



Provider Portal Training

Provider Billing Cycles & AR

October 2026

2026 Indiana Health Coverage Programs (IHCP) Works Annual Seminar

Company Overview

- Founded in 1974 and headquartered in Irving, Texas
- Provides healthcare technology, analytics, and program integrity services
- Supports government healthcare programs, health plans, and payers
- Part of Gainwell Technologies since 2021
- We currently have over 700 unique Indiana Providers enrolled in our Portal

Mission and Value

Help healthcare organizations control costs, improve payment accuracy, reduce fraud, waste and abuse, and enhance outcomes for members and taxpayers.

What is Disallowance?

- CMS-required post-payment audit process
- Ensures Medicaid is the payer of last resort
- Reviews claims after Medicaid payment
- Identifies claims where Medicare or commercial insurance should have paid first

How Is Disallowance Determined?

HMS matches Medicaid-paid claims against eligibility records:

- Medicaid eligibility
- Medicare eligibility
- Commercial insurance eligibility

Positive matches create a claim listing that is compiled into a Disallowance Packet and sent to providers to begin the recoupment process.

What Can Providers Expect?

Providers receive:

- Audit participation instructions
- Affected claim listing
- Third-party insurance information

Action Required:

Bill the identified Medicare or commercial insurer for the specified claims.

Key Takeaway:

Medicaid should only pay after all available insurance resources have been exhausted.

HMS Integrated Solutions Suite

Member and Provider Portals • Member Mobile App
• Management Portal • Gabby Virtual Assistant



Business Process Services

- TPR Call Center
- Advisory Services



COB On Demand + Portal

- Real-time coverage verification to update and validate files, confirming accuracy and compliance
- Can be integrated into prior authorization process



Pre-Pay Cost Avoidance

- Maximize cost avoidance
- End-to-end solutions
- Focused on speed to delivery and data quality
- Accuracy to create actionable insights



Commercial Insurance Billing, Direct Bill

- Unmatched access to more than 1,936 carriers, enabling precise data matching with 99.9% accuracy



Intelligent Solutions and Automation

- AI-Powered Solutions
- Intelligent Automation

Comprehensive Cost Containment Solution

- Pre-Pay Post Pay Coordination of Benefits • Payment Accuracy
- Eligibility Verifications • Case Management • Care Quality

HMS Integrated Solutions Suite, Continued

Member and Provider Portals • Member Mobile App
• Management Portal • Gabby Virtual Assistant



Business Process Services

- TPR Call Center
- Advisory Services



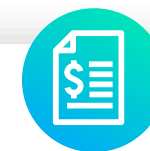
Disallowance, HMS Portal

- Recovers erroneous payments from providers that should have billed their commercial or Medicare plan as the member had primary coverage
- Self-service portal for providers to submit supporting information



Subrogation Maestro & Solaris+

- Online case management portals providing self-service capabilities for attorneys and members
- Support electronic submission of records, case tracking, and letter management



Health Insurance Premium Payment

- Multi-channel member outreach
- Supports direct deposit for premium reimbursement
- Online application with documentation support



Intelligent Solutions and Automation

- AI-Powered Solutions
- Intelligent Automation

Comprehensive Cost Containment Solution

- Pre-Pay Post Pay Coordination of Benefits • Payment Accuracy
- Eligibility Verifications • Case Management • Care Quality

Core Services

Coordination of Benefits

Payment Integrity & Claims Review

Eligibility Verification

Third-Party Liability Recovery

Population Health Analytics

Healthcare Advisory Services

How HMS Creates Value

- Identify improper payments
- Recover overpayments
- Improve accuracy of claims processing
- Ensure the right payer is billed
- Support compliance and cost containment



**Lower healthcare costs and
better financial performance**

Clients and Stakeholders

- State Medicaid Programs
- Managed Care Organizations
- Medicare Advantage Plans
- Health Insurers
- Healthcare Providers

HMS helps these organizations improve payment accuracy, reduce unnecessary spend, and make better data-driven decisions.

Key Takeaways

Health Management Systems is a healthcare technology and analytics organization focused on payment integrity, cost containment, and operational efficiency. Its solutions help healthcare payers reduce waste, recover funds, and improve healthcare program performance.



