

Local Education Agency

Lori Crawford
August 26, 2025

gainwell®



Agenda

01 Eligibility Check

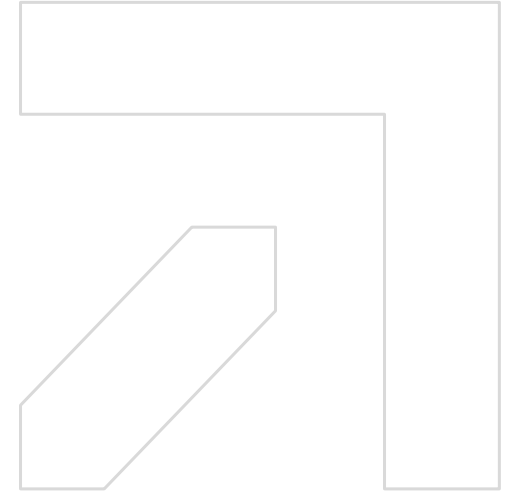
02 Overview of Revalidation Process

03 Remittance Advice

04 Denials

05 Interactive Tools

06 Q&A



Eligibility Check



Use the hamburger menu to access Eligibility

The screenshot displays the Gainwell Provider Portal interface. At the top, the header includes the Gainwell logo, the text "Provider Portal MEDICAID", and navigation links for "MESSAGES", "CONTACT US", "FAQ", "PORTAL HELP", and "LOGOUT". A search bar and a hamburger menu icon (three horizontal lines) are located in the top right corner, with the latter circled in red. Below the header, the main content area features several tiles: "Message Center" with "NEW 0" and "READ 0" counts and a "View Messages Now" button; "Verify Eligibility" with a "Send Secure Message" link; "Search for a Claim" with a "Claim ID" input field and "Full Search" and "Go" buttons; "Search Treatment History" with a "Member ID" input field and "Full Search" and "Go" buttons; and "Download Files". A vertical sidebar menu is open on the right, listing "Provider Portal" and "Eligibility" (which is highlighted in dark blue), along with other options: "Claims", "Appeals", "Care Management", "EDI File Exchange", "Resources", and "Maintenance". The footer contains links for "DISCLAIMER", "WEBSITE REQUIREMENTS", and "PRIVACY POLICY", along with copyright information "© 2025 Gainwell Technologies. All rights reserved." and a server status indicator "Server: 30.201.181".

Search Criteria

Benefit Eligibility Verification

Required Fields (*)

SEARCH CRITERIA ^

* Search By ? * Effective Date ? End Date ?

select a value... 08/20/2025 📅 08/20/2025 📅

select a value...

Member ID

Name and DOB

SSN and DOB

Cancel Submit

v

- Select a value and enter a date range.
- Only 1 month can be searched at a time
- Enter calendar month of the service date to verify eligibility.
- Click Submit to search.

Search by Member ID

Benefit Eligibility Verification

Required Fields (*)

SEARCH CRITERIA

* Search By	?	* Effective Date	?	End Date	?
Member ID	▼	08/20/2025	📅	08/20/2025	📅

* Member ID	?
08	🔍

ADDITIONAL SEARCH CRITERIA

Reset

Cancel

Submit

For this example, Member ID was used as the search criteria.

Eligibility Verification Details

Verification Response ID 252347NV4X - 8/22/2025

Plan Date 09/01/2024 - 09/30/2024

Response Text **The member is not eligible.**

- Once a member has met their spenddown, no data will appear in the spenddown section of the verification. Claims data for members assigned to an MCO will be updated upon receipt from the MCO.
- The patient liability displayed is the total for the month. Claims data for members assigned to an MCO will be updated upon receipt from the MCO.
- To ensure you receive the most up to date information for members with both a KanCare MCO assignment and Lockin status, contact the assigned MCO.

Member Information

Member ID	Birth Date	Date of Death	Gender	Medicare Id
00				
Last Name	First Name	Middle Name		

Print

If a member is not eligible for a month – improved messaging will be available after KMMS 2.2 upgrade. Previous, messaging only said “no results found” if eligibility segment not present.

