



**D·B·H·D·D**

# **The Department of Behavioral Health and Developmental Disabilities**

## **Behavioral Health Providers**

February 2024



Georgia Department of Behavioral Health &  
Developmental Disabilities

Kevin Tanner, Commissioner

**DBHDD**

Office of Provider Relations & ASO Coordination

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Dear New Behavioral Health Provider,

Welcome to the Department of Behavioral Health and Developmental Disabilities (DBHDD) Behavioral Health (BH) Provider Network. The purpose of this BH Welcome Packet is to acquaint new providers, such as yourself, with important information and resources that will assist you in providing community-based services. You may use it as an outline and/or as a resource guide as you strive to provide outstanding services. The “Welcome” section provides general information about DBHDD such as our history, locations, and partners. The “Resource” section offers an in-depth account of the many resources that a new provider will need.

As a new provider, we know that questions can arise, and we want you to know that the [Office of Provider Relations](#) is here for you. You may submit any questions you have via the Provider Issue Management System (PIMS) by [clicking here](#).

Our hope is that you find this packet to be a useful tool. We are happy to have you onboard and wish you the best in your journey!

Thank you,

Carole Crowley, Senior Provider Relations Manager

&

Sharon Pyles, Senior Provider Relations Manager

## **DBHDD Vision**

*Easy access to high-quality care that leads to a life of recovery and independence for the people we serve.*

## **DBHDD Mission**

*Leading an accountable and effective continuum of care to support Georgians with behavioral health challenges and intellectual and developmental disabilities in a dynamic healthcare environment.*

## **WELCOME**

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# **WELCOME**

## **I. Our Story**

The Department of Behavioral Health and Developmental Disabilities (DBHDD) was created by Georgia Governor Sonny Perdue and the General Assembly in 2009. DBHDD officially began operations on July 1, 2009. DBHDD is responsible for most of the activities that were previously undertaken by the Division of Mental Health, Developmental Disabilities, and Addictive Diseases, formerly part of the Department of Human Resources (DHR). In addition, the DBHDD became responsible for the State Suicide Prevention Program that was previously under the DHR Division of Public Health.

DBHDD provides for community-based services across the state through contracted providers. The department serves people living with mental health challenges, substance use disorders, intellectual and developmental disabilities, or any combination of these. As Georgia's public safety net, the primary responsibility is to serve people who are uninsured.

Kevin Tanner serves as the Commissioner of the Georgia Department of Behavioral Health and Developmental Disabilities. Prior to his appointment by Governor Brian Kemp, Kevin Tanner served as the County Manager of Forsyth. Governor Kemp also appointed him as chair of the Behavioral Health Reform and Innovation Commission in 2019, helping to secure meaningful improvements in this field. Previously, he served four terms as a State Representative for District 9 and has a total of thirty-two years in public service.

## **II. Our Organization**

The DBHDD is comprised of numerous divisions, including the Division of Behavioral Health, which are led by Commissioner Tanner. Information regarding these divisions and the DBHDD Leadership Team can be found on the DBHDD website by [clicking here](#).

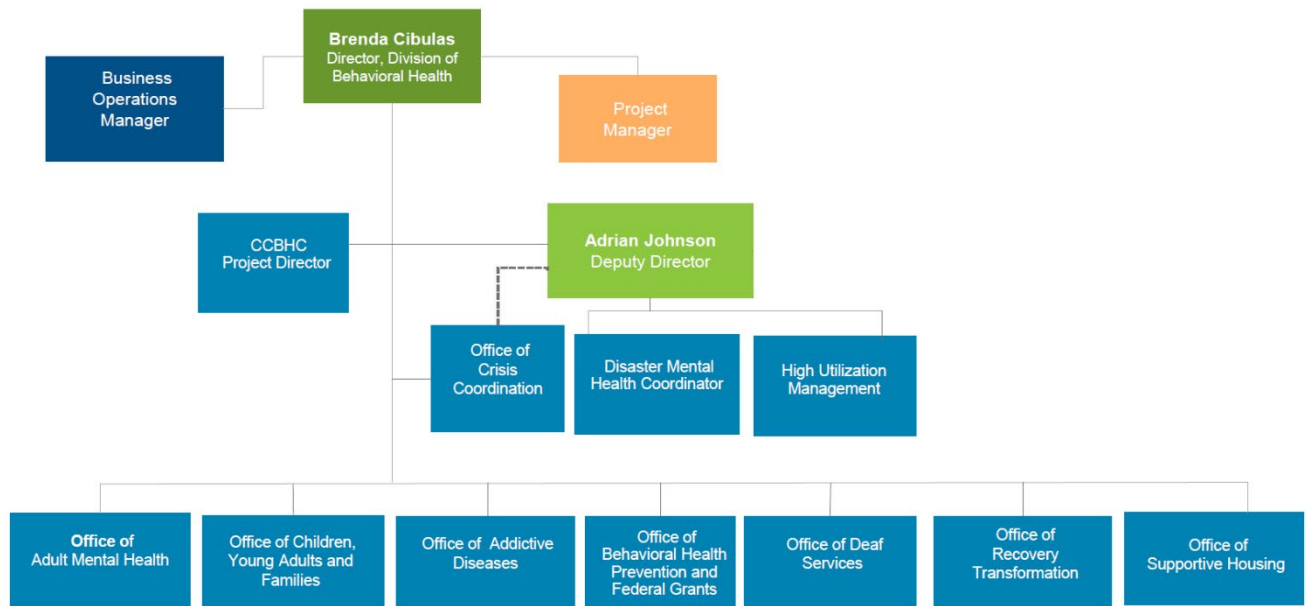
### **1. The Division of Behavioral Health**

