

Dear Provider,

The Georgia Collaborative ASO has identified an issue posing a challenge for providers related to Medicaid and State Contracted billing. The issue affects the ProviderConnect and batch authorization processing systems. The authorizing system is returning an incomplete client authorization number, this number is used by providers to bill HP Medicaid and DBHDD/Beacon State Funded Services. A solution has been identified and will be implemented on 12/31/15 to alleviate the identified issue.

### **Issue Overview**

The client authorization number is a 12 digit identifier beginning with a 9 followed by a string of 11 numbers. This authorization number is communicated to providers through the online ProviderConnect system and through the batch response files (see field 563 in authorization companion guide). The Beacon system was expected to provide a 12 digit client authorization number, however it has been generating and returning an 11 digit number for all approved authorizations during the month of December. Any approved authorization issued by Beacon, as part of the Georgia Collaborative, between 12/1/15 and 12/31/15 were erroneously assigned an 11 digit client authorization number.

The HP Medicaid claims system requires a 12 digit authorization number (beginning with a 9) to be submitted in order for a claim to process correctly. If a provider does not submit an accurate 12 digit number, the claim will deny stating that there is no authorization on file. Therefore, any claims referencing the 11 digit authorization number for approved authorizations between 12/1/15 and 12/31/15 will deny in the GAMMIS system and provide the error “no authorization on file”.

### **Beacon Issue Resolution (1/1/16 and forward)**

For batch authorization response files only, a system edit will be put into place that will provide a 12 digit client authorization number for all approved authorizations beginning 1/1/16. Online ProviderConnect users will need to continue to add a trailing zero to the provided 11 digit client authorization number in the claiming process to HP for Medicaid billing. This client authorization number can be used to search for existing authorizations in the HP portal provided by the Collaborative and should also be used in the claiming process to HP for billing Medicaid.

### **Provider Issue Resolution (12/1/15 – 12/31/15)**

If your provider agency has received a Beacon authorization during the month of December 2015, the client authorization number will be represented by an 11 digit number. As outlined above the utilization of this authorization number will result in a rejected claim through the HP system.

When submitting claims for services authorized during December 2015, providers will need to add a trailing zero to the current 11 digit client authorization number that is associated with your approved authorization. This will meet the HP 12 digit authorization number requirement

and also match to the client authorization number that Beacon Health Options sends to HP for all approved authorizations.

We understand the complications this has caused providers and appreciate your patience as we work to fine tune our processes post implementation. Your feedback and insight is always appreciated and critical to the continuous process improvement cycle. If you have any questions, please contact Provider Relations at [GACollaborativePR@beaconhealthoptions.com](mailto:GACollaborativePR@beaconhealthoptions.com). Thank you for your partnership and we look forward to a successful new year with you.