



Network Provider Newsletter Quarter 1 2023



Important

- ✓ **Reminder of the upcoming PRISM updates and freeze**
 - Both the Utah Department of Health Medicaid website and the January Medicaid information bulletin (MIB) give important information about the upcoming PRISM Freeze, and updates.
 - The claim adjudication process for Optum Medicaid will not be directly affected during the upcoming PRISM freeze.
- ✓ **Medicaid eligibility is to be checked monthly per the Optum Provider Manual for Medicaid Services. (Pg. 36)**

Reminders

- ⇒ The claim adjudication calendar for 2023 is now available on our website under the “manuals, guidelines and policies” drop-down.
- ⇒ Please log in to Provider Connect every 45 days. Otherwise, you will be moved to inactive status.
- ⇒ Demographic information for your practice can be updated through Provider Express. In addition, please notify the network email box of any address or phone number changes so we can update our provider referral resources.



Training Calendar Upcoming OQ/ YOQ training

Beginner sessions

March 1st, 2023
12:00 PM to 1:30 PM

March 8th, 2023
9:00 AM to 10:30 AM

Advanced Sessions

March 2nd, 2023
9:00 AM to 10:30 AM
(Includes a brief recap of the foundations of OQ® Measures and how to incorporate the results into treatment planning)

March 15th, 2023
12:00 PM to 1:30 PM
(Includes hands-on treatment planning exercises, building on the foundations of OQ® Measures. Attendance at previous trainings and experience using the OQ® and/or Y-OQ® strongly recommended.)

Comprehensive In-person Session

Beginner and Advanced.
Maximizing OQ® Analyst
presented by the OQ® Measures team

March 9th, 2023
9:00 AM – 3:00 PM

Things to remember about treatment plans:

- ⇒ **Goals** - in the member's voice and reflect medical necessity and demonstrate cultural considerations and cultural barriers were addressed.
- ⇒ **Objectives** - SMART (specific, measurable, actionable, relevant, time specific).
- ⇒ **Reviews** - take place when objectives or goals are achieved or are no longer relevant. They are completed with the member, reflect treatment progress, and provide the clinical rationale for ongoing treatment.
- ⇒ **Changes** - expected if a member is not progressing.
- ⇒ **Methods** - prescribe amount, frequency, duration of each treatment method and includes provider type and place of service.
- ⇒ **Outpatient services** - at least one goal present in the record prior to services being provided. (SLCo only)

Timely Filing:

All claims, regardless of format and submission, must be submitted within 90 days of date of service. This does NOT apply to Retro Reviews or situations where Medicaid is the secondary payor. All other situations will be reviewed on a case-by-case basis.

Interpretive Services:

Information regarding Interpretive Services and how to access an interpreter can be found in the Utah Medicaid Provider Manual, under the “Medical Interpretive Services” and the “Guide to Medical Interpretive Services.”