The Division of Behavioral Health's goal is to build a recovery-oriented, community-based system of care, with the capacity to provide timely access to high-quality behavioral health treatment and support services. A Recovery-focused system operates on the principle that severe and persistent mental illness, substance use, and co-occurring disorders are long-term

conditions that a person will be managing for life. This model signifies a shift from crisis-driven services to a prevention-focused continuum of care that provides sustained support and is based on the strengths, wellness, and goals of the person in recovery.

The division also supports policy development, service planning, program development, budget development, workforce development (training), and external collaboration with stakeholders across the system of care.

The organizational chart within the Division of Behavioral Health is below:



Click [here](#) to access the Behavioral Health Services landing page on the DBHDD website.

### III. Our Locations

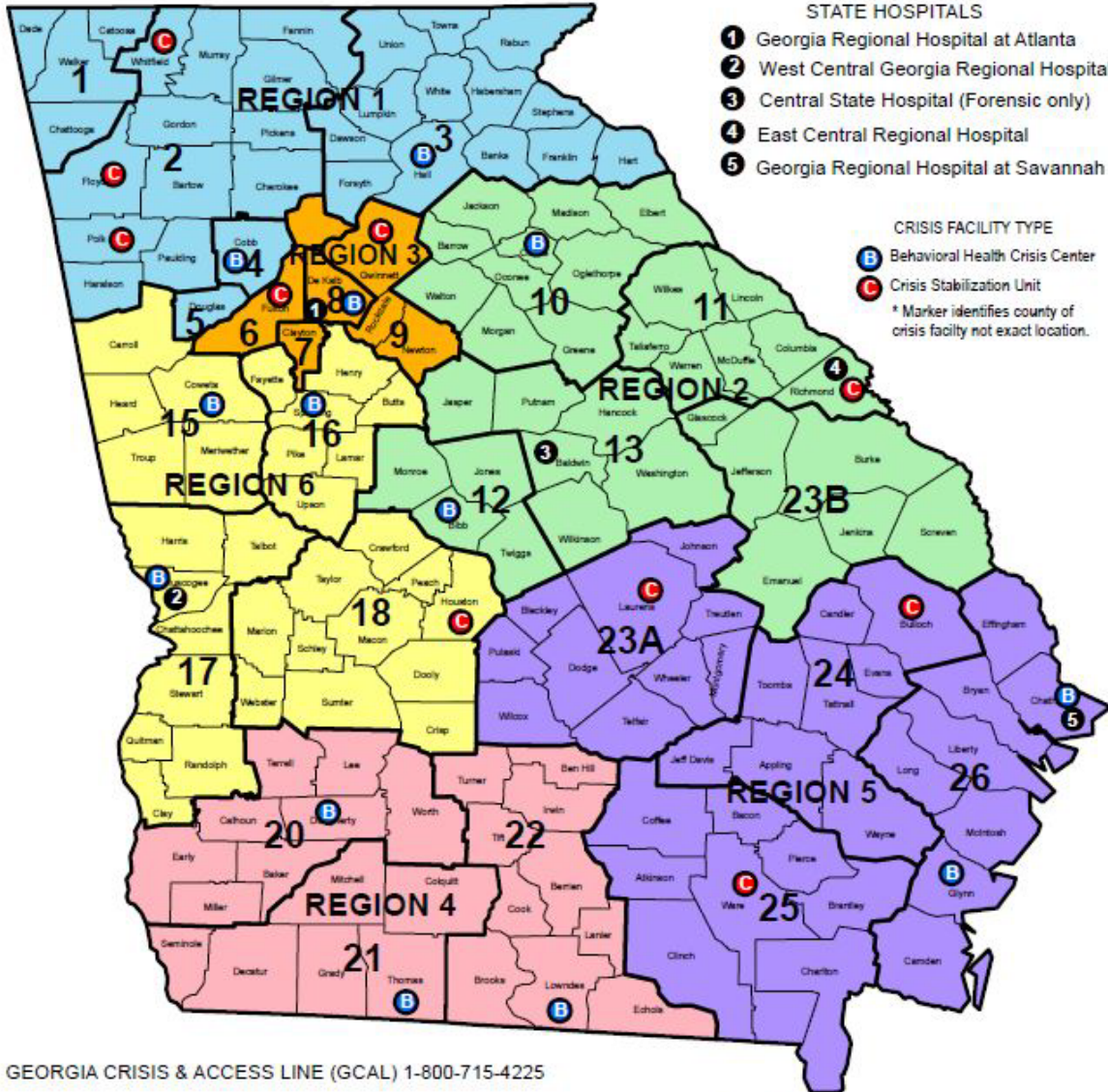
The DBHDD’s state office is in Atlanta, Georgia at 200 Piedmont Ave S.E., West Tower. We also have six (6) Regional Field Offices throughout the state. The DBHDD system of services is administered through those six (6) Field Offices. These offices administer the community resources assigned to the region.

