

EVV How To?

Electronic Visit Verification

For access to this presentation, please visit:
www.mmis.georgia.gov -> Provider Information ->
Provider Notices -> "Presentation - EVV How To?"

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Contacting Gainell Technologies

EVV Overview

Electronic Visit Verification



EVV Overview

What is EVV?



EVV is a technology that automates the gathering of service information by capturing time, attendance and care plan information entered by a home care worker at the point of care.



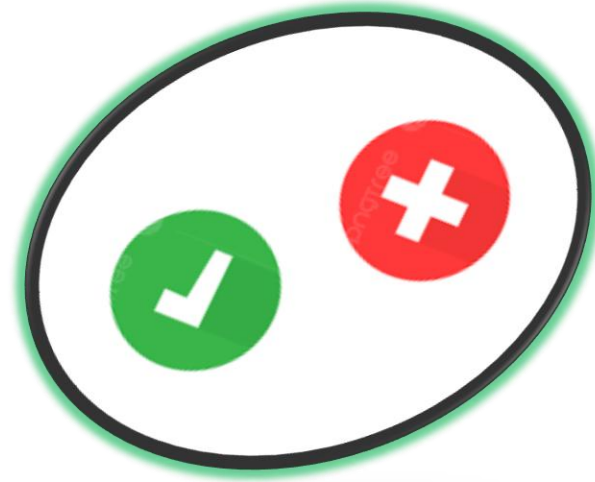
EVV gives providers, care coordinators, and DCH access to service delivery information in real-time to ensure there are no gaps in care throughout the entire course of the service plan.

EVV Overview

(continued)

At a minimum, EVV electronically verifies the:

- Type of service performed
- Individual receiving the service
- Individual providing the service
- Date the service was provided
- Location of service delivery
- Time the service begins and ends



EVV Overview

(continued)

The Georgia Department of Community Health (DCH) has selected Netsmart's Mobile Caregiver+ (MCG+) as the state-designated electronic visit verification (EVV) solution. This system is designed to capture real-time service delivery and support our shared efforts to reduce fraud, waste, and abuse in the delivery of in-home care services.



→ **Please note:** The Netsmart MCG+ solution is provided at no cost to you.

Alternatively, Georgia DCH allows providers the option to use an approved third-party EVV vendor; however, please note that DCH will not cover any costs associated with this option. All expenses for using a third-party EVV system are the sole responsibility of the agency.

We encourage providers to evaluate their options carefully to ensure compliance with state EVV requirements.

To support providers with common EVV solution issues once registered, Georgia DCH has partnered with Conduent.

The Conduent Call Center is available Monday through Friday, from 8:00 AM to 7:00 PM EST, excluding state holidays. 1-833-701-0012

Mobile Caregiver+ Link: <https://evv-dashboard.mobilecaregiverplus.com>

Contacting the EVV Call Center

Contact the Georgia EVV Call Center for technical issues or questions, via phone, e-mail, or website for chat.

To receive faster service, you will need the following information to create your support ticket:

- Your agency name
- Your agency Medicaid ID
- Your agency National Provider Identification (NPI) number
- Your agency Employee Identification Number (EIN) or Taxpayer Identification Number
- Contact e-mail address
- Call back number

Primary Number: [\(833\) 701-0012](tel:(833)701-0012)

Email: GAEVVSupport@Conduent.com

Website for Chat: www.gaevv.com

EVV Required Procedure Codes

CPT Codes T1019, T2025, and S9122

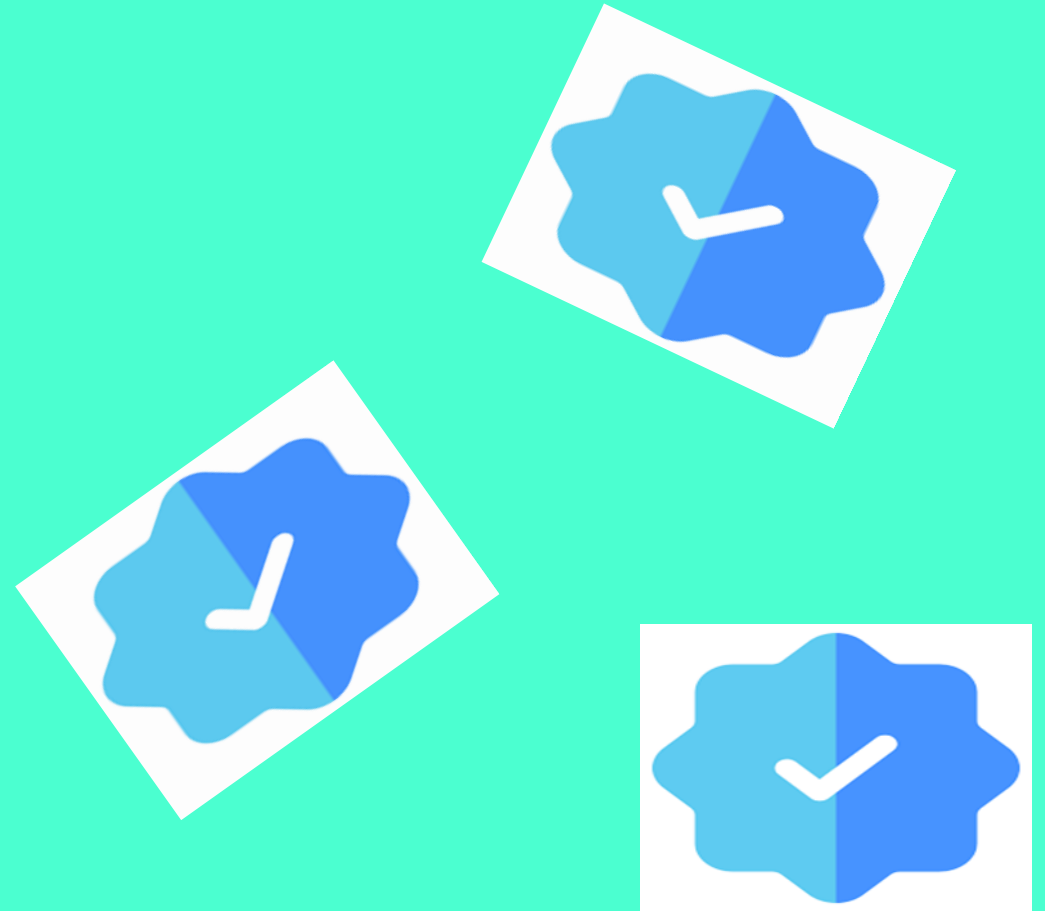
The following waiver programs below are subject to EVV Program requirements:

- Service Options Using Resources in a Community Environment (**SOURCE-COS 590**)
- Community Care Services Program (**CCSP-COS 930**)
- New Options Waiver (**NOW-COS 680**)
- Comprehensive Supports Waiver Program (**COMP-COS 681**)
- Independent Care Waiver Program (**ICWP-COS 660**)
- Georgia Pediatric Program (**GAPP-COS 971**)



A full comprehensive list of required codes and modifiers can be found on <https://medicaid.georgia.gov/programs/all-programs/georgia-electronic-visit-verification-evv>

Verifying Eligibility- GAMMIS



Verifying Eligibility

Is this member eligible to receive services?

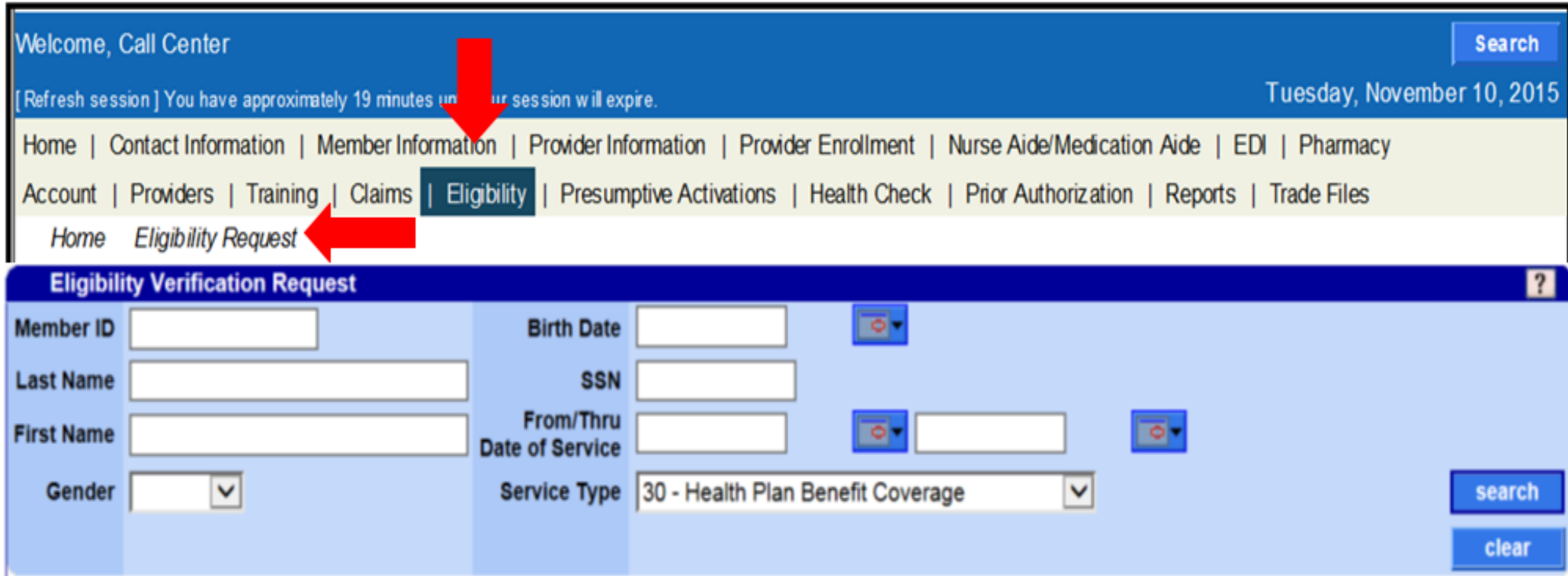
Eligibility verification is essential for claims reimbursement.

