Claims Payment

Optum Behavioral Health

Agenda

- Updates Page on Optum Alaska Website
- Primary Modifier Grids
- Diagnosis Sequence and Z Codes
- Covered 1115 Waiver Services
- Provider Uploading Process
- Multiple NPIs on Different Claims and One NPI on a Remittance Advice (RA)
- 837 Information in Optum Intelligent EDI
- Recovery of an Overpayment
- Submitting Claim Adjustments and Corrected (or Void) Claims

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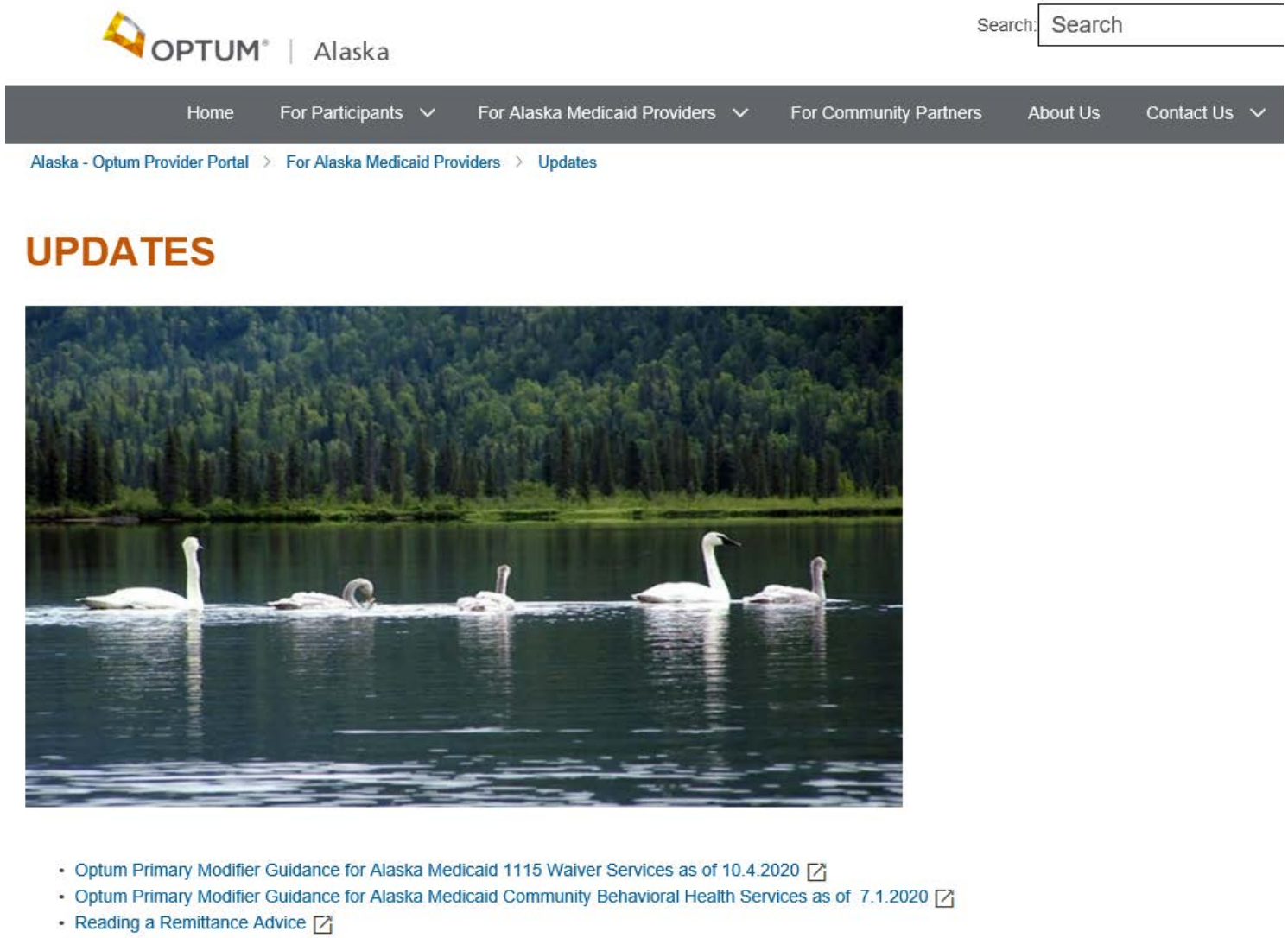
Updates Page on Optum Alaska Website



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Primary Modifier Grids

The Primary Modifier Grids are posted on the website under Updates at: https://alaska.optum.com/content/ops-alaska/alaska/en/providers/Updates.html

UPDATES

- Optum Primary Modifier Guidance for Alaska Medicaid 1115 Waiver Services as of 10.4.2020

- Optum Primary Modifier Guidance for Alaska Medicaid Community Behavioral Health Services as of 7.1.2020

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Optum Primary Modifier Guidance for Alaska Medicaid 1115 Waiver Services as of 10.4.2020

