

Maryland ASO Provider

Frequently Asked Questions (FAQ)

Provider Relations

Credentialing

- **How long is the credentialing process for new providers?**
 - *New provider enrollment is done through ePREP. Specific credentialing turnaround times can be obtained via ePREP at 844-4MD-PROV or <https://eprep.health.maryland.gov>.*
- **Do providers and/or medical directors need to contract with Carelon separately?**
 - *Your provider agreement remains with Maryland Medicaid. Your provider status must be active and maintained through Medicaid. A separate contract, directly with Carelon, is not required for providers or the medical director.*
- **Which lab companies will be included in the Maryland Medicaid network?**
 - *All Maryland Medicaid providers and their enrollment are managed through the Maryland Department of Health's ePREP portal. Carelon does not manage any provider directly, including the lab companies within the Maryland Medicaid network.*

Transition

- **What experience does Carelon have related to transitioning Medicaid services? What were some of the greatest challenges? What challenges may be anticipated for launch in January 2025?**
 - *Carelon Behavioral Health has a long, 30-year history of implementing new programs for state and federal agencies. To manage the successful transition, we allocated an Implementation Project Manager and accompanying team to oversee the program development and execution. These professionals are supported by over 110 designated Carelon subject-matter experts to lead and coordinate the transformation of all programmatic areas and stakeholders. We are partnering closely with MDH and behavioral health associates across 40 workstreams to ensure detailed attention to every element and ensure a seamless transition.*
 - *With more than 30 years of experience implementing large state and federal programs, Carelon has established a clear and comprehensive implementation process to mitigate risk and ensure positive program transitions. Notably, our previous experience in the state of Maryland allowed us to reuse, refine or rebuild technology previously deployed to support this implementation. Additionally, as part of our implementation plan, we will engage various providers in the fall to conduct end-to-end testing.*
 - *In one example of how Carelon manages transition challenges, we successfully launched a statewide Behavioral Health Help Line for the commonwealth of Massachusetts in January 2023 within a compressed implementation timeframe of*

Maryland ASO Provider

Frequently Asked Questions (FAQ)

only three months. Our state agency partner provided this positive feedback: “The MBHP team did an extraordinary job implementing the help line in a very short period of time and with many challenges.”

Provider Focused

- **How will this transition affect Medicaid re-determination?**
 - *Re-determination of Medicaid eligibility is not tracked within our system. Please utilize the Maryland Medicaid Electronic Verification System (EVS) to verify participants eligibility status at 866-710-1447.*
- **Will Carelon follow the Medicaid fee schedule? If so, will rates auto increase when the state does?**
 - *Yes. The fee schedule is owned by Medicaid and administered by the Administrative Services Organization (ASO). The Public Behavioral Health System (PBHS) fee schedule can currently be found on the Optum website. Please visit maryland.optum.com and select the drop down under Behavioral Health Providers to view the most current fee schedule. As of January 1, 2025, the fee schedule will be available on the Carelon website.*
- **Does Carelon use billing modifiers for behavioral health? If so, are modifiers based on education or credentialing?**
 - *Yes. Carelon uses the fee schedule and reimbursement rate modifiers and places of service (POS) codes approved by Maryland Department of Health for the Maryland Medicaid behavioral health workflow.*
- **Does Carelon have a provider communication plan in case of major system issues?**
 - *As of January 1, 2025, Carelon will be responsible for all Provider Alerts communications. This will serve as the primary method of disseminating information about system maintenance and outages.*
- **When will orientation and training start for Local Behavioral Health Authorities (LBHAs)?**
 - *The training for LBHA’s will be soon. Details will be provided via Provider Alerts and other official communication channels.*
- **Will we still have to use two audit claim systems?**
 - *No. As a part of the transition, we are migrating three years of claims history into one system. As of January 1, 2025, the Carelon platform will be the single operational platform.*
- **What is the provider relations communications plan aside from the forums?**

