Optum

Incedo Claim Submission

Optum Maryland Provider Training & Education

Participant Guide

Key Learning Points

- Form Demonstration
- Tips for Claim Success
- Claim Resubmission/Void
- Coordination of Benefits
- Additional Resources

Demonstration

Optum

Tips for Claim Submission Success

Verify coverage is active

Verify services are authorized

Verify service is covered

HCPCS and CPT codes and fee schedules found on Optum Maryland Web Site

Use the SR authorization number on the claim

Rendering provider ID is ONLY required for these provider types:

- **Mental Health Groups (PT 27)**
- **Physician Groups (PT 20)**
- **FQHC (PT 34)**
- **ABA (PT AB)**

Optum

Tips for Claim Submission Success

Optum | Maryland

PROVIDER ALERT

Claim Billing and 277CA Update

August 10, 2022

Target Audience: All Behavioral Health Providers

Optum Maryland has made updates to the claim billing process that will improve efficiency of claim processing and reduce the need for reprocessing. Provider action in regard to these changes is detailed below.

Provider Action Required:

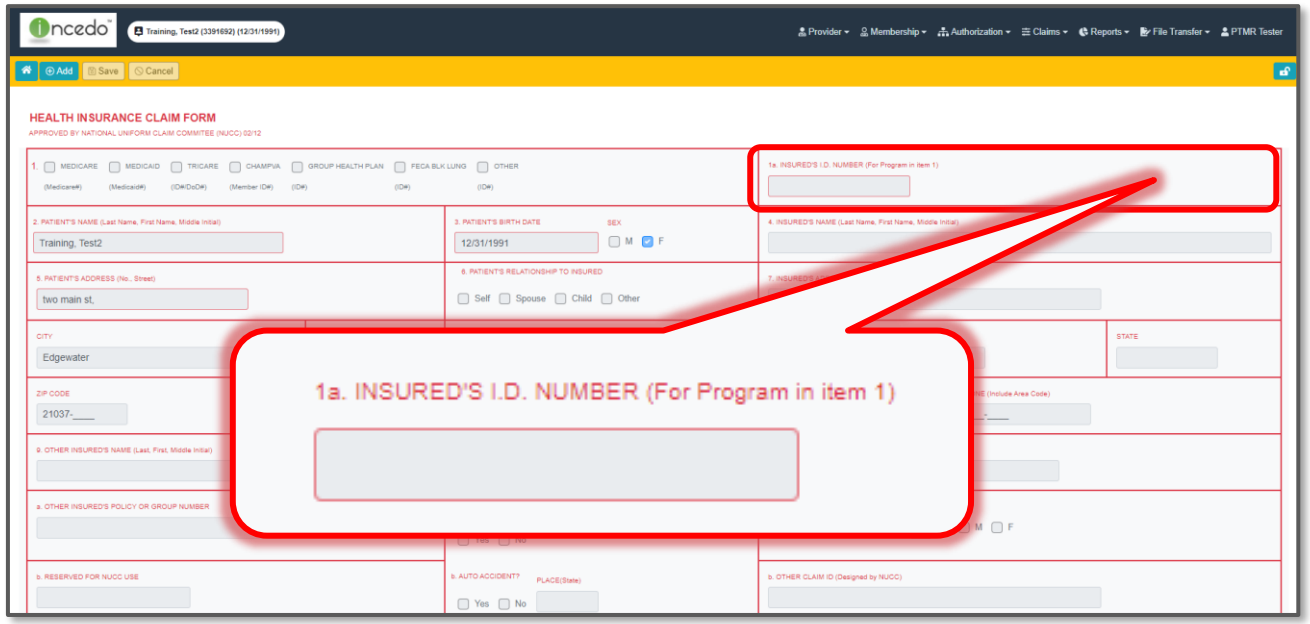
We are reminding all providers of the critical importance of completing the **provider and participant identifier** elements on each claim accurately.