Service Title/Description	Service Code	Primary Billed Modifier #1	Modifier #2	Modifier #3	Modifier #4
Outpatient Services ASAM 1.0 - Individual	H0007	V1 - Demonstration			
Outpatient Services ASAM 1.0 - Individual (Telehealth)	H0007	V1 - Demonstration	GT - Telehealth		
Outpatient Services ASAM 1.0 - Group (Adolescent)	H0007	**HQ - Group**	HA - Adolescent	V1 - Demonstration	
Outpatient Services ASAM 1.0 - Group (Adolescent) (Telehealth)	H0007	**HQ - Group**	HA - Adolescent	V1 - Demonstration	GT - Telehealth
Outpatient Services ASAM 1.0 - Group (Adult)	H0007	**HQ - Group**	HB - Adult	V1 - Demonstration	
Outpatient Services ASAM 1.0 - Group (Adult) (Telehealth)	H0007	**HQ - Group**	HB - Adult	V1 - Demonstration	GT - Telehealth
Intensive Case Management	H0023	V1 - Demonstration			
Intensive Case Management (Telehealth)	H0023	V1 - Demonstration	GT - Telehealth		
Ambulatory Withdrawal Management	H0014	V1 - Demonstration			
Clinically Managed Residential Withdrawal Management	H0010	V1 - Demonstration			
Medically Monitored Inpatient Withdrawal Management 3.7 WD	H0010	**TG - High Level**	V1 - Demonstration		
Medically Managed Intensive Inpatient Withdrawal Management 4.0 WD	H0011	V1 - Demonstration			
Medically Managed Intensive Inpatient Services 4.0	H0009	**TG - High Level**	V1 - Demonstration		
Medically Monitored Intensive Inpatient Services 3.7	H0009	**TF - Intermediate**	V1 - Demonstration		
Community & Recovery Support Services - Group	H2021	**HQ - Group**	V1 - Demonstration		
Community & Recovery Support Services - Group (Telehealth)	H2021	**HQ - Group**	V1 - Demonstration	GT - Telehealth	
Community & Recovery Support Services - Individual	H2021	V1 - Demonstration			
Community & Recovery Support Services - Individual (Telehealth)	H2021	V1 - Demonstration	GT - Telehealth		
SUD Care Coordination	H0047	V1 - Demonstration			
SUD Care Coordination (Telehealth)	H0047	V1 - Demonstration	GT - Telehealth		

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Optum Primary Modifier Guidance for Alaska Medicaid 1115 Waiver Services as of 10.4.2020 – Continued

Service Title/Description	Service Code	Primary Billed Modifier #1	Modifier #2	Modifier #3	Modifier #4
Peer-Based Crisis Intervention Services	H0038	V1 - Demonstration			
23-Hour Crisis Observation & Stabilization	S9484	V1 - Demonstration			
Mobile Outreach and Crisis Response Services	T2034	V1 - Demonstration			
Crisis Residential Stabilization	S9485	V1 - Demonstration			
Intensive Outpatient ASAM 2.1 - Group	H0015	**HQ - Group**	V1 - Demonstration		
Intensive Outpatient ASAM 2.1 - Group (Telehealth)	H0015	**HQ - Group**	V1 - Demonstration	GT - Telehealth	
Intensive Outpatient ASAM 2.1 - Individual	H0015	V1 - Demonstration			
Intensive Outpatient ASAM 2.1 - Individual (Telehealth)	H0015	V1 - Demonstration	GT - Telehealth		
Treatment Plan Development/Review	T1007	V1 - Demonstration			
Treatment Plan Development/Review (Telehealth)	T1007	V1 - Demonstration	GT - Telehealth		
Partial Hospitalization	H0035	V1 - Demonstration			
SUD Residential 3.1 (Adolescent)	H2036	**HA - Adolescent**	V1 - Demonstration		
SUD Residential 3.1 (Adult)	H2036	**HF - Substance Abuse**	V1 - Demonstration		
SUD Residential 3.3	H0047	**HF - Substance Abuse**	V1 - Demonstration		
SUD Residential 3.5 (Adult)	H0047	**TG - High Level**	V1 - Demonstration		
SUD Residential 3.5 (Adolescent)	H0047	**HA - Adolescent**	V1 - Demonstration	TF - Intermediate	
Home Based Family Treatment Level 1	H1011	V2 - Demonstration			
Home Based Family Treatment Level 2	H1011	**TF - Intermediate**	V2 - Demonstration		
Home Based Family Treatment Level 3	H1011	**TG - High Level**	V2 - Demonstration		
Therapeutic Treatment Homes	H2020	V2 - Demonstration			

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Optum Primary Modifier Guidance for Alaska Medicaid 1115 Waiver Services as of 10.4.2020 – Continued