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *Provider relations will continue to offer the Provider Council meetings along with other opportunities. Provider Alerts will be the primary means of communication for all updates and contractual requirements.*
- ***Will facilities be assigned a provider representative?***
 - *No. All provider representatives will be trained to handle all calls, whether it is a solo provider group, program or facility. There will be an escalation process in place should it be necessary.*

Optum

- ***Can someone from Carelon assist with Optum audits and claims payment issues both retroactively and going forward?***
 - *We encourage all efforts to be focused on working toward resolution prior to the transition, as the history of your concern and any work done will be with the current ASO.*

Medicaid

- ***Why are providers now required to bill a new National Provider Identifier (NPI) with every location, but the same tax ID number?***
 - *This NPI change is a new federal guideline and Centers for Medicare and Medicaid Services (CMS) requirement. We understand this process may create extra work for providers, however this is a federal regulation modification out of Carelon's control.*
- ***Do certain rules apply to all Medicaid plans or are they set on a state-by-state basis? If a person has a commercial insurance policy, can they claim Maryland Medicaid?***
 - *Maryland Medicaid sets forth its own rules. If a Medicaid member has a commercial policy, then the commercial policy is typically the primary payer and Medicaid the secondary.*
- ***Will timely filing remain the same?***
 - *Yes. Timely filing laws are federal laws with state interpretation. Carelon promises to adhere to the state requirements on timely filing.*

Authorizations

- ***How will authorization requests for SUD PT 32 be impacted by this transition?***
 - *All requests for authorization will be submitted through the provider portal. Training will be offered on the Carelon processes.*
- ***Regarding authorizations, how is Carelon/Medicaid responding to the American Society of Addition Medicine (ASAM) fourth edition changes regarding dimension reordering, different LOC language, etc.?***

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *We do not anticipate any changes to the criteria used as of January 1, 2025.*
- ***Are there any expected improvements in the turnaround or approval time for PHP (Level 2.5) and 3.1 Residential Treatment authorization requests?***
 - *Carelon will review requests as quickly as possible and adhere to the required turnaround times for all levels of care.*
- ***How can we get support in advance to learn how to submit PRP authorizations and billing, so we are not hit with burdensome delays, especially as a small agency?***
 - *Training on the authorization processes, including submission in the provider portal, will be provided prior to the contract going live.*
- ***Will Carelon use the same procedure to acquire authorizations for our clients as Optum Maryland?***
 - *The process will be similar. All authorization requests will be submitted through the Carelon provider portal. Training for this new process will be listed on the Optum website leading up to the official transition on January 1, 2025.*
- ***Will you continue to use Optum's PRP functionals for authorization requests?***
 - *Carelon is working with the outgoing vendor and the state on authorization processes and anticipates they will remain similar or the same.*
- ***Will the payer ID remain the same as it is now?***
 - *The payor ID will be shared with the provider network prior to go-live.*
- ***Do we have to call the participant/provider to close out an open authorization?***
 - *This will vary based on the service. However, providers should anticipate processes that are similar to the existing procedures. Any new specifics will be covered in the training.*
- ***SUD authorizations currently take 20 days. Will this be extended or stay the same?***
 - *All recommendations will be assessed in collaboration with the MDH in an attempt to improve the clinical program times. Currently, the parameters will remain the same.*
- ***What if we need to backdate an authorization, which system do we do that in?***
 - *The backdating authorization process is still being reviewed with MDH.*
- ***Will the 20 days backdate policy remain?***
 - *We are looking at the backdate grid currently and will communicate any changes.*
- ***Previously under Beacon, we had to obtain two authorizations to cover intake and the first session. With Optum, we don't need authorization for intake. Will we be going back to two authorizations?***
 - *No. You will maintain the current process.*