Providers can verify eligibility by:

- Logging into the GAMMIS secure web portal and performing an eligibility search.
- Contacting Gainwell Technologies Contact Center at 1-800-766-4456, M-F 7AM to 7PM.
- Contacting the acting Case Manager.

Eligibility Verification

(continued)



Welcome, Call Center Search

[Refresh session] You have approximately 19 minutes until your session will expire. Tuesday, November 10, 2015

Home | Contact Information | Member Information | Provider Information | Provider Enrollment | Nurse Aide/Medication Aide | EDI | Pharmacy

Account | Providers | Training | Claims | **Eligibility** | Presumptive Activations | Health Check | Prior Authorization | Reports | Trade Files

Home *Eligibility Request*

Eligibility Verification Request ?

Member ID		Birth Date		
Last Name		SSN		
First Name		From/Thru Date of Service		
Gender		Service Type	30 - Health Plan Benefit Coverage	

search
clear

- [Medicaid ID and Date of Service Span]
- [Last Name/First Name, Gender, Birth Date, and Date of Service Span]
- [Birth Date, Social Security Number, and Date of Service Span]
- [Last Name/First Name, Social Security number, Date of Service Span]

Eligibility Verification

(continued)

Benefit Plan & Eligibility by Service Type **must show “ACTIVE”**

Benefit Plans ?						
Status	Service Type Code	Effective Date	End Date	Insurance Type Code	Aid Category	Special Notes or Limitations
Active	30 - Health Plan Benefit Coverage	03/01/2016	03/31/2016	MC - Medicaid	135 - Newborn Child	MEDICAID

Eligibility by Service Type ?							
Status	Service Type Code	Effective Date	End Date	Insurance Type Code	Aid Category	Copay Amount	Special Copay Notes
Active	1 - Medical Care	03/01/2016	03/31/2016	MC - Medicaid	135 - Newborn Child	0.00	

Eligibility by Service Type ?							
Status	Service Type Code	Effective Date	End Date	Insurance Type Code	Aid Category	Copay Amount	Special Copay Notes
Inactive for Service Type Code selected.		09/08/2018	09/08/2018				

Eligibility Verification

(continued)

Retroactive Medicaid Benefits

Retroactive Eligibility

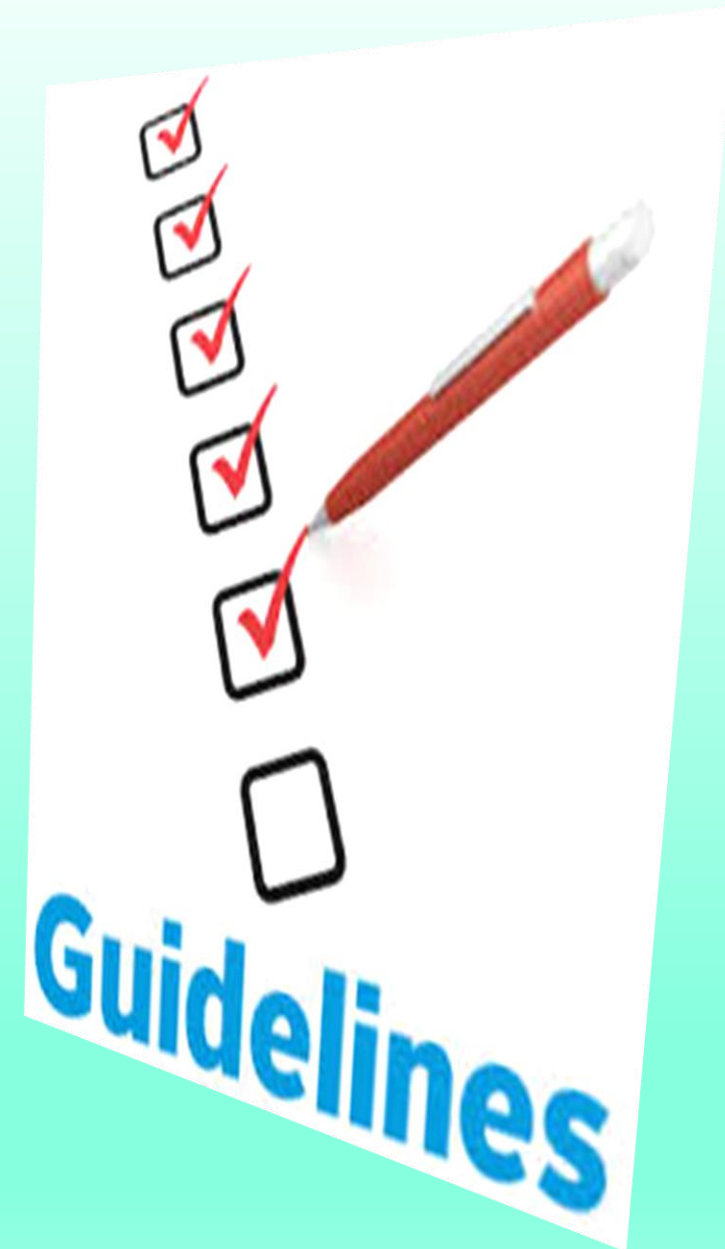


Retroactive Begin Date	Retroactive End Date	Retroactive Eff (Update) Date
06/08/2018	06/08/2018	08/11/2018

*****Claims must be received within six months after the date in which the determination of retroactive eligibility was made.*****



EVV Claim Submission



Claim Submission

There are **two ways** to submit, adjust, and/or resubmit a claim:

Electronic Visit Verification (EVV)

Georgia Medicaid Management Information System
(GAMMIS)

******(Must have a Tier 2 Ticket, TPL, or Patient Liability)******

Submitting Visits Through EVV

All visits for EVV-applicable services must be submitted through the state-mandated EVV solution, Netsmart Mobile Caregiver+. This includes new visits, resubmissions for denied visits, and any instances where a claim needs to be voided or adjusted.

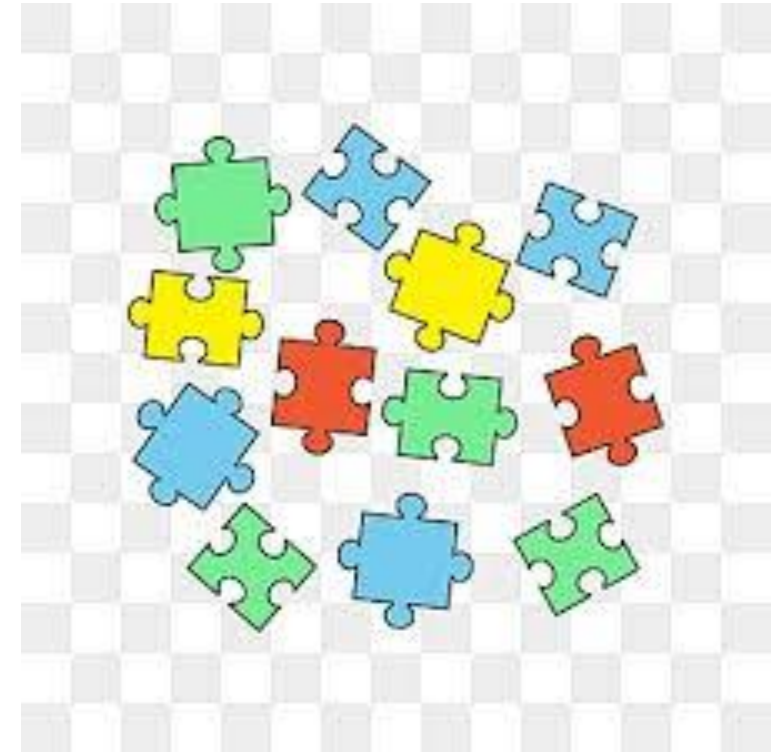
Create a Visit:

- The Schedule menu option allows providers to view existing visits, check availability, and add new visits to the EVV Provider Dashboard by selecting the “Add New Visit” button in the top-right corner of the screen.
- Once visits are scheduled, the Schedule Calendar displays a calendar view of all scheduled visits within the agency’s Provider Dashboard.
- For more information on adding or scheduling visits, please refer to **Section 6.3**, “Adding/Scheduling Visits,” in the Provider Portal User Guide found under the Training menu in your agency’s Provider Dashboard.

Submitting Visits Through EVV

Unmatched and Matched Visits:

- All completed visits are processed and transitioned to the Worklist for review.
- In the Worklist, providers can review each visit, whether matched or unmatched, before manually releasing visits for adjudication. Providers should review and resolve any errors displayed for unmatched claims.
- For more information on Unmatched Errors Code Reasons or Releasing Matched Service Records for Claims Submission, please refer to **Sections 7.6 through 7.16** of the Claims Console User Guide.



Submitting Visits Through EVV

Suspended Visits:

Suspended visits are identified with a “PENDED” status in the Claims Review menu. Please note that these visits will remain in “PENDED” status in the EVV solution until the adjudication process is complete and the visit receives either a paid or denied status. It is important to immediately contact your **Gainwell Technologies representative for support with these visits**, as they cannot be overwritten or rebilled through the EVV solution.

Denied Visits:

Denied claims must be recreated as a new claim using the “New Claim” feature in the Work List.

It is important that all providers review their GAMMIS Remittance Advice to confirm payment or denial details.

For detailed instructions on resubmitting denied claims, please refer to **Section 8.4** of the Claims Console User Guide under “Locating and Remediating Denied Claims.”

Please note that step-by-step instructions for the New Claims process are outlined in **Section 7.15**, “Manually Creating New Service Records,” of the same Manual.

Multiple Visits on The Same Day

Multiple visits per day to the same member is permitted.

Your claim may be **denied** if:

- EVV data is mismatched (ex: time and date, service code, caregiver ID, location, recipient info)
- Missing Prior Authorization
- Eligibility
- Documentation discrepancies

Provider Responsibilities: If different providers (e.g., separate agencies or individual caregivers)

serve the same member on the same day, each provider is responsible for accurately capturing and submitting their respective visit data through their chosen EVV solution (which must be integrated with the State EVV system, Netsmart).

Method of Correction: Verify your service has not been paid previously by performing a claim search.

Verify data being billed matches the service record.

