contact Provider Services Contact Center-** 800-766-4456, available 7 AM to 7 PM EST