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- **Does that mean that outpatient mental health services will be approved right away?**
 - Yes. We are not changing any auto approval policies. They will remain the same.
- **Do you know the type of services that will be auto approved?**
 - All current auto approvals will remain auto approved. We are working with the Maryland Department of Health to see if we can expand that list.
- **Are we required to notify Carelon when or if authorizations are closed earlier than a previously approved end date?**
 - We are currently working on reporting and system functionality to advise of authorization end dates.
- **Will the authorization page include the date submitted?**
 - Yes. The authorization page will include the date submitted and the requested start date.
- **Can you get inpatient authorizations for facilities outside of your own network through the portal?**
 - Providers using the provider platform for Maryland Medicaid authorizations must be approved Maryland Medicaid providers. Authorization entry is provider specific and entry of authorization requests for providers, other than yourself, are not permitted.
- **Will there be clear guidelines on services for children?**
 - Yes. The guidelines mandated by Maryland Department of Health will govern the review process for all services, including those rendered for children and adolescents.
- **Will authorization time spans change?**
 - All review guidelines and time spans will remain the same on January 1, 2025.
- **Can we auto authorize concurrent authorizations?**

The process and criteria for the auto approval process will remain the same.
- **Will authorization submission timeline requirements be included in the training webinar?**
 - Yes, all timelines will be included in the webinar trainings.
- **For example, with 3.7WM and 3.7 RES, will those authorizations still have to be submitted within 24 hours? And does that include holidays?**
 - We are currently working with MDH to document the requirements and share any changes in training.
- **Are you expecting to return to a client/clinician-based reauthorization process for outpatient mental health similar to what was done previously on the provider portal?**

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *We are still in the process of finalizing the client/clinician-based reauthorization process.*
- **Will Carelon process outpatient lab claims and POS 81 with a SUD diagnosis?**
 - *Yes. Additional guidance related to lab services can be found in the Provider Manual.*
- **Where does Maryland RecoveryNet (MDRN) housing fall?**
 - *Authorization requests for MDRN will be housed in Carelon's system, but our clinical team is not responsible for approvals or denials. The regional coordinators continue to have that responsibility.*
- **Will each authorization have multiple CPT/revenue or service codes "bundled" or do providers need to specify all specific CPT codes needed with each authorization?**
 - *CPT codes are bundled for some services. Information offered during the training will clarify the authorization process.*
- **Can providers dispute denials online? And what is the turnaround time for disputes?**
 - *Yes. We are still in the process of finalizing the dispute process.*
- **Can we backdate authorizations? How many days can an authorization be backdated or made retroactive?**
 - *The backdating authorization process is still being reviewed with MDH.*
- **Will providers be able to backdate the PRP and RRP authorizations, and if so, how long?**
 - *The backdating authorization process is still being reviewed with MDH.*
- **How far in advance can authorizations be requested?**
 - *Although Carelon is reviewing authorization details, as of right now, this parameter will remain the same as what providers experience with the current ASO.*
- **How long will mental health prior authorizations take?**
 - *This needs clarification. Would you mind elaborating and emailing your question to MDHtransitionsupport@carelon.com.*
- **Will the authorization number be the same in Optum as in Carelon?**
 - *No. The Carelon platform will generate a unique authorization number that will not match previous authorizations found in the Optum system.*
- **Will Outcome Measurement System (OMS) surveys be required when getting authorizations every six months?**

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *No. OMS surveys will be discontinued.*
- ***Is an SUD 2.5 authorization considered urgent or 14 calendar days?***
 - *Review for SUD 2.5 services have a 14-calendar day turnaround. There will be no changes to authorization turnaround times and medical necessity criteria.*
- ***Can you explain how we can transition minors to adult services? Or will we need to submit a new "initial" authorization request to be able to continue services?***
 - *When transferring minors to adult services new authorizations are needed.*

