

MediCall Fact Sheet

How to Use the MediCall System

Please use this self-service system for Eligibility Certification, Claims Status, Check Amounts, Service Authorization, and Service Limits

To access MediCall, the provider must have a currently active Medicaid provider number. The provider's number is verified before access to MediCall is authorized. Responses by the caller to MediCall are required within a specified period of time. If the time limit is exceeded, the call will be disconnected.

The caller should have the following information available before calling:

- 10-digit National Provider Identifier (NPI) or Atypical Provider Identifier (API)
- Member Medicaid Number (12 digits) or Social Security Number (9 digits) and Date of Birth (8 digits) in month, day, and year format (mmddyyyy) for member eligibility verification and claims status
- From and Thru Date(s) of Service in month, day, and year format (mmddyyyy) for member eligibility verification and claims status

The caller will have the following limits when entering dates of service:

- The caller does not have to enter a Thru date of service if services were rendered on a single day. Pressing the # key prompts the system to continue.
- Future month information is only available in the last week of the current month.
- Inquiries cannot be on dates of service more than one year prior to the date of inquiry. After dialing the MediCall number, the system will ask for the NPI or API. Enter the 10-digit number and select from the following options:
 - Press "1" for member eligibility verification.
 - Press "2" for claims status.
 - Press "3" for recent check amounts.
 - Press "4" for service authorization information.
 - Press "5" for service limit information.