PROVIDER RELATIONS FOCUS

ONE TEAM. SHARED RESPONSIBILITY. STRONGER RESULTS.

ONE MISSION. MANY HANDS. BETTER OUTCOMES.



ONE MISSION
MANY HANDS
BETTER OUTCOMES



ONE TEAM

We support each other.



SHARED RESPONSIBILITY

We own it together.



STRONGER RESULTS

We deliver for our providers and members.



WE CARE

about our providers, our members, and each other.



WE COLLABORATE

across teams and expertise.



WE DELIVER

exceptional service every day.

TOGETHER,
WE MAKE A DIFFERENCE.

Provider Portal Overview

Secure • Compliant • Transparent • Efficient

HMS Provider Portal Access:
<https://hmsportal.hms.com>

Platform Capabilities

- ✓ Review claim letters and listings
- ✓ Track claim status in real time
- ✓ Communicate with Provider Relations
- ✓ Submit dispositions and responses
- ✓ Upload supporting documentation
- ✓ Access claim history and correspondence

**Single Source of Truth
for all Disallowance Claims**

PROVIDER PORTAL

One Portal. One Process. Faster Outcomes.



Faster Processing

2-3 Weeks vs. 90 Days

- Submit refute documentation
- Processing in 2-3 weeks
- Eliminates 90-day cycle closure



Team Task Assignment

Improve Accountability & Workflow

- Assign staff tasks
- Monitor progress
- Streamline collaboration



**Central Repository
for All Disallowance
Claim Documentation**



Real-Time Claim Status

Know Where Every Claim
Stands

- Track claim activity anytime
- Immediate visibility
- Reduced follow-up effort



Historical Cycle Data

Past Information at
Your Fingertips

- Access previous cycles
- Historical documentation
- Trend analysis support

Compliance & Audit Readiness

The portal supports operational and regulatory requirements through complete visibility, auditability, and records retention.

- Audit Trails
- Records Retention
- Historical Correspondence
- Confidential Data Protection
- Accountability and Traceability

Business Value

A secure and centralized platform that improves provider engagement, streamlines workflows, strengthens compliance, and accelerates claim resolution.

Provider Portal Features and Benefits

Features

- Secure data environment
- Real-time access
- On-demand reports
- Direct upload of medical record/documentation
- Area to update provider contact information
- Receipt to notifications and medical record requests
- Screens to monitor review progress and track status
- Ability to communicate, send inquiries, and respond directly within tool

Benefits

- Automates and streamlines provider communications
- Accelerates recoveries
- Expedites provider involvement in review process
- Decreases real-time reviews
- Reduces administrative burden
- Supports interaction among providers, HMS, and client
- Enhances security and privacy of PHI received from providers

Portal Demo

Provider Portal Workload

The screenshot displays the 'Provider Portal' interface. A red arrow points to the 'My Workload Landing Page' header. The left sidebar contains navigation links: My Workload, Dashboard, Provider Communication, Letters, Claims, Bulk Document Upload, A/R Claim Review, Self-Reporting, New Access Request, and Reports & Documents. The main content area shows a list of work items under 'All Work'. The first section is 'Cycles' (11 items), with a 'Filters' dropdown. The second section is 'Letters' (1 item). The 'Cycles' list includes items with status 'Closed with Extension' and progress indicators (71%, 92%, 89%, 0%, 100%). The 'Letters' section shows a table with columns: Provider Name & No., Disallowed(\$), Sent Date, Acknowledged, Claims, and View Claims. A red arrow points to the 'Filter Cycles' dropdown. Another red arrow points to the percentage values in the 'Cycles' list, labeled 'Percentage of claims that still need to be worked'. A third red arrow points to the 'View Claims' link in the 'Letters' table, labeled 'Claim Details'.

