

# ***MEDICON 2025***

AFMC Medicaid Management Information  
System (MMIS) Outreach Team

Speaker-Karen Young, Training and Program Developer

# Agenda

MMIS Outreach  
Team

New Paperless  
Submission for  
Provider  
Enrollment

Medicare vs  
Commercial  
Insurance

Reconsiderations  
vs  
Appeals

Healthcare Portal  
Update

Things to  
Remember

Medicaid Tools  
and Resources

# MMIS Outreach Team Map

## MMIS Outreach Specialists Information Sheet

1020 W. 4th St., Suite 400 • Little Rock, AR 72201 • [afmc.org/mmis](http://afmc.org/mmis)

### MMIS OUTREACH SPECIALISTS

**HOURS OF OPERATION:**  
Monday–Friday • 8 A.M.–5 P.M.

**MMIS Manager**  
Becky Andrews ..... 501-212-8738  
[bandrews@afmc.org](mailto:bandrews@afmc.org)

**MMIS Supervisors**  
Tanasia Johnson-Kamal ..... 501-212-8798  
[mmisupervisor@afmc.org](mailto:mmisupervisor@afmc.org)  
Angie Riggan ..... 501-212-8795  
[mmisupervisor1@afmc.org](mailto:mmisupervisor1@afmc.org)

**Outreach Specialists**

- Janna Childers  
Pulaski County ..... 501-906-7566  
[pulaskibilling@afmc.org](mailto:pulaskibilling@afmc.org)
- Christy Owens  
NW—Northwest ..... 501-906-7566  
[northwestbilling@afmc.org](mailto:northwestbilling@afmc.org)
- Rose Bruton  
NE—Northeast ..... 501-906-7566  
[northeastbilling@afmc.org](mailto:northeastbilling@afmc.org)
- Mary Riley  
EC—East Central ..... 501-906-7566  
[eastcentralbilling@afmc.org](mailto:eastcentralbilling@afmc.org)
- Kristie Williams  
SC—South Central ..... 501-906-7566  
[southcentralbilling@afmc.org](mailto:southcentralbilling@afmc.org)
- Renee Smith  
WC—West Central ..... 501-906-7566  
[westcentralbilling@afmc.org](mailto:westcentralbilling@afmc.org)
- Shiveeta Robertson  
S—South ..... 501-906-7566  
[southbilling@afmc.org](mailto:southbilling@afmc.org)

### ARKANSAS DEPARTMENT OF HUMAN SERVICES, DMS

**ARKIDS FIRST/MEDICAID**  
<https://humanservices.arkansas.gov/>  
ARKids First Enrollment Information ..... 888-474-8275

**MEDICAID FRAUD CONTROL UNIT (PROVIDERS)**  
Central Arkansas ..... 501-682-8349

**ARKANSAS MEDICAID MANAGED CARE VOICE INFORMATION SERVICES**  
Toll free ..... 800-805-1512

**PHARMACY**  
Prime Therapeutics  
Help Desk ..... 800-424-7895

**TPL INFORMATION**  
Local ..... 501-537-1070  
Fax ..... 501-682-1644  
DHS Division of Medical Services,  
TPL Unit • P.O. Box 1437, Slot S296  
Little Rock, AR 72203-1437

### GAINWELL TECHNOLOGIES (Claims Processing)

**Gainwell Provider Assistance Center**  
**ELECTRONIC DATA INTERCHANGE (EDI), PROVIDER ASSISTANCE CENTER (PAC), AND PROVIDER ENROLLMENT**  
In-state toll free ..... 800-457-4454  
Local and out-of-state ..... 501-376-2211  
Monday through Friday 8 a.m. until 5:00 p.m.