Revalidation Process



Message Center

NEW
0

READ
0

[View Messages Now](#)

[Send Secure Message](#)

Verify Eligibility

Search for a Claim

Claim ID

Full Search

[Go](#)

Helpful Links

- [Change My Password](#)
- [Search Fee Schedules](#)
- [PES Installation Package](#)
- [PES User Guide](#)
- [Recommended Browsers](#)

Search for a Member

Search Treatment History

Member ID

Full Search

[Go](#)

Download Files

WICHITA PUBLIC SCHOOLS

NPI 1659478923

Message Center

NEW
0

READ
0

[View Messages Now](#)

[Send Secure Message](#)

Search for a Claim

Claim ID

Full Search

Go

Verify Eligibility

Search Treatment History

Member ID

Full Search

Go

Search for a Member

Download Files

Provider Portal

- ◀ Eligibility
- ◀ Claims
- ◀ Appeals
- ◀ Care Management
- ◀ EDI File Exchange
- ◀ Resources

◀ Maintenance

- Portal Profile Maintenance
- Manage My Information
- Manage My Templates
- Manage My Rosters
- Manage Delegates
- Manage Revalidations

Welcome

Use the following Process to update and submit any changes to your organizational information

If your organization has multiple service locations, select a service location from the Service Location dropdown below to select which service location you want to update.

Once you select "**Start**", you will be presented with a series of tabs to help you navigate to the information you choose to update.

Providers can review and update their provider and organizational information using the relevant tabs based on each service location selected.

To update information for another Service Location, select Maintenance – Manage My Information from the Navigation Menu to return to the Welcome page to select another service location.

Important Information:

Some updates may require approval prior to changes being reflected for your organization. If you do not see updates immediately within Manage My Information, visit the Manage My Information – Re Tracking tab to view the status of any updates submitted.

After you have completed your updates if necessary, visit the - **My Account Profile** Page - Provider Portal/Maintenance/PortalProfileMaintenance - to review and update your profile information.

Service Location Information

Service Location



30003939850001 - WICHITA PUBLIC SCHOOLS - 903 S EDGEMOOR ST, WICHITA, KS 67218-3337

Sta



General Information



Specialties



Addresses



Organization



Other Information



Disclosures



MCO Network



Request Tracking



Service Location

Cancel

General Information

Enrollment Information

Enrollment Type

Facility

Provider Type

Local Education Agency

Effective Date

03/07/1993

Revalidation Date

10/05/2025

Provider Information

Ownership

Yes No

* Business Name

[Redacted]

Required F

Contact Information

* Last Name

[Redacted]

* First Name

[Redacted]

Middle Name

[Redacted]

Title

[Redacted]

Contact Information

* Last Name	* First Name	Middle Name	Title
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
* Address Line 1	Address Line 2		
<input type="text"/>	<input type="text"/>		
* City	* State	* Country	* ZIP Code
<input type="text" value="WICHITA"/>	<input type="text" value="Kansas"/>	<input type="text" value="United States"/>	<input type="text" value="67218-3337"/>
* Phone Type	* Phone Number	Extension	Fax Number
<input type="text" value="Work"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
* Email Address	* Preferred Communication	Preferred Communication Language	
<input type="text"/>	<input type="text" value="Email"/>	<input type="text" value="English"/>	

Reset

Save

Degrees

- Confirm contact information is current.
- Revalidation notices and reminders are sent to Contact Information on file.

Contact Information

* Last Name * First Name Middle Name Title

* Address Line 1 Address Line 2

* City * State * Country * ZIP Code

WICHITA Kansas United States 67218-3337

* Phone Type * Phone Number Extension Fax Number

Work

* Email Address * Preferred Communication Preferred Communication Language

Email English

Reset Save

- Click into the field and update as required.
- Asterisk fields are required.

Contact Information

* Last Name	* First Name	Middle Name	Title
Crawford	Louisa		
* Address Line 1		Address Line 2	
903 S EDGEMOOR ST			
* City	* State	* Country	* ZIP Code
WICHITA	Kansas	United States	67218-3337
* Phone Type	* Phone Number	Extension	Fax Number
Work	770-415-6621		316-973-4705
* Email Address	* Preferred Communication	Preferred Communication Language	
louisa@gmail.com	Email	English	

Reset Save

- Reset clears all fields.
- Click Save to update information.

