





Agenda

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- Maryland Behavioral Health Administration Updates
- 4 Tranche Release and Claims Payment
- 5 Reconciliation Updates
- 6 System Enhancements
- 7 Operations Updates
- 8 Provider Questions
- 9 Wrap-up



Maryland Medicaid Updates



Maryland Behavioral Health Administration Updates

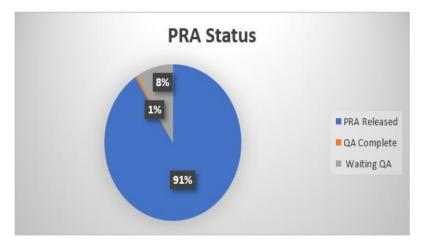


Tranche Release and Claims Payment



Prior Day PRA/835 (Tranche) Release

- We are currently 91% complete with the QA of the Prior Day (Tranche) PRA/835's
- All available PRA's for T1, T2 and T3 have been released as of Thursday, September 10



- We will continue to release available Prior Day (Tranche) PRA/835s on Tuesdays and Thursdays each week
- While you will not be able to request a meeting with the reconciliation manager until you have received and reviewed all of your PRA's, you can and should review the individual PRA's as you receive them so that you can proactively identify any variances



Claims Payment

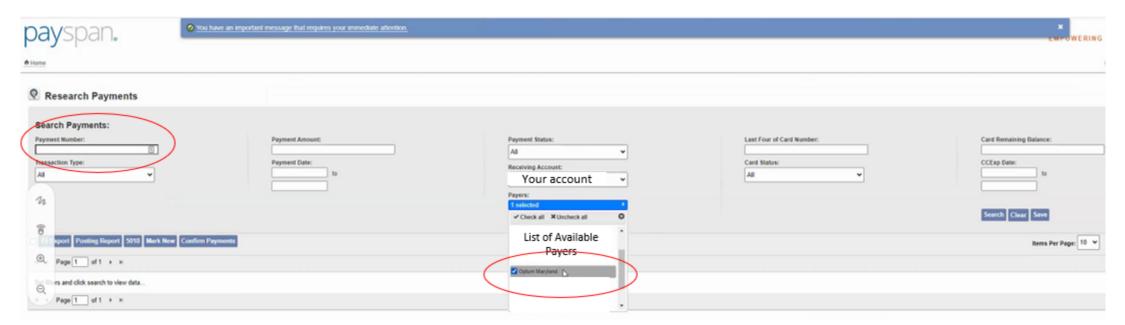
- Fifth check write made on Thursday, September 9
- Fourth check write on Thursday, September 3. 100% PRAs accompanied this payment
- Third check write on Thursday, August 27. 100% PRAs accompanied this payment
- PRAs and 835 files posted to PaySpan
- PRAs and 835s for the August 13 payment and forward will display document creation dates of August 10, or later
- Providers are encouraged to submit claims as early as possible on an ongoing basis



Searching for a specific payment number

To search for a specific payment number

- Select Payments, then enter the payment number in the box using the "*" where appropriate
- You can also limit your search criteria to just those from Optum Maryland by selecting Optum Maryland in the Payers drop down box





Connecting Payments with PRA's

If you have received a check with a blank PRA, there may be an updated PRA available. To connect the 2 – you can search in PaySpan using the payment number with an "*" at the end. In the example below, you would search for 12121212*

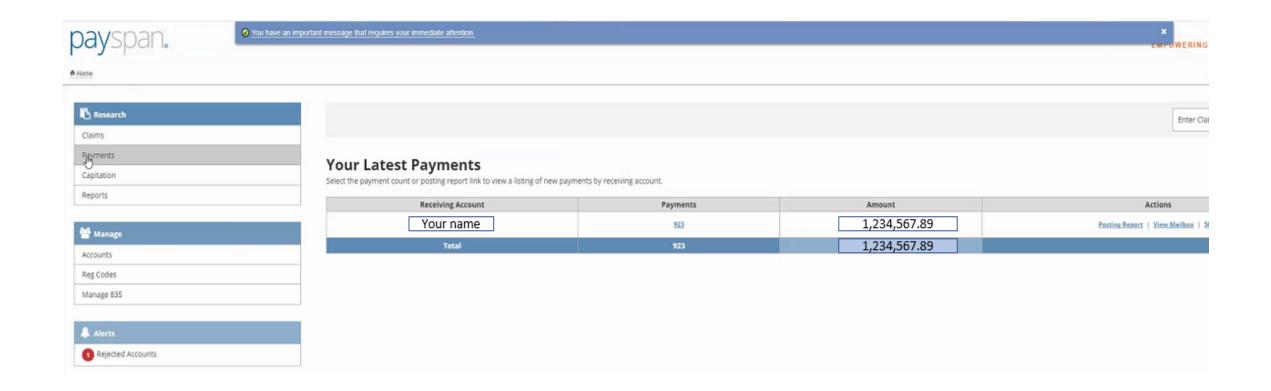
The PRA that includes -1 is the updated PRA