**CLAIMS**  
P.O. Box 8034  
Little Rock, AR 72203

**SPECIAL CLAIMS**  
ATTN: Research Analysts  
P.O. Box 8036  
Little Rock, AR 72203



# MMIS OUTREACH TEAM



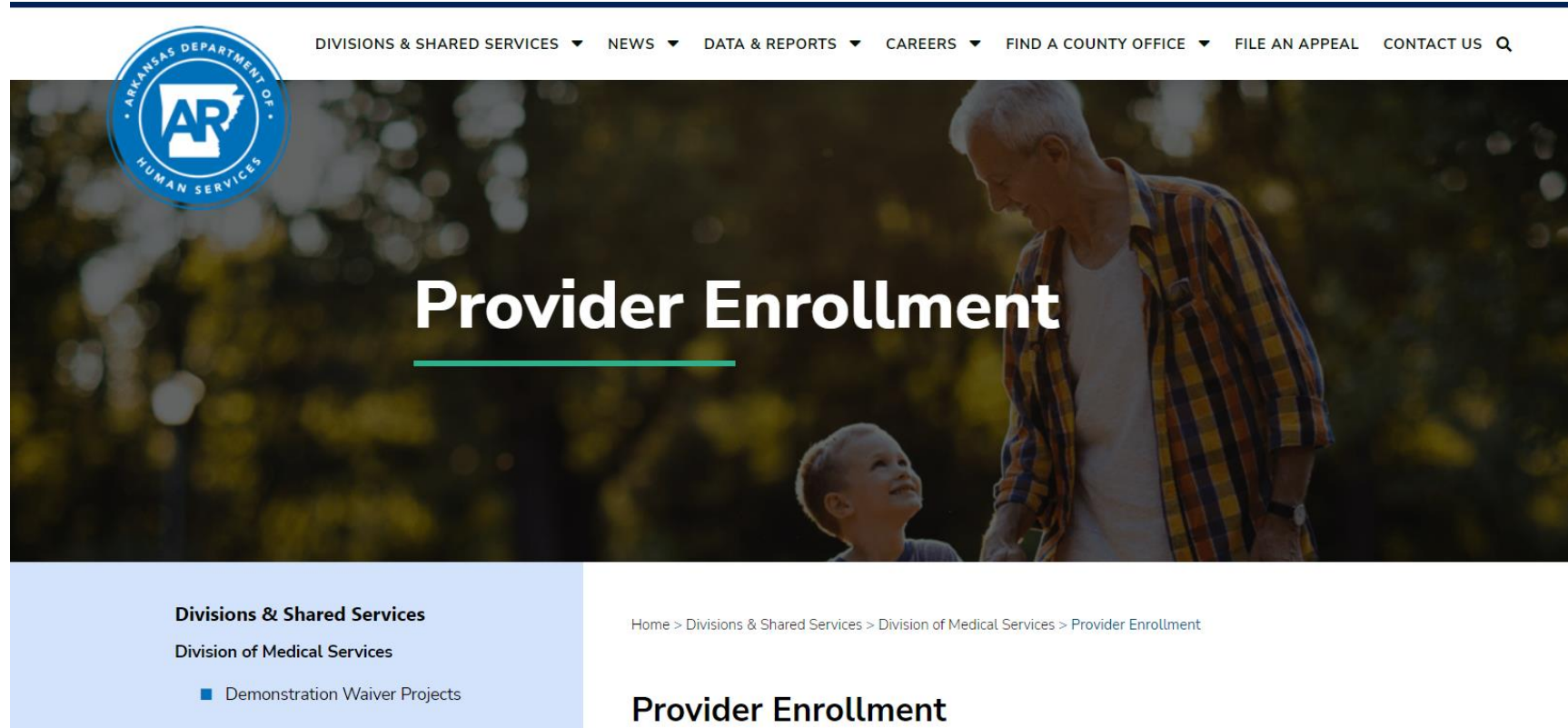
# Gainwell Technologies | Provider Enrollment





# Provider Enrollment

<https://humanservices.arkansas.gov/divisions-shared-services/medical-services/provider-enrollment/>



