

# Quick Reference Guide: Understanding Error 2017

## Overview: Member Eligibility

Members in the Mississippi Medicaid program are provided services through either traditional Medicaid (Fee for Service, FFS) or through a managed care Coordinated Care Organization (CCO). This guide will show how to determine what program the member is in and who a claim should be submitted to. This will help avoid receiving **Claim Error 2017 – Member Enrolled with Managed Care CCO**, and make sure any services rendered are billed to the appropriate Medicaid program.

## Member Eligibility Search via the Provider Portal

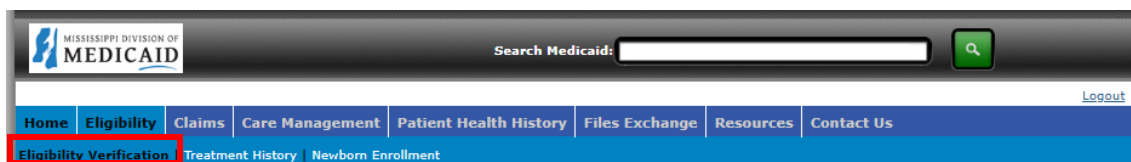
Visit the Provider Portal on the Mississippi Medicaid website to verify member eligibility information in the system.

- **Note:** Provider credentials are needed to log into the portal to use this functionality.

<https://portal.msxix.net/ms/provider/Home/tabid/135/Default.aspx>

On the Provider Portal Home Page:

1. Hover the mouse pointer over the Eligibility tab at the top of the page. The Eligibility Verification link will appear.
2. Click on Eligibility Verification.



The Eligibility Verification Request search panel is displayed.

3. Enter either the **Member ID** (Medicaid ID) or two of the following fields: **Name**, **SSN**, or **Birth Date**.

The **Eligibility Verification Information** panel will display.

4. To see if a member is enrolled with a CCO, look at the **Managed Care Assignment Details**.

Eligibility Verification Information for <span style="float: right;">4/11/2024 to 4/11/2024</span>						
Member ID	N/A		Birth Date	08/04/2017	Gender	Female
Head of Household	N/A		Authorized Rep	No		
Authorized Rep Name	N/A		Authorized Rep Phone #	N/A		
Verification Response ID	2410200007					
<b>Demographic Details</b>						
Street Address	City		State	Mississippi		Zip Code
<b>Benefit Details</b>						
Coverage	Effective Date	End Date	Add Date	Last Update Date		
073 - Children age 6-19 with income at/below the MAGI	09/01/2023	12/31/9999	08/16/2022	09/30/2022		
<b>Medicare Coverage Detail</b>						
Coverage	Effective Date	End Date	Last Update Date			
None						
<b>Managed Care Assignment Details</b>						
Managed Care Plan	Managed Care Plan Phone	Primary Care Provider	Provider Phone	Benefit Plan	Effective Date	End Date
MOLINA HEALTHCARE OF MISSISSIPPI IN	1-844-809-8438			MississippiCAN	6/1/2023	12/31/9999
<b>Lock-In Details</b>						
Lock-in Provider	Lock-in Provider Phone	Benefit Plan	Effective Date	End Date		
None						
<b>Living Arrangement Details</b>						
Level of Care Plan	Provider NPI	Provider Name	Effective Date	End Date		
None						

If details like the ones above are present, the member is enrolled with a CCO.

Members will have a **Benefit Plan** of either MississippiCAN or MississippiCHIP.

\* **Note:** MississippiCHIP members are children up to 21 years old but can be enrolled in either plan.

## Member Eligibility via the AVRS:

**Automated Voice Response System (AVRS) 1-800-884-3222**

The AVRS is a quick phone call using the automated voice response system to see what eligibility a member has.

- **Provider Medicaid ID or NPI Number** is required to use the AVRS.

\***Note:** If multiple locations are associated with the NPI number, a taxonomy code will be required.

## Steps to hear Member Eligibility

1. Select 2 for Provider.
2. Enter the provider's NPI or Medicaid ID when prompted.
3. Select 2 to hear about Member Eligibility.
4. Enter Member Medicaid ID or social security number.
5. Select 1 to hear Member Eligibility
  - a. If the member is enrolled in a Managed Care program, the program and managed care provider information is communicated.

## Error 2017 – Member Enrolled with Managed Care CCO (Coordinated Care Organization)

### Common Causes:

- **No NPI:** The member is enrolled in either MSCAN or MSCHIP programs with one of the CCOs contracted by Mississippi state.

### Explanation of Benefits (EOB)

Error 2017 will have the following explanation (Claim Detail Error):

EOB	Description
0287	Member is enrolled in a state-contracted managed care program for the date(s) of service.

## Job Aid Reference:

Member Eligibility on the Provider Portal:

[https://medicaid.ms.gov/wp-content/uploads/2024/03/20240213\\_MES\\_Gainwell\\_PRP-101\\_Job\\_Aid\\_Eligibility\\_Verification\\_v1.9-1.pdf](https://medicaid.ms.gov/wp-content/uploads/2024/03/20240213_MES_Gainwell_PRP-101_Job_Aid_Eligibility_Verification_v1.9-1.pdf)

MS Automated Voice Response System (AVRS):

<https://medicaid.ms.gov/wp-content/uploads/2022/10/PRP-100-Job-Aid-AVRS-Provider.pdf>

## Change History

The following change history log contains a record of changes made to this document:

Version #	Published/ Revised	Author	Section/Nature of Change
0.1	03/22/2026	Gainwell	Initial publication