Errors from improperly completing these items are a major cause of claim rejection, processing delays, and unnecessary denials. The following requirements apply to all claims, whether on 837, paper, or on the Incedo Provider portal:

- A **valid** Maryland Medicaid ID number (MMIS) or Optum-issued ID number for Uninsured Participants must be used on **all** claim submissions.
  - The Optum-issued ID number for Uninsured Participants is the Incedo ID number, beginning with a "U."
    - For example, if the Incedo ID number is "123456789," the uninsured number is "U123456789."
    - Effective immediately, the Incedo number (without the "U" will no longer be accepted).
- A **valid** Provider Billing NPI Number must be used on **all** claim submissions.

A rejection will be generated if this information is entered inaccurately or incompletely.

- A **valid** Maryland Medicaid ID number (MMIS) or Optum-issued ID number for Uninsured Participants must be used on **all** claim submissions.
  - The Optum-issued ID number for Uninsured Participants is the Incedo ID number, beginning with a "U."
    - For example, if the Incedo ID number is "123456789," the uninsured number is "U123456789."
    - Effective immediately, the Incedo number (without the "U" will no longer be accepted).



Click image to go to the Provider Alert

Tips for Claim Submission Success

- Do not submit bills with both GT and UB modifiers on same service.
- Do not submit bills with a telehealth place of service (2 or 95)
- All required fields are outlined in RED