Discharges

- ***Do we have to submit an official discharge?***
 - *Requirements for submitting discharge reviews depend on the level of service or level of care. We will cover the discharge submissions during training.*
- ***When a patient has discharge authorizations from a previous provider, will that discharge date be the same day as discharges, or will providers have to wait the day after to obtain authorizations?***
 - *Carelon is working on a discharge process that would allow the participant to receive continuous care.*
- ***When will the Carelon participant release form be available to EHR/IT departments for electronic signature development?***
 - *All providers can use their internal releases that they deem appropriate for their programs. The standard format available through will be made available by go live.*

Programs

- ***Could you confirm that health homes will be billed through this platform and no longer through eMedicaid?***
 - *We are working with MDH to transfer the review and payment of Health Homes to the Carelon system.*
- ***I work for the adult Psychiatric Rehabilitation Program (PRP) services at Johns Hopkins. Our units for services for onsite were 130,104,78,52. Now they are just a straight 90 units for six months. Will that change back to the multiple like before when Carelon takes over?***
 - *PRP services will remain the same at this time.*
- ***Will there be a cap on program abuse by the participant within a certain span of time to try and curve behavior?***

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *The Maryland Medicaid contract is driven by member choice. Carelon understands this challenge, but we cannot cap member movement between programs.*
- **How will substance use disorder (SUD) and supported employment (SE) programs migrate and be seamless?**
 - *Authorizations will be pre-loaded into the Carelon platform. As of January 1, 2025, providers will be able to see their participants' historical authorizations, including those for SUD and SE programs.*
- **If a participant has case management services, are they ineligible for PRP services?**
 - *PRP should provide basic case management. Therefore, if you are in one, you are not eligible for the other.*
- **Do you plan to continue the Top Provider Program (TPP) program?**
 - *Yes.*
- **Value Options / Beacon Health had consumer incentive programs for high utilizers of ED services, will these come back with Carelon?**
 - *We are assessing this program.*
- **Regarding the Assertive Community Treatment (ACT) program, will the uninsured or gray spans be auto approved in the Carelon system? What about the additional spans after two in 12 months, if patients meet the criteria?**
 - *The process for securing uninsured time periods is being reviewed and will be discussed in more detail during training.*

Uninsured

- **What happens to uninsured span open approvals?**
 - *Open approvals will migrate over to the Carelon system on January 1, 2025.*

Clinical Strategy on Whole Person Care

- **How will Carelon address the issue of licensed counselors who are employed by so many organizations but are not performing their duties effectively?**
 - *As the ASO, Carelon provides payment for services rendered. We do not have control over which providers are employed and where they are employed. If there is an issue with performance, please reach out to a provider's employer directly.*
- **How do we address the whole person when they can hop multiple programs?**

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *The system is set up to alert the provider if a participant is in multiple programs that may cause an overlap.*

Utilization Management

- ***We've had some challenges with the utilization management practices of our current ASO. How will Carelon's utilization management team be more flexible and competent than Optum?***
 - *Carelon will follow the review requirements in accordance with guidance received from Maryland Department of Health.*

Medical Necessary Criteria

- ***Will the clinical criteria be changed?***
 - *Clinical criteria will remain the same as of January 1, 2025.*

Clinical Staff

- ***When will you begin to hire clinicians? Will you prioritize current Optum providers?***
 - *Our desire is always to retain talented individuals that have long term experience working with Maryland Medicaid. We are interviewing and plan to have all staff fully hired by December 2024.*

Pharmacy

- ***What is the Rx policy?***
 - *All prescriptions must be written by a Medicaid provider.*

ROI

- ***Do we need to have our clients sign a new ROI by January 1, 2025?***
 - *We are working with Optum to transfer the current ROIs to our system. All attempts will be made to assure availability of ROIs by January 1, 2025. More information will be provided closer to the transition date.*

Manual

- ***Will the provider manual provide step-by-step instructions for submitting authorizations specifically for mobile treatment? Will mobile treatment still be able to upload treatment plans as opposed to typing them into the system directly (assuming treatment plan submission will still be required for authorization)?***