Service Title/Description	Service Code	Primary Billed Modifier #1	Modifier #2	Modifier #3	Modifier #4
Assertive Community Treatment	H0039	V2 - Demonstration			
Adult MH Residential Treatment Level 1	T2016	V2 - Demonstration			
Adult MH Residential Treatment Level 2	T2016	**TG - High Level**	V2 - Demonstration		
Children's MH Residential Treatment Level 1	T2033	V2 - Demonstration			
Children's MH Residential Treatment Level 2	T2033	**TF - Intermediate**	V2 - Demonstration		
Peer-Based Crisis Services	H0038	V2 - Demonstration			
23 Hour Crisis Stabilization	S9484	V2 - Demonstration			
Mobile Outreach and Crisis Response Services	T2034	V2 - Demonstration			
Crisis Residential Stabilization	S9485	V2 - Demonstration			
Intensive Case Management	H0023	V2 - Demonstration			
Intensive Case Management (Telehealth)	H0023	V2 - Demonstration	GT - Telehealth		
Community & Recovery Support Services - Group	H2021	**HQ - Group**	V2 - Demonstration		
Community & Recovery Support Services - Group (Telehealth)	H2021	**HQ - Group**	V2 - Demonstration	GT - Telehealth	
Community & Recovery Support Services - Individual	H2021	V2 - Demonstration			
Community & Recovery Support Services - Individual (Telehealth)	H2021	V2 - Demonstration	GT - Telehealth		
Partial Hospitalization	H0035	V2 - Demonstration			
Intensive Outpatient ASAM 2.1 - Group	H0015	**HQ - Group**	V2 - Demonstration		
Intensive Outpatient ASAM 2.1 - Group (Telehealth)	H0015	**HQ - Group**	V2 - Demonstration	GT - Telehealth	
Intensive Outpatient ASAM 2.1 - Individual	H0015	V2 - Demonstration			
Intensive Outpatient ASAM 2.1 - Individual (Telehealth)	H0015	V2 - Demonstration	GT - Telehealth		
Treatment Plan Development/Review	T1007	V2 - Demonstration			
Treatment Plan Development/Review (Telehealth)	T1007	V2 - Demonstration	GT - Telehealth		

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Modifier V2 Example for H2021

Service Title/Description	Service Code	Primary Billed Modifier	Modifier #2	Modifier #3	Modifier #4	Fee	Unit of Measure
Community & Recovery Support Services - Group	H2021	HQ - Group	V2 - Demonstration			$5.63	15 Minutes
Community & Recovery Support Services - Group (Telehealth)	H2021	HQ - Group	V2 - Demonstration	GT - Telehealth		$5.63	15 Minutes
Community & Recovery Support Services - Individual	H2021	V2 - Demonstration				$21.46	15 Minutes
Community & Recovery Support Services - Individual (Telehealth)	H2021	V2 - Demonstration	GT - Telehealth			$21.46	15 Minutes

Code H2021 - Optum has the primary modifier listed as V2 with a $21.46 rate and HQ with a $5.63 rate

- If a Provider sends a claim to Optum with V2:
  Claim will pay at the $21.46 rate
- If a Provider sends a claim to Optum with HQ and V2:
  Claim will pay at the $5.63 rate
- If a Provider sends a claim to Optum with V2 and HQ:
  Claim will pay at the $21.46 rate. This would be an over- payment for Community and Recovery Support Services-Group

Diagnosis Sequence

- Claims for SUD services must have a SUD diagnosis and claims for BH services must have mental health diagnosis
- This applies to 1115 Waiver and State Plan services
- For Home Based Family Treatment Level 1, H1011, if a recipient does not have a diagnosed mental condition, a provider may use ICD 10, (F99), list the recipient as “not otherwise specified” until a primary diagnosis is available. The Z-code may only be used as a secondary or tertiary diagnosis. At no time can a Z-code be the primary diagnosis on a professional claim

Diagnosis Z codes

Diagnosis Z codes can be found in the Alaska Behavioral Health Provider Standards & Administrative manual for BH Provider Services, dated October 4, 2020.

It is located on the DBH website at the link below. Attachment A, page 54, in the manual contains the list of qualifying Z codes.

http://dhss.alaska.gov/dbh/Pages/Resources/Medicaidrelated.aspx

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Covered 1115 Waiver Services

Drug Screenings/Urine Analysis services are not a separately billable 1115 Waiver SUD service.

- Payment for drug screenings are included in the reimbursement rates for 1115 Waiver SUD services

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Provider Uploading Process

Optum recommends a provider does not bill for services until s/he or the agency is uploaded in the Optum system

- The time period for uploading a provider is within 30 days from enrollment at Conduent

- If claims are billed before uploading is completed, then claims will deny with error reason N77 - Missing/incomplete/invalid designated provider number

- A provider will need to rebill the claims

- A provider will know when rendering providers have been uploaded in the Optum system when they are showing in the Live and Work Well (LAWW) Provider Directory at: https://www.liveandworkwell.com/content/en/member.html

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Multiple NPIs on Different Claims and One NPI on a RA

Providers may bill under a single National Provider Identifier (NPI) for all their claims to Optum for Alaska Medicaid covered services.

This includes state plan and 1115 Waiver services and multiple locations. **They may all be billed with the same NPI number.**

- The NPI printed on a RA will match the NPI submitted on one of the claims received in a batch of claims
- One RA is produced for all the claims paid on the same day. A separate RA is not produced for each NPI submitted on the claims
- Therefore, a provider may bill have more than one NPI in a batch of claims that pay, but only one NPI number will print on the RA

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Multiple NPIs on Different Claims and One NPI on a RA – Continued

- If more than one claim exists with different NPIs in the same payment cycle, then the largest sequential NPI number among all the claims will be reported on the RA
- The RA will not list all the NPIs received on all the claims
- For example, if the NPIs are the ones below are in the same payment cycle, then the RA will contain NPI number 1678912345 only
  - 1234567890
  - 1678912345

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837 Information in Optum Intelligent EDI

837 Reject Reason Information: Optum Intelligent EDI provides weekly LINK trainings that providers are encouraged to attend to learn how to use the LINK system. The Optum Intelligent EDI trainings cover where to locate provider reports that have the full rejections on them from the payers.