As part of our directive to be the state’s safety net provider, we contract with 24 Community Service Boards (CSBs) across the state that assist us in this important work. [Click here](#) for a list of each location, areas served, and corresponding addresses.

Additionally, the DBHDD operates five state hospitals located around the state: Augusta, Columbus, Decatur, Milledgeville, and Savannah. More information pertaining to the DBHDD's hospital services are [available here](#).

Here is a current map that illustrates each Regional Field Office, State Hospital, and Community Service Board's location across the state. [Click here](#) for additional information regarding service locations.

**Georgia Department of Behavioral Health & Developmental Disabilities**  
**Adult Crisis Beds (BHCC's & CSU's)**  
**Effective July 1, 2021**



GEORGIA CRISIS & ACCESS LINE (GCAL) 1-800-715-4225



Provider Name (BHCC/CSU Location - City). If a service area has no facility then there is no city listed.

1 - Lookout Mountain CSB	9 - View Point Health (Lawrenceville)	18 - Middle Flint Behavioral Healthcare (Warner Robins)
2 - Highland Rivers CSB (Dalton)	10 - Advantage Behavioral Health Systems (Athens)	20 - Aspire BHDD Services (Albany)
2 - Highland Rivers CSB (Rome)	11 - Serenity Behavioral Health (Augusta)	21 - Georgia Pines Community Services (Thomasville)
2 - Highland Rivers CSB (Cedartown)	12 - River Edge Behavioral Health Center (Macon)	22 - Legacy Behavioral Health (Valdosta)
3 - Avita Community Partners (Gainesville)	13 - Oconee Community Service Board	23A/B - CSB of Middle Georgia (Dublin)
4 - Cobb CSB (Marietta)	15 - Pathways Center (Newman)	24 - Pineland Area CSB (Statesboro)
5 - Douglas County CSB	16 - McIntosh Trail CSB (Griffin)	25 - Unison Behavioral Health (Waycross)
6 - Grady Hospital (Atlanta)	17 - New Horizons Community Service Board	26 - Gateway CSB (Savannah)
7 - Clayton County CSB	17 - St. Francis Hospital - Bradley Center (Columbus)	26 - Gateway CSB (Brunswick)
8 - DeKalb CSB (Decatur)		



## IV. Our Partners

The DBHDD Providers will interact with different agencies such as the Georgia Department of Community Health (DCH) and the Georgia Collaborative Administrative Services Organization (ASO).

DCH is one of Georgia's four health agencies serving the state's growing population of over 10 million people. It serves as the lead agency for Medicaid in Georgia and also oversees the State Health Benefit Plan and Healthcare Facility Regulation Division (HFRD), impacting one in four Georgians.

DBHDD contracts with Carent Behavioral Health as the Administrative Support Organization (ASO) to DBHDD and our network. This is often referred to as the Georgia Collaborative ASO or "the ASO". The ASO is a partner with DBHDD that facilitates the provision of integrated behavioral health and developmental disabilities supports and services to more than 200,000 Georgia residents statewide. Working with the DBHDD network of more than 600 providers, the ASO supports person-centered, whole-health, culturally sensitive supports and services to children, adolescents, and adults. It is comprised of three partner companies: Carent Behavioral Health, Behavioral Health Link, and Qlarant. Additional information on the Georgia Collaborative ASO is detailed herein.

The second part of this package provides details regarding each Agency's role in supporting DBHDD providers. It also serves as a guide to new providers by outlining the resources that are available to them through these agencies.

# **RESOURCES**

## **I. DBHDD**

The DBHDD has created an accountable, community-based system of care. To aid our providers, DBHDD has created many resources that can be accessed from the DBHDD website.

### **1. DBHDD Website**

The DBHDD has an established website that holds much of the information a provider will need to provide services. What follows are areas of importance that can be accessed through the website. Click [here](#) to access the DBHDD website.

#### **a. Office of Provider Relations**

The Office of Provider Relations was created in 2016 to assist the DBHDD Provider Network. This office has a landing page on the DBHDD website that providers will find very helpful. Access it [here](#) or simply select the “**For Providers**” tab on the DBHDD website.