The screenshot shows the top of a web page for the Arkansas Department of Human Services. At the top left is the AFMC logo. In the center is the gainwell logo. At the top right is the Arkansas Department of Human Services logo. Below these is a navigation bar with links: DIVISIONS & SHARED SERVICES, NEWS, DATA & REPORTS, CAREERS, FIND A COUNTY OFFICE, FILE AN APPEAL, and CONTACT US. A search icon is also present. Below the navigation bar is a large banner image of an elderly man and a young child looking up at each other. Overlaid on the banner is the text 'Provider Enrollment' in large white font. In the top left corner of the banner is the Arkansas Department of Human Services seal. Below the banner, on the left, is a blue sidebar with the text 'Divisions & Shared Services' and 'Division of Medical Services'. Below this is a link for 'Demonstration Waiver Projects'. On the right, below the banner, is a breadcrumb trail: 'Home > Divisions & Shared Services > Division of Medical Services > Provider Enrollment'. Below the breadcrumb trail is the heading 'Provider Enrollment'.

**Provider Enrollment**

Divisions & Shared Services  
Division of Medical Services  
■ Demonstration Waiver Projects

Home > Divisions & Shared Services > Division of Medical Services > Provider Enrollment

**Provider Enrollment**

# Provider Re-validation on the Healthcare Portal

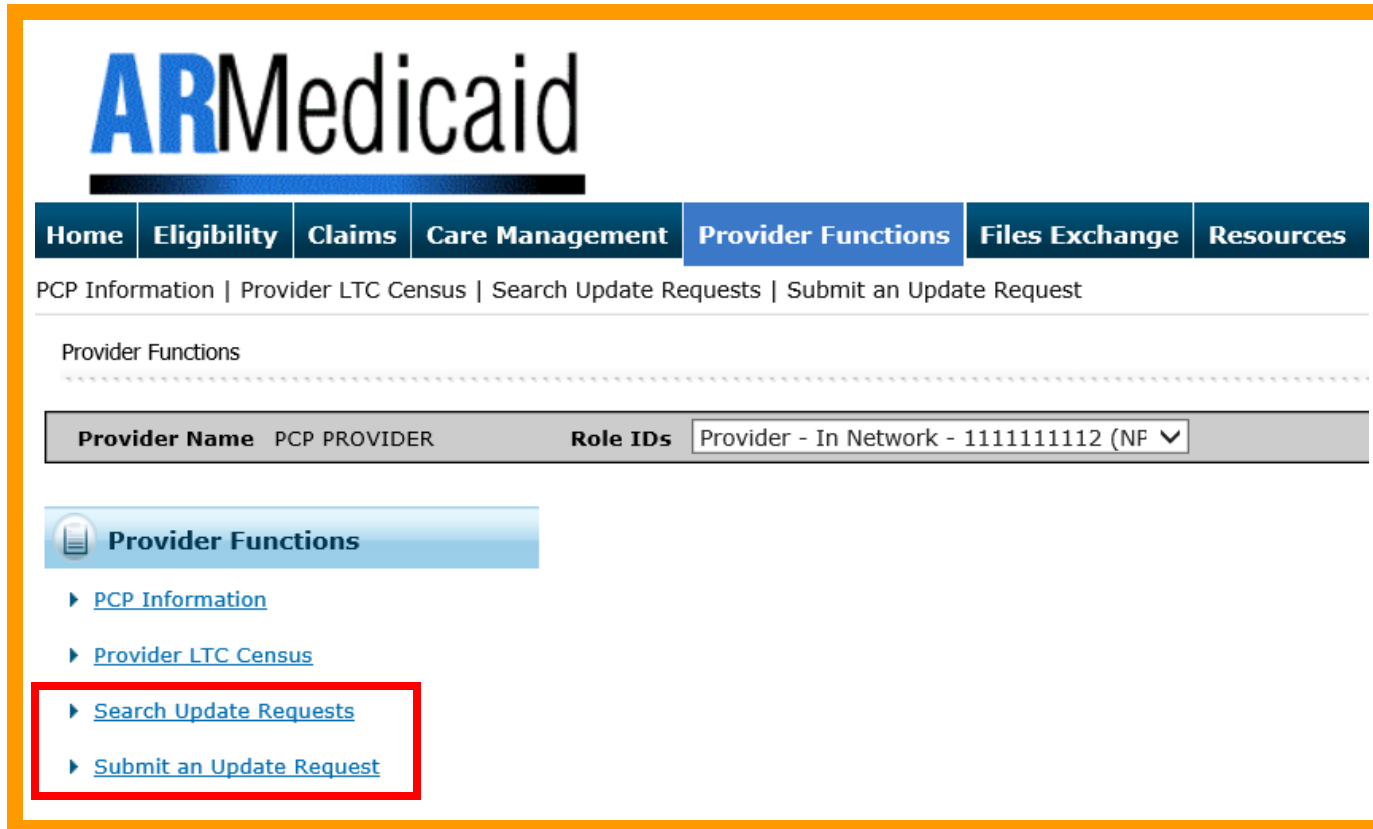
The screenshot displays the ARMedicaid Healthcare Portal interface. The top navigation bar includes links for Home, Eligibility, Claims, Care Management, Provider Functions, Files Exchange, and Resources. The user is logged in as a Provider, and the date is Thursday 01/02/2020 02:14 PM CST.

