What is the Question?	Who Should I Contact?		
Provider Contract Questions (All Programs)	shfamccontracts@mychoicewi.org or contact your assigned Contract Specialist (contact info below) – Contracting cannot answer credentialing questions, please contact the credentialing department below		
Provider Rate Questions	Contracted Providers to contact their Contract Specialist below		
Provider Credentialing Questions	credentialing@mychoicefamilycare.com		
Residential Provider Vacancies	Go into the MIDAS Portal and update bed capacity under bed information. Below is thepath and link:  MIDAS Provider Portal -> Provider Mgmt -> MIDAS Provider BedInformation		

INTERNAL Claims Status or Questions	My Choice Wisconsin or MCFC legacy Origin Member Claims:  Provider.Liaison@mychoicefamilycare.org  Care Wisconsin Origin Member Claims:  Provider-Help-Desk@carewisc.org		
EXTERNAL Claim Status or Questions	My Choice Wisconsin or MCFC legacy Origin Member Claims:  Call WPS: 800-223-6016  Care Wisconsin Origin Member Claims:  Call Claims Help Desk: 855-878-6699		
Member Concerns	Appropriate Care Management Program Staff (Family Care, Partnership, SSI, DualAdvantage)		

Health Care Benefit Package Questions (Partnership, SSI, Dual Advantage)	General Benefit Questions: <a href="https://mychoicewi.org/providers/authorizations/">https://mychoicewi.org/providers/authorizations/</a> - Prior Authorizatio Reference Document (Requirements by Program)		
	Callers should be directed to call CW Customer Service800-963-0035		

MIDAS Provider Setup Questions (Provider Password Resets, etc.)	dlfamccontracts@mychoicefamilycare.com
Change of Ownerships	chowrequests@mychoicefamilycare.com

Authorization Questions	Appropriate Care Management Program Staff (Family Care, Partnership, SSI, DualAdvantage)		
Electronic Visit Verification	External communication = EVV inbox: <a href="mailto:evv@mychoicewi.org">evv@mychoicewi.org</a>		
Apply to Join the Network	https://mychoicewi.org/providers/joining-our-network/		

## Contractor Information for In-Network Providers (Contracted rate questions, contract questions, provider information updates)

\*\* Providers with Corp/Parent Locations: Will be assigned to the contractor where the corporate entity lives

Provider Relations & Network Specialist	ASSIGNED GSR	SERVICES	ADDTL INFO	Dedicated Responsibilities (ie below)
Jennifer Winter Jennifer.winter@mychoicewi.org 414-287-7428	GSR 2,3,9	Supportive Visits, SHC, Day Services, Financial Services, Transportation, SNFS, DME/DMS, Employment Services, SDS, Meals, Adaptive Aids, PERS, Adult Day Care, OTC, Recreational Activities, Home Health Care, Personal Care, PT/OT.ST, Mental Health, AODA	Reports to Michael Kampmeier	All Member Specific Requests for this GSR
Sheri Wojtowicz sheri.wojtowicz@mychoicewi.org 414-287-7656	GSR 5,12,14	Supportive Visits, SHC, Day Services, Meals, Financial Services, Transportation, SNFS, DME/DMS, Employment Services, SDS, Meals, Adaptive Aids, PERS, Adult Day Care, OTC, Recreational Activities, Home Health Care, Personal Care, PTO, OT, ST, Mental Health, AODA	Reports to Michael Kampmeier	All Member Specific Requests for this GSR
Samantha Monrial Garza samantha.monrialgarza@mychoicewi.org 608-210-4078	GSR 6,8,11,13	Supportive Visits, SHC, Day Services, Meals, Financial Services, Transportation, SNFS, DME/DMS, Employment Services, SDS, Meals, Adaptive Aids, PERS, Adult Day Care, OTC, Recreational Activities, Home Health Care, Personal Care, PT OT ST, Mental Health, AODA	Reports to Michael Kampmeier	All Member Specific Requests for this GSR
John Jorgenson john.jorgenson@mychoicewi.org 715-563-1616	GSR 1	Residential, Supportive Visits, SHC, Day Services, Meals, Financial Services, Transportation, SNFS, DME/DMS, Employment Services, SDS, Meals, Adaptive Aids, PERS, Adult Day Care, OTC, Recreational Activities, Home	ALL ANCILLARY AND RESIDENTIAL PROVIDERS IN GSR 1 Reports to Celine Unger	All Member Specific Requests for Ancillary in this GSR

		Health Care, Personal Care, OT PT ST, Mental Health, AODA		
Kelli Macon Kelli.macon@mychoicewi.org 414-287-7422	All Single Case Agreements (All GSRs) for Residential Dedicated Services		Reports to Celine Unger	
Gray Bolivar gray.bolivar@mychoicewi.org 414-287-7638	GSR 2,3,9		Reports to Celine Unger	
Jessica Cullen jessica.cullen@mychoicewi.org 608-290-0279	GSR 5,12,14		Reports to Celine Unger	
Sadie SanFelippo Sadie.sanfelippo@mychoicewi.org 414-287-7688	GSR 6,8,11,13		Reports to Celine Unger	
Michael Kampmeier – Supervisor, Ancillary, Health Plan michael.kampmeier@mychoicewi.org 414-287-7652	ALL GSRs	Primary & Specialty Care Physician Services, Health Systems, Independent Hospitals, FQHC & Indian Providers, Chiropractic Care	Reports to Celine Unger	
Kathleena Gomez chowrequests@mychoicewisconsin.org, eiprequests@mychoicefamilycare.com, provterminationrequests@mychoicefamilycare.org		ALL Enroll In Places, CHOW's, OON, Terminations	Reports to Michael Kampmeier	
Jane Westphal	Contract Services Assistant	New Provider Applications: A-M	If the assigned contractor is out, please forward all calls to 414-287-7640 or email shfamccontracts@mychoicewi.org	

Crissi Bates	Contract Services Assistant	New Provider Applications: N-Z	Reports to Michael Kampmeier
Celine Unger	Manager, Provider Relations & Network		

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Provider Quality	Services Covered	Alpha Split
Briann Eagen Provider Quality Lead Supervisor 800-963-0035 or providerquality@mychoicefamilycare.org	Misc. Ancillary Services	N/A
Elizabeth Zettler Provider Quality Coordinator 800-963-0035 or providerquality@mychoicefamilycare.org	Transportation & High Behavioral Site Visits	N/A
Jamison Hammer Provider Quality Coordinator 800-963-0035 or providerquality@mychoicefamilycare.org	SNF, CBRF, AFH 3-4 Bed, SHC/PC & Statement of Deficiencies	P-Z
Kristine Trotter Provider Quality Coordinator 800-963-0035 or providerquality@mychoicefamilycare.org	SNF, CBRF, AFH 3-4 Bed, SHC/PC & Statement of Deficiencies	A-O
Spencer Lameka Provider Quality Coordinator/AFH Certifier 800-963-0035 or providerquality@mychoicefamilycare.org	1-2 AFH Certifier 1-2 Bed AFH Concerns, SIL/SVA	GSRs: 6, 8, 9, 10, 11, 13 & 14
Tanya Kaiser Provider Quality Coordinator/AFH Certifier 800-963-0035 or providerquality@mychoicefamilycare.org	1-2 AFH Certifier 1-2 Bed AFH Concerns, RCAC	GSRs: 1, 2, 3, 4, 5, 7 & 12