The Provider Relations Team sends monthly newsletters and periodic special bulletins to our providers. Past newsletters and special bulletins are available on our landing page. All new providers will be added to our email distribution list. For any staff within the agency that would like to receive these publications, [click here](#) to submit their contact information.

Providers may contact the Provider Relations Team directly at [dbhdd.provider@dbhdd.ga.gov](mailto:dbhdd.provider@dbhdd.ga.gov). Questions regarding DBHDD policies, procedures, or expectations, can be submitted through the Provider Issue Management System (PIMS).

#### **b. Provider Issue Management System (PIMS)**

The Provider Issue Management System (PIMS) may be accessed from the Provider Relations landing page. This system is an avenue for providers to utilize when there is a question they would like addressed. Click [here](#) to access PIMS. PIMS can also be accessed from the [DBHDD homepage](#) by selecting “**Submit a Question to Provider Relations**” tile. It is recommended that this site be bookmarked for future use and to utilize it whenever a question arises.

### **c. Regional Field Offices**

The DBHDD has six Regional Field Offices (RFOs) located across the state. Their contact information and counties served can be found on the DBHDD website by hovering over the “**Find Services & Contacts**” tab and selecting “**Field Offices**” in the drop-down menu. [Click here](#) to access this information. Each RFO has a Regional Services Administrator (RSA) for BH Services. To become familiar with the individuals in the local office, you may contact the RSA and schedule a meeting. For questions that relate to a specific individual that is receiving services, contact the Regional Field Office.

Community Collaborative meetings are held in each Region on a quarterly basis. The RSA in the Regional Field Office can provide more information regarding these meetings.

### **d. Constituent Services**

The DBHDD Office of Constituent Services serves as a point of contact for the people that our provider agencies support and their families, advocates, legislators, and the general public. They are there to answer questions, address complaints, and help individuals access DBHDD services. Their goal is to be accessible and responsive to an individual’s needs and identify areas that need improvement. More information can be found [here](#).

### **e. DBHDD Provider Manual**

The Provider Relations landing page has a direct link to the Provider Manual for Community Behavioral Health Providers. This can be accessed [here](#). Providers are responsible for reviewing the most current Provider Manual for Community Behavioral Health Providers. **This manual is updated on a quarterly basis.** The first part of each provider manual includes a description of the changes that occurred to the manual during the preceding quarter. The manual will also provide eligibility requirements and community standards as it relates to a provider policies, procedures, staffing, and documentation requirements for Behavioral Health Services.

### **f. DBHDD Training**

As mentioned previously, the DBHDD has a Training page which may be accessed by clicking [here](#). Once there, we encourage providers to subscribe to the email distribution list so that they can receive email notifications of upcoming trainings. A list of available trainings may be accessed on that page as well.

## 2. DBHDD University for Providers

The DBHDD University for Providers can be accessed from the [DBHDD Training page](#). Once on the DBHDD Training page, simply select “**DBHDD University for Providers**” to be directed to the site. This site offers access to several learning libraries to include Incident Management Image training, Needs Supportive Housing training, and Recovery-Oriented Training Resources.

### a. Relias Learning Management System (RLM)

The Relias Learning Management System can be accessed from the DBHDD University “**For Providers**” webpage or by clicking [here](#). The RLM content relates directly to the Department’s Provider Manual requirements for direct care staff. The first step is to enroll your agency with RLM by appointing the staff member who will be your “BH Liaison.” This is done by clicking the link above, then selecting “**New Provider Enrollment**” once on the website. We recommend that your designated BH Liaison complete the offered Liaison webinar to learn how to register your agency’s users for specific trainings.

For any issues associated with the Relias Learning Management System, please contact [relias.admin@dbhdd.ga.gov](mailto:relias.admin@dbhdd.ga.gov).

## 3. Provider Toolkits

The DBHDD also offers Provider Toolkits to assist BH providers. The DBHDD toolkits can be accessed by [clicking here](#). They are also available from the DBHDD website by hovering over the “**For Providers**” tab then selecting “**Provider Toolkit**” from the drop-down menu.

## 4. PolicyStat

The DBHDD PolicyStat holds all applicable policies for DBHDD providers. The DBHDD PolicyStat can be accessed directly [here](#) or once on the DBHDD website, hover over the “**DBHDD Agency Information**” tab and select “**Policies**” in the drop-down menu. The DBHDD policy, [Access to DBHDD Policies for Community Providers, 04-100](#), provides an overview on the use of this system.

There is an index of all policies that can be found on the PolicyStat home page by selecting “**DBHDD PolicyStat Index.**”

One specific policy that DBHDD providers will find especially helpful is the [DBHDD Abbreviations and Acronyms, 04-112](#) policy. This policy contains an attachment of the most used administrative and clinical abbreviations.