The main content area is titled "Welcome Health Care Professional!". It features a sidebar on the left with sections for User Details, Provider, and Provider Services. The Provider section is expanded, showing the following information:

- Name: [Redacted]
- Provider ID: [Redacted]
- Revalidation Date:** 08/11/2019 (indicated by a red arrow)
- License: 396 (Expiration Date: 06/30/2020)

The right sidebar contains links for Contact Us and Secure Correspondence, along with contact information for Claims: DXC Technology, PO BOX 8034, LITTLE ROCK, AR 72203.

# Provider Enrollment Updates



The screenshot shows the ARMedicaid website interface. At the top is the ARMedicaid logo. Below it is a navigation bar with tabs: Home, Eligibility, Claims, Care Management, Provider Functions (highlighted), Files Exchange, and Resources. Under the navigation bar is a breadcrumb trail: PCP Information | Provider LTC Census | Search Update Requests | Submit an Update Request. The main content area is titled "Provider Functions" and contains a search bar with "Provider Name" set to "PCP PROVIDER" and "Role IDs" set to "Provider - In Network - 1111111112 (NF)". Below the search bar is a section titled "Provider Functions" with a list of links: PCP Information, Provider LTC Census, Search Update Requests (highlighted with a red box), and Submit an Update Request (highlighted with a red box).

**ARMedicaid**

Home Eligibility Claims Care Management **Provider Functions** Files Exchange Resources

PCP Information | Provider LTC Census | Search Update Requests | Submit an Update Request

Provider Functions

**Provider Name** PCP PROVIDER **Role IDs** Provider - In Network - 1111111112 (NF ▼)

**Provider Functions**

- ▶ [PCP Information](#)
- ▶ [Provider LTC Census](#)
- ▶ [Search Update Requests](#)
- ▶ [Submit an Update Request](#)

