



Optum Alaska

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Alaska Medicaid Provider Update

Claims Rejection When Submitted with No EOB – Effective July 1, 2022

Optum's Claim Processing System is being updated related to claims that are submitted with no EOB (Explanation of Benefits) when Participant has other insurance (TPL) on file.

What is changing?

Effective July 1, 2022, when a claim is submitted to Optum that does not have an EOB attached for a Participant with a TPL insurance policy on file, the claim will be rejected. This change is to ensure alignment with CMS guidelines.

Why is this changing?

Per CMS (Centers for Medicare and Medicaid Services) 42 CFR § 433.139(b)(1) – *Except as provided in paragraph (e) of this section. If the agency has established the probable existence of third-party liability at the time that claim is filed, the agency must reject the claim and return to the provider for a determination of the amount of liability. The establishment of third-party liability takes place when the agency received confirmation from the provider or a third-party resource indicating the extent of third-party liability. When the amount of liability is determined, the agency must then pay the claim to the extent that payment is allowed under the agency's payment schedule exceeds the amount of the third party's payment.*

What action do providers need to take?

Providers will need to ensure that all claims submitted to Optum have an EOB, if required.

If electronic (examples: clearing house, provider express), providers will need to submit other insurance information in the appropriate fields. More information can be found at the following link:

<https://www.providerexpress.com/content/dam/ope-provexpr/us/pdfs/trainingMain/guidedTour/LongFormOvrviewBH4041.pdf>.

If paper claims are submitted, providers will need to include the paper copy of the EOB.

Questions? Please contact, Provider Relations at akmedicaid@optum.com