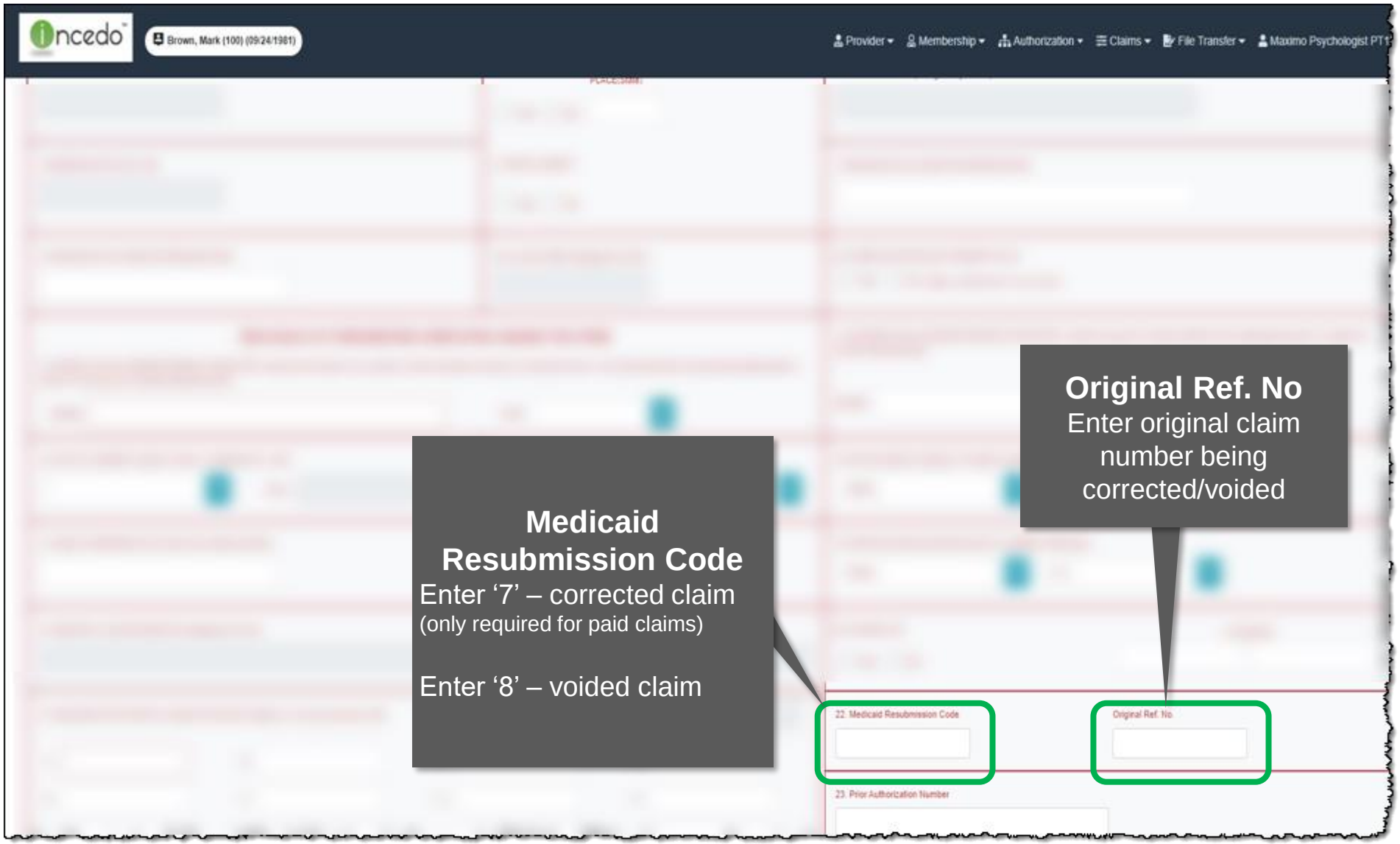
Claim Re-Submission

- The **ONLY** time a claim needs to be resubmitted as a corrected claim is if the claim was previously paid.
- To correct a denied claim, submit a new claim with changes reflected.
- Resubmitting without corrections or changes does not trigger reprocessing. These claims are denied as duplicates if previously paid.
- If a claim has been denied incorrectly, **contact the call center and request a claim review**. The Claims Team will review the original and, if appropriate, will reprocess.
- Pended claims do not require resubmission and are pended for further analysis by the claims team.

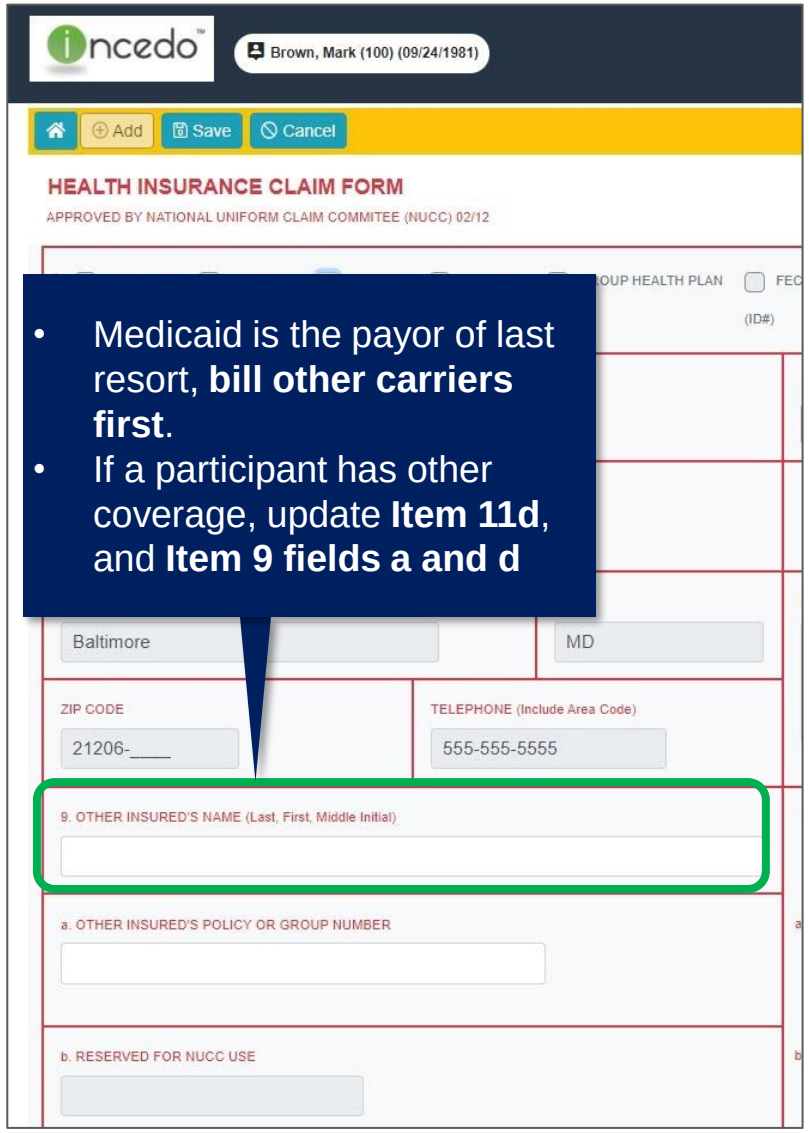
Do Resubmit	Do Not Resubmit
• Corrected claims (original claim previously paid) • Voided claims	• Claims without corrections or changes • Provider challenges a denied claim • Pended Claims