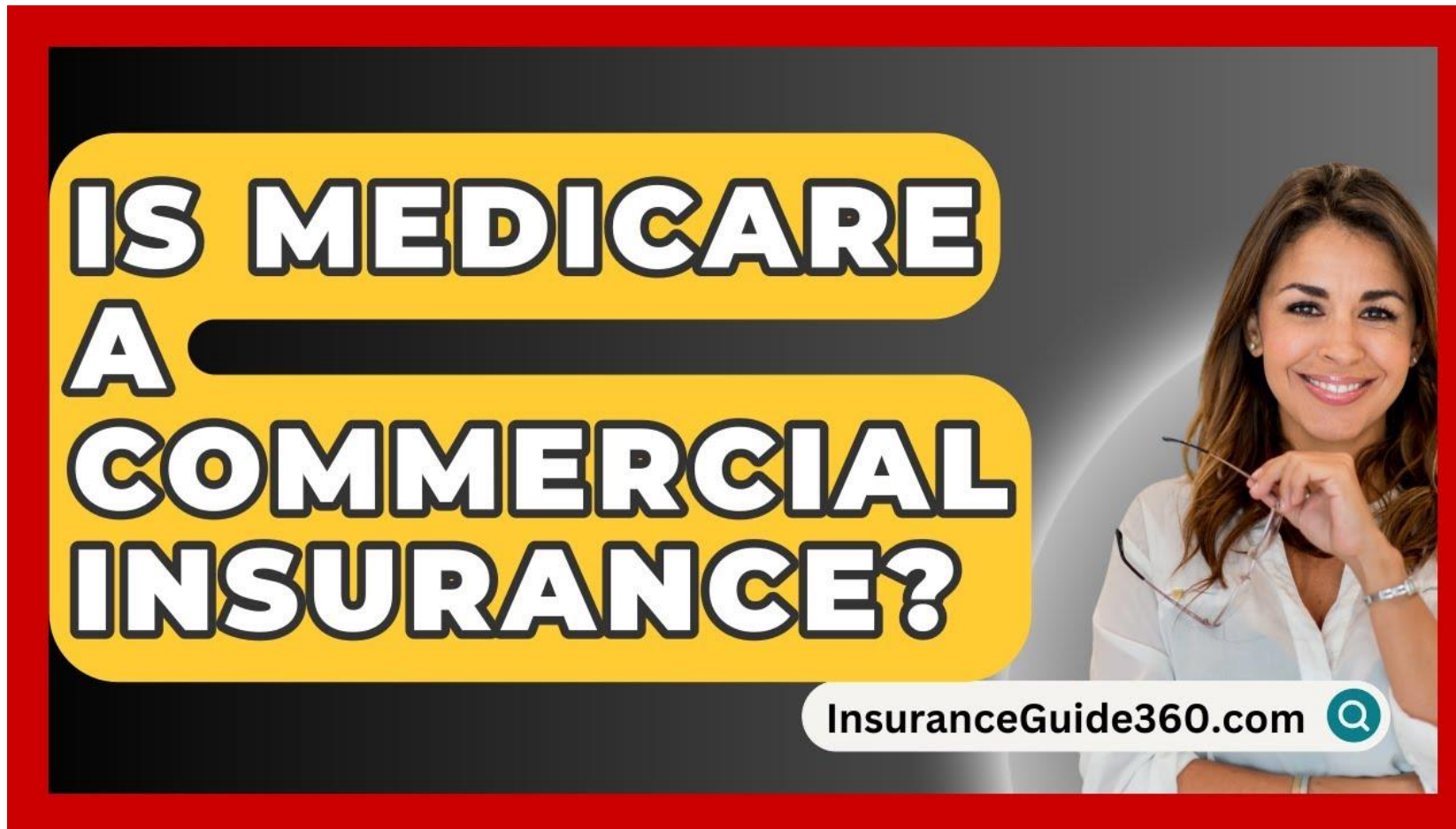


# Medicare Crossover Billing and Training Tools

MEDiCARE



# Medicare vs Third Party Liability (TPL)





**Division of Medical Services**

P.O. Box 1437, Slot S401, Little Rock, AR 72203-1437

P: (501) 682-8292 F: (501) 682-1197

**OFFICIAL NOTICE**

**TO:** Health Care Providers – All Providers

**DATE:** September 30, 2024 – **REVISED October 2, 2024**

**SUBJECT:** Medicare Crossover Billing Instruction Changes

**I. General Information**

There have been changes to the Medicare Crossover Claims billing. **These changes are effective for claims received on or after 10/01/2024.**

The Provider Manuals have been updated to reflect these changes.

