# Autism Network Commercial Solo/Agency Provider Quick Reference Guide

## Electronic Claims Submission

All Autism/ABA Claims must be:
- Submitted on a Form 1500 (v.02/12) claim form
- Submit electronically via Provider Express [providerexpress.com](http://providerexpress.com) using the “Claim Entry” transaction feature
- Submit electronically using an EDI clearinghouse and payer ID# 87726
- Submitted within 90 days of date of service
- If unable to file electronically, paper claims should be mailed to the address on the back of the Member’s card

## Affiliate Claims Submission

All affiliate claim submissions should be mailed to the address on the back of the Member’s ID card:
- All autism services must be billed on a Form 1500
- Submission must occur within 90 days of date of service

## Claim Status

Claim status can be obtained by calling the Claims Customer Service Center:
- Optum – [1-800-557-5745](tel:1-800-557-5745) or by logging in to [providerexpress.com](http://providerexpress.com)
- Affiliate Members – Call the number on the back of the Member’s ID card

## Provider Appeals Process

Claim appeals process:
- Process for appeal will be detailed in the Member’s Rights Enclosure which accompanies the Explanation of Benefit (EOB) denial notice sent to the Provider and the Member
- Appeals must be received within 180 days from the date of disposition on the remittance report (Explanation of Benefits)

## Provider Assistance

Provider Service Line: **1-877-614-0484**
The Provider Service Line is available from 8 a.m. – 8 p.m. EST Monday through Friday, and can assist and/or triage on the following issues/questions you may have:
- Demographic changes
- Contract questions
- Fee schedule requests
- Termination requests
- Claim issues
- Tax ID changes

## Prior Authorization Eligibility Verification

All ABA services require prior authorization:
- Verify benefits/eligibility online at [providerexpress.com](http://providerexpress.com) or call the Behavioral Health number located on the back of the Member’s ID card
- Online assessment request at [optumpeeraccess.secure.force.com/ABAassessment/](http://optumpeeraccess.secure.force.com/ABAassessment/)
- Ongoing Prior Authorization obtained by:
  - Calling ABA-dedicated clinical team at **1-866-830-0325**, or
  - Indiana Providers only, faxing treatment plan to **1-888-541-6691**, or
  - Indiana, Ohio, Washington, Tennessee, New Mexico and Arizona providers only, submitting treatment plan online at [optumpeeraccess.secure.force.com/ABAtreatment/](http://optumpeeraccess.secure.force.com/ABAtreatment/)
- Authorization status can be viewed online at [providerexpress.com](http://providerexpress.com)

## Provider Portal

Visit Autism / ABA Corner at [providerexpress.com](http://providerexpress.com)

## Disclaimer

Information contained herein is subject to change. Please contact the Provider Service Line: **1-877-614-0484** with any questions.