Optum

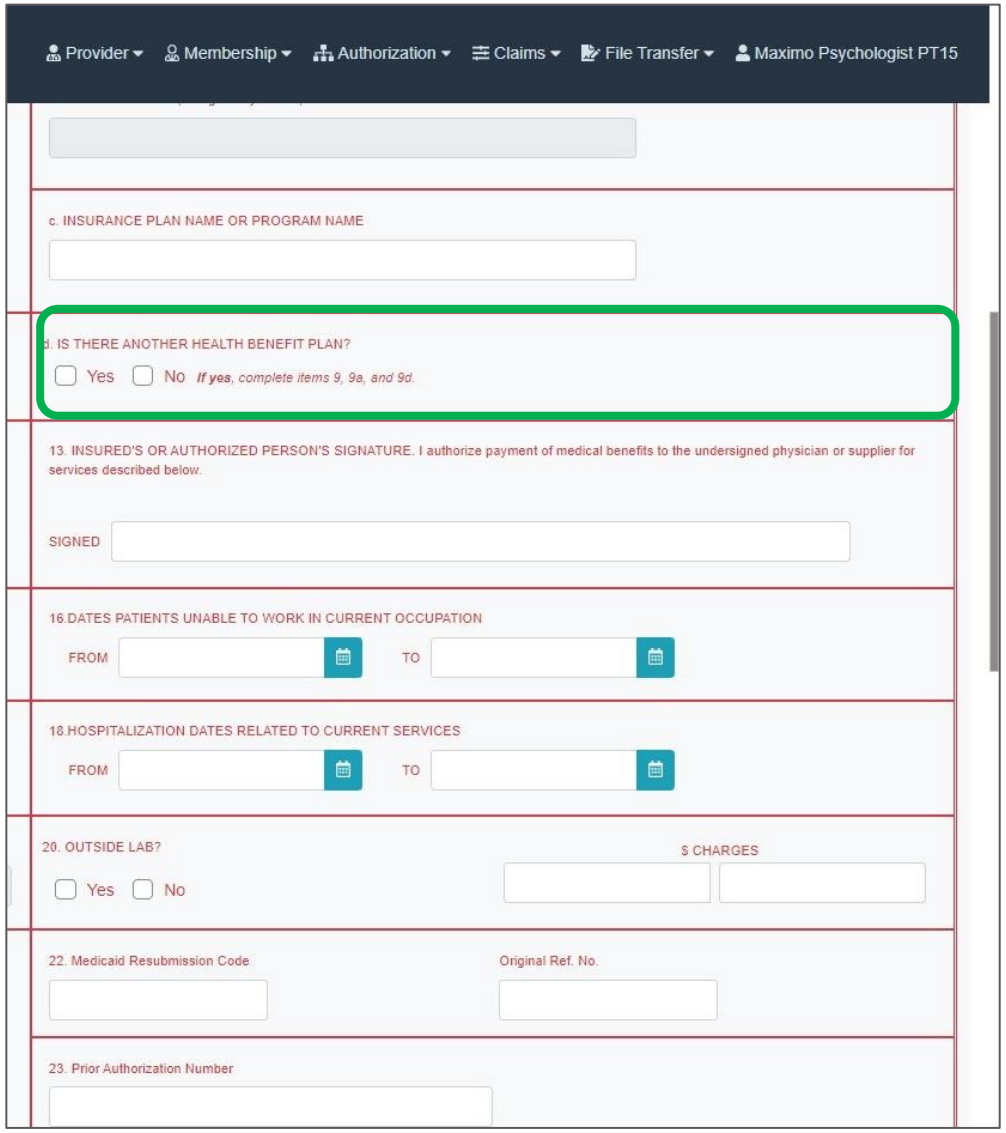
Corrected Claims or Requesting a Claim be Voided