If your service has not been paid and matches the service record, please submit an appeal for your denied claim via the GAMMIS Web portal.

GAMMIS Denied Claim(s) Appeal Process

Please visit the GAMMIS Web portal at: www.mmis.Georgia.gov

1. Select claims search
2. Enter your claim ICN number and search
3. Select the “Blue DMA-520” Icon

Complete all data fields and attach if any supporting documentation.

For more information related to the DMA-520 process, please visit www.mmis.Georgia.gov, Provider Information, Provider Notices and select the Provider Appeals Process Presentation –June 2025

Schedule Display

Dashboard

Schedule

Visits

Work List

Claim Review

Prior Authorizations

Reports

Users

Members

Provider Agency

Schedule

< Jul 16 2025 >

User

Find *

Member

User Name	Total Visits	12am	1am	2am	3am	4am	5am	6am	7am	8am	9am	10am	11am	12pm
Baker Octavia	1													ALEO

Submitting Visits Through EVV

Dashboard

Schedule

Visits

Work List

Claim Review

Prior Authorizations

Reports

Users

Members

Provider Agency

Work List

Archive

New Claim

Search Panel

Recipient(s)

Member

Procedure Codes

Select Procedure Code

Actual Start Date

From

No Signature Gathered

Payer ICN(s)

Payer Internal Control Number (ICN)

Visit ID

Enter Visit ID

Actual End Date

To

☐ Personal Support Aide(s)

Personal Support Aide

Voiding or Adjusting Visits Through EVV

- ❖ Providers will use the Claim Review menu to locate, review, and remediate visits.
- ❖ Please note that the EVV Provider Dashboard only allows providers to adjust or void claims that have a paid or partially paid status.



Before you decide to void or adjust a claim, please ensure the following:

- The agency has confirmed that the selected visit aligns with Medicaid's void and adjustment policy, including timely filing requirements. (Adjustments = 90 days from the paid date)
- The correct tab has been selected within the EVV Provider Dashboard to void or adjust the visit appropriately.
- The agency should take note of the voided date, and all voided visits linked to the ICN, as each associated visit will be voided and recouped.
- The agency should be aware that a new claim for a previously voided visit cannot be submitted until one full billing cycle has passed.
- The agency should be aware that any visits released from the EVV solution cannot be voided or adjusted through GAMMIS. Attempting to do so will result in a hard claims edit denial.

Voiding or Adjusting Visits Through EVV

☰

Mobile Caregiver+

🇺🇸 English

CP3 - T1019 ▾

🏢 Provider Agency ▾

Dashboard

Schedule

Visits

Work List

!

Claim Review

Prior Authorizations

Reports

Users

Members

Claims

Claim

Voids and Adjustments

Voids and Adjustments

Payer *

Payer Georgia DCH ✕ |

ICN# Add ICN#

Search

Clear

Voiding or Adjusting Visits Through EVV

Search List

TRF#	ICN#	Claim Submitted Date	Claim Date Range	Claim Billed Amount	Claim Paid Amount	Claim Status
20210501	062149131234567		4/26/2021-4/27/2021	\$191.00	\$141.66	PAID
Adjust		Void				

Member Name	Diagnosis Code	Procedure Codes/Mods	System-Assigned PA #	Manual Override PA #	Original Billed Amount	Original Paid Amount	Billable Service Start	Billable Service End	E
KELSI KEMP	A0100,A0229S9122		00880011	00880009	\$81.00	\$51.66	4/26/2021, 05:00 PM	4/26/2021, 08:30 PM	
KELSI KEMP	A0100,A0229S9122		00880011	00880011	\$80.00	\$45.00	4/27/2021, 07:30 AM	4/27/2021, 11:30 AM	
KELSI KEMP	A0100,A0229T1019		00880011	455353563	\$30.00	\$45.00	4/26/2021, 07:30 AM	4/26/2021, 09:00 AM	
TOTAL AMOUNT					\$191.00	\$141.66			

Adjust

Cancel

Voiding or Adjusting Visits Through EVV

For more information on voiding or adjusting claims, please refer to **Section 8.5**, “Adjusting Paid Claims,” and **Section 8.6**, “Voiding Paid and Partially Paid Claims,” in the Claims Console User Guide, located under the Training menu in your agency’s Provider Dashboard.

Claim Filing Deadline

❖ Remember:

- Claims submission **deadline is each Thursday at midnight** to be in the Friday payment cycle.
- Providers can no longer wait until Friday noon to submit EVV-applicable claims.

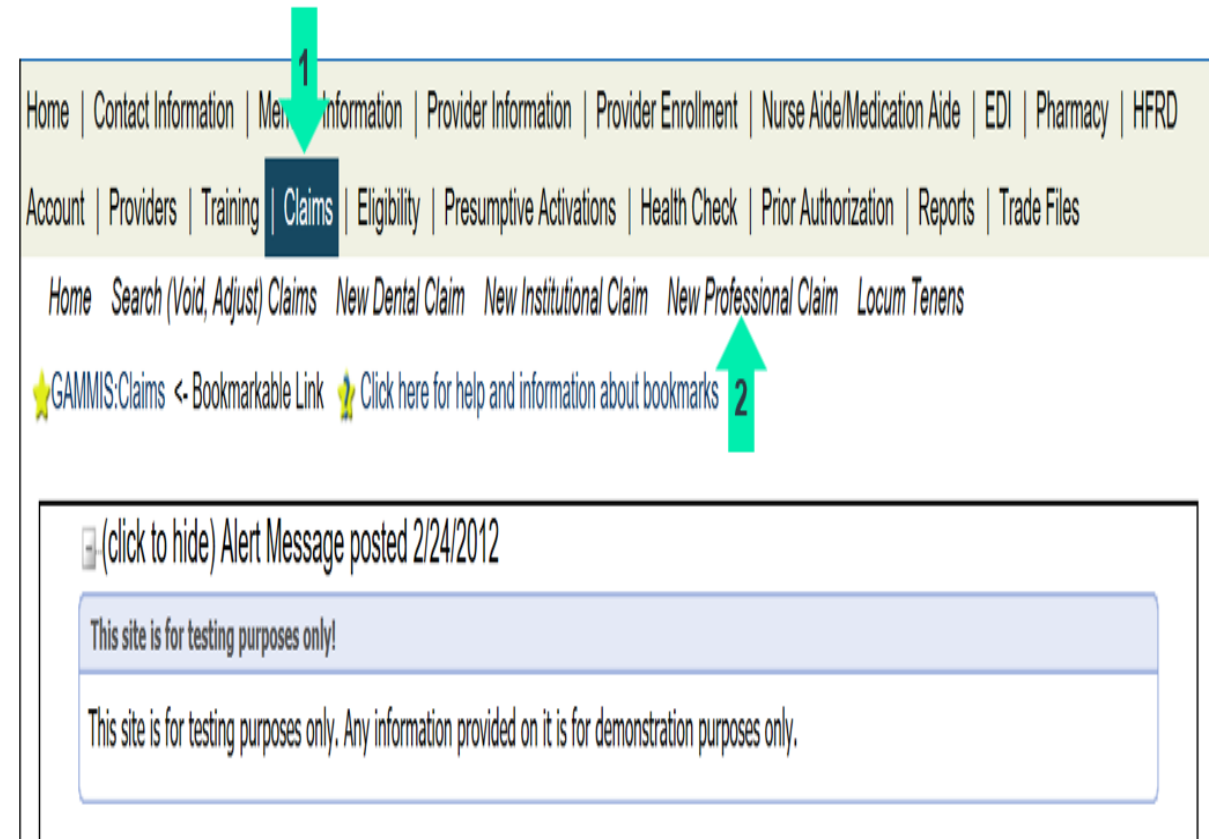


Claim Submission- GAMMIS



Claim Submission- GAMMIS

- Log into the secure web portal with your username and password.
 - Select Web Portal.
 - Select Claims-New Professional Claim.
-
- Training presentations for claim submissions can be found at www.mmis.georgia.gov - Provider Information- Web Portal Training- Claims- Completing a Professional (1500) Web Claim.
 - **Please Note: Providers **MUST** have A Tier 2 Ticket from Conduent to bill claims in GAMMIS.**



Where Can I Review the Status of Submitted Claims on GAMMIS?



- Claim status can be reviewed by logging into the GAMMIS secure Web Portal.
- Select the “Claims” tab, and click “search, void, adjust” in the submenu.
- Insert the claim Internal Control Number (ICN) or use the member’s Medicaid ID, dates of service, and claim status (paid/denied).
- You can also review by opening the Remittance Advice (RA) that is generated every Monday. To do so, you can locate the “reports” tab after logging into the GAMMIS Web Portal. Select the option “financial reports” and choose “remittance advice” from the drop-down menu. Select the date range of the claim in question.

Timely Filing Guidelines

For most **providers**, timely filing is **six months** from the **month the service** was rendered by the provider; however, there are variations which you should be aware of:

- Claim **submission** -Within **six months** of the month of service
 - Claim adjustment -Within **three months** of the month of payment
 - Claim resubmission -Within **three months** of the month the denial occurred
 - One Year (**365 Days**) Claim Submission -All claim submissions and adjustments to denied claims are to be completed according to policy by 365 days.
- A claim is considered a new claim if there are any changes made to the claim after the initial submission (total charges, dates of service, revenue codes, etc.); therefore, the six months for timely filing will apply to the claim that has been edited. Regardless if the prior submitted claims were kept timely in the system.



Prior Authorization- EVV



Where Do I Obtain the Member's Prior Authorization (PA) Information?



Receiving a new member?

The **Case Manager** will:

Submit for the PA and provide the approved PA number once it has processed.

Managing Authorized Units Through EVV

Effectively managing **APPROVED** vs. **USED** units linked to a recipient's prior authorizations is essential for:

- Ensuring accurate reimbursement.
- Preventing overpayments.
- Reducing the risk of PUNTs (unit overages) in the EVV solution.

Providers can **track and manage** the number of units linked to a prior authorization by:

- Reviewing the authorization details in the Prior Authorization menu.
- Using the Search Visit to Claim Reconciliation function in the Visit menu.



