

Georgia Medicaid Paperless Hard Stop was May 1

The Georgia Paperless Initiative launched on September 1, 2014, between the Georgia Department of Community Health (DCH) and DCH's fiscal agent (partner vendor) Hewlett-Packard Enterprise Services (HPES). DCH and HPES teamed up to transition to a paperless system for Medicaid provider enrollment, claims filing, appeals and reimbursement. In 2015, the Paperless Initiative will be implemented in phases.

The Initiative for Phase 1 began with the rollout of online-only enrollment for institutional providers. The Provider Enrollment (PE) process is now online. Provider Enrollment applications and any download of supporting documents can be submitted through the GAMMIS Web Portal via a secure login under the PROVIDER ENROLLMENT (PE) hyperlink. You can contact the PE team at Contact Us or call HPES at (800) 766-4456. Any applicable documents can be faxed to the PE team at (866) 483-1045.

ALL claims, appeals, forms, prior authorizations (PA) and PE documents are to be submitted electronically through the GAMMIS Web Portal, www.mmis.georgia.gov. Effective May 1, 2015, paper will no longer be accepted from institutional and individual providers into the HPES web portal. This includes paper claims, appeals, provider inquiry forms (DMA 520 /520A), PAs, Medicare and Medicare Advantage claims, institutional claims, and Inpatient Part B only claims and PE applications.

As part of the Paperless Initiative and as of January 1, 2015, all new GA Medicaid providers must enroll in Electronic Fund Transactions/Direct Deposit with their financial institutions to receive payment. All newly enrolled providers are mandated to enroll into the GA Medicaid program to receive their payments via electronic funds transfer (EFT) and not as a paper check. Paper checks will be delayed and mailed out on a Wednesday rather than on Mondays. To enroll in EFT go to www.mmis.georgia.gov; under the Provider Enrollment tab select the EFT Agreement from the drop down box.

Post Office (PO) Boxes (no longer valid)

As of May 1, 2015, the following P.O. Boxes are no longer valid and should not be used:

P.O. Box 105201 - Provider Enrollment /EDI Services

P.O. Box 105202 - CMS 1500 Claims

P.O. Box 105203 - Crossover Claims

P.O. Box 105204 - UB04 Claims

P.O. Box 105205 - ADA 2006 Dental Claims

P.O. Box 105206 - Adjustments and Voids

P.O. Box 105207 - TPL/Finance/Buy-in

Only use the following P.O. Boxes that will remain open and are to be used as instructed by HPES:

P.O. Box 105200 - Member and Provider Correspondence

P.O. Box 105208 - Retroactive Eligibility Claims, Out of State Claims, Outlier Documentation

P.O. Box 105209 - Miscellaneous Non-claims documents and Business Reply mail such as EOMBs and MSQs

Provider Inquiry Forms (access at the GAMMIS Web Portal)

* DMA 520A Forms (Medical review, Clinical records) go to GMCF via the Provider Workspace secure logion on the GAMMIS Web portal, www.mmis.georgia.gov, under the link "Prior Authorization/Provider Workspace/Provider Inquiry Form."

* The DMA-520 Claim Inquiry Form

The DMA-520 Claim Inquiry Form panel, on the GAMMIS Web portal, www.mmis.georgia.gov, allows providers and billing agents to view or submit a DMA-520 Claim Inquiry for claim payments issues, or questions on their remittance advices or EOMBs. New inquiries are restricted to claims with a remittance advice and its related attachments less than or equal to 30 calendar days of the current date. Only one DMA-520 form may be used per inquiry. All data fields must be completed. A contact tracking number (CTN) will be provided to allow you to track your request. If the CTN status is CLOSED, you will not be able to upload supporting documentation.

Adjustment Process

Refer to Part 1 PeachCare for Kids™/Medicaid manual, section 204, regarding the individual provider adjustment process. No paper adjustment forms will be accepted by HPES. Providers can access the GAMMIS web portal to make any adjustments within the timely filing and adjustment period.

For additional information on the Paperless Initiative, refer to the Frequently Asked Questions (FAQs) for providers, titled Transition of Paperless Processes, which was posted March 18, 2015, on the Georgia Department of Community Health website (www.dch.ga.gov). Both the FAQs and the latest issue of DCH-i can be accessed at <http://dch.georgia.gov/publications>.

You can also contact HPES at (800) 766-4456 or through the Georgia Medicaid Management Information System (GAMMIS) at www.mmis.georgia.gov for assistance.