One other policy to note is the [Provider Manual for Community Behavioral Health Providers, 01-112](#) policy. This relates to the information mentioned previously in the DBHDD Provider Manual section.

### **a. Tiered Provider Network**

The DBHDD has developed a three-tiered provider network. More information pertaining to this network can be found in the DBHDD policy, [Community Behavioral Health Provider Network Structure, 01-199](#).

Associated policies for each tier are noted below along with, if applicable, appropriate standards, requirements, and Key Performance Indicators (KPIs):

- Tier 1: Comprehensive Community Providers (CCP) - [Comprehensive Community Provider \(CCP\) Standards for Georgia's Tier 1 Behavioral Health Safety Net, 01-200](#)
- Tier 2: Community Medicaid Providers (CMP) - [Community Medicaid Provider \(CMP\) Standards for Georgia's Tier 2 Behavioral Health Services, 01-230](#)
- Tier 3: Specialty Providers (SP) - offer an array of specialty treatment services and supports.

### **b. Key Performance Indicators**

Both Tier 1 and Tier 2 providers are required to follow all applicable policies associated with a Comprehensive Community Providers (CCP) or Community Medicaid Provider (CMP), as appropriate. Tier 1 and Tier 2 providers must complete a yearly Performance Monitoring Report of their compliance with the associated standards. A list of the policies is attached to the appropriate policies noted above.

The DBHDD reserves the right to take specific actions based upon compliance scores achieved in Performance Monitoring Reports (PMRs) by CCPs and CMPs. Failure to comply with any of the applicable CCP or CMP Standards is considered a deficiency. Scoring specifics and more

information is outlined in DBHDD policy [Compliance Outcomes for DBHDD Behavioral Health Community Providers, 13-102](#).

### **c. Incident Reporting**

Providers are required to report deaths and other incidents based on the DBHDD policy, [Reporting Deaths and Other Incidents in Community Services, 04-106](#). The DBHDD has developed an online reporting system known as Image. Information on registering and accessing Image can be found in this policy.

The DBHDD also offers an online training course for Image. This training can be accessed from the DBHDD Training page by selecting “**DBHDD University for Providers.**” Once on the site, select the “**Incident Management Image Training**” link.

### **d. Criminal History Records Check**

All providers in the DBHDD’s Provider Network are required to have a DBHDD Criminal History Background Check (CHBC) completed using a fingerprint based criminal history record check. This is addressed in the DBHDD policy [Criminal History Records Checks for DBHDD Network Provider Applicants, 04-104](#), which is found on PolicyStat.

## **5. Deaf Services**

DBHDD strives to provide equal access to high-quality behavioral health and developmental disability services to individuals who are deaf, deaf-blind, and hard of hearing by utilizing American Sign Language (ASL) fluent-clinicians, ASL Fluent-Case Managers, and Interpreters. The DBHDD offers deaf services for those requiring assistance to receive needed treatment. Information pertaining to these services is available on the DBHDD website by hovering over the “**DBHDD Services**” tab and selecting “**Deaf Services**” from the drop-down menu. Access this information by [clicking here](#). Additionally, please review the DBHDD policy [Accessibility of Community Behavioral Health Services for Individuals Who are Deaf and Hard of Hearing, 15-114](#) for additional information.

The DBHDD Office of Deaf Services can be reached directly at [deafservices@dbhdd.ga.gov](mailto:deafservices@dbhdd.ga.gov).

## **6. Letter of Agreement (LOA)**

The Letter of Agreement (LOA) is an agreement between DBHDD and Behavioral Health approved providers. The LOA sets the terms and conditions under which both parties operate. LOA's are valid for one year and renewed annually. A renewal LOA is sent via email to providers by the Office of Provider Enrollment, Procurement, and Contracts as the expiration date of the existing LOA approaches. Providers are required to submit current copies of Commercial or Comprehensive General insurance certificate, Accreditation, or DBHDD Certification. It is important to ensure the contact information (email and phone number) for the CEO/Director and Agency Contact is current, as well as the Georgia Secretary of State registration. Note, if this information has changed, a Staff Update Form or Change of Information form must be submitted to the ASO via email to: [GAEnrollment@carelon.com](mailto:GAEnrollment@carelon.com).

## **II. Georgia Collaborative ASO**

The Georgia Collaborative Administrative Services Organization (ASO) assists the DBHDD in the management of services and supports for individuals receiving Community Behavioral Health and Rehabilitation Services (CBHRS), New Options Waiver Program (NOW), Comprehensive Supports Waiver Program (COMP), and state-funded behavioral health and intellectual and developmental disabilities services. The ASO was initiated in July 2015 and is provided via a contract with Carelon Behavioral Health. Carelon directly provides many of the functions of the ASO and subcontracts with Behavioral Health Link (BHL) and Qlarant. BHL operates the Georgia Crisis and Access Link (GCAL) and Qlarant is responsible for quality management reviews of I/DD services.