Click on this link to access the training: https://optum.webex.com/optum. Copy and Paste the meeting number and password for the meeting you wish to join.

IEDI Enrollments Training (Training specific to submitting a Claim & ERA Enrollment)

Monday, 8:00 am Alaska Time

Meeting number: 646 188 539

Meeting password: dP8Gt7ZbQ$8

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837 Information in Optum Intelligent EDI – Continued

IEDI LINK Training (Full LINK Portal Training)

Tuesday at 9:00 am Alaska Time

Session number: 610 751 023
Session password: Gg3huFk$

IEDI Portal Refresher ***Must have attended a full portal training first***

(This is where you can get questions answered once you are working in the system, after you have attended a full portal training)

Wednesday, 8:00 am Alaska Time

Meeting number: 646 391 148

Meeting password: BuNs4sz@

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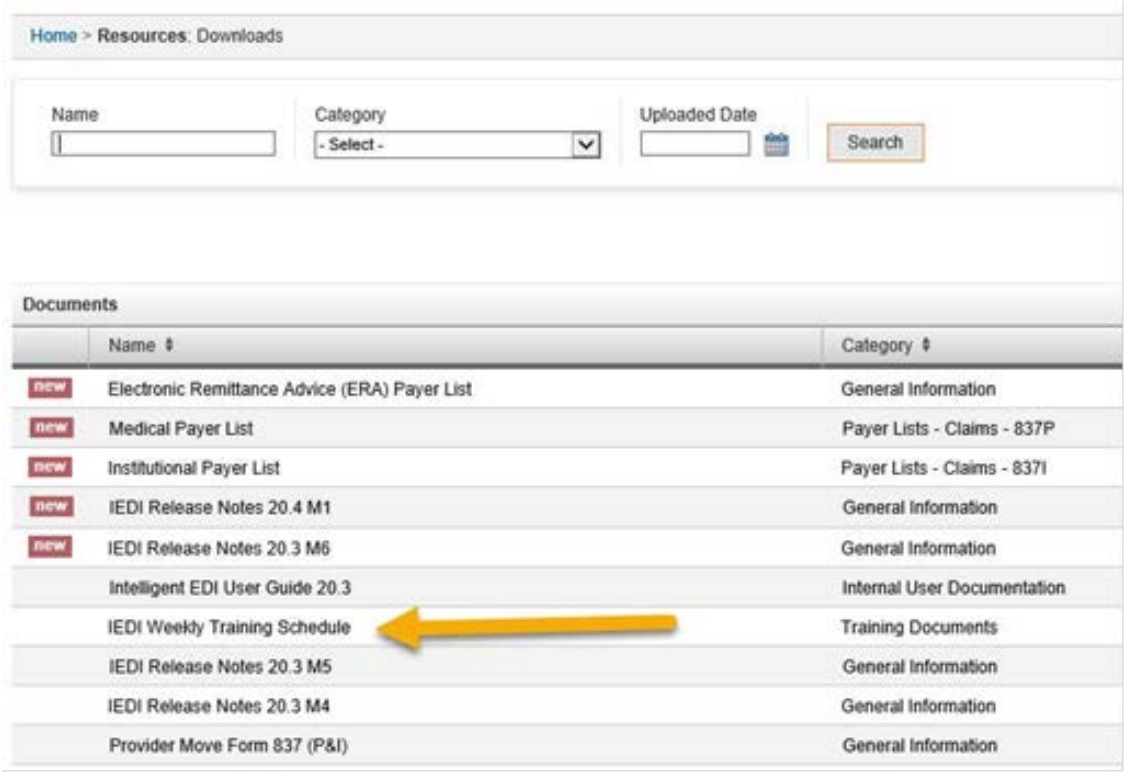
837 Information in Optum Intelligent EDI - Continued

Providers can access the resources>download section and download the IEDI weekly trainings which will contain the most current links to trainings being offered.



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Recovery of an Overpayment

Information on recovery or recoupment of an overpayment is in the Provider Manual on page 50. The Provider Manual is on the Optum Alaska website at: https://alaska.optum.com/content/ops-alaska/alaska/en/providers/guidelines-policies.html.

When an overpayment is identified, there are three actions:

1. A provider is notified on a Remittance Advice of an overpayment,

2. A provider receives an Overpayment Recovery Letter titled, “Refund Request,” and

3. An overpayment is recovered by reducing a provider’s future payment(s) within 28 days of the date on the letter.

- Optum does not recommend that a provider who is routinely billing and receiving payments from Optum send a refund check to Optum in the mail.
- The reason Optum does not recommend it is the check may arrive in the mail at Optum after the overpayment has already been recovered by reducing a provider’s future payment.