| View | Payment # 12121212 Payment Date 08/11/2020 Effective Date 08/13/2020 Availability Date 08/13/2020 Mailed Date | Payment Method ACH Payment Amount \$12,105.00 Payment Status Disbursed Payment Code MEDICAID | Job ID 56 Pavee Name Your Agency Line of Business | PIN 111111 NPI 9999999999 TIN 529999999 | RIN 1111111 Group Name Application Optum Claim Payme |
|------|---|---|---|--|---|
| View | Payment # 12121212-1 Payment Date 08/09/2020 Effective Date 08/18/2020 Availability Date 08/18/2020 Mailed Date | Payment Method Non Payment Amount \$0.00 Payment Status Disbursed Payment Code MEDICAID | 835 Routed To Job ID 125 Pavee Name Your Agency Line of Business MEDICAID | PIN 111111 NPI 9999999999 TIN 529999999 | RIN 1111111 Group Name Application Optum Claim Flat |



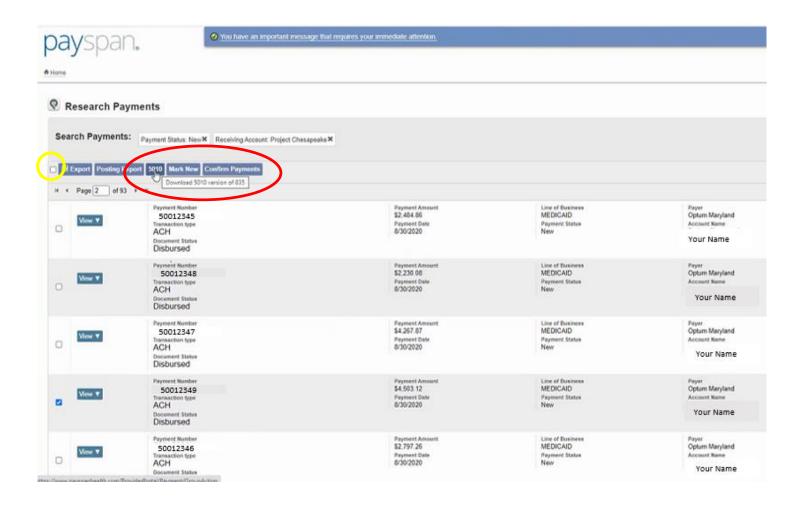
To view your latest Payments

To view your latest payments and PRA/835s, select Payments on the left navigation bar.





Downloading 835's from PaySpan



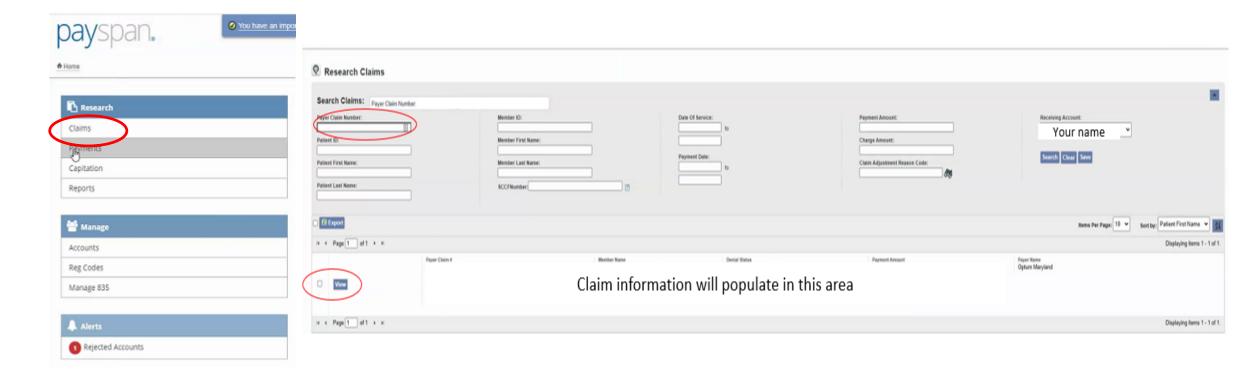
- Once you have located the 835's that you want to download, check the box to the left of that PRA. If you want to select all, click the box circled in yellow in the screenshot
- Once you have checked the box, click on the 5010 button at the top. "Download 5010 version of 835



Search for a specific claim

You can search for a specific claim by selecting "Claims" on the left navigation bar

- Enter the claim number and click search
- You can then view the details of the claim and the PRA through the information in the results field at the bottom of the screen





Reconciliation Updates



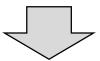
Reconciliation Overview

Reconciliation
Manager
Engagement
with Provider

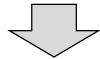
- 1. Confirm Accounting of Claims:
- a. All claims on file?
- b. Estimated Payments match?