Different Month

Benefit Eligibility Verification

Required Fields (*)

SEARCH CRITERIA ^

* Search By * Effective Date * End Date

* Member ID

ADDITIONAL SEARCH CRITERIA v

Enter a different month and click Submit.

Multiple sections return

Eligibility Verification Details

Verification Response ID 252347NV4Z - 8/22/2025
Plan Date 10/01/2024 - 10/31/2024

- Once a member has met their spenddown, no data will appear in the spenddown section of the verification. Claims data for members assigned to an MCO will be updated upon receipt from the MCO.
- The patient liability displayed is the total for the month. Claims data for members assigned to an MCO will be updated upon receipt from the MCO.
- To ensure you receive the most up to date information for members with both a KanCare MCO assignment and Lockin status, contact the assigned MCO.

Member Information

Member ID	Birth Date	Date of Death	Gender	Medicare Id
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	First Name	Middle Name		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

Medicare Information

Coverage Type	Effective Date	End Date
Medicare Part A	10/01/2024	10/31/2024
Medicare Part B	10/01/2024	10/31/2024
Medicare Part D	10/01/2024	10/31/2024

Medicare Part D

10/01/2024

10/31/2024

Benefit

Coverage	Effective Date	End Date	Base Deductible
Medically Needy	10/01/2024	10/31/2024	
Qualified Medicare Beneficiary	10/01/2024	10/31/2024	

Copayments

- Beneficiary is responsible for copayment. The copayment information is applicable if the member is not assigned to a KanCare MCO, or the service is not covered by the KanCare MCO.

Service Type Code Details - Covered

Service Type Code	Description	Effective Date	End Date	Copay	Coinsurance	Plan Network
30	Health Benefit Plan Coverage	10/01/2024	10/31/2024		\$0.00	0.00% Yes
1	Medical Care	10/01/2024	10/31/2024		\$3.00	0.00% Yes
2	Surgical	10/01/2024	10/31/2024		\$0.00	0.00% Yes
4	Diagnostic X-Ray	10/01/2024	10/31/2024		\$0.00	0.00% Yes

Managed Care Assignment

Service Type	Health Plan	Health Plan Phone	Managed Care Organization/Primary Care Provider	Provider Phone	Effective Date	End Date
	KANCARE19	877-542-9238	UNITEDHEALTHCARE COMMUNITY PLAN - KANSAS		10/01/2024	10/31/2024

Spend Down

From Date	To Date	Amount	Remaining Amount
10/01/2024	03/31/2025	\$6,936.00	
10/01/2024	03/31/2025		\$6,936.00

Service History Details

Service Type	Last Exam	Next Exam
Medically Related Transportation	10/01/2024	10/31/2024

Print

Remittance Advice (RA)



File Download

Search Criteria

* Download Type

Reports

Category

Remittance Advice

* From Date

* To Date

Reset

Cancel

- Search Providers
- Search Procedure (HCPCS) Codes
- Search Diagnosis Codes
- Search Drug (NDC) Codes
- Notify Me
- Search Members
- File Download**

- Provider Portal
 - Eligibility
 - Claims
 - Appeals
 - Care Management
 - EDI File Exchange

Resources

- Maintenance

- RA can be found under Resources and File Download

Denials



Interactive Tools



Searches

- HCPCS
- NDC
- Diagnosis
- Fee Schedule

The image shows a screenshot of the KMAP website's navigation menu. The menu is divided into four main sections: Home (KMAP), Member, Provider, and Publications. The 'Provider' section is currently selected and highlighted in teal. A dropdown menu is open under 'Provider', listing several options: 'Provider Publications', 'Interactive Tools', 'Helpful Information', 'Provider Documents', 'KanCare', 'Provider Login', and 'Provider FAQ'. The 'Interactive Tools' option is circled in red. The 'Publications' section also has a dropdown menu with 'Provider Publications' and 'Provider Bul' visible.