My Workload Landing Page

Filter Cycles

Percentage of claims that still need to be worked

Claim Details

Provider Name & No.	Disallowed(\$)	Sent Date	Acknowledged	Claims	View Claims
	\$111,457.18	Jan 1, 1900		1	

Showing 1-1 of 1 Letters

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Provider Portal Letters

Letters Landing Page

hms portal Provider Portal

Filter Options for Letters

Letters Disallowance

114 Total Letters

Filters

Letter Type

- ☐ Coordination of Benefits (114)

Letter Status

- ☐ Acknowledged (112)
- ☐ Acknowledgment Needed (2)

Cycle Status

- ☐ Closed (92)
- ☐ Closed with Extension (14)
- ☐ Open (8)

Context Name

- ☐ California (114)

Searched by: Clear All

Search field

Cycle Status

Provider Name & No.	Sent Date Jan 1, 1900	Cycle Close Date Feb 27, 2023	Acknowledged	Claims 2 View Claims
Client (317) CA Department of Health Care Services	Cycle Medicare Part A Cycle 151 10/28/2022	Cycle Status Open		
Provider Name & No.	Sent Date Jan 1, 1900	Cycle Close Date Feb 27, 2023	Acknowledged	Claims 9 View Claims
Client (317) CA Department of Health Care Services	Cycle Medicare Part B Cycle 137 10/28/2022	Cycle Status Open		
Provider Name & No.	Sent Date Jan 1, 1900	Cycle Close Date Feb 27, 2023	Acknowledged	Claims 16 View Claims
Client (317) CA Department of Health Care Services	Cycle Commercial Insurance Cycle 148 10/28/2022	Cycle Status Open		
Provider Name & No.	Sent Date Jan 1, 1900	Cycle Close Date Jan 30, 2023	Acknowledged	Claims 38

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Claims Landing Page

Filter by Claim Status

4,091

Total Claims

Filters

Claim Status

- ☐ Open Request (2277)
- ☐ Pending Review (16)
- ☐ Recoupment/Finding (1075)
- ☐ Void/Closed (723)

Claim Disposition

- ☐ Agree (1196)
- ☐ Disagree (853)
- ☐ Request Extension (233)
- ☐ Unknown (1809)

Claim Disposition Extension

- ☐ Grant (27)
- ☐ Pending (207)

Letter Listing Status

- ☐ Acknowledged (3870)
- ☐ Unknown (221)

Searched by:

Clear All

Claim No. 1210	Disallowed(\$) \$218.15	Patient Name C.	Cycle (20658) COMMERCIAL INSURANCE CYCLE 148 10/28/2022	Cycle Close Date Feb 27, 2023	
Provider Name & No.	Client (317) CA Department of Health Care Services	Claim Disposition Disagree	Claim Status Open Request		

Claim No. 1321	Disallowed(\$) \$135.41	Patient Name DO	Cycle (20658) COMMERCIAL INSURANCE CYCLE 148 10/28/2022	Cycle Close Date Feb 27, 2023	
Provider Name & No.	Client (317) CA Department of Health Care Services	Claim Disposition Unknown	Claim Status Open Request		

Claim No. 202	Disallowed(\$) \$8,284.00	Patient Name RU	Cycle (20651) MEDICARE PART A CYCLE 151 10/28/2022	Cycle Close Date Feb 27, 2023	
Provider Name & No.	Client (317) CA Department of Health Care Services	Claim Disposition Agree	Claim Status Open Request		

Claim No. 202	Disallowed(\$) \$65.88	Patient Name RU	Cycle (20654) MEDICARE PART B CYCLE 137 10/28/2022	Cycle Close Date Feb 27, 2023	
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Provider Portal Claim Details

hms portal | Provider Portal

TAKE A TOUR OF WHAT'S NEW

Claims / 21

Claim Status: Open Request | Claim Disposition: Unknown

COMMERCIAL INSURANCE CYCLE 146 08/31/2022 / CA Department of Health Care Services

166) Claim No. 21

Claim Details | Repayments | Refund Request

Patient Details

Patient Name	Date Of Birth	Date Of Service	Procedure Code
		Apr 8, 2022	--
Sex	Medical ID		
F			
Recipient Acct No			
--			