- 2. Claim Payment/Denial Evaluation:
- a. Review of claims in question with claims experts/provider-facilitated by Reconciliation Manager



- 3. Claim Payment/Denial Outcomes:
- a. Optum adjust claims where payments/denials incorrect
- b. Provider resubmit claims where corrected claims are needed
- c. Provider submits Appeal for any outcomes they disagree with



5. Provider Reconciled

a) Overpayment process



4. Claim Adjustments/
Resubmissions/ Appeals Complete

Appeals Process for Reconciled Claims

On September 4, Optum Maryland released a <u>provider alert</u> regarding the Appeals and Grievances process for claims released as part of the reconciliation tranches.

Providers will have up to 90 calendar days AFTER the final reconciliation tranche is completed to seek reconsideration of denials.

Step 1: Reference the Maryland PBHS Billing Appendix to be certain the claim was denied incorrectly

Step 2: Contact the call center at 1-800-888-1965 to dispute the denial

Step 3: If the provider disagrees with the results of the call and continues to receive a denial, then they may file an appeal

Step 4: If the denial is upheld, the provider may file a grievance to BHA in writing, within 10 days



Reconciliation Survey Update

Optum Maryland is reaching out by email in the first instance, to providers who request a Reconciliation Manager. It is important to note you will not hear immediately from a reconciliation manager. The following process will occur:

- 1. You return the survey with a request to engage with a reconciliation manager
- 2. An initial email will be sent to you by Optum Maryland. This email will contain instructions for the next steps that you must take to prepare for your meeting with the reconciliation manager. Look out for an email with the subject line: "Optum Survey Reconciliation Management" or "Optum Reconciliation Management"
- 3. You should complete the items detailed in this email and email Optum (per the instructions) to confirm that you are ready to engage with a reconciliation manager
- 4. A meeting will then be scheduled for you to speak to a reconciliation manager



System Enhancements



Requested System Enhancements

| Enhancement Description | Status |
|---|------------|
| Ability to see more than 500 claims per day | Submitted |
| Reverse File Download List from Oldest to Newest to Newest to Oldest | Submitted |
| Mechanism for filtering claims by Completed, Denied, Pended and In Process labels. | Submitted |
| Check Date and check numbers need to be displayed on the claim lines for any claim that has fully processed (paid or denied) | Submitted |
| We need to see the "processed date" and "service date" to be searchable header/filter in Incedo | Submitted |
| Be able to export claims out of the system just like the function they have recently added for authorizations. | Submitted |
| We need to be able to either export all of the Encounter Data services or run a report for processed Encounter Data so agencies can internally audit what has been processed for Case-rate services | Submitted |
| We need a claim file number assigned when an 837 file is uploaded into Incedo so we can match them to the correlating 999 reports. | Submitted |
| We want to be able to see the history of processing the claims in Incedo with PRA references. | Submitted |
| 277 reports | In testing |
| Ability to combine or not combine data across PRA | Submitted |



Operations Updates



Operations Updates

E & M Codes

- Increased number of units displayed for each E&M code to 26 per six-month span (applies to both initial and concurrent).
- Increase the number of units for outpatient therapy codes for Individual and Group Practices to 26 per sixmonths (applies to both initial and concurrent).
- Outpatient Therapy codes for OMHC, Facility-based and SUD treatment services have not changed.

02 Place of Service not valid for Maryland providers

Use of this code will result in a denial

Missing 999s – Optum have identified the following causes

- 837's missing diagnosis codes, participant name, participant address line.
- Hyphens or dashes in zip code and Tax IDs are not allowed.



Operations Updates continued

Reason codes differ between PRAs and Incedo

- The PRA shows the CMS CARC codes
- Incedo shows the system configured denials

Known authorization issues

• Issues occurring around split authorizations. Optum Maryland is working to fix these and providers do not need to take action on these issues or contact us about them. More information is forthcoming in a provider alert.

PRP Child Medical Necessity Criteria

Wording has been updated in the Medical Necessity Criteria

Website Updates

Changes to Provider Tools and Provider Information pages



Provider Questions



Provider Council Information

- Slide decks from previous meetings, and associated FAQs can be found on Maryland. Optum.com at the following links:
- https://maryland.optum.com/content/ops-maryland/maryland/en/bh-providers/tools.html
- https://maryland.optum.com/content/ops-maryland/maryland/en/bh-providers/council.html
- The next Provider Council meeting will be held on Friday, October 9, 2020.
- Meeting reminders will be sent at the beginning of month.



Frequently Used Phone and Email Addresses

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Maryland Public Behavioral Health System 1-800-888-1965

- Option 1 Participants
- Option 2 Providers

Maryland Provider Relations - marylandproviderrelations@optum.com

Token and Incedo Provider Portal Registration questions - omd_providerregistration@optum.com (Please note the underscore in this email address: "omd_providerregistration..."

Maryland Provider Payments - maryland.provpymt@optum.com

To register for Provider Alerts - marylandprovideralerts@optum.com



Thank you.

The Optum Maryland Team

