



## Section: General Billing Information

### 1.2 Fiscal Agent

The Mississippi Division of Medicaid (DOM) presently works in conjunction with a fiscal agent to provide accurate and efficient claims processing and payment. In addition, both organizations work together to offer provider and beneficiary support to meet the needs of the Mississippi Medicaid community. The fiscal agent consists of technical and program staff. Technical staff maintains the claims processing operating system, and program staff assists with the actual processing of claims, payment, and customer service. Other functions include drug rebate analysis and utilization review.

The DOM and the fiscal agent have several systems in place to make contacting our offices easier for the provider. Having several different systems in place for providers to obtain needed information should decrease the time and effort required by providers to complete forms and requirements correctly and completely.

#### Telephone Contact

The fiscal agent provides telephone access to providers as shown below. These services include lines for provider inquiries, automated eligibility verification, and assistance with electronic claim submittal. Our call center is open Monday through Friday, 8 am-5 pm CST. The website includes a listing with the name and telephone number of the provider representative assigned to your specific area.

Fiscal Agent	Telephone Numbers
Provider/Beneficiary Services	1-800-884-3222 or 601-206-3000
Provider/Beneficiary Services Fax Number	601-206-3015
Automated Voice Response System(AVRS)	1-800-884-3222 or 1-866-597-2675
Electronic Data Interchange (EDI)	1-800-884-3222
Prescription Benefits Management (PBM)	1-800-884-3222 or 601-206-3000
Translation Service	1-800-822-5552, Access Code 8166

#### Mailing Contact Information

Providers may contact the fiscal agent via the mail at the addresses listed below. These post office boxes should be used for claim submittals, adjustment and void requests, provider and beneficiary services, and administrative correspondence. A financial mailbox is available for mail containing checks. Please send correspondences to the appropriate post office box. This will lessen the chance for errors and shorten the time required to complete your transactions.

Fiscal Agent	Mailing Addresses
All Claims	P. O. Box 23076, Jackson, MS 39225
Adjustment/Void Requests	P. O. Box 23077, Jackson, MS 39225
Provider/Beneficiary Services	P. O. Box 23078, Jackson, MS 39225
Administrative Mail	P. O. Box 23080, Jackson, MS 39225
Financial Correspondence (mail with checks)	P. O. Box 6014, Ridgeland, MS 39158-6014
Prescription Benefits Management	P. O. Box 23076, Jackson, MS 39225

## Web Site Information

The Mississippi web portal provides Medicaid-related information to providers and the interested public. Information can be accessed through the Mississippi Medicaid web portal at <https://msmedicaid.acs-inc.com>. The web portal provides another alternative to using the Provider and Beneficiary Call Center or the Automated Voice Response System (AVRS). It is available free of charge, 24 hours a day, 7 days a week, 365 days a year.

## For Health Care Providers

The web portal has two areas that can be accessed from the initial home page. One area is non-secure and allows access to the general public without registration. No confidential provider- or patient-related data is disclosed on the portal's public pages. The second area is a secure one that requires registration and provides additional functionality that is associated with the Call Center and the AVRS. Details on how to enroll can be found on the home page under the link titled Web Registration. The main page of the web portal has links to the Division of Medicaid (DOM), HealthSystems of Mississippi (HSM), and Health Information Designs (HID) websites.

The secure area of the web portal is available to providers with a login and password. Providers will have access to the secure features of the web portal with greater enhancements, such as direct data entry and adjudication of claims. Through the claim inquiry feature, providers are able to access claims status information and reason for denial of a claim. Additionally the web portal offers provider type FAQs, access to training materials, provider bulletins, fee schedules, and enrollment options. Providers are able to submit prior authorization requests and report insurance changes to the third party liability (TPL) beneficiary file via the web portal. When providers check beneficiary eligibility through either the Automated Voice Response System (AVRS) or through the Mississippi Envision web portal, they are able to obtain a more detailed response tailored specifically to the beneficiary's Category of Eligibility (COE). A brief description of the COE for the beneficiary and their Medicaid benefits and/or exclusions is provided. Be advised that the web portal is a mechanism for providers to check eligibility prior to treatment; however, the successful verification is not a guarantee of payment.