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *Yes. The manual will be a comprehensive guide for our Maryland providers. All instructions will include steps for submitting mobile treatment authorizations.*
- **Will the new Carelon provider manual offer an audit tool to ensure internal audit compliance and quality assurance with both BHA and Medicaid regulations and rules?**
 - *Yes. There will be dedicated chapters devoted to audits, tools and regulations in the provider manual.*
- **Will the provider manual provide information on how to bill for therapeutic leave days?**
 - *Yes. The manual will be a comprehensive guide for our Maryland providers.*
- **Will the provider manual include video links that demonstrate how to navigate the provider portal?**
 - *The provider manual will not include links on how to use the provider portal. However, the planned provider webinar training courses will demonstrate how to navigate the provider portal.*
- **Will there be comprehensive guidelines on crisis?**
 - *Yes. We have designed the manual to be specific and comprehensive for the providers. All programs will be represented in the manual.*
- **Will we be able to see the provider manual before the transition?**
 - *We will ask some providers to help us review the manual during end-to-end testing prior to transition. The manual itself will be published on our website starting on January 1, 2025.*
- **Can Carelon change anything in the manual?**
 - *Yes. On January 1, 2025, Carelon will offer an up-to-date provider manual that's been approved by Maryland Department of Health.*
- **Where can the provider manual be found?**
 - *The provider manual is still being reviewed for the Carelon implementation and will be ready and posted to the Carelon website on January 1, 2025. Until then, please access the Optum website for any provider manual needs.*
- **Will level of care (LOC) information be included in the provider manual?**
 - *Yes, all levels of care will be included within the provider manual.*

Maryland ASO Provider

Frequently Asked Questions (FAQ)

Systems

Portal Registration

- **Will Beacon insurance be available on the same website?**
 - *Beacon is now rebranded as Carelon. There will be only one system the providers will have to utilize.*
- **Will our previous Beacon ProviderConnect usernames work with Carelon's system?**
 - *No. You will need to create a new login.*
- **How can I set up my Carelon account?**
 - *Continue to watch for Provider Alerts associated with the registration process. Once the new ProviderConnect is launched, you will be prompted to create a profile.*
- **Can you customize login profiles?**
 - *Yes. You can customize the profile for any individual within your organization based on their role and the level of access.*
- **Will the provider login access be specified per provider tax ID number, site/service location, or program?**
 - *Each provider will be given a Carelon ID to login. There is an opportunity to link to an admin account. Additional details will be shared during training.*
- **Will providers be required to re-enroll with Carelon at the transition?**
 - *Yes. You will have to register with Carelon even if you used to have a Beacon ID.*
- **Is the Carelon ID number the same as our Medicaid ID number?**
 - *No. The Carelon ID is a specific number associated with you as a provider. Embedded in the file will be your other numerical identifiers including the Medicaid number.*
- **Will we be able to login to the ProviderConnect site directly without going through Availity? If so, if I no longer have my old Beacon ID and password, can I create a new one to login straight from my browser without Availity?**
 - *No. You cannot use your previous Beacon ID. You must create a new login for ProviderConnect as well as Availity.*
- **Is there one system administrator or does everyone have a unique login and password?**

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *Although you can create an admin account, each user must have their own login username and password.*
- ***Will we need to complete a survey for the provider IDs for ProviderConnect?***
 - *To receive your Carelon provider ID, you will need to fill out an online form. There is no survey required.*
- ***How will the account administrator be selected?***
 - *The provider will identify the administrator.*
- ***How many administrators can you set up?***
 - *Carelon will review the functionality and advise if there is a limitation on the number of account administrators per organization.*
- ***Can we set up an account on ProviderConnect now, or do we have to wait until after the transition is complete? If we already have Availity accounts, can we just go to payer spaces and get the Carelon form to request portal access?***
 - *No. The Maryland Availity payer space will not be live until December, and you will need your Carelon provider ID to login to ProviderConnect. The Provider Alert system will help communicate with providers when the new system is ready for registration.*
- ***I already have an Availity account. Is that going to be a problem? How will that work?***
 - *This is not an issue as you will be able to access your payer space for Maryland after you create a Carelon account.*
- ***Can we use the same Availity account we use for other insurance companies?***
 - *Yes. When the payer space for Maryland goes live you can select that tile and log into ProviderConnect. The SSO will be engaged once the linkage activity is completed.*
- ***How soon can we apply/register for the Carelon portal?***
 - *We will open the registration after the provider trainings are completed.*