The ASO provides infrastructure focused on access to services, quality management and improvement, utilization management and review, data reporting, eligibility, claims payment, provider enrollment, and information technology.

The ASO website is also designed for individuals who are seeking services in Georgia by providing a way to locate providers in their area and is a central location that houses important resources for individuals. The webpage can be found [here](#).

### **1. Provider Relations Team**

The ASO has a Provider Relations Team that is available to assist Providers with any questions regarding the services performed by the ASO. They can be contacted at [GaCollaborativePR@carelon.com](mailto:GaCollaborativePR@carelon.com).

## 2. Provider Handbook

A review of the ASO Handbook, [here](#), will provide more in-depth information on the responsibilities of the ASO. This handbook houses important contact information for the ASO and valuable instructions for how providers utilize the ASO via provider forms, ProviderConnect, IDD Connects, GCAL, Quality Management, etc.

## 3. Provider Forms

The ASO website contains various documents that can be utilized to update DBHDD and DCH of any changes to the provider organization. These include:

- GA Medicaid Reactivation Request Form
- GA Medicaid Termination Request Form
- Existing Provider Application
- Change of Information Form
- Request to Add Counties
- Staff Update Form

Other forms located on this webpage relate to Provider Connect, GCAL, and Quality Management. These forms can be accessed [here](#).

### **GA Medicaid Reactivation Request Form**

If a Medicaid Provider number provider is not used for 12 months, the Department of Community Health (DCH) will suspend the Medicaid Provider number. To reactivate a suspended Medicaid Provider number, a GA Medicaid Reactivation Request must be submitted. If the Medicaid Provider number remains inactive for an additional four (4) months, for a total of 16 months, DCH will terminate the Medicaid Provider number. Terminated Provider numbers cannot be reactivated; the provider will need to reapply. The “**GA Medicaid Reactivation Request Form**” is located on the ASO website. This form cannot be handwritten; it must be typed. Completed forms must be submitted to the ASO. **DO NOT SEND THE COMPLETED FORM TO HP ENTERPRISE SERVICES**, as the form states. The form can be emailed to [GAEnrollment@carelon.com](mailto:GAEnrollment@carelon.com).



**GA Medicaid Termination Request Form** – To request termination of a Medicaid Provider Number, the GA Medicaid Termination Request must be completed and submitted to the to the ASO. **DO NOT SEND THE COMPLETED FORM TO HP ENTERPRISE SERVICES**, as the form states. The form can be emailed to [GAEnrollment@carelon.com](mailto:GAEnrollment@carelon.com).

**Adding Services** – Providers can add new services to their existing array of services. However, the provider must be an approved BH provider for at least one (1) year. Agency providers must be:

- i. Accredited by a national accrediting body accepted by DBHDD; or
- ii. Certified by DBHDD Office of Provider Certification and Services Integrity

- To add a service, complete the “**BH Agency Existing Provider Application**” located on the ASO website. Please complete the form as instructed and follow the submission guidelines that are provided on the form. All forms must be typed; no handwritten forms will be accepted.

**Address Change** – DBHDD must be notified, **and grant approval**, to a change in location, whether it is a change in the main office location or a service location.

- To notify DBHDD, the provider is required to complete the “**Change of Information**” form located on the ASO website. Please complete the form as instructed and follow the submission guidelines that are provided on the form. All forms must be typed; no handwritten forms will be accepted.

**Staffing Change** – If the organization experiences a change in leadership, for example the Chief Executive Office or Clinical Director, DBHDD must be notified of this change.

- The provider is required to complete the “**Staff Update Form**” located on the ASO website. Please complete the form as instructed and follow the submission guidelines that are provided on the form. All forms must be typed; no handwritten forms will be accepted.

## 4. ProviderConnect

ProviderConnect is an online tool that allows providers to submit and check claims status, check member eligibility, update their provider profile, request inpatient and outpatient authorizations, and more. ProviderConnect is easy to use, secure, and available 24/7. There is a user guide available [here](#) as well as demonstration videos to help providers get started using the system.

## 5. Georgia Crisis and Access Line (GCAL)

GCAL provides telephonic crisis intervention, clinical triage, and referral for Georgians in need 24/7/365. Key functions of GCAL include:

- Mobile Crisis Dispatch for all State-Funded Behavioral Health and Developmental Disability Mobile Crisis Response Teams
- Single Point of Entry for State Contracted Inpatient Beds
- Preferred Point of Entry for Crisis Stabilization Units and State Hospital
- Initial Authorization for Crisis Stabilization Unit, State Hospitals, and State Contracted Inpatient Bed Admissions

## 6. Quality Management

The focus of the ASO Quality Management department is to monitor and evaluate quality across the entire range of services provided by the DBHDD Provider Network.