Home (KMAP)	Member	Provider	Publications
		Provider Publications	Provider Publications
		Interactive Tools	Provider Documents
		Helpful Information	Provider Login
		KanCare	Provider FAQ
		Provider Publications	Provider Bul
		Manuals	

Interactive Tools

Interactive Tools


Reference Codes	Taxonomy Cross Reference List	TPL Noncovered Procedure Code List	Hospital DRG Weights and Rates
-----------------	-------------------------------	------------------------------------	--------------------------------

Reference Codes









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The KMAP Reference Codes pages provide users the capability to search for procedure, drug, and diagnosis codes. The procedure code search has been enhanced to provide information regarding all CPT-4 procedure codes, HCPCS, and ADA codes currently recognized by KDHE-DHCF.

This is an interactive site that allows you to:

- [Search by Procedure](#) 
- [Search by NDC](#)
- [Search by Diagnosis](#)
- [Coding Modifiers Table](#)
- [Ambulance Coding Modifiers Table](#)
- [Download Fee Schedules](#)
- [MS-DRG to CMS-DRG Crosswalk](#)
- [HCPCS Reference List](#)
- [Pharmacy Federal and State Pricing](#)
- [Fee Schedule for Outpatient Hospitals](#)

Interactive Tools

KMAP   Member  Provider  Publications  EDI  Provider Directory  Links  FAQ

Reference Copyright Notice

IMPORTANT NOTICE: Before you can view Reference Codes, you must accept the following agreement. If you accept, you will be sent to the KMAP Reference Code page. If you do not accept, you will be returned to the KMAP Home Page.

LICENSE FOR USE OF "Physicians' CURRENT PROCEDURAL TERMINOLOGY", FOURTH EDITION ("CPT")

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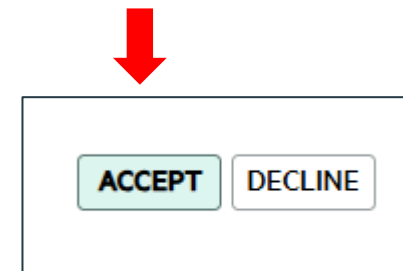
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In order to search, you must choose ACCEPT at the bottom of the page to continue.



Interactive Tools

Search By Procedure (HCPCS Codes)

SEARCH CRITERIA

Information provided does not guarantee coverage or payment. Providers must reference provider manuals for specific coverage information or program limitations and verify if services are covered for their provider type and specialty and the member. All fields are required.

Disclaimer: Effective with dates of service on and after February 1, 2016, out-of-state and border city hospitals do not receive the adjustment factor/rate that is applied to "Outpatient Services – For Outpatient Hospital Claims (OPS)".

Disclaimer: Effective with the processing date of July 28, 2017, retroactive to dates of service on and after July 1, 2017, the previously implemented provider payment reduction was restored. Claims with a date of service prior to July 1, 2017, continue to receive the reduction. Effective for claims with DOS on and after 07/01/2018 the DRG adjustment percentage was increased to 78% for outliers (both cost outlier and day outlier).

* HCPCS	* Date of Service	* Benefit Plan
T1017	03/03/2025	TXIX - TITLE XIX (MEDICAID)

* Provider Type	* Provider Specialty	RESET	SEARCH
21 - Targeted Case Management	186 - Family Service Coordination for ECI		

SEARCH RESULTS

Interactive Tools

HCPCS	Covered Ages	Effective Date	End Date	Benefit Plan
T1017	0-3	03/12/2020	12/31/2299	TITLE XIX (MEDICAID)

HCPCS INFORMATION

Coverage for Procedure T1017 as of 3/3/2025

Date of Service 3/3/2025

Benefit Plan : TITLE XIX (MEDICAID)

Information provided does not guarantee coverage or payment. Providers must reference provider manuals for specific coverage information or program limitation and verify if services are covered for their provider type and specialty and the member.

COVERAGE INFORMATION

Procedure	T1017
Effective Date	3/12/2020
End Date	12/31/2299
Covered Ages	0-3
Gender	Both
Med Review	N
MR Ages	0-999
Prior Auth	N
PA Ages	0-999

ALLOWED PLACE OF SERVICE CODES

- 02 - Telehealth Provided Other than in Patients Home
- 03 - School
- 04 - Homeless Shelter









OTHER COVERAGE INFORMATION

This procedure code may be covered by the beneficiary's mental health contractor. Providers should verify the beneficiary's eligibility to see if the beneficiary is required to access this service through the mental health contractor.