Provider Details

Provider Name & Provider No.	NPL	Client Details	
		Name	Contract
		(317) CA Department of Health Care Services	California
		Cycle	Cycle Status
		20581 - COMMERCIAL INSURANCE CYCLE 146 08/31/2022	Open
		Retro Claims	Cycle Close Date
		N/A	Dec 29, 2022

Insurance Details

Name	Group No.	Payment Details	
		Disallowed(\$)	Due(\$)

Letters | Documents | **Activity**

Refresh

Add more notes... Save

Dec 29, 2022 ○ Final Cycle Closed
User:
Type: Cycle

Aug 31, 2022 12:55 PM ○ Acknowledged
User:
Type: Letter/Listing

Aug 31, 2022 ○ Cycle Reported
User:
Type: Cycle

Aug 31, 2022 ○ Final Cycle Mailing
User:
Type: Cycle

Aug 30, 2022 4:46 AM ○ Open Request
User: System
Type: Claim Status

Aug 30, 2022 ○ Unknown

Where to request an extension or approve/deny the recoupment

Where to add any notes or comments

Resources

Provider Relations Phone Number : (877) 264-4854

Provider Relations Email : prdoc@gainwelltechnologies.com

Provider Relations Fax Number: (214) 905- 2064

Action Reason Codes Reference

OPN Codes

OPN01 – Claims will be recouped at the first cycle summary

Recoup Codes

R01 – Provider agrees with recoup

R06 – Recoup during extension

R12 – Recoup during 2nd – 60-day extension

Void Codes

V01 – No Coverage on DOS

V02 – Medicare benefit exhausted

V03 – Medicaid recipient mismatched

Pended Codes

PE01- First Extension

PE02 – Second Extension

PE03 – Final Extension

Action Reason Codes Reference – cont'd

Recoup Codes	Void Codes	Pended Codes
R13 – Recoup during 3 rd – 60-day extension	V05 – Non-covered service	PE90 – Placed in a special extension
R73 – Partial recoup only	V06 – Prior Medicaid Recoupment	
R74 – Partial Recoup during 2 nd – 60-day extension	V12 – Correctly Billed	
R75 – Partial Recoup during 3 rd – 60-day extension R83-No Response During Open Cycle	V21 – Disallow amount applied to deductible or coinsurance	
	V76 – Illegal Resident	

Questions



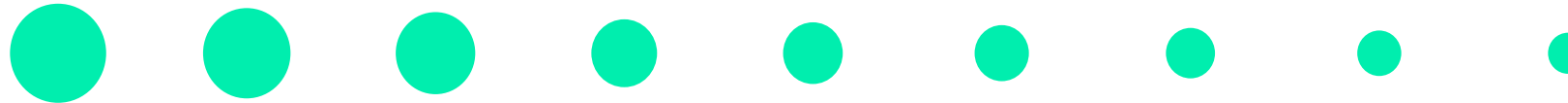
Thank you!

Provider Operations:

prdoc@gainwelltechnologies.com

HMS Provider Portal Access:

<https://hmsportal.hms.com>



Provider Relations Consultants



Areas Covered	Consultant	Email	Telephone
Region 1 plus Chicago/Watseka, IL, and Sturgis, MI	Michelle Walls	INXIXRegion1@gainwelltechnologies.com	317-488-5071
Region 2 plus Danville, IL	Jill Harris	INXIXRegion2@gainwelltechnologies.com	317-488-5080
Region 3	Open	INXIXRegion3@gainwelltechnologies.com	317-488-5324
Region 4 plus Cincinnati/Harrison and Hamilton/Oxford, OH	Kassandra Johnson	INXIXRegion4@gainwelltechnologies.com	317-488-5153
Region 5	Virginia Hudson	INXIXRegion5@gainwelltechnologies.com	317-488-5186
Region 6	Open	INXIXRegion6@gainwelltechnologies.com	317-210-2618
Region 7 plus Louisville and Owensboro, KY	Tami Lott	INXIXRegion7@gainwelltechnologies.com	317-286-6894
All out-of-state providers except those in the previously listed cities	Judy Green	INXIX_OOS@gainwelltechnologies.com	317-488-5026

Thank you for attending!

By taking a few moments to complete the event and session evaluations, you help us understand your experience and shape the future of our programs.

