**OPTUM®** | **Maryland**

# March 2020 Provider Council Meeting
# Frequently Asked Questions (FAQs)

This FAQ addresses questions and concerns raised by the provider community during March's Provider Council Meeting.

## Coronavirus Disease 2019 (COVID-19)

1. **Is there any guidance coming from the Behavioral Health Administration (BHA) for providers regarding COVID-19?**
    a. *As BHA finalizes policies related to COVID-19, Optum Maryland is distributing updates via alerts and is posting documents to the [Optum Maryland](#) website. [Click here](#) to view.*
    b. *For more information, including FAQs, visit the [BHA website](#) or [coronavirus.maryland.gov](#). For additional questions or concerns, contact your Local Behavioral Health Authority.*

2. **Will Optum Maryland continue to operate as normal during COVID-19?**
    a. *Optum Maryland would like to reassure providers that all of our services are operating as normal during the current national response to COVID-19. Providers can continue to contact us at 1 (800) 888-1965.*

## Telehealth

1. **Where can I access information about telehealth?**
    a. *The Maryland Department of Health (MDH) and BHA releases updated telehealth FAQs weekly. [Click here](#) to view telehealth FAQs.*

## Uninsured

1. **I still have uninsured requests from February that have not been approved. Why is that?**
    a. *Optum Maryland has reduced the backlog of requests but acknowledges there are some requests currently open from January and February. Delays in processing are primarily due to issues with the request, no application submitted, incorrect fund assigned, or the consumer having a duplicate record. If your requests have not been approved, contact [marylandproviderrelations@optum.com](mailto:marylandproviderrelations@optum.com) and we will investigate this issue.*

## Authorization

1.  **Will the grace period be extended beyond April 2020?**
    a.  *Optum Maryland is awaiting notification from MDH regarding these issues. When notification is received, we will send out an alert outlining the details.*

2.  **If we have already gotten authorizations in Incedo, will the modifiers be automatically added to them?**
    a.  *Yes, there is no need to go back and add modifiers to authorizations already granted.*

3.  **When will the stabilization period begin?**
    a.  *Optum Maryland and MDH are meeting daily to review the timelines associated with the stabilization period, and when it is finalized, we will notify the provider community via an alert.*

4.  **Where are the pie charts located?**
    a.  *Pie charts are located on the home page when you log into IPP.*

5.  **How can customer service verify a participant is not attending another program when concurrent authorizations from Beacon have not been transferred over yet?**
    a.  *The majority of Beacon authorizations have now been entered into the Incedo Provider Portal (IPP). Providers should ask the participant directly if they are attending another program. If the person denies being in another program and you are able to submit an authorization request at this time and the authorization is approved, the authorization will be honored.*

6.  **The provider representative cannot tell me if there is an open authorization and I also cannot see it sometimes. Will I be paid for services for participants that have open authorizations since it has been challenging to see if a participant has an open authorization?**
    a.  *If the system allows you to enter an authorization request and it is approved, the authorization will be honored.*

7. **What is the process for requesting authorizations for psychological testing?**
    a. *Within the IPP system, there is an authorization plan for psychological testing. This plan should be utilized to request testing units.*

8. **What is the expected timeframe for resolving problems related to submitting and approving authorizations?**
    a. *Optum Maryland is actively working on resolving issues related to obtaining authorizations. If you are still not able to request an authorization please contact provider relations for assistance.*

9. **OMHCs cannot currently get any authorizations.**
    a. *As of March 18 OMHC authorizations issues have been fixed. Click here to view the alert. Providers that are still not able to enter any type of authorization should contact marylandproviderrelations@optum.com.*

10. **We cannot obtain outpatient authorizations and I understand we have until April 30 to obtain retro authorizations, but we are told this is a long-term fix. Will we be responsible to obtain all authorizations for these services?**
    a. *Yes, authorization will be required though the grace period, which we anticipate will be extended beyond April 30th. When MDH shares the new parameters regarding authorizations, Optum Maryland will notify providers via an alert.*

11. **I've noticed that authorizations for crisis code S9485 are receiving a T2048 for the daily bed charge. The daily bed charge associated with the S9485 is H0019. Will this be corrected?**
    a. *The H0019 code is now part of the Residential Crisis authorization plan. Please note that MDH has indicated the H0019 code is to be used for bed holds only. T2048 is the code to be used for room and board when requesting S9485.*

12. **What is the turnaround time for authorization requests?**
    a. *The turnaround times for authorization requests are 24 hours for urgent levels of care and 14 days for others.*

13. **When selecting authorization for Residential Crisis Services (RCS), the only options are S9485 and T2048. As stated, the codes should be S9485 AND H0019. Not T2048.**
    a. *See question number 11.*

## Claims/Billing

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1. **Will providers have the ability to enter claims in Incedo for participants who have primary payments so paper claims will no longer be needed?**
   a. *Providers may submit payments made by primary carriers via an 837i/p file. Optum Maryland is working on an enhancement that will allow for the direct entry of this information into the IPP platform. When the functionality is available we will notify providers via an alert.*

