

Massachusetts Quick Reference Guide

How do I become contracted with Optum Behavioral Health Solutions?



If you are not currently contracted and are interested in becoming an Optum Behavioral Health Solutions in-network provider, please visit the <u>Our Network page</u> on Provider Express to find and complete the appropriate application.

If you need further assistance with the secure portal tools, you can <u>chat</u> with a live representative or call the help desk at **1-866-209-9320**.

How do I add a new Tax ID to my record?



The Add/Update Form is used by credentialed providers to add a new Tax ID to their record, change an existing Tax ID, or inactivate a Tax ID from their record.

The combination of the Provider Name and Individual NPI (Type 1) uniquely identifies you and your requests in the Provider Express secure portal. Please use the same information each time so you can view all your requests together.

The Provider Express secure portal



The Provider Express secure portal is the dedicated location where providers and their associates can do business with Optum. Most tasks are complete in the secure portal, including:

- Request prior authorizations
- Submit and check the status of claims
- Requests for payment and billing updates

Update/attest provider information to make it easier for members to find you

Eligibility and prior authorizations



The secure portal makes it easy to review a member's benefit plan and verify what services require authorization or notification.

You can quickly submit and check the status of in-process authorization requests by using your One Healthcare ID to <u>log in</u> > Eligibility and Benefits or > Prior Authorizations. You can use the 'check status' feature for real-time updates.

If you're not able to authorize a service online, please call the number on the back of the member ID card.



Check network participation status



You can verify your network status and plan participation(s) at any time using the secure portal. Log in using your OneHealthCare ID > My Practice Info > My Networks

For assistance with the credentialing tool in the secure portal, you can <u>chat</u> with a live representative or call the help desk at **1-866-209-9320**.

Please note: The MA Medicaid network is equivalent to Mass General Brigham Health Plan ACO and UBH General Network is equivalent to Optum commercial lines of business



Network ^	Network Status Active	Effective Date ≎	Termination Date
Applied Behavior Analysis Network	Active	11/18/2024	12/31/9999
MA ABA Medicaid	Active	11/18/2024	12/31/9999
MA Medicaid	Active	08/01/2023	12/31/9999
MA One Care MMP	Active	10/01/2023	12/31/9999
Mass General Brigham Employees	Active	09/01/2022	12/31/9999
Mass Senior Care Option	Active	10/01/2023	12/31/9999
Medicare	Active	02/27/2017	12/31/9999
UBH General	Active	01/01/2019	12/31/9999

Fee schedule requests



To obtain a copy of your contract/fee schedule or request a change in fees schedules, please call Provider Services at **1-877-614-0484** or <u>email</u> your request to us.

Claims



The Claims section in the secure portal allows you to see the status of your claims online, regardless of how the claim was submitted.

You can quickly submit and check the status of in-process claims requests by using your One Healthcare ID to <u>log in</u> > Claims > Submit or Check Status.

Claims Support

You can <u>chat</u> with a live representative using the secure provider portal or by calling the number on the back of the member's ID card.

This brief video <u>Claim Inquiry & Claim Adjustment Requests</u> is a step-by-step guide to the secure portal provider claims tool.



Demographic updates



Provider demographic updates are made in the My Practice Info section of the secure portal: Use your One Healthcare ID to log in > My Practice Info > Update Provider Data.

Under the Consolidated Appropriations Act (CAA), Providers are required to attest to their data every 90 days, including **updating areas of expertise (AOE)**. Required documentation for attested area of expertise can be submitted as part of the AOE verification.

This video provides step-by-step instructions: My Practice Info Guidance

Medical records audit



If you have received a letter from our Payment integrity Team, please contact the resource provided in the letter directl, <u>email</u> or call PNI Customer Service at **1-877-972-8844**. Please have your Letter Reference ID and TIN/NPI available. A certified coder will respond within 10 business days.

Our Provider Express Payment Integrity page has helpful PNI audit resources.

Where to get help



Provider Services: 1-877-614-0484. Call for inquiries related to:

- Credentialing/Recredentialing
- Contracting/Fee Schedules
- Network Status

Provider Relations

A Provider Relations Advocate is available to assist with escalated concerns. Call Provider Service at **1-877-614-0484** and request that a case be opened and routed to a Provider Relations Advocate (PRA). Your issue will be timestamped, documented, and assigned to an appropriate PRA.

Provider Express secure portal technical support

Call the Provider Express help desk at **1-866-209-9320** for assistance with troubleshooting your secure portal account.

Member-specific inquiries: Call the number on the back of the member's insurance card for: Eligibility and benefits, ASO funding, claims and payments and more.

Training: Explore the vast training resources on the Provider Express <u>Training page</u>.