Coordination of Benefits

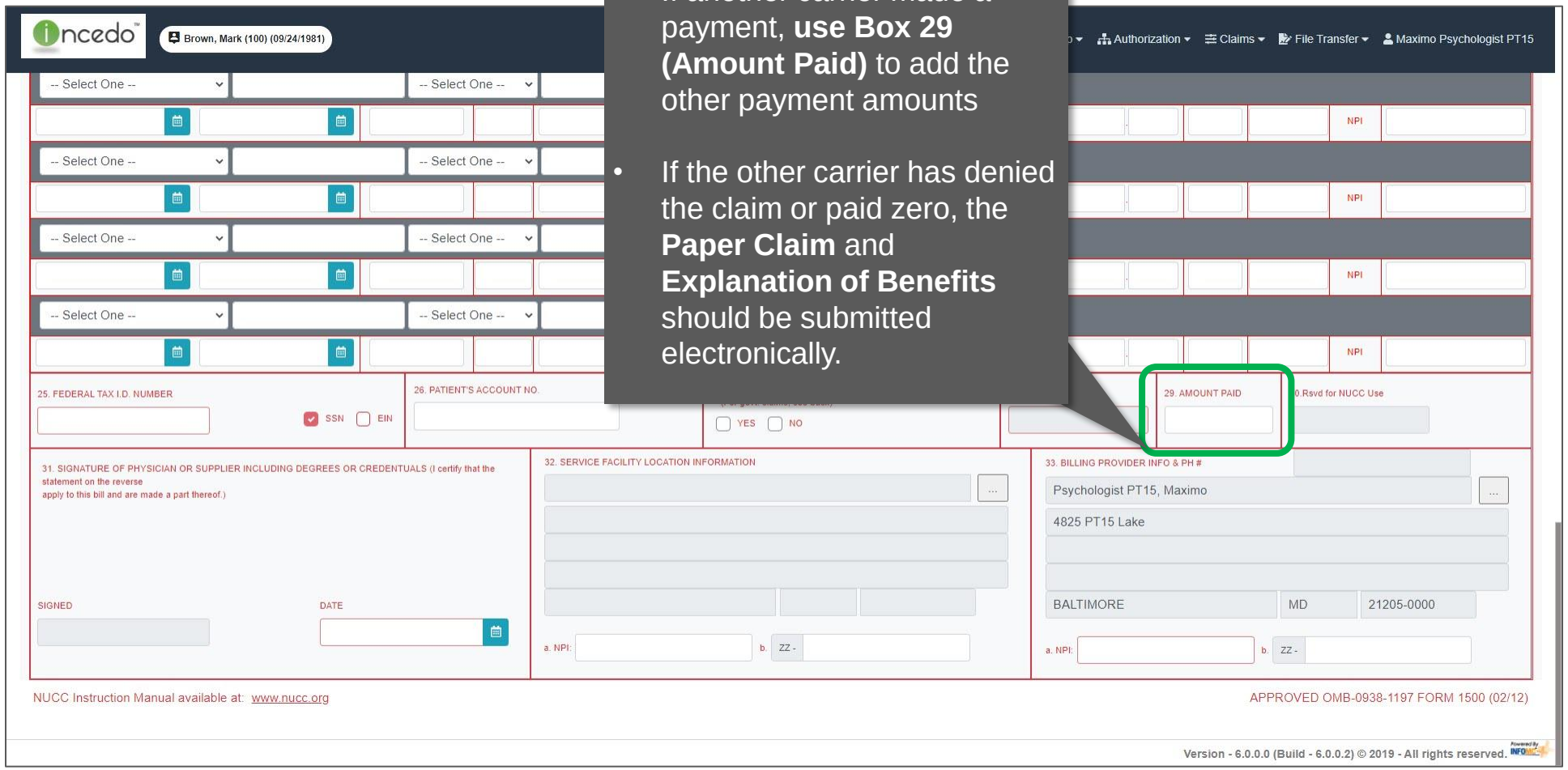


- Medicaid is the payor of last resort, **bill other carriers first**.
- If a participant has other coverage, update **Item 11d**, and **Item 9 fields a and d**