Managing Authorized Units Through EVV

The Visit Service Reconciliation Report offers providers a real-time overview of:

- completed visits
- including transmission status
- scheduling details
- and visit data

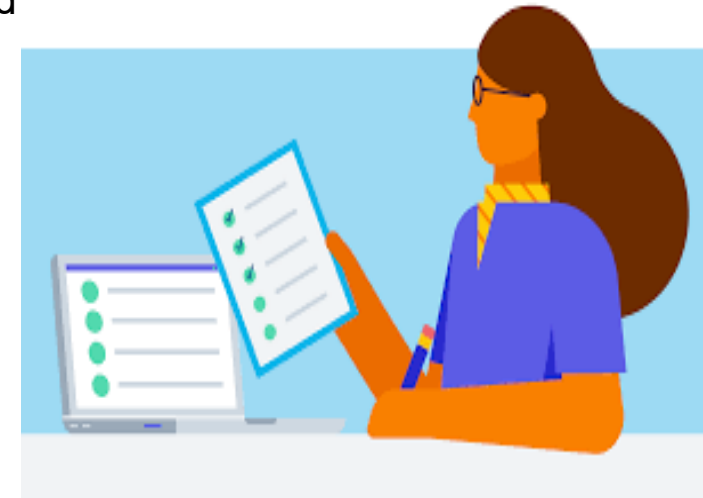
It also helps to monitor the status of visits integrated from a third-party vendor.

By design, this report displays the status of all completed visits as seen in both the Worklist and Claims Review menus.

It provides visibility into which services have been submitted for billing and which still require action, helping to ensure that all billable services are properly tracked and submitted

When used properly, the Visit Service Reconciliation Report helps providers:

- Reduce missed billing opportunities.
- Improve overall claim accuracy.
- Quickly identify the root cause of PUNTs (unit overages).



Managing Authorized Units Through EVV

≡

 Mobile Caregiver+

English

Dashboard

Schedule

Visits

Work List

Claim Review

Prior Authorizations

Visits

Payer

Payer

Members

Member

Visit ID

Enter Visit ID

Visit Status

Select Visit Status

Start Date

From

End Date

To

Search Visits

Search Visit to Claim Reconciliation

Managing Authorized Units Through EVV

Search Visits Search Visit to Claim Reconciliation														
Visit ID	Visit Status	Scheduled Service Start	Scheduled Service End	Actual Service Start	Actual Service End	Member Name	Service Code	Service Duration	Standalone	Claim Invoice ID#	Units	Amount	Claim Invoice Status	TRX#
1173683738	COMPLETED	10/6/22, 10:45 PM	10/6/22, 11:00 PM	10/6/22, 7:45 PM	10/6/22, 8:00 PM	ABRAHAM LOP...	T1019 TF	15 Mins	☐	de56b154-5c20-...1	1	\$4.96	UNMATCHED	-
2752914246	COMPLETED	6/4/21, 12:15 PM	6/4/21, 12:30 PM	6/4/21, 12:08 PM	6/4/21, 1:29 PM	DELISA CRAY	T1019 TF	81 Mins	☐	d76907c7-9098-...5	5	\$24.80	UNMATCHED	2021061118000...
0722696007	COMPLETED	8/30/22, 7:00 AM	8/30/22, 8:00 AM	8/30/22, 7:00 AM	8/30/22, 8:00 AM	SHANDRA O'H...	T1019 TF	60 Mins	☐	d7716090-6b43-...0	0	\$0.00	UNMATCHED	-
0262892652	COMPLETED	5/18/23, 6:15 PM	5/18/23, 6:30 PM	5/16/23, 6:15 PM	5/16/23, 6:30 PM	ALEC MENDEL	T1019 TF	15 Mins	☐	d78364ed-8177-...1	1	\$4.96	UNMATCHED	-
2020956245	COMPLETED	9/28/21, 1:15 PM	9/28/21, 3:00 PM	9/28/21, 1:15 PM	9/28/21, 2:55 PM	DELISA CRAY	T1019 TF	100 Mins	☐	d8253c49-522f-...7	7	\$34.72	ACCEPTED	2023081120000...
3814665846	COMPLETED	9/24/21, 7:00 AM	9/24/21, 8:00 AM	9/24/21, 7:00 AM	9/24/21, 8:00 AM	ARCHIE KIVETT	T1019 TF	60 Mins	☐	d8c3e0a4-9c34-...2	2	\$9.92	PAID	2022020721000...
1541519640	COMPLETED	6/23/21, 2:00 PM	6/23/21, 2:15 PM	6/23/21, 2:03 PM	6/23/21, 2:04 PM	ALENE LLOYD-...	T1019	-	☐	d9c4482f-39a9-...0	0	\$0.00	UNMATCHED	-
0802835798	COMPLETED	5/17/22, 7:30 PM	5/17/22, 8:00 PM	5/12/22, 7:30 PM	5/12/22, 8:00 PM	ALENE LLOYD-...	T1019 TF	30 Mins	☐	da8dd95d-afe0-...2	2	\$9.92	DENIED	2022051305000...

Managing Authorized Units Through EVV

For more information on voiding or adjusting claims, please refer to **Section 10.13**, “Visit Service Reconciliation Report” in the Claims Console User Guide, located under the Training menu in your agency’s Provider Dashboard.

How Can We Get a PA Updated for Additional Units?

Missing units or need a PA updated?

Please contact the Case Manager for any updates as it pertains to the Prior Authorization units. Once the update is complete, you can verify by reviewing the PA details prior to submitting your claim.

My PA units have been updated by the Case Manager, but I am unable to see them in EVV, what should I do?

- Please contact Conduent. A **Tier II Ticket** may have to be issued to resolve the issue.
- The **only exception** for an escalation to Tier II is if it has been determined that units have been added by the case manager and the number of units that were authorized has changed, but has not reflected in the EVV's PA.



PA Unit (PUNT) error. How can I resolve it?

What is PUNT?

- The **PUNT error** occurs when there is an **overuse of units** for the approved Prior Authorizations.
- **P for Prior Authorization** and **UNT for units** and it appears in the Work List as an **Unmatched claim(s)**.
- GA EVV Support **does not** automatically issue a Tier II ticket for a PUNT related issue.



Locate and Resolve: (PUNT)

• Step 1

- ☐ Access the GAMMIS PA by identifying units used per PA and subtract from units used in EVV.
- ☐ Then subtract answer from what has been authorized to find the extra units.

• Step 2

- ☐ Find the Authorization Number in the Prior Authorization tab.
- ☐ Copy it and paste it in archive list and confirm no units are pulling in any of the claims.
 - ☐ To confirm this, both calculated and billable lines, have to say zero.
- ☐ They will need to restore the claims and remove the units from both billable and calculated fields.
- ☐ You can confirm the units are removing by checking in the PA tab on EVV.

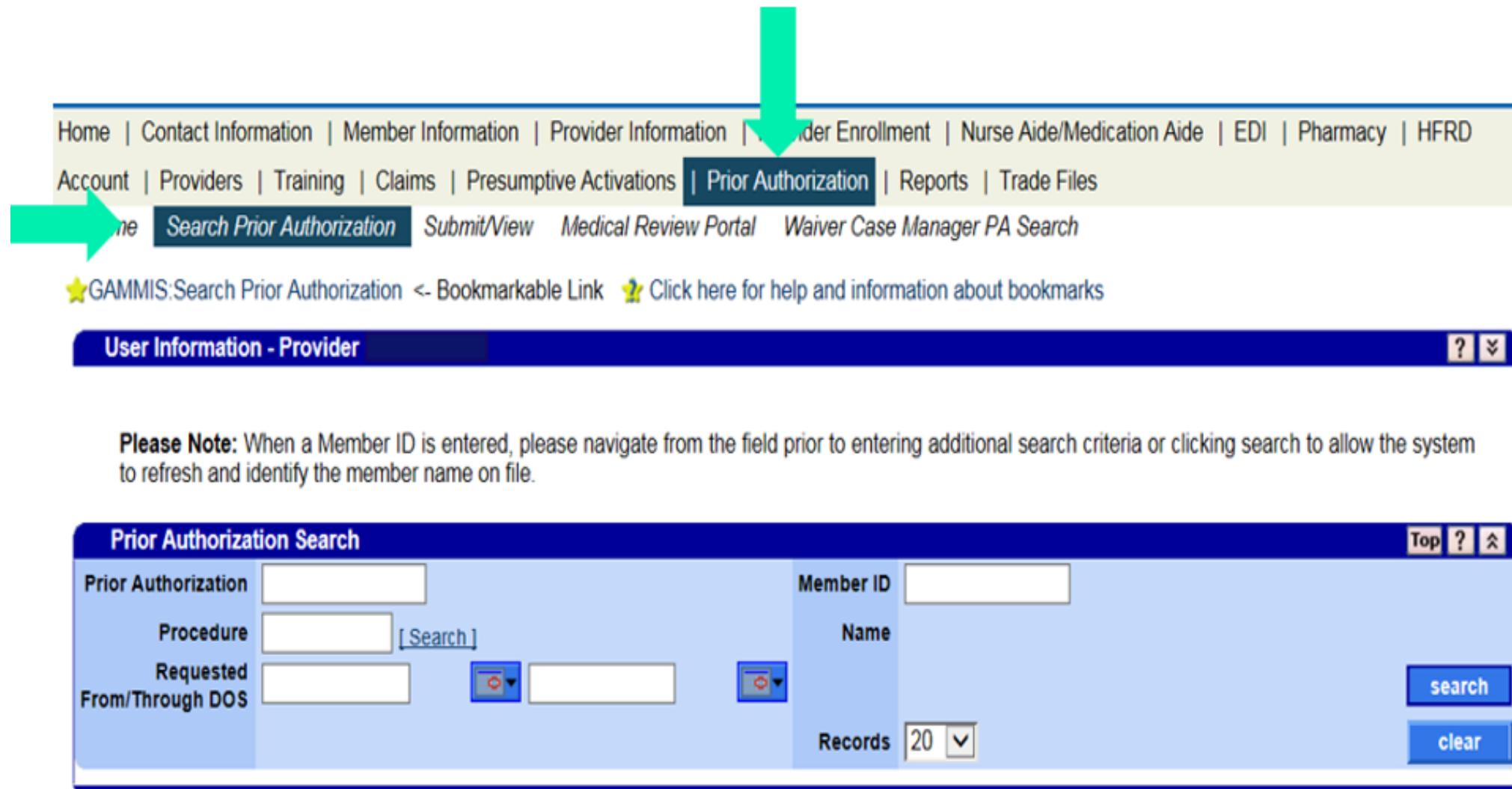
• Step 3

- ☐ Go to Work List.
- ☐ Select Payer from the drop-down menu.
- ☐ In the Authorization Field, enter the authorization number from the prior authorization tab in Step 1.
- ☐ Do not enter dates in the date fields. This will cause the system to limit the claims to dates within that time frame and may eliminate.
- ☐ Click on the "Search" button.
- ☐ At the top of the Row Headers, click on Calculated Amount and then click on it again to sort the field from highest dollar amount to lowest.
- ☐ If you find a claim with an extreme dollar amount, it is an indication there are too many units assigned to that claim line.

