Updated: Friday, Nov 15, 2019

ASO Transition FAQs for Providers

Effective January 1, 2020, Optum Maryland will replace Beacon as the Administrative Service Organization (ASO) for Maryland's Public Behavioral Health System. Authorization for services, claims, and check runs will be handled by Beacon through December 31, 2019. All ASO activities will transfer to Optum beginning January 1, 2020.

Find the latest information on the **MDH homepage** (last item under "Quick Links") or https://mmcp.health.maryland.gov/Pages/Administrative-Service-Organization-Transition-Information-.aspx.

Email transition-related questions to mdh.bhasotransition@maryland.gov for inclusion in the running FAQ document. MDH consolidates similar questions and posts the responses in this FAQ document which is updated weekly, or more frequently, as needed.

PROVIDER MANAGEMENT FAQs

What do I have to do?

1. All providers (individual, group, programs, and institutions) **MUST log into the Optum Maryland Portal and register** in order to request authorizations, file claims, and receive payments.

The registration process (not to be confused with the enrollment process) will make you "known" to the Optum system as an active provider. This is also your opportunity to make sure that your primary contact email for your program or office, your enrollment, group affiliation, as well as your billing address are up to date.

Failure to register in the Optum system will result in a provider not receiving payment. The registration process will be launched in the coming weeks. Providers will receive an alert when this function is available.

2. Do providers need to take any steps regarding their claims information if it is up to date in Beacon's and Optum's systems?

Providers should ensure that the information in their Provider File is up to date in Medicaid's system through the ePREP portal. Providers must make sure their "Pay To" or "Remit to"

address in Medicaid's system is accurate. The information in Optum's portal is based solely on the Medicaid provider file.

3. All providers must **attend provider trainings**. Which staff members should take the training offered by Optum?

Trainings are specific to provider type. To sign up for a session, click here to visit the ASO transition site.

Staff members who submit authorizations and claims should participate in the upcoming trainings. Optum will offer additional trainings for new providers as needed after the transition.

What is staying the same in the Optum system?

1. Will the overall structure of Optum's system, including the provider portal, be similar to Beacon's?

Yes. Regulations, most billing codes, diagnoses covered under the carve out, and combination of service rules, are at the direction of MDH and DO NOT change based on the transition to a different ASO.

2. If a provider is registered for United Healthcare's commercial insurance portal, will they need to register separately with Optum?

Optum and United Healthcare are separate entities. As such, providers registered with United Healthcare will need to register separately with Optum, Maryland, the Department's ASO. The registration process will make you "known" to the Optum system as an active provider. Failure to register in the Optum system will result in a provider not receiving payment.

3. The current claims filing limit for Beacon Health Options is 365 days. Will the claims filing limit stay the same for Optum Maryland?

Yes, per Medicaid regulations, COMAR 10.09.36.06 providers have 12 months from the date of service to file Medicaid claims. .

4. What phone number can providers use to call Optum Maryland?

MDH owns the phone number (1-800-888-1965) and Optum will take over the management of this phone number beginning January 1, 2020. There will be a new voice menu and options which will be available on the Optum webpage (live 1/1/2020) and voice directions will be updated as of 1/1/2020.

Is registering with Optum the same as enrolling as a Maryland Medicaid provider?

No. The provider credentialing and enrollment process will remain the same. In Maryland, behavioral Health is reimbursed under fee for service.   This means that participating providers are those that are licensed, certified and qualified to enroll with Medicaid. The enrollment process requires that providers attest to complying with all Medicaid regulations by signing the provider agreement.

How will the ASO transition affect Substance Use Disorder (SUD) programs?

As with all providers billing the public behavioral health system, if you submit for authorizations and claims payment through Beacon today, you will need to register with Optum to submit for authorizations and claims beginning January 1, 2020.

Will the email distribution list for Provider Alerts be transferred to Optum?

Yes. The existing provider alert system will continue through Beacon until Dec. 31, 2019. As of Jan. 1, 2020, Optum will begin its own system of provider alerts. While there may be a list of emails that comes from Beacon to Optum, it will be necessary for providers and stakeholders, to update their information to ensure they are receiving necessary information that impacts the public behavioral health system.

Due to providers' specific email system rule, alerts from Optum may be rejected or labeled spam or junk mail. Optum will perform a test of their system before January 1 and send a companion alert through the current Beacon alert system. Providers should contact their system administrators or sign-up directly for Optum's alerts if they do not receive the test message or any Optum alerts **after** January 1, 2020.

Providers not currently on Beacon's Provider Alert email distribution list, may sign up here: http://maryland.beaconhealthoptions.com/provider/prv_alerts.html

BILLING FAQs

How will billing procedures be affected?

All claims that are currently billed through Beacon Health Options must be billed through Optum starting January 1, 2020.

Will the transition cause delays in claims processing and payment, particularly those billed through a clearinghouse?

No. Optum will be launching their provider portal which will include options for clearinghouse, batch files, and direct claims submission. Once Optum completes overall system testing, providers will be able to test their clearinghouse and claims submission.

How and when will claims and authorizations be transferred to the new ASO?

The transfer of current authorizations and claims files has already begun. MDH is coordinating the transfer between the vendors for both history and open/active through the end of the current contract period.

These files will continue to be transferred in updated increments to ensure all open authorizations and open claims are captured prior to go-live.

How will uninsured spans be affected by the transition?

Optum has already received and will continue to receive the open authorization file which includes uninsured spans.

When will providers be able to conduct claims testing using Optum's system?

Optum will make arrangements for testing batch files and direct claims submission prior to the launch. More information will be available in December, when Optum will send providers information to begin submitting for testing.

Will all claims submitted to Beacon be forwarded to Optum directly?

At the point of the transition, a claims file of all submitted, but non-adjudicated claims from Calendar Year 2019 will be forwarded to Optum. MDH is working with both vendors to ensure a final reconciliation of these claims file post transfer.

What is happening with regards to Releases of Information (ROIs)?

1. Should providers collect Release of Information (ROI) for mental health patients as well as SUD service recipients?

All SUD providers or providers treating individuals with a primary diagnosis of SUD **MUST OBTAIN AN UPDATED ROI IMMEDIATELY,** before the new ASO contract begins on January 1, 2020. Data sharing improves clinical decision-making and leads to better outcomes, but 42 CFR, Part 2 requires this level of informed consent so that care coordination can continue on behalf of your patients between the ASO and their Managed Care Organizations. **Even if you have a current ROI on file, a new release will be required before the launch of the new contract.**

2. Does the ROI form submitted to Optum Maryland have to be in the exact formatting provided in the Beacon Health Options Provider Alert sent out on November 7, 2019?

Yes, providers must submit a completed [ROI form](#) in its original format. ROI forms **must be faxed** to Optum at (855)-293-5407. Should you have any questions related to the ROI, please contact Karl Steinkraus at Optum Maryland at Karl.steinkraus@optum.com. Optum will

continue to develop an automated system to replace the fax system after the launch, but you must use the fax number for now.