This procedure code may be covered by the beneficiary's mental health or substance abuse contractor. Providers should verify the beneficiary's eligibility to see if the beneficiary is required to

Interactive Tools

RATE INFORMATION

- Procedure  T1017
- Covered Ages  0 - 3
- Gender  Both
- Rate Type  FSC/TCM for ECI
- Benefit Plan  TITLE XIX (MEDICAID)
- Pricing Method  MAX Fee
- PA Ages  0-999
- Conversion Factor  1

ASSOCIATED RATES

Effective Date	End Date	Modifier	Amount
10/01/2024	12/31/2299		18.75

 Print

Interactive Tools

The screenshot shows the Kansas Medical Assistance Program (KMAP) website. At the top left is the Kansas Department of Health and Environment logo. The main header reads "Kansas Medical Assistance Program (KMAP)". On the right, it says "Welcome , Wed Feb 28, 2:57 pm" and "English" with a dropdown arrow. Below the header is a navigation bar with icons for Member, Provider, Publications, EDI, Provider Directory, Links, and FAQ. A secondary navigation bar contains links for Provider Publications, Interactive Tools, Helpful Information, Provider Documents, KanCare, KMS Login, and Provider FAQ. The "Interactive Tools" section is active, with a sub-menu showing Reference Codes, Taxonomy Cross Reference List, TPL Noncovered Procedure Code List, and Hospital DRG Weights and Rates. The "Reference Codes" sub-page is displayed, featuring a "NOTE" about copyright, a paragraph describing the search capabilities, and a list of links: Search by Procedure, Search by NDC (highlighted with a red arrow), Search by Diagnosis, Coding Modifiers Table, Ambulance Coding Modifiers Table, and Download Fee Schedules.

KMAP Kansas Medical Assistance Program (KMAP) Welcome , Wed Feb 28, 2:57 pm English

Member Provider Publications EDI Provider Directory Links FAQ

Provider Publications Interactive Tools Helpful Information Provider Documents KanCare KMS Login Provider FAQ

Interactive Tools

Reference Codes Taxonomy Cross Reference List TPL Noncovered Procedure Code List Hospital DRG Weights and Rates

Reference Codes

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This is an interactive site that allows you to:

- [Search by Procedure](#)
- [Search by NDC](#) ←
- [Search by Diagnosis](#)
- [Coding Modifiers Table](#)
- [Ambulance Coding Modifiers Table](#)
- [Download Fee Schedules](#)

Interactive Tools



KMAP



Member



Provider



Publications



EDI



Provider Directory



Links



FAQ

NDC Code Search

Information provided does not guarantee coverage or payment. Providers must reference provider manuals for specific coverage information or program limitations and verify if services are covered for their provider type and speciality and the member.

Disclaimer: Effective with the processing date of July 28, 2017, retroactive to dates of service on and after July 1, 2017, the previously implemented provider payment reduction was restored. Claims with a date of service prior to July 1, 2017, continue to receive the reduction. Effective for claims with DOS on and after 07/01/2018 the DRG adjustment percentage was increased to 78% for outliers (both cost outlier and day outlier).

Search Drug (NDC) Codes

SEARCH CRITERIA

Coverage information provided here applies only to retail pharmacies and is not to be used as a professional outpatient claims reference. Information provided does not guarantee coverage or payment. Providers must reference provider manuals for specific coverage information or program limitations and verify if services are covered for their provider type and speciality and the member.

* NDC	? * Date of Service	? * Benefit Plan	<input type="button" value="RESET"/>	<input type="button" value="SEARCH"/>
<input type="text" value="00378137578"/>	<input type="text" value="3/22/2024"/>	<input type="text" value="Select Benefit Plan"/>		

Provider Training

- Provider Portal Guide
- Billing Packets
- YouTube Videos

The screenshot shows the KMAP Provider Portal navigation menu. The top navigation bar includes the KMAP logo, a Home icon, and three main categories: Member, Provider (highlighted in teal), and Publications. Below this, a secondary navigation bar shows 'Provider Publications' and 'Provider Bul'. The main content area features a 'Publications' header and a 'Manuals' button. A dark teal sidebar on the right contains a list of links: 'Provider Publications', 'Interactive Tools', 'Helpful Information' (circled in red), 'Provider Documents', 'KanCare', 'Provider Login', and 'Provider FAQ'.