# Helpful Links for Crossover Billing

[How to File a Professional Crossover Claim](#)

[How to File an Institutional Crossover Claim](#)

[How to File an Outpatient Institutional Crossover Claim](#)



# Reconsiderations vs. Appeals



*If you disagree with a denial of a claim there is a process to follow. Do **not** automatically file for a reconsideration or appeal - some denials can be resolved through corrections and resubmission.*

# Process for denial of a claim



## Step 1: Contact the Provider Assistance Center (PAC) at 800-457-4454:

Ask PAC to research the claim denial and verify the denial is legitimate and not the result of provider error.

*If you disagree with the explanation of the claim denial given by PAC, or you would like additional assistance, you should:*



## Step 2: Contact MMIS:

Contact your MMIS Outreach Specialist (see team map) to research the claim denial and verify the denial is legitimate and not the result of provider error.

*If you disagree with the explanation of the claim denial given by PAC and/or your Outreach Specialist, you should:*



## Step 3: Drop the claim to paper and mail it to the Research Department for Reconsideration:

Include a detailed cover letter explaining the situation and requesting the claim be reconsidered for payment. Make sure to also include any supporting documentation. Please note this must be done within 30 calendar days after the claim was denied.

**Gainwell Technologies**  
**Attn. Research Department**  
**P.O. Box 8036**  
**Little Rock, AR 72203**

# Process for denial of a claim - Final Step



If your Reconsideration is denied, your next option is to submit an Appeal.



\*Please note that if the Appeal meets all the criteria, it can result in a court hearing.\*



Appeals are submitted to Utilization Review.

# Healthcare Provider Portal

[Contact Us](#) | [Logout](#)

[Home](#) | [Eligibility](#) | [Claims](#) | [Care Management](#) | [Provider Functions](#) | [Files Exchange](#) | [Resources](#)

Home Thursday 01/26/2023 08:44 AM CST

**Provider Name** PCP PROVIDER **Role IDs** Provider - In Network - 1111111112 (NP ▼)

 **User Details**  
Welcome PCP Provider  
[My Profile](#)  
[Manage Accounts](#)

 **Provider**  
**Name** PCP PROVIDER  
**Provider ID** 1111111112 (NPI)  
**Revalidation Date** 03/01/2022  
[Characteristics](#)

 **Provider Services**  
[Search Payment History](#)  
[MAPIR](#)

### Welcome Health Care Professional!



We are committed to make it easier for physicians and other providers to perform their business. In addition to providing the ability to verify member eligibility and submit claims, our secure site provides access to benefits, answers to frequently asked questions, and the ability to search for providers.

[Help us provide better service to you! Click here to give us your feedback](#)

[Authenticare Demo - For Personal Care Providers required to participate in Electronic Visit Verification](#)