Prior Authorization Search- GAMMIS



Prior Authorization Search-GAMMIS



The screenshot shows the GAMMIS web application interface. A large green arrow points down to the 'Prior Authorization' link in the top navigation bar. A smaller green arrow points right to the 'Search Prior Authorization' link in the sub-navigation bar. Below the navigation bar, there is a 'User Information - Provider' section. A 'Please Note' message is displayed. The main section is titled 'Prior Authorization Search' and contains several input fields: 'Prior Authorization', 'Procedure', 'Requested From/Through DOS', 'Member ID', 'Name', and 'Records'. There are also '[Search]' and 'search' buttons, and a 'clear' button. The 'Records' field is set to 20.

Home | Contact Information | Member Information | Provider Information | Provider Enrollment | Nurse Aide/Medication Aide | EDI | Pharmacy | HFRD
Account | Providers | Training | Claims | Presumptive Activations | **Prior Authorization** | Reports | Trade Files

[Search Prior Authorization](#) [Submit/View](#) [Medical Review Portal](#) [Waiver Case Manager PA Search](#)

★GAMMIS:Search Prior Authorization <- Bookmarkable Link 🌟 Click here for help and information about bookmarks

User Information - Provider ? ▾

Please Note: When a Member ID is entered, please navigate from the field prior to entering additional search criteria or clicking search to allow the system to refresh and identify the member name on file.

Prior Authorization Search Top ? ⬆

Prior Authorization		Member ID	
Procedure	[Search]	Name	
Requested From/Through DOS	▾ ▾	Records	20 ▾
			search
			clear

Prior Authorization Search-GAMMIS

(continued)

The screenshot shows a web application window titled "Prior Authorization Search". The interface is divided into two main sections. The left section contains three input fields: "Prior Authorization" (with a text input), "Procedure" (with a text input and a "[Search]" button next to it), and "Requested From/Through DOS" (with two date pickers). The right section contains two input fields: "Member ID" (with a text input) and "Name" (with a text input). Below these is a "Records" dropdown menu set to "20". At the bottom right, there are two buttons: "search" and "clear". In the top right corner of the window, there are links for "Top", a help icon "?", and an up arrow icon.

Prior Authorization search can be done in either of the following ways:

- Enter the member's prior authorization number and select search
- Enter the Member ID and the requested from/through date of service and select search

Prior Authorization Search-GAMMIS

(continued)

Prior Authorization Information			
PA Number	9000 [REDACTED]	Member ID	[REDACTED]
Reviewer	VND_ASO	Last Name	[REDACTED]
Review Date	08/31/2022	First Name	[REDACTED]
PA Type	COMMUNITY MENTAL HEA	DOB	03/21/1985
Date Mailed		Status	APPROVED
PA Notice	NO PRINT	Begin Date	08/09/2022
Vendor PA Number		End Date	05/10/2023
Retro Reason		Used Units	
Update Reviewed	08/31/2022	PA Source	ASO
Internal Text	☐	Version	
External Text	☐		

Prior Authorization Search-GAMMIS

(continued)

Line Items											
PA Line Item	01	Status	APPROVED	Rendering Provider							
From DOS	11/14/2016	COS Code	660	Category of Service							
Through DOS	11/13/2017			Tooth							
Most Recent DOS Paid				Quadrant							
Units Allowed	12	Amount Allowed	\$2,240.04	Surface							
Units Used	0.000	Amount Used	\$0.00								
Max Monthly Units	1	Max Monthly Amount	\$0.00								
Max Daily Units	0	Authorized Rate	\$0.00								
PA Line Item	02	Status	APPROVED	Rendering Provider							
From DOS	11/14/2016	COS Code	660	Category of Service							
Through DOS	11/13/2017			Tooth							
Most Recent DOS Paid	01/12/2017			Quadrant							
Units Allowed	1160	Amount Allowed	\$10,416.80	Surface							
Units Used	104.000	Amount Used	\$933.92								
Max Monthly Units	110	Max Monthly Amount	\$0.00								
Max Daily Units	0	Authorized Rate	\$0.00								
PA Line Item	03	Status	APPROVED	Rendering Provider							
From DOS	11/14/2016	COS Code	660	Category of Service							
Through DOS	11/13/2017			Tooth							
Most Recent DOS Paid	01/11/2017			Quadrant							
Units Allowed	676	Amount Allowed	\$6,827.60	Surface							
Units Used	88.000	Amount Used	\$886.45								
Max Monthly Units	60	Max Monthly Amount	\$0.00								
Max Daily Units	0	Authorized Rate	\$0.00								
Procedures											
PA Line Item	(Procedure	Description)	(Modifier 1	Description)	(Modifier 2	Description)	(Modifier 3	Description)	(Modifier 4	Description)	NDC
01	1	T2022 CASE MANAGEMENT, PER MONTH	SE	STATE/FED FUNDED PROGRAM/SER							
02	2	T1021 HH AIDE OR CN AIDE PER VISIT	TF	INTERMEDIATE LEVEL OF CARE							
03	3	T1021 HH AIDE OR CN AIDE PER VISIT	U1	M/CAID CARE LEV 1 STATE DEF							

Conduent

Helpful

Resources/

Training



Conduent Helpful Resources & Training

Mobile Caregiver+ training webinars for the EVV Provider Dashboard and MCG+ mobile app are hosted by Netsmart throughout the month and cover a variety of topics. Users are also welcome to watch pre-recorded webinars about the solution or join live Q&A sessions to get their questions answered in real time.



Helpful Resources:

1. To register for the EVV Dashboard - <https://mobilecaregiverplus.com/ga-dch/>
2. To register for additional Mobile Care+ Training - <https://mobilecaregiverplus.com/training/>
3. To register for a Live question and answer session with Netsmart - <https://mobilecaregiverplus.com/training/>
4. To access Georgia EVV Townhalls and Webinars - <https://medicaid.georgia.gov/programs/all-programs/georgia-electronic-visit-verification-evv/evv-service-providers>

Once the initial training is complete, the Conduent Call Center is available to provide ongoing support, helping providers reinforce their knowledge and ensuring an optimal EVV experience moving forward.

How to access quick reference guides or complete training manuals?

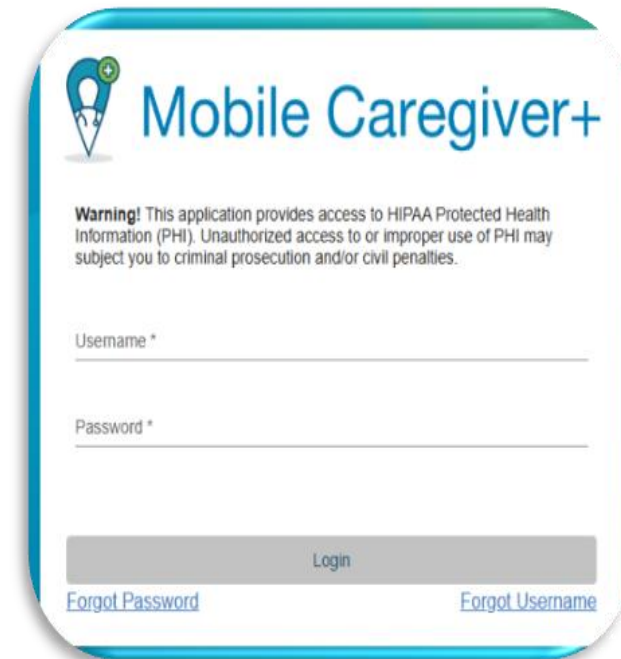
EVV Provider Dashboard:

- Log into the EVV Provider Dashboard
- In the Main Menu click on "Training"
- The screen that opens in the Main Window is blank except a hyperlink that says "Go To Training."
- Click on the hyperlink to be taken to the <https://mobilecaregiverplus.com/resources/>

Mobile Caregiver+ Mobile App:

- Log into the Mobile Caregiver+ Mobile App
- Select Menu and click on "Help Center"
- Once selected, each mobile users should have immediate access to immediate training on the following:
 - Location Services
 - Viewing or Deleting Messages
 - Offline Mode
 - View or Cancel Visits
 - Start or End Visits
 - How to Schedule a Visit
 - How to View a Scheduled Visit
 - Undoing the Start of a Visit
 - Recipients

EVV Login Page



Mobile Caregiver+

Warning! This application provides access to HIPAA Protected Health Information (PHI). Unauthorized access to or improper use of PHI may subject you to criminal prosecution and/or civil penalties.

Username *

Password *

Login

[Forgot Password](#) [Forgot Username](#)

GAMMIS Helpful Resources & Training



GAMMIS Helpful Resources

The **Provider Notices Panel** houses **PowerPoint presentations** from monthly workshops and semi-annual Medicaid Fairs

Refresh session] You have approximately 15 minutes until your session will expire.

