

GEORGIA MEDICAID PROVIDER UPDATE

May 29, 2007

Dear Provider:

During the first year of the program, Avesis mandated that providers obtain “approval codes” for members’ eligibility and benefits prior to rendering services. Avesis paid claims based on issuance of that approval code, even if a Member was not eligible, or had already utilized their benefit. Because of the administrative burden on many offices of this process, we have lifted this requirement. **Effective June 1, 2007**, Avesis will no longer issue approval codes. It is strongly encouraged that you verify eligibility for each Member’s appointment the business day prior to rendering services unless the next business day is the first day of a new month. Please note that verification of benefits or eligibility is not a guarantee of payment: actual payment is based on the terms and conditions of the plan in force once the claim is received.

If you should have any questions please contact Avesis Provider Services at (800) 231-0979.

As always, thank you for your participation in the Avesis Georgia Medicaid network and we look forward to continuing our relationship with your office.

Sincerely,

Avesis Provider Service Team