2. **I submitted a claim to Optum and was told the claim was denied based on no authorization. However, the claim was authorized under Beacon. I was told I had to resubmit a new authorization. In order for the provider to get paid, is this accurate?**
   a. *No, your claim should not have been denied for not having an authorization. Please contact customer service and ask that the claim be reprocessed.*

3. **Will COVID-19 impact estimated payments and claims processing?**
   a. *No. Optum Maryland would like to reassure providers that all of our services and processes are operating as normal during the current response to COVID-19. Providers can continue to contact us at 1 (800) 888-1965 or email [maryland.provpymt@optum.com](mailto:maryland.provpymt@optum.com) with their questions or concerns related to claims processing or estimated payments.*

4. **Is there a way to correct claims?**
   a. *Providers may submit corrected claims via the use of an 837i/p file or may drop the claim information to a paper claim. Paper claims should be submitted to Optum P.O.Box 30531, Salt Lake City, UT, 84130. Instructions for submission can be found in the billing appendix located on the Optum Maryland website or by [clicking here](#).*

5. **Can Optum Maryland address the issues with billing for medication? At this point, there is no place to enter the NDC code in the system to bill for medication.**
   a. *Optum Maryland is aware of this issue and is working on an enhancement to allow the submission of this information. Providers will be notified via an alert when this functionality is available.*

6. **What is the email for claim payment inquiries?**
   a. *For questions or concerns related to claims payments, please email us at [maryland.provpymt@optum.com](mailto:maryland.provpymt@optum.com).*

7. **Is there a way for providers to determine what claims the estimated payments should be applied to?**

      *a. As part of the estimated payment/claims reconciliation, providers will be receiving information that denotes which claims are applied towards the estimated payment.*

8. **We are currently not able to see why some claims have been denied. Will Optum Maryland add a functionality that will state why claims are being denied under the claims drop-box?**

      *a. Yes, Optum Maryland is making enhancements to IPP that will allow denial reasons to be visible in the system. Providers will be notified via an alert when this functionality is available.*

9. **I'm still having problems when I submit claims that are being denied due to place of service for providers. I was told claims have to be resubmitted and it may take 30 days for processing.**

      *a. At this time, Optum Maryland is not processing and releasing claims for payment as the estimated payment process is currently in effect. After the estimated payments process completes, clean claims will be paid in 14 days and all claims will be processed within 30 days.*

10. **When will the system allow me to include a rendering provider when submitting claims for group practices?**

      *a. Optum Maryland recognizes this is an issue for providers and are working on an enhancement to allow for submission of this information. We anticipate the functionality to go live in May.*

11. **When will 835s be available?**

      *a. Explanation of benefits will be available in PaySpan at the conclusion of the estimated payments process.*

## Payments

1. **What is the email to ask about estimated payments?**

      *a. Email your estimated payment related questions to [maryland.provpymt@optum.com](mailto:maryland.provpymt@optum.com).*

2. **What is the time frame and date to receive reports, reconciliation and EOBs?**

      *a. Optum Maryland and MDH are finalizing the timelines related to payment reconciliation reporting and claims reactivation. Once these timelines are finalized, the provider community will receive an alert with more details.*

3. **I know providers are receiving weekly estimated payments; however, our client accounts are running high balances and we are unable to run several of our monthly reports. We are also unable to get correct fee balances on our client accounts.**

      *a. Prior payments processed through PaySpan will not be recycled during reconciliation. Today, the PRA and 835 are still available on the PaySpan Provider portal.*

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**4. Will 835s be retro to Jan. 1, 2020, for all check payments already recorded via PaySpan?**

    *a. For those claims not already processed through IPP, 835s will be available as Optum processes and releases those claims.*

**5.  My estimated payments are an underestimate. Will I receive a payout in April when the estimated payments are finished? When can I expect to receive that payment?**

    *a. Optum Maryland and MDH are finalizing the timelines associated with reconciliation and any applicable over or under payments. Once these timelines are finalized providers will receive an alert with additional details.*

**6. How can I view all PaySpan payments on the portal?**

    *a. PaySpan is a separate vendor that Optum has contracted to provide payments and remittance advices. Please log on to your PaySpan account directly by [clicking here](#).*

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**1. Where can prior Provider Council Meeting minutes be located on the Optum Maryland website?**

    *a. Please visit [maryland.optum.com](http://maryland.optum.com) and click the "Behavioral Health Providers" tab. On the drop-down select "Provider Information" and scroll down the page to "Provider Council Minutes."*

**2. Is there a place to access recordings of previous Webex provider trainings?**

    *a. Recordings are placed on the Optum Maryland website under "Behavioral Health Providers" tab, listed within the "provider tools" section. We are excited to announce that we will soon be publishing several new provider training videos covering various topics. Stay tuned for upcoming communication about these videos.*