



PROVIDER ALERT

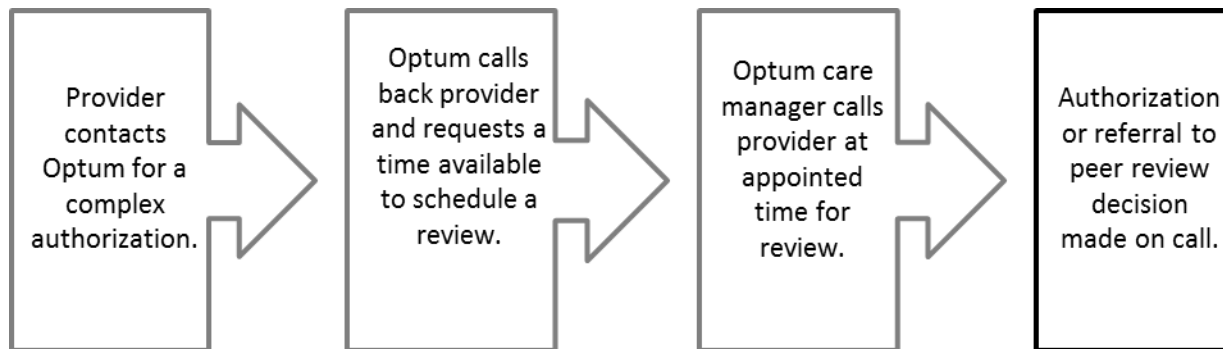
Call Back Process and Other Care Management Improvements

May 13, 2014

We appreciate the feedback that we have received from providers regarding our care management process. This collaboration with providers has allowed us to implement key initiatives that will help reduce the administrative burden for providers. One of these changes is the call back process.

This call back system is specifically for providers requiring more complex authorizations. With this system, Optum calls back a provider who is in need of a complex authorization at a mutually agreed upon time.

Call Back Process:



Note: Per Optum's contract with IDHW, for standard authorization decisions Optum must provide notice as expeditiously as the enrollee's health condition requires and within State-established timeframes that **may not exceed 14 calendar days following receipt of the request for service.**

As part of streamlining this process, we will be adding additional staff to make call back appointments. In addition, we are also updating templates to decrease the amount of time spent on collecting information for a clinical review. These templates will be made available by May 15 at optumidaho.com.

We have appreciated your patience throughout this process improvement plan. We will continue to partner with providers to create improvements to the prior authorization process and will communicate those improvements as they are made.

If you have questions or additional feedback to share, you may contact the Optum Idaho Clinical Team at 855-202-0983 and press option #1 for treatment and authorizations.

United Behavioral Health, operating under the brand Optum