KMAP	Member	Provider	Publications
Provider Publications	Provider Bul	Provider Publications	Interactive Tools
Publications		Helpful Information	Provider Documents
Manuals		KanCare	Provider Login
		Provider FAQ	

Helpful Information

The screenshot displays the Kansas Medical Assistance Program (KMAP) website. At the top left is the Kansas Department of Health and Environment logo. The page title is "Kansas Medical Assistance Program (KMAP)". The top right shows the date and time: "Welcome , Mon Mar 3, 9:37 am" and a language dropdown set to "English". A navigation bar includes "Login/Register", "Contact Us", and a search box. Below this is a main menu with icons for "KMAP", "Member", "Provider", "Publications", "EDI", "Provider Directory", "Links", and "FAQ". The "Provider" menu item is active, leading to a sub-menu with "Provider Publications", "Interactive Tools", "Helpful Information", "Provider Documents", "KanCare", "KMMS Login", and "Provider FAQ". The "Helpful Information" sub-menu item is also active, showing a list of links: "Provider Training", "COVID Information for Providers", "EOB Crosswalk", "Coding Modifiers Table", "Appeal Rights", "Trading Partner Information", and "NPI". The "Provider Training" link is selected, displaying the "Provider Training" section. This section includes a "Provider Portal Reference Guide" with a description and a link, "Provider Portal Billing Packets" with a description and four links, and "Provider Portal Training Videos" with a description and two links.

Kansas
Department of Health
and Environment
Division of Health Care Planning

Kansas Medical Assistance Program (KMAP)

Welcome , Mon Mar 3, 9:37 am

English

Login/Register | Contact Us | Search

KMAP

Member

Provider

Publications

EDI

Provider Directory

Links

FAQ

Provider Publications

Interactive Tools

Helpful Information

Provider Documents

KanCare

KMMS Login

Provider FAQ

Helpful Information

Provider Training

COVID Information for Providers

EOB Crosswalk

Coding Modifiers Table

Appeal Rights

Trading Partner Information

NPI

Provider Training

Provider Portal Reference Guide

This guide covers the KMAP public site, KMAP Secure Site registration, and other features of the KMAP Secure site. See the Provider Portal Billing packets for instructions on submitting a claim.

- [Provider Portal Reference Guide](#)

Provider Portal Billing Packets

These guides cover billing claims on the KMAP public site. In addition to billing a claim the guide covers editing, voiding, and searching for claims.

- [KMAP Provider Portal Professional Billing Packet](#)
- [KMAP Provider Portal Institutional Billing Packet](#)
- [KMAP Provider Portal Dental Billing Packet](#)
- [KMAP Provider Portal Pharmacy Billing Packet](#)

Provider Portal Training Videos

These videos cover various processes on the KMAP Provider portal.

- [KMAP Portal Registration Demo 1: Registering as a Provider](#)
- [KMAP Portal Registration Demo 2: Registering as a Provider Delegate](#)

Contact Us

Kansas Department of Health and Environment
Division of Health Care Finance

Kansas Medical Assistance Program (KMAP)

Welcome , Fri Feb 14, 12:25 pm

English ▾

Login/Register Contact Us Search

KMAP

Member Provider Publications EDI Provider Directory Links FAQ

Contact List

Name	Contact
	800 792 4884
KANCARE CLEARINGHOUSE	(FAX) 800 498 1255
	(TDD/TDY) 800 792 4292
KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT, DIVISION OF HEALTH CARE FINANCE	785 296 3981
KANSAS RELAY CENTER (TDD/TTY)	800 766 3777
	(PROVIDER) 800 933 6593
KMAP CUSTOMER SERVICE CENTER	(MEMBER) 800 766 9012

Questions



Contact

Heather Gould

Project Director

School Based Services Grant

Division of Health Care Finance

Kansas Department of Health and Environment

900 SW Jackson, Suite 900 North

Topeka, KS 66612

Office: 785-296-1076

Heather.Gould@ks.gov