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Overpayment Amounts on RA

Provider Payment Information

Prov Adj Cd	Prov Adj ID	Remark Cd	Prov Adj Amt
FB	[redacted]	OVP	[redacted]
FB		OVP	
FB		OVP	
FB		OVP	
FB		OVP	
FB		OVP	
FB		OVP	
FB		OVP	
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FB		OVP	
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FB		OVP	
		Total Adjustment	
		Claim Total	
		Prov Pay Amt	

REMARK(S) LISTED BELOW ARE REFERENCED IN THE SERVICE DETAIL SECTION UNDER THE HEADING "Remark Cd"

[redacted]

OVP - Overpayment Amount

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Refund Request Letter

OPTUM™

Attn: MSC 410836
P.O. Box 415000
Nashville, TN 37241-0836

(866) 682-3859
Fax (844) 232-6217

March 10, 2020

REFUND REQUEST

Dear [redacted]:

After a careful review of OptumHealth Behavioral Solution records, we have found that an overpayment exists on the claim(s) detailed below. Our files indicate that a refund is due for the following reason(s):

REFUND DUE: $6,300.00
Patient Name: [redacted]
Client Claim ID: [redacted]
Paid Date: 08/20/2019
Payment Ref #: [redacted]
Reason: Payment at the incorrect level of benefits.

Service Date(s): 05/11/2019 to 05/24/2019
Patient Acct. #: [redacted] 01
Optum #: [redacted]
Paid amount: $6,300.00 by carrier
Date of last payment to creditor:

If you disagree with these overpayments, please send a written dispute, including all rationale and supporting documentation, along with a copy of this letter to OHBS Attn: Appeals Department, PO Box 30512, Salt Lake City, UT 84130-0512. Sending correspondence to any other location may delay or prevent proper processing.

Please make your payment directly to Optum. To pay by check or money order, please send your payment to Optum Attn: MSC 410836, P.O. Box 415000, Nashville, TN 37241-0836.

If a refund is not received, the overpayment will be recouped on April 8, 2020.

If you have any questions or need assistance processing this refund, please call (866) 682-3859. Calls to this number may be recorded for quality assurance purposes.

Sincerely,
Penny Hill
Recovery Resolution Analyst

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Claim Number

Optum Claim Number

20|X|xxxxxxx|00

- Year the claim was received
- Claim submission method
  - X = Electronic
  - 0 = Paper Claim
- Claim document batch, number sequence
- Claim transaction type number
  - 00 = Original
  - 01 = Adjustment

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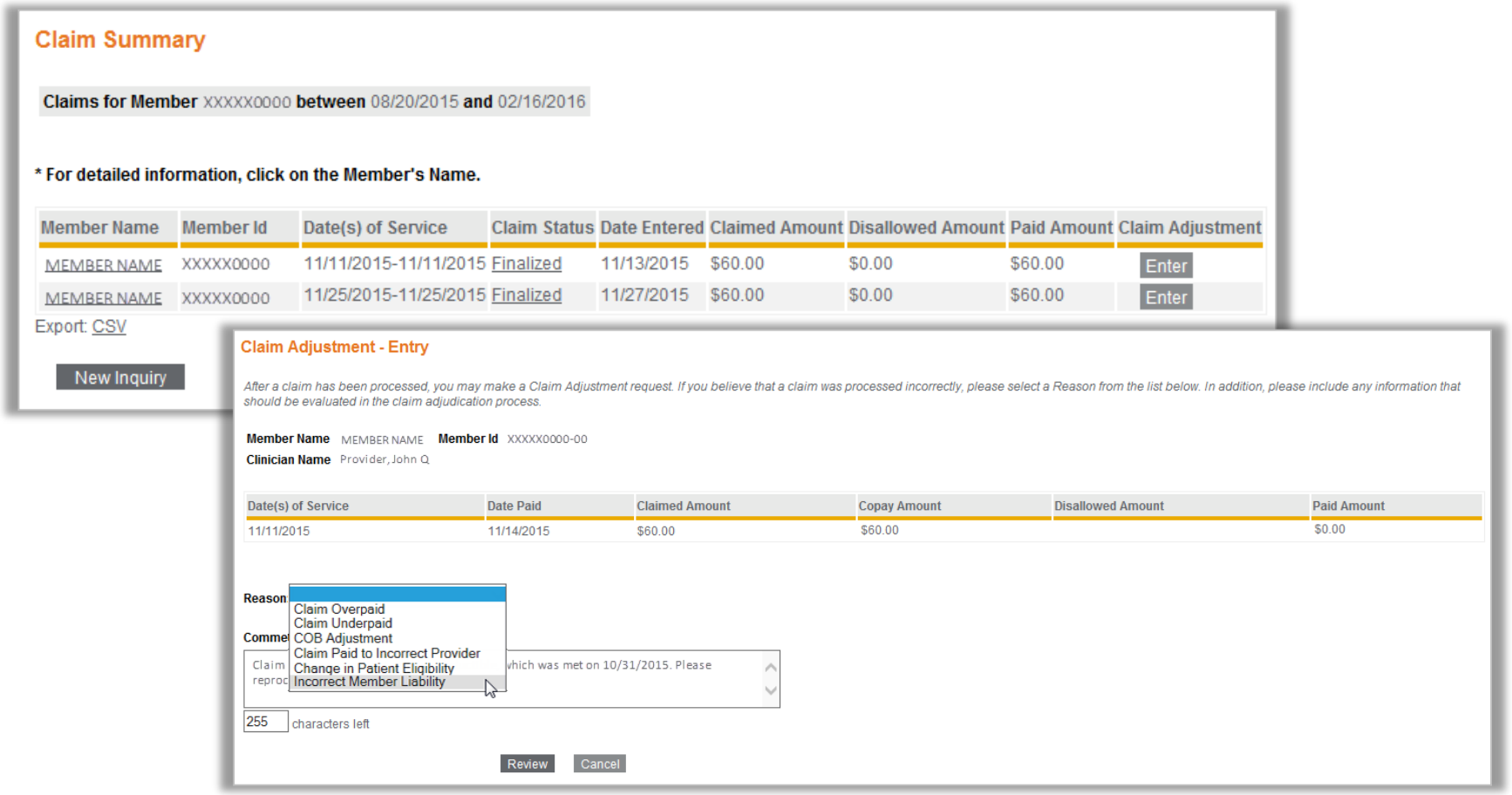
Submitting Claim Adjustments and Corrected (or Void) Claims