Wednesday, December 8, 2021

Search

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[Web Portal Training](#) | [Provider Education](#)

★GAMMIS:Provider Notices <- Bookmarkable Link 🌟 Click here for help and information about bookmarks

Provider Notices (more than 150 available)				
Title	File Type	Category	Size (KB)	Release Date
Presentation - ICWP New Biller - December 2023	PDF	SESSION MATERIALS	2711.9	12/15/2023
Presentation - Hospital Services - December 2023	PDF	SESSION MATERIALS	2397.2	12/01/2023
Presentation - Physician Services - November 2023	PDF	SESSION MATERIALS	2016.5	11/01/2023
Nurse Aide Registry Adverse Findings Letter & Quarterly Report - October 2023	PDF	NURSE AIDE	645.7	10/03/2023
Presentation - NOW/COMP - September 2023	PDF	SESSION MATERIALS	1483.7	09/01/2023
Presentation - Provider Revalidation Process - August 2023	PDF	SESSION MATERIALS	1292.3	08/29/2023
Presentation - CIS Services - August 2023	PDF	SESSION MATERIALS	974.4	08/01/2023
Nurse Aide Registry Adverse Findings Letter & Quarterly Report - July 2023	PDF	NURSE AIDE	645.7	07/01/2023
Presentation - GAPP Services - July 2023	PDF	SESSION MATERIALS	1869.5	07/01/2023
2023 Fingerprinting Instructions for Medicaid High Risk Providers	PDF	FAQ FOR PROVIDERS	2598.7	06/30/2023
Presentation - CCSP/ Source New Biller - June 2023	PDF	SESSION MATERIALS	1907	06/12/2023
Presentation - Spring Medicaid Fair 2023/Amerigroup - YouTube	PDF	MEDICAID FAIRS	2302.1	05/10/2023
Presentation - Spring Medicaid Fair 2023/CareSource - YouTube	PDF	MEDICAID FAIRS	1596.1	05/10/2023
Presentation - Spring Medicaid Fair 2023/Peach State - YouTube	PDF	MEDICAID FAIRS	1434.5	05/10/2023
Presentation - End of Continuous Enrollment - May 2023	PDF	SESSION MATERIALS	429.2	05/09/2023
Presentation - Nursing Home Services - May 2023	PDF	SESSION MATERIALS	967.2	05/01/2023
Presentation - Spring Medicaid Fair 2023/Common Denials - YouTube	PDF	MEDICAID FAIRS	2402.7	04/28/2023
Presentation - Spring Medicaid Fair 2023/End of Continuous Enrollment - YouTube	PDF	MEDICAID FAIRS	374.5	04/28/2023
Presentation - Spring Medicaid Fair 2023/Opening Session - YouTube	PDF	MEDICAID FAIRS	1146.8	04/28/2023
Presentation - Spring Medicaid Fair 2023/Pathways - YouTube	PDF	MEDICAID FAIRS	480.9	04/28/2023
Presentation - End of Continuous Enrollment - April 2023	PDF	SESSION MATERIALS	461.2	04/10/2023
Nurse Aide Registry Adverse Findings Letter & Quarterly Report - April 2023	PDF	NURSE AIDE	644.2	04/03/2023
Presentation - Hospice Services - March 2023	PDF	SESSION MATERIALS	1515	03/16/2023
Georgia Families Frequently Asked Questions and Answers - Members	PDF	ALL CATEGORIES	263.2	03/06/2023
Georgia Families Frequently Asked Questions and Answers - Providers	PDF	FAQ FOR PROVIDERS	263.2	03/06/2023
Presentation - Autism Spectrum Disorder - February 2023	PDF	SESSION MATERIALS	1293.6	02/01/2023
Presentation - New Biller CCSP and SOURCE - January 2023	PDF	SESSION MATERIALS	1699.5	01/12/2023
Presentation - New Biller Web Portal Navigation - January 2023	PDF	SESSION MATERIALS	3963.6	01/11/2023
Nurse Aide Registry Adverse Findings Letter & Quarterly Report - January 2023	PDF	NURSE AIDE	644.6	01/01/2023
Appendix E - Education for Healthy Behaviors Booklet for Mothers	PDF	SESSION MATERIALS	1099.7	12/16/2022

GAMMIS Helpful Resources

The Provider Manuals Panel houses Part I and Part II (Category Specific) Policy Manuals

Refresh session] You have approximately 19 minutes until your session will expire.

Wednesday, December 8, 2021

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[Web Portal Training](#) | [Provider Education](#)

★GAMMIS:Provider Manuals <- Bookmarkable Link 📌 Click here for help and information about bookmarks

ALL CATEGORIES ▼ go

Provider Manuals (more than 150 available)				
Title	File Type	Category	Size (KB)	Release Date
Adult Protective Services Targeted Case Management	PDF	CURRENT POLICY MANUALS	758.5	10/01/2023
Adults with Aids Targeted Case Management	PDF	CURRENT POLICY MANUALS	607.4	10/01/2023
Advanced Nurse Practitioner Services	PDF	CURRENT POLICY MANUALS	2102.5	10/01/2023
Ambulatory Surgical and Birthing Center Services	PDF	CURRENT POLICY MANUALS	964.1	10/01/2023
At Risk of Incarceration Targeted Case Management	PDF	CURRENT POLICY MANUALS	526.5	10/01/2023
Autism Spectrum Disorder Services	PDF	CURRENT POLICY MANUALS	1523.4	10/01/2023
Childbirth Education Program	PDF	CURRENT POLICY MANUALS	972.5	10/01/2023
Children's Intervention School Services	PDF	CURRENT POLICY MANUALS	1261.3	10/01/2023
Children's Intervention Services	PDF	CURRENT POLICY MANUALS	2693.3	10/01/2023
Community Behavioral Health Rehabilitation Services	PDF	CURRENT POLICY MANUALS	2363.6	10/01/2023
Comprehensive Supports Waiver Program and New Options Waiver Program	PDF	CURRENT POLICY MANUALS	3073.5	10/01/2023
Comprehensive Supports Waiver Program Chapters 1300-3700	PDF	CURRENT POLICY MANUALS	1851.7	10/01/2023
Dental Services	PDF	CURRENT POLICY MANUALS	908.5	10/01/2023
Diagnostic Screening and Preventive Services	PDF	CURRENT POLICY MANUALS	1111.3	10/01/2023
Dialysis Services	PDF	CURRENT POLICY MANUALS	1266.4	10/01/2023
Durable Medical Equipment	PDF	CURRENT POLICY MANUALS	4732.8	10/01/2023
Early Intervention Case Management	PDF	CURRENT POLICY MANUALS	723	10/01/2023
EDWP - CCSP and SOURCE Adult Day Health Services	PDF	CURRENT POLICY MANUALS	621.7	10/01/2023
EDWP - CCSP and SOURCE Alternative Living Services	PDF	CURRENT POLICY MANUALS	798.2	10/01/2023
EDWP - CCSP and SOURCE Case Management	PDF	CURRENT POLICY MANUALS	3335.6	10/01/2023
EDWP - CCSP and SOURCE Emergency Response Services	PDF	CURRENT POLICY MANUALS	226.9	10/01/2023
EDWP - CCSP and SOURCE General Services	PDF	CURRENT POLICY MANUALS	3635	10/01/2023
EDWP - CCSP and SOURCE Home Delivered Meals	PDF	CURRENT POLICY MANUALS	407.2	10/01/2023
EDWP - CCSP and SOURCE Home Delivered Services	PDF	CURRENT POLICY MANUALS	233.8	10/01/2023
EDWP - CCSP and SOURCE Out of Home Respite	PDF	CURRENT POLICY MANUALS	470.3	10/01/2023
EDWP - CCSP and SOURCE Personal Support Services	PDF	CURRENT POLICY MANUALS	754.2	10/01/2023
EDWP - CCSP and SOURCE Skilled Nursing Services by Private Home Care Providers	PDF	CURRENT POLICY MANUALS	243.2	10/01/2023
Emergency Ambulance	PDF	CURRENT POLICY MANUALS	971.8	10/01/2023
EPSDT Services - Health Check Program Manual	PDF	CURRENT POLICY MANUALS	5159	10/01/2023
Exceptional Transportation Services	PDF	CURRENT POLICY MANUALS	4280.5	10/01/2023
Family Planning Services	PDF	CURRENT POLICY MANUALS	970.4	10/01/2023
Federally Qualified Health Center Services (FQHC) and Rural Health Clinic Services (RHC)	PDF	CURRENT POLICY MANUALS	1188.7	10/01/2023
GAPP Manual	PDF	CURRENT POLICY MANUALS	2038.7	10/01/2023
HCBS Provider Guidance V4	PDF	CURRENT POLICY MANUALS	962.3	10/01/2023

GAMMIS Helpful Resources

The **Provider Messages Panel** includes the most **up-to-date announcements and changes** to the Medicaid Program.

Filters are available by adding a **Keyword, Year or Provider** to narrow search.

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[Home](#) [Provider Notices](#) [Provider Manuals](#) [Provider Messages](#) [Fee Schedules](#) [Forms](#) [PASRR Request](#) [Reports](#) [FAQ for Providers](#)
[Web Portal Training](#) [Provider Education](#)

User Information?⬆

Login/Manage Account

Login

Banner Messages

This page provides easy access to public banner messages. To access all banner messages, leave the search fields blank and click the search button.

Messages Search PanelTop?⬆

Keyword

Year

▼

Provider Type

▼

Records

20

▼

search

clear

GAMMIS Helpful Resources

The **Web Portal Training Panel** houses various training guides and materials for GAMMIS Web Portal users.

Refresh session | You have approximately 19 minutes until your session will expire.

Wednesday, December 8, 2021

Search

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Home Provider Notices Provider Manuals Provider Messages Fee Schedules Forms for Providers Reports for Public Access FAQ for Providers

Web Portal Training Provider Education

★GAMMIS:Web Portal Training <- Bookmarkable Link 🌟 Click here for help and information about bookmarks

User Information

Login/Manage Account Login

PDF Reader Required

NOTE: If you don't have a PDF reader already installed, Adobe Acrobat Reader is required to view these documents. Click here to obtain the latest version of the free Adobe Reader.

File Download Issues

Some users may have difficulty downloading files. Often this is caused by pop-up windows being blocked or by security settings in the browser. Click here for help with download issues.

