



Provider Service Quick Guide Neighborhood Health Plan of Rhode Island

<p style="text-align: center;">Call Center for Optum</p>	<table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="background-color: #444; color: white;">Product</th> <th style="background-color: #444; color: white;">NHP of RI</th> </tr> </thead> <tbody> <tr> <td>INTEGRITY</td> <td style="text-align: center;">1-401-443-5995</td> </tr> <tr> <td>Medicaid</td> <td style="text-align: center;">1-401-443-5997</td> </tr> <tr> <td>Commercial</td> <td style="text-align: center;">1-833-470-0578</td> </tr> </tbody> </table>	Product	NHP of RI	INTEGRITY	1-401-443-5995	Medicaid	1-401-443-5997	Commercial	1-833-470-0578
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<p style="text-align: center;">Websites & What's Available</p>	<p>providerexpress.com:</p> <ul style="list-style-type: none"> • Demographic Updates • Guidelines and Policies • Best Practice Guidelines • Level of Care Guidelines • Recovery & Resiliency Toolkit • Network Manual • Trainings and Webinars • Sentinel Events Reporting Form 								
<p style="text-align: center;">Claims Submission</p>	<p><u>Paper Claim submission:</u> Optum Behavioral Health P.O. Box 30760 Salt Lake City, UT 84130-0760</p> <p>Claims must be submitted within 90 days from the date of service</p>								
<p style="text-align: center;">EDI</p>	<p>Payer ID: 87726 EDI Support: 1-800-210-8315 or email supportEDI@uhc.com</p>								
<p style="text-align: center;">Electronic Payments & Statements (EPS)</p>	<p>It's quick and easy, go to myservices.optumhealthpaymentservices.com/registrationSignIn.do or call EPS Customer Support phone number: 1-877-620-6194</p>								
<p style="text-align: center;">Best Practice Guidelines</p>	<p>We have adopted Best Practice Guidelines, which were developed by nationally recognized organizations. Provider Express > Guidelines/Policies & Manuals > Best Practice Guidelines</p>								



Utilization Management Guidelines

Additional details about utilization management guidelines are located in the **Optum National Network Manual**.

Authorization/Notification Requirements – Higher Levels of Care

Commercial/Integrity/Medicaid
<p>Inpatient Mental Health and Substance Use inclusive of :</p> <ul style="list-style-type: none"> • Residential Services Mental Health and Substance Use • Inpatient Substance Use Detox • Electroconvulsive therapy • Partial Hospitalization Mental Health and Substance Use

Authorization Requirements - Outpatient Levels

Commercial	Integrity	Medicaid
<ul style="list-style-type: none"> • Intensive Outpatient Services • Autism Services • Crisis Stabilization Unit/Observation • Electroconvulsive therapy • Psychological testing • Transcranial magnetic stimulation 	<ul style="list-style-type: none"> • Assertive Community Treatment* • OTP Health Homes* • Mental Health Psychiatric Rehabilitative Residence MHPRR* • Integrated Health Homes* 	<ul style="list-style-type: none"> • Intensive Outpatient Services • Crisis Stabilization Unit/Observation • Electroconvulsive therapy • Psychological testing • Transcranial magnetic stimulation • Integrated Health Homes* • Assertive Community Treatment* • OTP Health Homes* • Mental Health Psychiatric Rehabilitative Residence MHPRR* • Community Based Detox • Day/Evening Treatment

*Authorization must be obtained from Department of Behavioral Healthcare and Developmental Disabilities and Hospitals, Optum will not issue authorizations