Quickly verify claim status or make adjustments

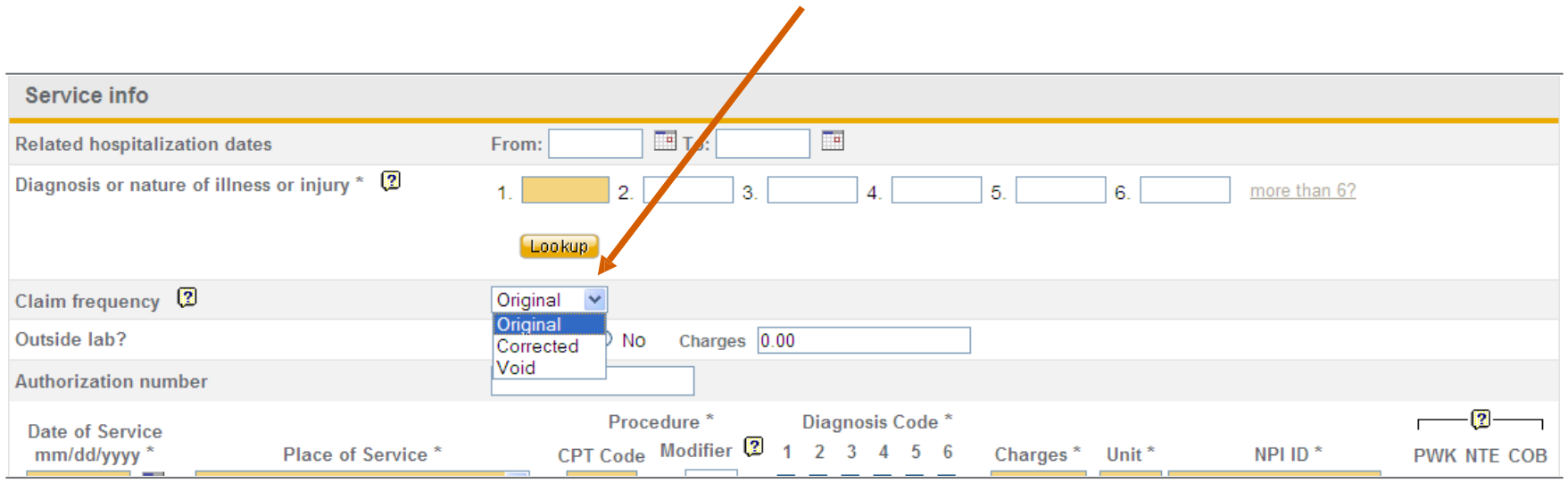
Check the status of your claim on *Provider Express* where you can also submit Claim Adjustment Requests online



Submitting Corrected (or Void) Claims

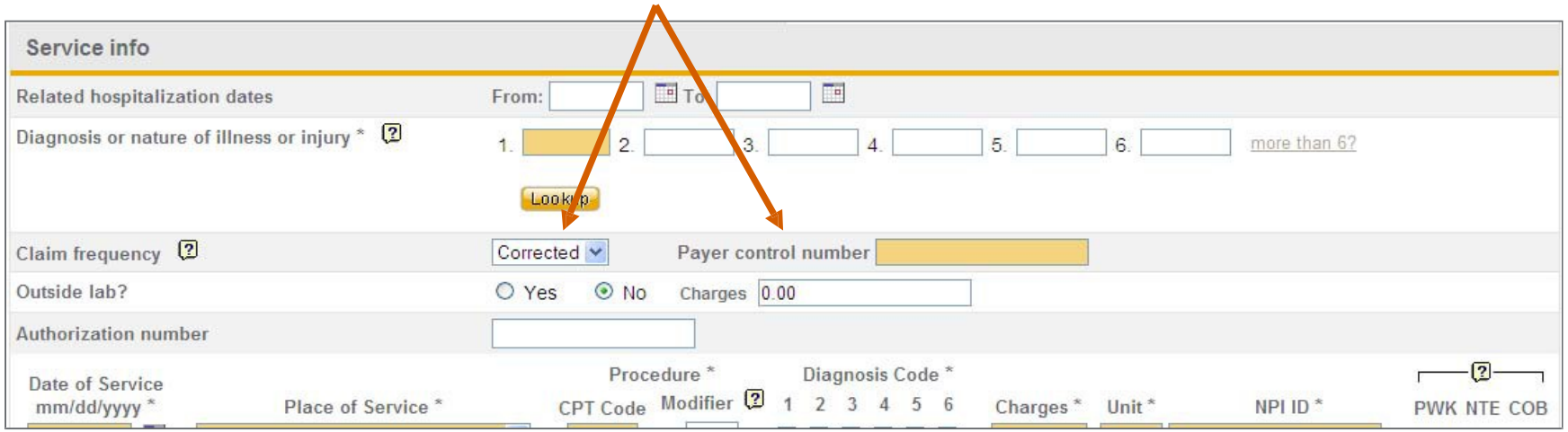
- Regardless of the claim form (short or long), you do have the ability to submit a Corrected or Void claim request as well, when a previously submitted claim had incorrect information on it