Reporting

- ***Can you have reporting platform profile customizations?***
 - *The reporting library will have a standard suite of reports. Provider specific customization will not be available.*
- ***What enhanced reporting will we have access to on open authorization and MA ineligibility/uninsured consumers?***

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *The reporting library will have reports that point to authorization status. A report on member eligibility will also be available.*
- ***Will providers be able to print out authorization expiration date reports to easily identify clients who are going to expire in the next month or upcoming months?***
 - *The authorization dashboard can extract data to support all reporting needs for providers. Providers will have the ability to filter and sort via date fields.*
- ***Will PowerBI reports be available on January 1, 2025?***
 - *The reporting library is still in development. On January 1, 2025, a suite of reports will be available that leverage what was previously available along with updated and improved approaches. Continue to watch for alerts for the latest information.*
- ***What importable non-PDF data will be available for download starting January 1, 2025?***
 - *All existing reports will be available to providers in January 2025. This will include historical content, authorizations, claims and eligibility reports.*

System Functionality

- ***Will we have access to attachments in the system?***
 - *Yes. Access to attachments will be available.*
- ***Will the new system offer a database of in-network providers to help refer patients to outpatient care or other facilities as needed (similar to Referral Connect from Beacon Health Options)?***
 - *The MDH has developed its own provider directory, which will be accessible through the Carelon website. Referral Connect will also be available. We are ensuring that the provider community will have the same features to find a network provider.*
- ***Will the authorization status column be added?***
 - *Yes.*
- ***Will groups be able to see open claims/authorizations for other providers via the claims dashboard option?***
 - *Providers can only see their own claims and authorizations.*
- ***What about new authorizations for input services?***
 - *You can view all authorizations for your organization within the time span selected.*
- ***My company has one EIN with several NPI numbers. Will providers be able to filter out claims by NPI number?***

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *Yes. You will be able to filter by NPI.*
- ***Does this mean that we will once again have access to view authorization letters like Beacon Health Options used to provide through the provider portal?***
 - *Yes.*
- ***Will consumers be uploaded into Carelon from Optum, or as a provider?***
 - *Carelon will receive uploads of participant eligibility as well as provider files daily from the MDH.*
- ***Is Carelon aware of Maryland Medical Assistance's new location NPI requirement? If so, from a systems and staffing perspective, is Carelon prepared for this change?***
 - *Yes. All the new rules concerning the NPI and TINs will be administered throughout the portals with customization to profiles and linkage to the admin account.*
- ***Are we able to look at submitted claims per client?***
 - *Yes. On the claims dashboard you can sort by client or participant.*
- ***Can each user be assigned to specific clients instead of having access to all clients in the organization?***
 - *Additional research will be conducted regarding provider functionality.*
- ***Can I filter all claims by participant?***
 - *We are researching if we can filter by participant. At this time, we can review up to five facilities, within your organization, by a time span of up to 180 days.*
- ***For PRP, do we still have to submit multiple claims for encounters H2016, and then one for H2018?***
 - *Yes, the required process for PRP billing has not changed.*
- ***How far back will we be able to obtain authorizations?***
 - *The time limits for submitting authorizations and the clinical criteria used for the process will not change. As of January 1, 2025, the criteria will be the same as it is under the current ASO.*
- ***How will we be able to find out the reason for a claims denial and resubmit the claim?***
 - *In the system, you will be able to click the claim link to see the claim details and denial reasoning. Additional claims training will be forthcoming.*
- ***What will be the turnaround time for denials and payments?***