Web Portal Training (16 rows returned)				
Title	File Type	Duration	Size (KB)	Run Date
Payee Selection Quick Reference Guide	PDF		601.7	04/10/2023
MFA Troubleshooting - FAQ	PDF		188.7	12/02/2022
GAMMIS MFA Navigation	PDF		235.4	11/04/2022
FAQ - Multi-factor Authentication (MFA) for GAMMIS	PDF		254.2	10/21/2022
Claims - Completing an Institutional (UB04) Web Claim	PDF		888.7	03/04/2021
Claims - Completing a Crossover Web Claim	PDF		882.9	02/12/2021
Claims - Completing a Dental Web Claim	PDF		507.2	02/12/2021
Claims - Completing a Professional (1500) Web Claim	PDF		457.4	02/12/2021
Provider Enrollment - Initial Application	PDF		2722.5	02/12/2021
Provider Enrollment - Initial Facility Application	PDF		2567.7	02/12/2021
Provider Enrollment- Additional Service Location (Facility) Application	PDF		1913.1	02/12/2021
Presentation - Ordering, Prescribing, or Referring (OPR)	PDF		1229.7	11/02/2015
Online Enrollment for Behavioral Health COS 440 Providers - Step by Step	PDF		1206.8	09/15/2015
Provider Enrollment - Additional Service Location Application	EXE	20 Minutes	7637.3	12/13/2012
Billing Agent Account Registration and Maintenance	EXE	30 Minutes	7257.2	12/08/2010
Provider Web Registration and Maintenance	EXE	30 Minutes	6460.4	12/08/2010

Provider Manuals (4 rows returned)			
Title	File Type	Size (KB)	Release Date
Nurse Aide Program Provider/CNA - User Manual	PDF	526.1	10/18/2010
Web Portal Navigational Manual for Members	PDF	5861	07/01/2022
Web Portal Navigational Manual for Providers	PDF	18087.7	10/03/2023
Web Portal User Account Management Guide	PDF	1858.6	11/28/2022

Contacting

Conduent



The Call Center-EVV

Topic	Contact & Troubleshooting information
GA EVV Support (Netsmart Call Center)	Support by Phone: 1 (833) 483-5587
GA EVV Helpdesk (Netsmart Website Address)	www.NetsmartConnect.com Monday – Friday: 8:00 AM – 6:00 PM EST Saturday/Sunday and State Holidays: Closed
Netsmart Support Portal Assist with:	
Target Area: EVV Technical and System Questions GPS Variance Integration Portal Missing Member/PA Password Reset Support Profile Updates Registering Provider ID Reports/Time Log Scheduling Visits Technical Support/ L2 or L3 tickets (formerly Tier 2 or Tier 3)	Administrative Support Alternative EVV Requirements Claims Matching Dashboard Navigation EVV Mobile Device EVV Policy Questions EVV Visit Maintenance Getting started with EVV

Please note that your support is instrumental in enabling the Netsmart Call Center EVV Specialist to effectively address and resolve your concern.

Upon contact, the following details will be requested, including but not limited to:

Conduent **must** have all details below to create a ticket.

Reason for Contact:

Current Case #: (if applicable)

Tier 2 Case #: (if applicable)

Name of your 3rd party vendor: (if applicable)

- Your agency name
- Your agency Medicaid ID
- Your agency National Provider Identification (NPI) number
- Your agency Employee Identification Number (EIN) or Taxpayer Identification Number
- Your name, e-mail address, and contact number
- Screenshots of the Error or Issue

- PUNT
- PNOT
- Missing Member or PA
- Password Reset
- Unmatched Claims
- Denied Claims
- Voids or Adjustments
- Mobile App Issues

Example Tier
1 Escalations



- Missing Member or PA
- EVV Functionality Errors
- RNOT (validated)
- Unable to Register
- User Profile Issues (rare)

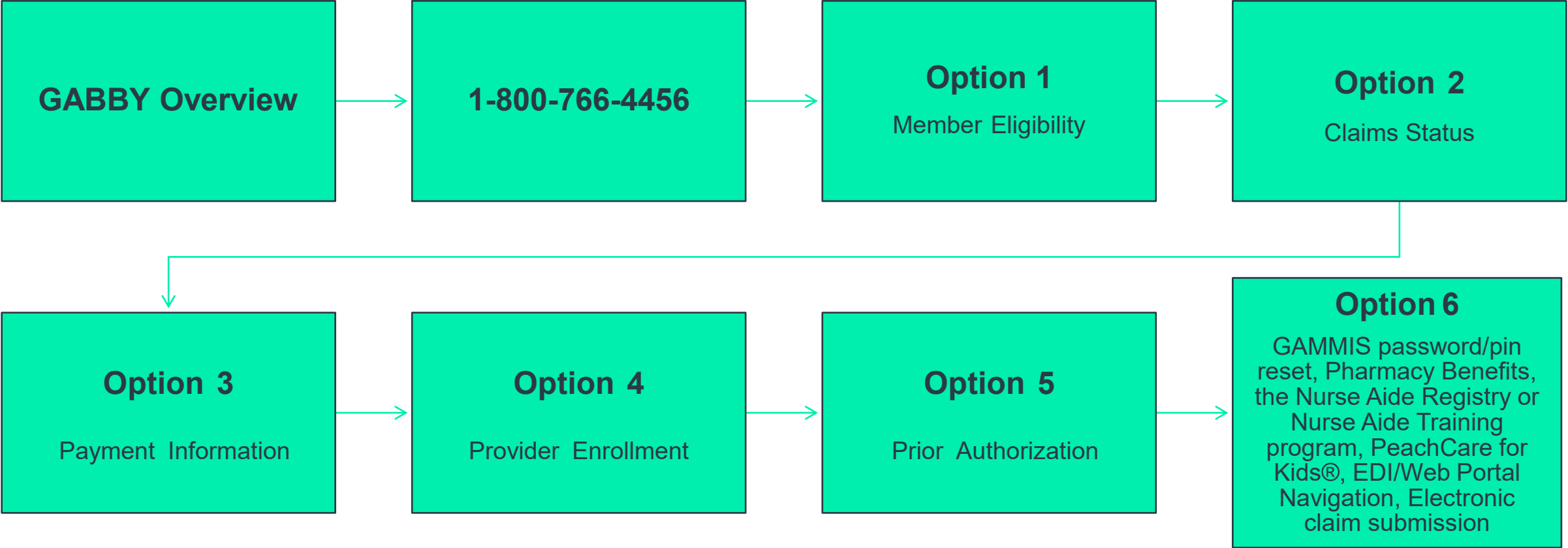
Example Tier
2 Escalations



Contacting Gainwell Technologies



GABBY™-Virtual Agent



Provider Services Contact Center

PSCC assists providers with inquiries regarding claims status, eligibility coverage, prior authorization, remittance advice, demographic changes, and other Medicaid questions. PSCC is available:

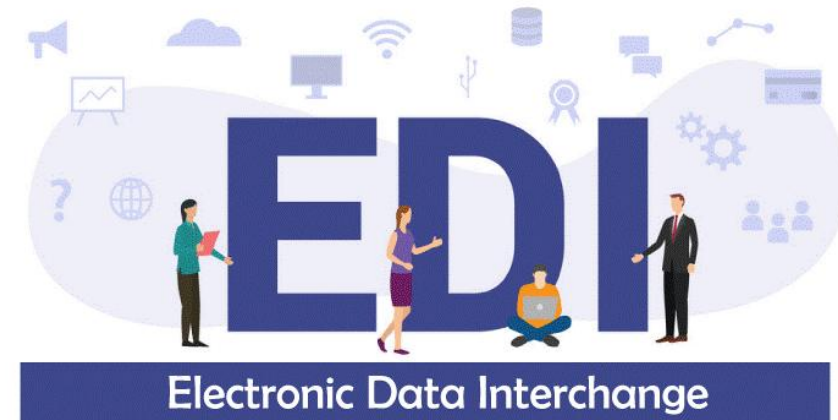
- **1-800-766-4456**
- **Monday through Friday (excluding state holidays)**
- **7 AM to 7 PM, Eastern Standard Time**
- **Providers can also use the “Contact Us” link on GAMMIS**