- In the Service info section, the “Claim frequency” code is what is used to determine the type of claim you are filing. Provider Express defaults to "Original" but you can change it to "Corrected" or "Void"



Submitting Corrected (or Void) Claims (cont.)

- As the help icon next to this section indicates:
  - **Claim frequency -** To submit a Corrected or Void claim, you will need to enter the Claim Number found on the claim record in Claim Inquiry. The claim number will also be reported on the paper remittance advice or electronic 835 file. You cannot submit a Corrected or Void claim until a claim number has been assigned.

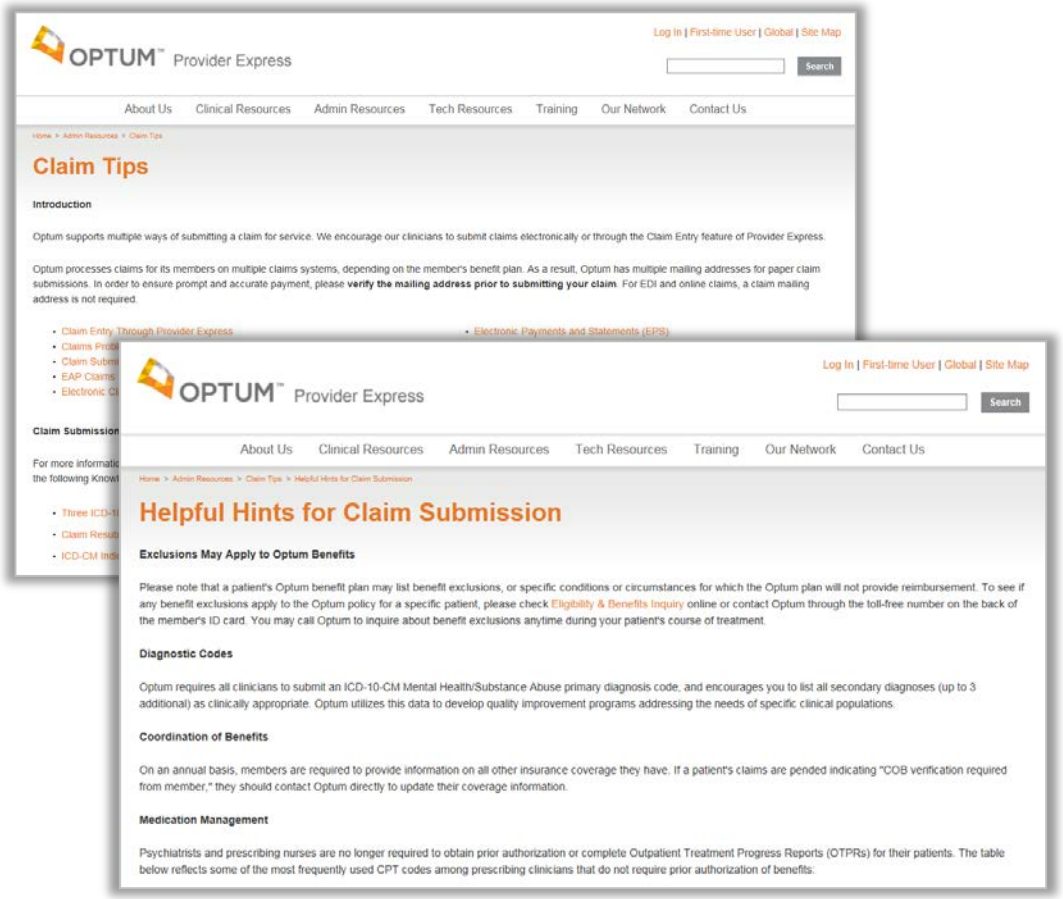


"Payer control number" = Claim number

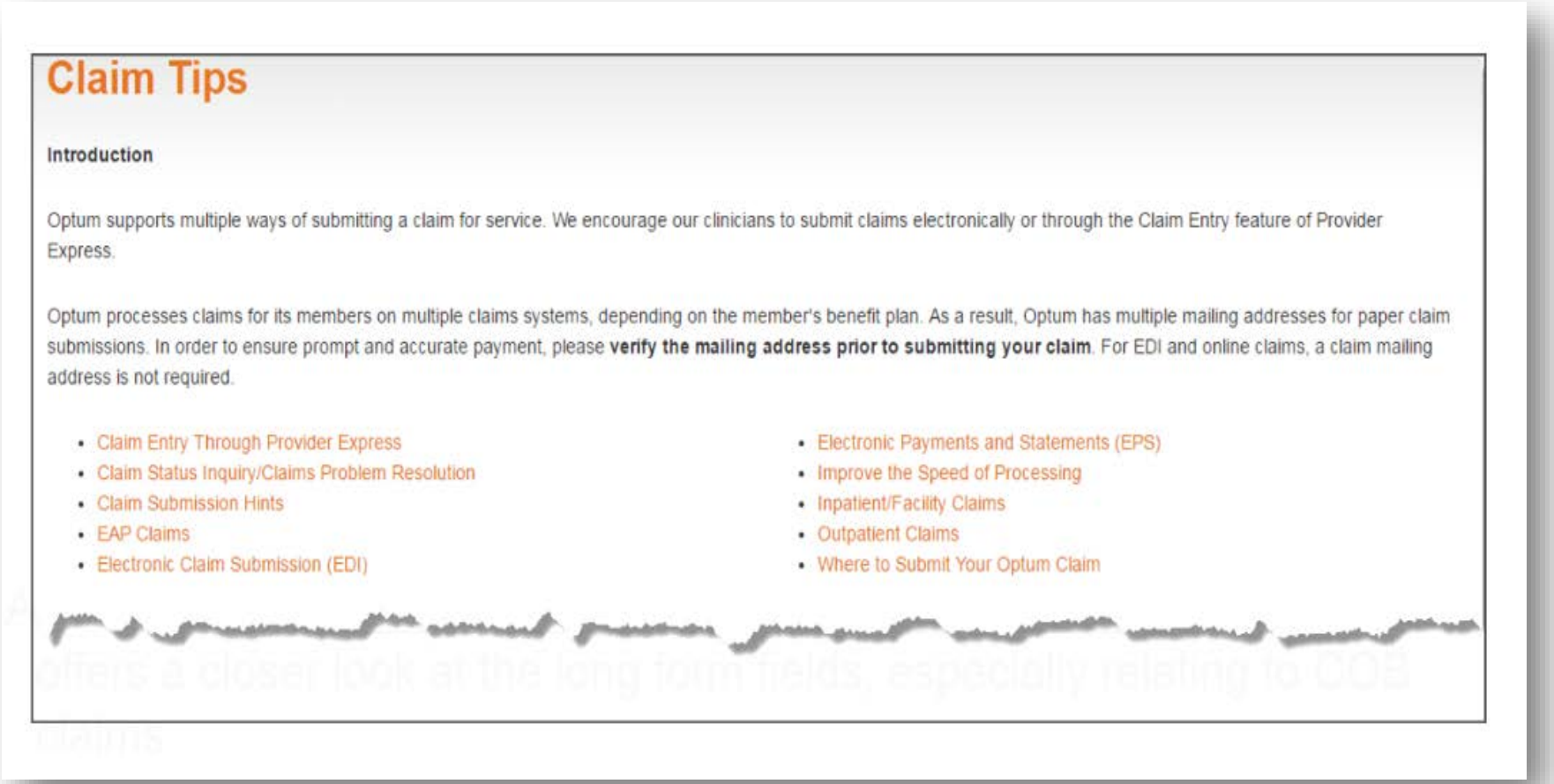
Additional handy claim tips

Visit *Provider Express* for additional information on preventing common claim errors.

Claim Tips Link



General Claim Assistance



Claim Tips

Introduction

Optum supports multiple ways of submitting a claim for service. We encourage our clinicians to submit claims electronically or through the Claim Entry feature of Provider Express.

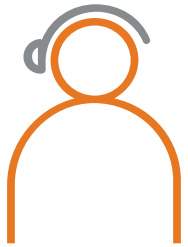
Optum processes claims for its members on multiple claims systems, depending on the member's benefit plan. As a result, Optum has multiple mailing addresses for paper claim submissions. In order to ensure prompt and accurate payment, please **verify the mailing address prior to submitting your claim**. For EDI and online claims, a claim mailing address is not required.

- Claim Entry Through Provider Express
- Claim Status Inquiry/Claims Problem Resolution
- Claim Submission Hints
- EAP Claims
- Electronic Claim Submission (EDI)
- Electronic Payments and Statements (EPS)
- Improve the Speed of Processing
- Inpatient/Facility Claims
- Outpatient Claims
- Where to Submit Your Optum Claim

The Provider Relations Team is here to help

The Alaska Provider Relations Team is your local guide to Navigating Optum.

The AK Provider Relations Team can:	The Optum AK Provider Relations Team:
• Act as your Optum liaison • Answer important questions • Facilitate ongoing process improvements • Keep you abreast of changes that impact your practice • Provider useful tools and resources	Lisa Brown: **1-763-797-2092** Lorraine Afe Vaoita Puletapuai Email: **akmedicaid@optum.com** Fax: **1-844-881-0959**



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