Coordination of Benefits

- If another carrier made a payment, **use Box 29 (Amount Paid)** to add the other payment amounts
- If the other carrier has denied the claim or paid zero, the **Paper Claim** and **Explanation of Benefits** should be submitted electronically.



Coordination of Benefits

Medicare is the primary payer

Medicare processes the claims and sends them electronically through a crossover claim to Medicaid.

Claim submission to Optum Maryland for participants with Medicare is ONLY required in the following instances:

Medicare benefits have exhausted or terminated

If this denial is received from Medicare, submit paper claim with the EOB to Optum for payment.

Medicare Non-covered service/provider type

For Services or Provider Types not covered by Medicare, providers are not required to submit to Medicare first and should submit to Optum for processing as primary.

Medicare Part A exhausted, Part B is active

Optum is primary payer for room and board, admission, and lab charges. Submit paper claim with EOB showing benefits are exhausted.

Medicare Part A is exhausted and there is no Part B coverage

Optum is primary payer for OP and IP charges. Submit the EOB showing benefits are exhausted.

Optum

Coordination of Benefits

Optum | Maryland

PROVIDER ALERT

NEW: Process for Submitting Coordination of Benefit Claims with Explanation of Benefits Via the Incedo Provider Portal

September 22, 2022

Target Audience: All Behavioral Health Providers

Issue:

Coordination of benefits (COB) claims for which the other carrier has paid $0 must currently be submitted on paper with the other carrier's explanation of benefits (EOB) via postal mail.

Resolution:

Optum Maryland has developed a process to allow electronic submission of COB claims with an EOB (when the other carrier has paid $0) through the IPP. This functionality will be implemented on Monday, September 26, 2022.

The action that providers will need to take when submitting COB claims via the IPP will differ depending on their method of claim submission. Please see detailed instructions for each method of submission below.

Please note, a process already exists to allow providers to submit COB claims through the IPP when the other carrier has partially paid.

When submitting claims via IPP using the CMS1500 format, and the other carrier has paid $0:

1. Enter the claim into the IPP.
2. Access the relevant "Participant Profile" and find the "Participant Documents" via the "Document" menu.
3. Upload the associated EOBs into the "Documents" section. Select the document type "Other Carrier EOB" from the available drop-down options.
4. Upload the EOB image (using the "Browse" button or "Drag it Here" functions as shown in the image below).
5. Associate the EOB image to the claim by indicating the participant's last name, first name, and date of service in the "Description" field. If submitting multiple