The DBHDD has delegated Behavioral Health (BH) and Intellectual/Developmental Disabilities (I/DD) quality reviews to the ASO. These reviews are focused on person-centered practices and provider performance. The purpose of these reviews is to determine adherence to DBHDD standards and to assess the quality of the service delivery system through various sources including:

- Interviews with individuals receiving services
- Employee records
- Record reviews
- Observations of services provided, where appropriate

More specific information regarding the Quality Review process can be found in the ASO Provider Handbook noted above. The ASO website provides examples of the tools utilized during the review process as well as trainings on the review process. This information can be accessed [here](#).

New Providers will be reviewed onsite at least three times within the first two (2) years. Additionally, new providers will be reviewed approximately six (6) months from the initial date of billed services.

## 7. Contact Information

Please review the appropriate email addresses below to contact the ASO:

- [GAEnrollment@carelon.com](mailto:GAEnrollment@carelon.com) – This is for document submission only. Agencies can submit Applications, Change of Information forms, Medicaid Reactivations/Deactivations forms, Licenses, Insurances, and Staff Update forms to this email address.
- [GACollaborative@carelon.com](mailto:GACollaborative@carelon.com) – Send any questions pertaining to credentialing or the enrollment process (Letter of Intent, New Applications, Existing Provider Applications) to this email address. Documents are not accepted at this email address. Please include the associated tracking number, if applicable, in the subject line of the email.
- [GACollaborativePR@carelon.com](mailto:GACollaborativePR@carelon.com) – This is for any questions related to authorizations, trainings, etc. Submit denied authorization spreadsheets to this email address also.

### III. Georgia Department of Community Health (DCH)

The Georgia Department of Community Health (DCH) is one of Georgia’s four (4) health agencies serving the state’s growing population of over 10 million people. DCH serves as the lead agency for Medicaid and oversees the State Health Benefit Plan and Healthcare Facility Regulation Division (HFRD). The DBHDD works in conjunction with DCH to assist in providing services to individuals in need of behavioral health, substance abuse, and/or intellectual and developmental disability services. More information regarding DCH can be found [here](#).

One platform used by DCH to support approved providers is the Georgia Medicaid Management Information System.

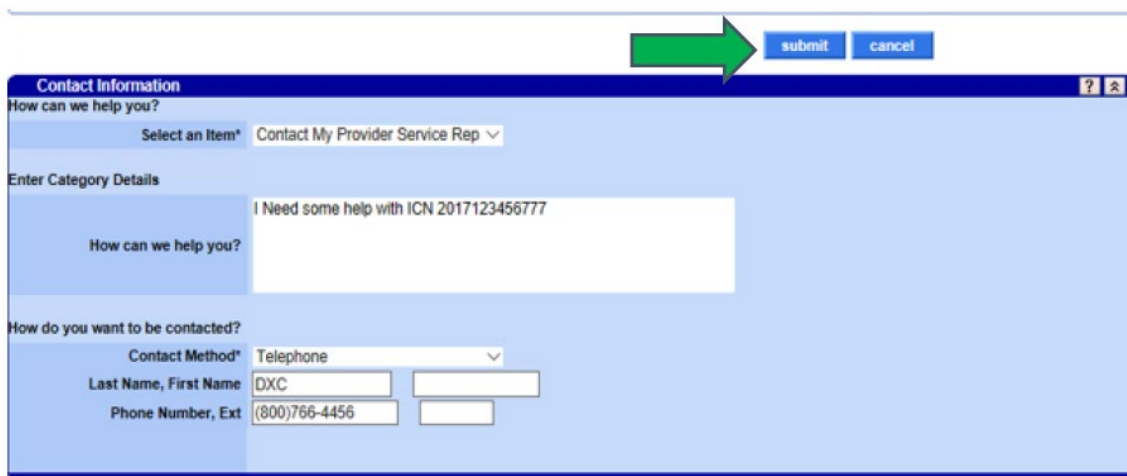
#### 1. Georgia Medicaid Management Information System (GAMMIS)

The Georgia Medicaid Management Information System (GAMMIS) website is administered by the Department of Community Health (DCH). It is important to be familiar with this site. Providers will bill for Medicaid services through GAMMIS. This site also contains many of the associated DCH Provider Manuals and Medicaid standards that impact the services provided in the community. Click [here](#) to access it.

## a. Gainwell Technologies

Gainwell Technologies (formerly known as DXC) is the fiscal agent for DCH. The DCH contracts with Gainwell Technologies to provide day-to-day services necessary for the different Medicaid programs to function. To assist providers, Gainwell has assigned Provider Relations Field Services Representatives. Providers can contact their assigned Provider Representative through the GAMMIS website by hovering over the “**Contact Information**” tab then selecting “**Contact Us**” from the drop-down menu.

A “**Contact Us**” form will appear. In the “**Select an Item**” box, from the drop-down menu, select “**Contact My Provider Service Rep.**” Then, complete the “**How can we help you?**” field. In the “**How do you want to be contacted?**” section, select “**telephone**” in the “**Contact Method**” drop-down box and in the Last Name, First Name section, input only “**Gainwell,**” followed by the relevant contact number for the Provider agency. See the screenshot for more guidance. It is important to note that your Gainwell Technologies representative can assist you with issues or questions regarding billing via GAMMIS.



