



Preparation

- Having a clear understanding of why you are calling the fiscal agent for Wyoming Medicaid will help you navigate through the IVR.
- Have your NPI or Medicaid provider number(s) at the time of the call. The IVR must validate that you are an active Wyoming Medicaid provider prior to providing health information.
- Provider and Trading Partners can use their Medicaid Provider ID (9 digits) to navigate the IVR.
- Providers who do not have their 9-digit Provider ID, can use their NPI. When their NPI is not a 1-to-1 match, you will be prompted to speak your Taxonomy. If a match still cannot be found, you will be asked for your ZIP code with 4-digit extension.
- Billing Agents/Clearinghouses must use their 9-digit Provider ID that was assigned to them at the time of registration to navigate the IVR – their Trading Partner ID (TPID) will not be recognized.
- Other important information to have prior to making your call include the following:
 - Member ID(s) and date(s) of service
 - SSN(s) and date(s) of birth
 - TCN(s) (Transaction Control Number) from an RA (Remittance Advice)

Things to Remember

- Keep in mind you may complete multiple inquiries in the IVR. Therefore, having all ID numbers and dates at the time of the call will save you time.
- System allows two attempts for the caller to provide a valid response to the menus or prompts. If the caller exceeds maximum attempts, then the system transfers the call to an agent for further assistance.
- Callers can use the '#' key to specify the end of a multiple digit input collection like Provider NPI, Provider ID, Claim TCN, Member SSN, Member ID, or date of birth.

Collecting Details for Provider Validation

1. If you are a Provider, Press 1



- a. If you bill using a 10-digit NPI, Press 1
- b. If you bill using a 9-digit Provider Number, Press 2

NOTE: After collecting provider validation, providers will be routed to the [Provider Self Service Menu](#).

Provider Self-Service Menu

Providers are presented with the following options:

2. For Claims, Press 1 (Goes to [CLAIM ENTRY](#)),
3. For Payments, Press 2 (Goes to [CHECK PAYMENT](#))
4. For Member benefit information, Press 3 (Goes to [ELIGIBILITY](#))
5. For Private insurance information, Press 4 (Transfers to TPL department)
6. For Authorizations, Press 5 (Goes to [AUTHORIZATION INQUIRY](#))
7. For Appeals, Press 6 (Transfers to the Appeals Department)
8. For EDI or web portal assistance, Press 7 (Transfers to Provider Services)

Claim Entry

Caller to select TCN or Member ID for claim lookup and claim details:

1. To search using TCN, Press 1
 - a. Enter 17-digit TCN number
(If the claim is found, the information is played)
- OR**
- b. To search using Member ID and dates of services, Press 2
 2. Enter the Member ID associated with the claim
 3. Enter the first date of service

For example: August 5, 2020 is Zero Eight, Zero Five, two zero two zero, followed by pound sign. (If the first date of service is not the same of the last date of service, then we request for the last date of service)

- a. Is the first date of service the same as last date of service?
 - i. Press 1 for 'Yes'



- ii. Press 2 for 'No'
4. Enter the last date of the service followed by a pound sign
 - a. If more than one claim is found, the claim is narrowed down using "Billed Amount" and "Procedure Code" or moved to Claim Status menu.
 - b. If the claim is found, the information is played

Check Payments

Providers have the option to check a payment based on a specific date or hear all the payments associated. There can be more than one payment associated with the search.

- For most recent payment information, Press 1
(The most recent payment information is played),
- OR**
- For specific payment date, Press 2
 - Enter the specific payment date
For example: August 5th, 2020 is Zero Eight, Zero Five, two zero two zero, followed by a pound sign. (When the payment information is found, the payment information is played.)

Eligibility

A Member's ID or Social Security Number (SSN) and date of birth are needed to hear the Member benefit information.

1. If you have the Member's Medicaid ID, Press 1. If you do not have it, move to Step 2.
 - a. Enter 10-digit Member's Medicaid ID
2. If you have the Member's SSN, Press 2
 - a. Enter the Member's SSN
3. Enter the Member's date of birth.

For example: August 5th, 1986 is Zero Eight, Zero Five, one nine eight six, followed by pound sign

4. To check the Member's benefit plan eligibility for today's date, Press 1.
(Plays Eligibility information message)

OR



5. For specific date of service, Press 2

a. Enter the date of service

For example: August 5, 2020 is Zero Eight, Zero Five, two zero two zero, followed by pound sign. (Plays Eligibility information message.)

Authorization Inquiry

The following are the lists of authorizations associated. The IVR presents the following options to choose from and plays the following message based on the response:

- If are you calling about a Member transportation or a hospice service for a Member residing in a nursing home, Press 1 (Transfers to [Provider Services Queue](#))
- For Community Choice Waiver, Press 2
 - Please contact your case manager
- For Developmental Disability Waivers, Press 3
 - Please contact your case manager
- For Pharmacy Authorizations, Press 4
 - Please contact Change Health Care at 877-207-1126 for pharmacy authorization assistance
- For Care Management Entity, Press 5
 - Please contact Care Management Entity at 307-459-6162 for Family Care authorization assistance
- For All other Prior Authorizations, Press 6
 - Please stay on the line while we transfer your call to WY Health

Automatic Callbacks

If all agents are busy, you will be prompted to receive a callback. If you would like to receive the callback, please press 1. You will be prompted the following:

- If you would like us to call you back at the telephone number you called from, Press 1

OR



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Interactive Voice Response (IVR) Navigation Tips

- For a different phone number, Press 2 (Enter you 10-digit telephone number.)