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *The turnaround time is based on level of care. The grid will be shared during upcoming training sessions.*
- **Will there be a portal for participants to view their authorizations?**
 - *The status of authorizations will be visible in ProviderConnect.*
- **Will accurate consumer eligibility information be available in the provider portal, or will we still need to access the Eligibility Verification System (EVS) system first?**
 - *Participant eligibility is loaded directly into the Carelon platform from Medicaid. Providers can also use EVS to validate member eligibility.*
- **Where are the CPT codes on the system dashboard or chart?**
 - *To view the CPT codes and additional claims line details, click the claim number link to migrate to the detail page.*

Clearing House & Electronic Data Interchange (EDI)

- **Is it true we won't have to use EVS anymore? We've noticed that our current ASO and EVS often have different information for our prospective consumers - last names are different, insurance eligibility changes. Please reconfirm that EVS will no longer be needed once we transition to Carelon?**
 - *It should not be needed as the Carelon system will include eligibility. EVS is supported with information directly from the Maryland Medicaid system. That information interfaces with the ASO. There may be instances where the information requires clarification, but those instances should be few.*
- **Will the Carelon system link to Qualifacts/Insync EMR?**
 - *No, direct connections to EMRs will not be supported.*
- **Will providers need to make any changes to payer enrollments in the system so claims and ERAs process correctly through Carelon instead of Optum?**
 - *Yes. Registration with all supporting platforms, including clearinghouses, for all business associated with the transition of the ASO to Carelon will be required. The relationship with Optum ends on December 31, 2024, with updated access pointing to Carelon, effective January 1, 2025. For any specifics related to batch submissions to Carelon, please contact bh_claimsmigration@carelon.com.*

Process Improvement

- **Is there anything challenging that we have seen with MDH?**

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *MDH is open to our recommendations and is amenable to improving the overall experience for Maryland participants and providers.*
- **Can we have one EHR system in the future?**
 - *The selection of EHRs is organizationally driven. Carelon does not provide guidance on which platform a provider or health system should choose.*

Testing

- **How do I sign up to assist with claim testing? I have custom software that I plan to use to submit 837 batch files.**
 - *We welcome all testing volunteers. Interested parties should contact MDHtransitionsupport@carelon.com.*
- **What is the test approach?**
 - *Carelon will allow providers to test the system and give feedback prior to the go-live date to ensure it's working as expected on January 1, 2025.*
- **When Optum took over, it took them almost an entire year to get their system up and running. They ended up having to provide emergency payments. Is there a plan in place just in case this happens?**
 - *Extensive testing will be completed prior to January 1, 2025, and a team will be available for immediate assistance should providers have concerns or issues with authorizations and/or claims submissions.*

Training

- **Most of our clinical staff do not obtain authorizations, do they need to attend the authorization training sessions?**
 - *Training courses are open to all. The authorization webinars are geared toward end users who will submit authorizations. If you are an admin, you will benefit from the orientation trainings to walk through different roles that are customizable by the admin to share access based on needs. We encourage all to sign up and attend the training courses available for an easier experience post go-live.*
- **Will there be one-on-one training, if needed?**
 - *Our goal is to train providers by having multiple live and recorded webinar sessions. If additional assistance is needed, please reach out to provider relations at mdhtranstionsupport@carelon.com.*

Maryland ASO Provider

Frequently Asked Questions (FAQ)