Electronic Data Interchange (EDI)/ Web Portal Team

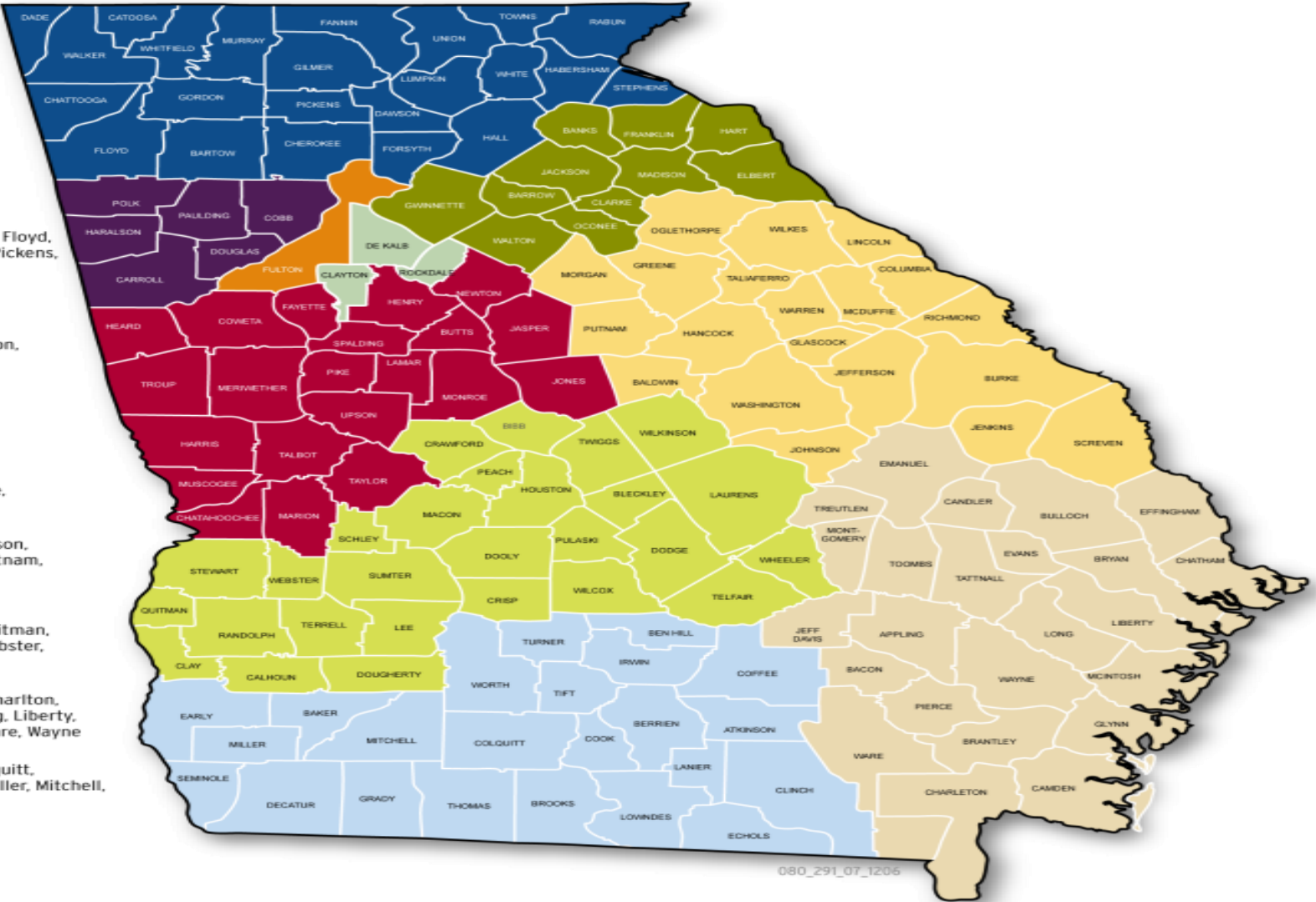
1-877-261-8785

- Web Portal Password Resets
- Provider Pin Activations
- Electronic claim file submissions
- Claim Rejects
- Web Portal Navigation/Registration
- Identifying and troubleshooting technical issues
- Enrollment of trading partners



Georgia Field Territories

- Territory 1 N GA**
Bartow, Catoosa, Chatooga, Cherokee, Dade, Dawson, Fannin, Floyd, Forsyth, Gilmer, Gordon, Habersham, Hall, Lumpkin, Murray, Pickens, Rabun, Stephens, Towns, Union, Walker, White, Whitfield
- Territory 2 Atlanta**
Fulton
- Territory 3 NE GA**
Banks, Barrow, Clarke, Elbert, Franklin, Gwinnett, Hart, Jackson, Madison, Oconee, Walton
- Territory 4: NW GA**
Carroll, Cobb, Douglas, Harolson, Paulding, Polk
- Territory 5: SE Metro**
Clayton, DeKalb, Rockdale
- Territory 6: Middle GA**
Butts, Chattahoochee, Coweta, Fayette, Harris, Heard, Henry, Jasper, Jones, Lamar, Marion, Meriwether, Monroe, Muscogee, Newton, Pike, Spalding, Talbot, Taylor, Troup, Upson
- Territory 7: Augusta**
Baldwin, Burke, Columbia, Glascock, Greene, Hancock, Jefferson, Jenkins, Johnson, Lincoln, McDuffie, Morgan, Oglethorpe, Putnam, Richmond, Screven, Taliaferro, Warren, Washington, Wilkes
- Territory 8: SW GA**
Bibb, Bleckley, Calhoun, Clay, Crawford, Crisp, Dodge, Dooley, Dougherty, Houston, Laurens, Lee, Macon, Peach, Pulaski, Quitman, Randolph, Stewart, Schley, Sumter, Telfair, Terrell, Twiggs, Webster, Wheeler, Wilcox, Wilkinson
- Territory 9: SE GA**
Appling, Bacon, Bryan, Bulloch, Brantley, Camden, Candler, Charlton, Chatham, Effingham, Emanuel, Evans, Glynn, Jeff Davis, Long, Liberty, McIntosh, Montgomery, Pierce, Tattnall, Toombs, Treutlen, Wayne
- Territory 10: South GA**
Atkinson, Baker, Ben Hill, Barrien, Brooks, Clinch, Coffee, Colquitt, Cook, Decatur, Early, Echols, Grady, Irwin, Lanier, Lowndes, Miller, Mitchell, Seminole, Thomas, Tift, Turner, Worth
- Territory 11 State Wide**
Hospital Field Representative



Provider Relations Field Services Representatives

Territory	Region	Rep
1	North Georgia	Mercedes Liddell
2	Fulton	DeAndre Murray
3	NE Georgia	Carolyn Thomas
4	NW Georgia	Tierra Johnson
5	SE Metro	Ebony Hill
6	Middle Georgia	Shawnteel Bradshaw
7	Augusta	Jessica Bowen
8	SW Georgia	Jill McCrary
9	SE Georgia	Kendall Telfair
10	South Georgia	Anitrus Johnson
North	Hospital Rep	Sherida Bentley
South	Hospital Rep	Vacant

Provider Relations Consultants

State-Wide Consultants

Brenda Hulette

Danny Williams

Janey Griffin

Contact My Provider Rep Directly

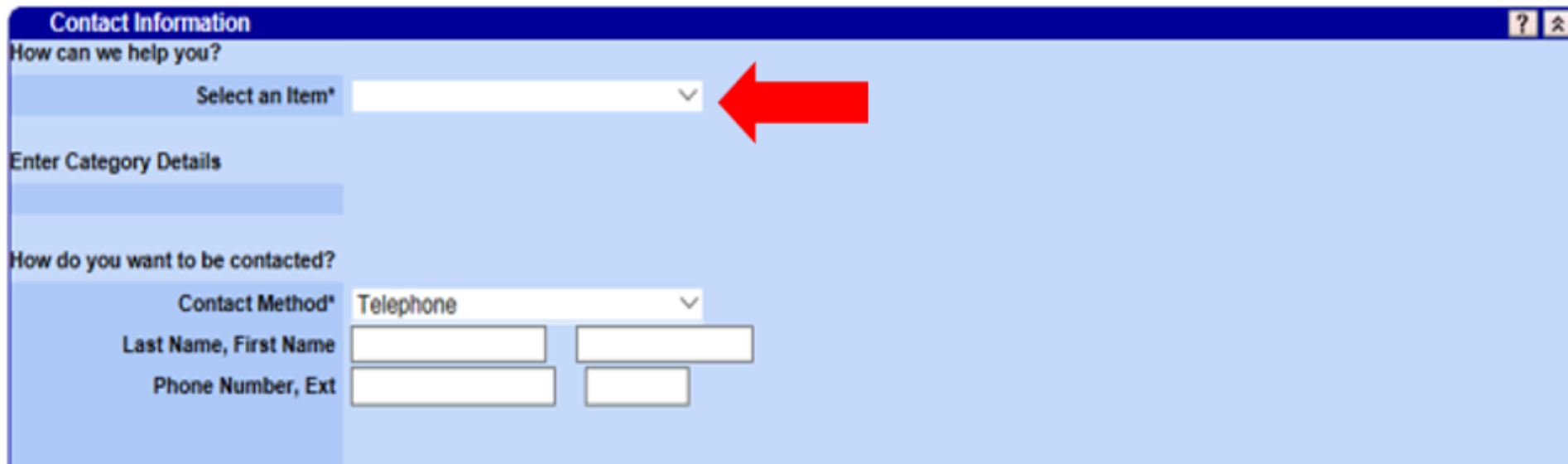
After logging into the GAMMIS System, select Contact Information then Contact Us



Contact My Provider Rep Directly

(continued)

Select an Item



The screenshot shows a web form titled "Contact Information" with a blue header bar containing a question mark icon and an upward arrow icon. The form is divided into sections. The first section, "How can we help you?", contains a dropdown menu labeled "Select an Item*" with a downward arrow icon. A large red arrow points to this dropdown menu. Below this is a section titled "Enter Category Details" with a light blue background. The next section, "How do you want to be contacted?", contains a dropdown menu labeled "Contact Method*" with "Telephone" selected. Below this are two rows of input fields: "Last Name, First Name" (two separate boxes) and "Phone Number, Ext" (two separate boxes).

Contact My Provider Rep Directly

(continued)

Requests Requiring PHI

NOTE: If the response to your inquiry contains protected health information (PHI) such as member or claims information, you must log into the secure web portal to submit your question and receive the response. Upon login, additional contact options related to PHI will be available.

[submit](#) [cancel](#)

Contact Information

How can we help you?

Select an Item*

Enter Category Details

How do you want to be contacted?

Contact Method*

Last Name, First Name

Phone Number, Ext

[top of page](#)

Claim Status Inquiry
Eligibility Inquiry
Contact My Provider Service Rep
Provider Enrollment
Request a Provider Rep Visit
ICD-10 Inquiry
Favors Review Inquiry
MAPIR Inquiry
Web Registration
Member ID Cards
Member PCP Assignments
Customer Service
Complaint about a Provider
Complaint about a Member
Other Complaint
Having a Technical Problem
Other
EDI Submission Problem
Provider PIN Issue

[top of page](#)

OR

Click Here

Contact My Provider Rep Directly

(continued)

Please provide all details pertaining to your issue, including ICN, member ID, etc.



submit cancel

Contact Information

How can we help you?

Select an Item* Contact My Provider Service Rep ▾

Enter Category Details

How can we help you?

I Need some help with ICN 2017123456777

How do you want to be contacted?

Contact Method* Telephone ▾

Last Name, First Name DXC

Phone Number, Ext (800)766-4456

Contact My Provider Rep Directly

(continued)

The following messages were generated:

Your request has been processed. Your tracking number is 20763193.

Providers may call the Provider Contact Center at (770) 325-5666 or toll-free at (800) 766-4456. Members may call the Member Contact Center at (770) 325-2331 or toll-free at (866) 211-0950.

Contact Information



How can we help you?

Select an Item*

Contact My Provider Service Rep

Enter Category Details

How can we help you?

test

How do you want to be contacted?

Contact Method*

Telephone

Last Name, First Name

HP

test

Phone Number, Ext

(800)766-4456

Session Review



Understand what is EVV



How to verify Eligibility



Where to submit claims/adjustments and reconcile pending/suspended claims



How to access Training Materials



How to contact Conduent and Gainwell Technologies

Questions





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