

CAREOREGON MENTAL HEALTH TRANSITION FREQUENTLY ASKED QUESTIONS (FAQ'S)

August 25, 2011

Q1. How do I know who to bill?

A1. This is determined by claim date of service. Services with a begin date of service of September 1st, 2011 are the responsibility of CareOregon. Services prior to September 1st are handled through OptumHealth.

Q2. Do I need an authorization?

A2. Prior Authorization is not required for outpatient services for Medicare covered services. Notification is required for inpatient hospitalization by census or facesheet. Fax notifications to (503) 416-4723. **Please Note:** Facility claims submission rules are determined by admission date. Admits and services prior to 9/1/2011 are billed to OptumHealth and subject to OptumHealth processing guidelines.

Q3. How do I obtain benefit, eligibility and claim status/questions?

A3. Contact OptumHealth for services rendered prior to September 1, 2011 at 1-800-577-7244

Services with a date of service of September 1, 2011 and forward can be verified with CareOregon through several options:

- Call CareOregon Customer Service at 503-416-4100 or 800-244-4840
- *CareOregon Connect* our provider portal allows you to view authorization status, confirm eligibility, remittance advice, provides coding help, claim status and detail
- Claim questions can be addressed to Customer Service or emailed to claimshelp@careoregon.org
- Claim Appeals can be faxed to 503-416-8112

Q4. How do I submit a claim to CareOregon?

A4. Claims can be submitted electronically or paper claims can be mailed to CareOregon

- Claims Address: P.O. Box 40328 / Portland, OR 97240-9934
- Electronic (EDI) Payer ID # 93975. You can contact Emdeon directly if you have further questions regarding billing electronically at 1-877-363-3666
- Corrected claims can be faxed to 503-416-8115 (**Please Note:** the claim must clearly be noted as a "corrected" claim and/or use the bill type to reflect corrected claim)