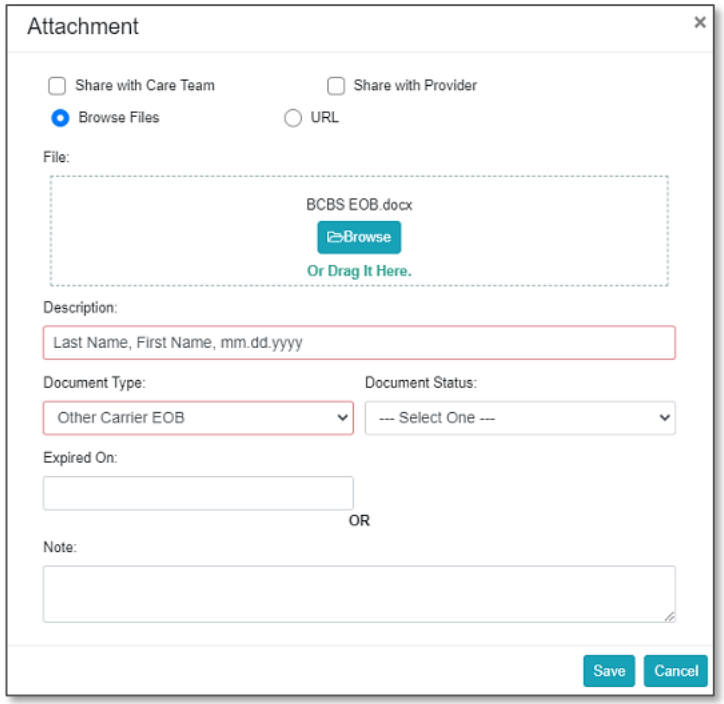
Click image to go to the Provider Alert

Resolution:

Optum Maryland has developed a process to allow electronic submission of COB claims with an EOB (when the other carrier has paid $0) through the IPP. This functionality will be implemented on Monday, September 26, 2022.

The action that providers will need to take when submitting COB claims via the IPP will differ depending on their method of claim submission. Please see detailed instructions for each method of submission below.

Please note, a process already exists to allow providers to submit COB claims through the IPP when the other carrier has partially paid.



- **Find the correct participant's profile.**
- **Attach the EOB to the participant's documents.**

Additional Resources

Contact Provider Relations for:

Assistance navigating claims process

Help resolving claims problems

Contact Customer Service for:

Appeals receipt inquiry

Claim receipt inquiry

Claim processing/payment status

Request claim reprocessing/adjustment

Claim Escalation/Complex Claims

Authorization Status

- ✓ CMS-1500 Box 1a
- ✓ CMS-1500 COB Claims with an EOB
- ✓ CMS-1500 Claim Procedure
- ✓ Paper Claim Submission
- ✓ Claims Management QRG
- ✓ Entry of Diagnosis Codes on Claims
- ✓ PRA Claim Lines
- ✓ Claims Rejection Reports
- ✓ Claim Denials and Rejection QRG
- ✓ Reconsideration, Grievances, and Appeals for Reconciled Claims

Optum

Additional Resources

Once claims are processed and adjudicated, an exception/adjudication reason will be visible in the Incedo Provider Portal

Charge $	Approved $	Units	Exception/Adjudication Reason
$125.00	$0.00	1	14 – Service Payable by other Primary Carrier
$119.00	$0.00	1	
$79.00	$0.00	1	

Incedo and CARC Denial Code Description Crosswalk

Incedo Explanation Code	Incedo Description	CARC Code	CARC Description
1	Contract Amount	45	Charge exceeds fee schedule/maximum allowable or cont
14	Service Payable by other Primary Carrier	22	This care may be covered by another payer per coordinati
15	Member's Coverage Not in Effect on Date of Service	27	Expenses incurred after coverage terminated.
16	Date of Service Not Covered/Authorized	96	Non-covered charge(s). At least one Remark Code must b
21	Claim submitted after filing limit.	29	The time limit for filing has expired.
22	Medical Service. Please submit to MCO	289	Services considered under the dental and medical plans.
40	Service submitted does not match auth on file	284	Precertification/authorization/notification/pre-treatment nu
44	Please submit Primary Carrier's EOB for service	22	This care may be covered by another payer per coordinati
55	Frequency of Authorization Exceeded	198	Precertification/authorization exceeded.
61	Units exceed authorized/daily limit allowed	198	Precertification/authorization exceeded.
62	Charge exceeds allowed amount for this service	45	Charge exceeds fee schedule/maximum allowable or cont
76	Diagnosis does not correspond to Procedure Code	11	The diagnosis is inconsistent with the procedure.
79	Payment is denied when billed by this Prov Type	170	Payment is denied when performed/billed by this type of p
87	Diagnosis code not effective on date of service	146	Diagnosis was invalid for the date(s) of service reported.

Provider Remittance Advice (PRA) will contain the Incedo Exception reason along with the Claim Adjustment Reason Code (CARC)

Click here to review the Provider Alert

Optum