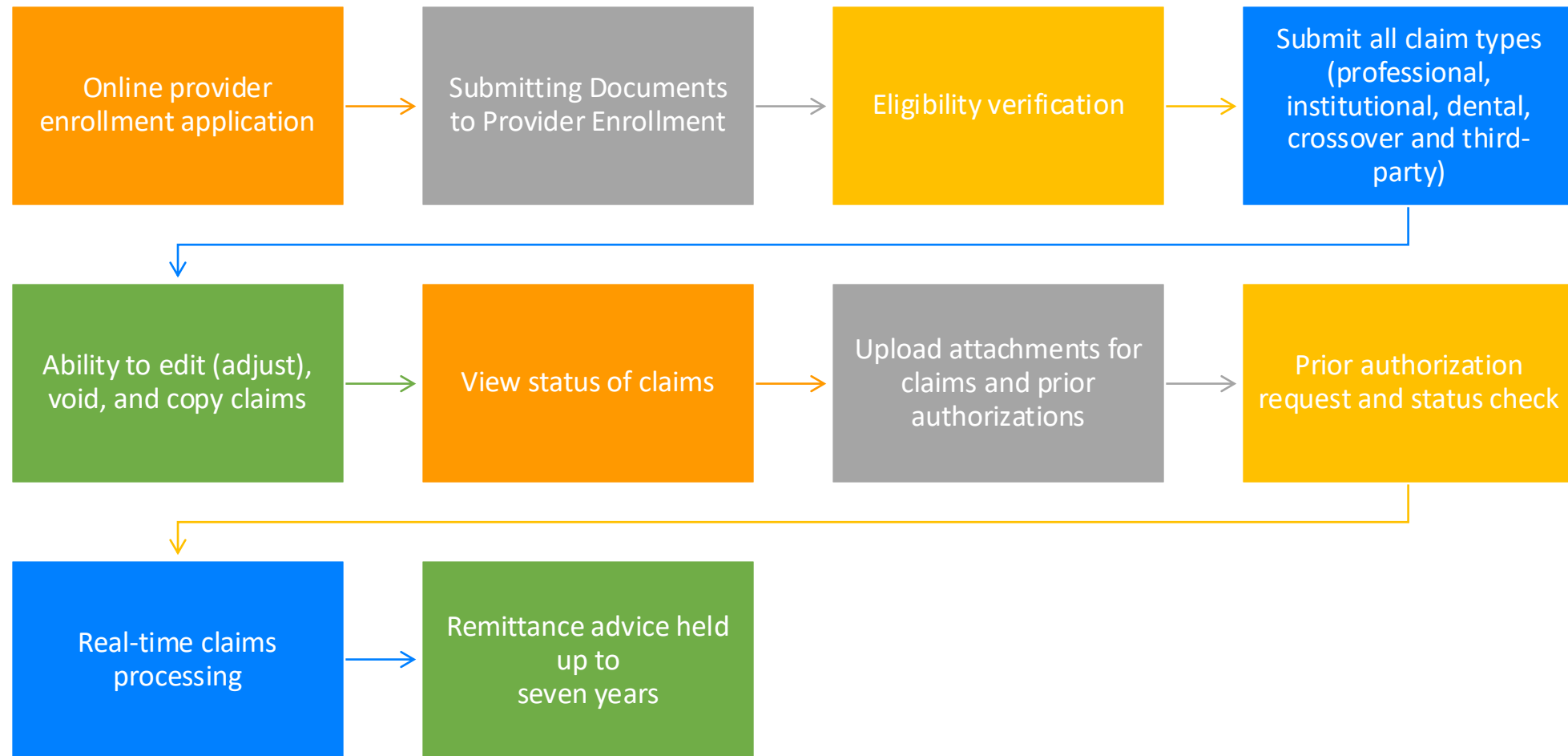
 [Contact Us](#)  
 [Secure Correspondence](#)  

All Claim Inquiries should be submitted to the following Address:

Claims  
Gainwell Technologies  
PO BOX 8034  
LITTLE ROCK, AR 72203



# Healthcare Portal Features



# Tips for Healthcare Portal

At least 5MB of  
upload and  
download speed

Everyone has their  
own username and  
password

Make sure staff that  
is no longer  
employed is inactive  
on your profile

Claims can be  
submitted 24/7

Claims submitted  
electronically must  
be entered by 6 p.m.  
on Friday

Check Eligibility the  
day you provide  
service

Submit claims  
electronically for  
faster payment

Check Portal for  
claim status

Resubmit denied  
claims using the  
portal

Before you enter  
your claim make  
sure you have your  
ORP (If applicable)

# Things to Remember

Always check  
eligibility before  
providing services.

Read Section II of  
***your*** manual.

Contact the right  
vendor or entity if  
you have  
questions.

Use training  
resources.

Non-emergency  
transportation  
opportunities for  
Medicaid clients

New provider  
workshops are  
conducted  
quarterly.

# QR Code to Access Training Resources

Use your IOS, Android or any device to access all our MMIS Tools and Resources for your convenience.







Questions?