

PROVIDER ALERT
Information on Claims Reconsideration, Grievances and Appeals
for Reconciled Claims
September 4, 2020

The information in this alert relates only to claims that have been released as part of the process of reconciling estimated payments with actual payments (“reconciliation”).

This alert provides details on submitting an appeal. If you wish to submit a corrected claim, please see the relevant procedure in a provider alert posted [here](#).

This alert provides additional information regarding the steps and timing for claims grievances and appeals for claims released as part of the reconciliation. Although claims are being reconciled in tranches, reconciliation is not complete until the date that the final tranche release is completed. Optum Maryland will send an alert to providers when the tranche release is completed. **Providers will have up to 90 calendar days AFTER the final reconciliation tranche is completed to seek reconsideration of denials.**

Step 1: File a reconsideration request to Optum.

Once a provider has established that a denied claim should have been paid (by referencing the [Maryland PBHS Billing Appendix](#)) the provider should contact the call center at 1-800-888-1965 to dispute the denial. If the provider disagrees with the results of the call and continues to receive a denial, then they may file an appeal.

Documentation* for a denial reconsideration request that shows the denial was incorrect, should be sent to Optum by either:

- Fax to 1-844-913-0799
- Mail to Optum Maryland: ATTN Grievances and Appeals Department, P.O. Box 30532, Salt Lake City, UT 84130.

**Documentation may include claim images, medical records, or any document or evidence that supports the Provider’s case.*

Step 2: Filing a grievance to the BHA for an Optum denied reconsideration.

If Optum upholds the initial denial (in Step 1), and the provider disagrees with Optum's decision, then the provider may file a grievance to the Behavioral Health Administration (BHA) **in writing within 10 days** of notification of Optum Maryland's decision by:

- Email to BHA.Appeals@maryland.gov (preferred), or
- Mail to Behavioral Health Administration, ATTN: Grievances and Appeals, Spring Grove Hospital Center - Vocational Rehabilitation Building, 55 Wade Avenue, Catonsville, MD 21228.

Step 3: Appeal to the Maryland Office of Administrative Hearings (OAH)

If the provider disagrees with BHA's decision on a Provider grievance of a denied claim (step 2), the provider may appeal **in writing within 30 days** of BHA's decision to the Maryland Office of Administrative Hearings (OAH).

Additional information related to grievances and appeals is included in Section 9 of the Optum [Maryland PBHS Provider Manual](#).

If you have any questions regarding this alert, please contact customer service at 1-800-888-1965.

Thank you,

Optum Maryland Team