The screenshot shows a web form titled "Contact Information" with a blue header. A green arrow points to the "submit" button. The form contains the following fields and sections:

- How can we help you?**: A dropdown menu with "Contact My Provider Service Rep" selected.
- Enter Category Details**: A text input field containing "I Need some help with ICN 2017123456777".
- How do you want to be contacted?**: A dropdown menu with "Telephone" selected.
- Last Name, First Name**: Two input fields, the first containing "DXC".
- Phone Number, Ext**: Two input fields, the first containing "(800)766-4456".

## b. Medicaid Provider Manuals

There are Provider manuals on this site that Providers should be familiar with. They can be accessed by hovering over the “**Provider Information**” tab and selecting “**Provider Manuals**” or by clicking [here](#). Once on this page, a complete listing of the manuals that pertain to all the different Medicaid programs administered by DCH can be seen. **These manuals are updated**

**on a quarterly basis.** Previous versions of the Provider Manuals are also archived and can be found in the Provider Manuals folder. There are three specific manuals that an approved DBHDD BH provider should become familiar with.

1. *Part 1 Policies and Procedures for Medicaid/Peachcare for Kids*
2. *Community Behavioral Rehabilitation Services*
3. *Telemedicine Guidance*

### **c. Provider Notices**

Provider notices on the GAMMIS website are vitally important. These can be accessed on this webpage by hovering over the “**Provider Information**” tab and selecting “**Provider Notices**” from the drop-down menu or by clicking [here](#). DCH will post all presentations in this section as well as announcements about Medicaid Fairs conducted around the state.

### **d. Provider Messages**

Provider messages can be accessed on the GAMMIS website by hovering over the “**Provider Information**” tab and selecting “**Provider Messages**” from the drop-down menu or by clicking [here](#). Once on this page, in the “**Provider Type**” field, we recommend that Providers select “**ALL PROVIDER TYPES**” in the drop-down menu to ensure all messages that have been released by DCH can be viewed. Select “**ALL PROVIDER TYPES**” then click “**Search**” and all messages will appear.

## **2. Care Management Organizations (CMOs)**

Effective June 1, 2006, the state implemented Georgia Families<sup>®</sup>, a managed care program through which healthcare services are delivered to members of Medicaid, PeachCare for Kids<sup>®</sup>, and Planning for Healthy Babies<sup>®</sup>, which serves approximately 1.3 million members. DCH contracts with Care Management Organizations (CMOs) to provide benefits and services to Georgia Families<sup>®</sup> members. By providing a choice of health plans, Georgia Families<sup>®</sup> allows members to select a healthcare plan that fits their needs. Many Georgians that are eligible for Medicaid receive their insurance coverage through one of the CMOs. Any provider wishing to provide services to individuals with this type of coverage will need to enroll with each CMO directly. The DBHDD is not able to provide guidance or assistance in this process, however, more information can be found [here](#).

### **3. Healthcare Facility Regulation Division (HFRD)**

The Healthcare Facility Regulation (HFR), a division of the Department of Community Health (DCH), is responsible for healthcare planning, licensing, certification, and oversight of various healthcare facilities and services in Georgia. Licenses and permits that some DBHDD BH Providers must have to provide services such as a Drug Abuse Treatment and Education Programs (DATEP) license are overseen by HFRD. More information can be found [here](#).

## Provider Issue Management System (PIMS)

Lastly, please remember that if you have any questions, you may contact the Office of Provider Relations through the Provider Issue Management System (PIMS). Again, this system is an avenue for Providers to utilize when there is a question they would like answered. Click [here](#) to access PIMS directly. It can also be accessed from the [DBHDD homepage](#) by selecting “**Submit a Question to Provider Relations**” tile. It is recommended that this site be bookmarked for future use and to utilize it whenever a question arises.

### IV. Quick Reference Guide

1. DBHDD: <https://dbhdd.georgia.gov/>
2. DBHDD Provider Manuals: <https://dbhdd.georgia.gov/be-connected/community-provider-manuals>
3. DBHDD PolicyStat: <https://gadbhdd.policystat.com/>
4. DBHDD University for Providers: <https://www.dbhdduniversity.com/providers.html>
5. Georgia Collaborative ASO: <https://www.georgiacollaborative.com/>
6. Georgia Collaborative Provider Forms: <https://www.georgiacollaborative.com/providers/forms/>
7. ProviderConnect: <https://www.georgiacollaborative.com/providers/providerconnect/>
8. DCH: <https://dch.georgia.gov/>
9. GAMMIS: <https://www.mmis.georgia.gov/portal/>
10. Healthcare Facility Regulation Division: <https://dch.georgia.gov/divisionsoffices/hfrd>