Operations

Claims

- **Can we adjust claims directly in the portal?**
 - Yes. You can adjust the claims directly in the portal on the claim detail page.
- **Will all historical claims data be transferred to Carelon from Optum?**
 - No. Carelon will receive historical claims for dates of services between January 2022 through December 2024.
- **How will labs be covered once Carelon takes over on January 1, 2025?**
 - Carelon and MDH are continuing to work through lab services in our clinical workstream meetings and anticipate minimal changes. Any adjustments to the system will be shared with providers by Carelon and MDH as we progress through the implementation.
- **Will providers be able to process secondary insurances and upload explanations of benefits (EOBs) from the primary?**
 - Yes, providers will be able to submit attachments for electronic claim consideration. For paper claims, attachments can also be included.
- **What if the claim is denied because the concurrent review auto approval crossed? Does the provider have to contact Carelon to get a claim paid or will the system go back to pick up the claim?**
 - This scenario is rare because the authorization should be approved prior to the claim being submitted for processing.
- **Will there be another claims address to replace Optum?**
 - Yes, you may submit paper claims directly to Carelon. Please mail to ATTN: Maryland P.O. Box 1850 Hicksville, NY 11802-1850.
- **When having a denial status of a claim, will the system note the denial reason, or do we need to call in?**
 - The system is set up to provide denial information. The claim details will explain the denial reason.
- **For those participants who only have Medicare, will we be able to submit those claims through this system?**

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *No. We are unable to support this request due to federal regulations. If a member has Medicare only, the claims should go through the Medicare submission process.*
- **Can Medicare claims be submitted through this system?**
 - *No. Medicaid claims only.*
- **What is the process for getting claims paid when the diagnosis code is not on Carelon's ASO list, but the MCO denies billing?**
 - *The allowable diagnostic listing for behavioral health services is available on the Carelon website. If there are instances where a diagnosis code is denied billing from both Carelon and the MCO, please follow the process for submission to the state for the decision on who the payer should be. The rules around claims and benefit alignments are managed by the state and only administered by the ASO.*
- **Currently Optum handles all the lab claims. Will Carelon take that over on January 1, 2024?**
 - *The rules for lab claims will mirror what is currently in place with Optum.*

Billing

- **Is there any way to link the new NPIs together for billing?**
 - *You will be able to connect the multiple NPIs in the system through a drop-down selection menu.*
- **Will there be a payment delay to providers during this transition in January 2025?**
 - *No. Carelon does not see any delays for our first check run of the year.*
- **How will our payments be affected, and will our business information just be transferred to the entity, or will we need to reapply? If so, when will that start and when would the deadline be?**
 - *Providers should ensure they have updated Medicaid and the Behavioral Health Administrator with their current business information. Carelon will be uploading this information into our system, it is important that it is accurate so that your payments will not be affected.*
- **Are you able to adjust rates?**
 - *All rates and the conditions for the ability to pay those rates are governed by the rules set forth by Maryland Medicaid. There is no provision to adjust them.*
- **Are there transportation reimbursement rates?**

Maryland ASO Provider

Frequently Asked Questions (FAQ)

- *There are no reimbursable transportation rates with Maryland Medicaid except those associated with the emergency petition process.*
- **Will there be Taxi dollars?**
 - *There are no reimbursable transportation rates with Maryland Medicaid except those associated with the emergency petition process.*
- **Optum still has issues with TPL (Third Party Liability) processing. Will that issue finally be cleared up with Carelon taking over?**
 - *Carelon has strict TPL claims processing guidelines in place and is committed to processing claims accurately.*
- **Is Carelon able to make any changes regarding CPT codes able to be billed by provider type? We are a group practice and currently can't bill code 90837, which creates a double billing issue and more admin time for us when Medicaid is secondary. Would it be possible to have 90837 as an approved code for the same rate at 90834?**
 - *CPT codes and rates are set by MDH. As the ASO, Carelon administers the codes and rates, but we are unable to make changes unless explicitly changed by MDH.*
- **I heard PaySpan was being taken over by Zelis payments, which charges to receive your ERAs and 835s. Is this true?**
 - *Please contact PaySpan directly for any changes due to their merger with Zelis.*