



**Behavioral Health Services
Optum Salt Lake County
Medicaid Member Handbook**

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Introduction

This handbook is for Medicaid members who are enrolled in, Utah Medicaid's Prepaid Mental Health Plan (PMHP). If you live in Salt Lake County, Salt Lake County Division of Behavioral Health Services (Salt Lake County DBHS) is your PMHP administrator. Salt Lake County DBHS uses Optum to help you get mental health and substance use disorder (SUD) services. While you live in Salt Lake County, you must get your mental health or SUD services through the Optum group of providers. If you have another kind of Medicaid (Targeted Adult Medicaid (TAM) or Adult Medicaid Expansion) call Utah Medicaid at 1-800-662-9651 or 1-801-538-6155.

This handbook explains the Medicaid mental health and SUD services that the PMHP covers. You can also get this handbook and the Optum Medicaid Provider Directory on the Optum website optumhealthslco.com. The Provider Directory has information on the languages providers speak and other details about each provider.

You can get this handbook and other written information for free in your language and in other formats (large print, audio, electronic, and other formats). For help, call 1-877-370-8953.

Introducción

Este manual es para miembros de Medicaid quienes están inscritos en el Plan de Salud Mental Prepagado (PMHP) de Utah Medicaid. Si usted vive en el condado de Salt Lake, su administrador de PMHP es Salt Lake County Division of Behavioral Health Services (Salt Lake County DBHS). Salt Lake County DBHS usa a Optum para ayudarle a recibir servicios de salud mental y para trastorno por consumo de sustancias. Mientras usted viva en el condado de Salt Lake, debe recibir sus servicios de salud mental o para trastorno por consumo de sustancias a través del grupo de proveedores de Optum. Si tiene otro tipo de Medicaid (Medicaid dirigido a adultos (TAM) o Adult Medicaid Expansion) comuníquese con Medicaid al 1-800-662-9651 o al 1-801-538-6155.

Este manual explica los servicios de salud mental y para trastorno por consumo de sustancias de Medicaid que cubre el PMHP. Usted también puede obtener este manual y el directorio de proveedores de Medicaid de Optum en el sitio de internet de Optum optumhealthslco.com. El directorio de proveedores tiene información sobre los idiomas que hablan los proveedores, así como otros detalles sobre cada proveedor.

Usted puede obtener este manual y cualquier otra información escrita en su idioma y en otros formatos (letra grande, audio, electrónico, y otros formatos) sin costo para usted. Para obtener ayuda, llámenos al 1-877-370-8953.

Other Languages

Free language assistance services are available to you. For help, call Optum at 1-877-370-8953.

Spanish

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llámenos al 1-877-370-8953.

Chinese

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-877-370-8953。

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-877-370-8953.

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-877-370-8953 번으로 전화해 주십시오.

Navajo

Díí baa akó nínízin: Díí saad bee yáníłti'go **Diné Bizaad**, saad bee áká'ánída'áwo'dęę', t'áá jiik'eh, éí ná hólq, koji' hódíłnih 1-877- 370-8953.

Nepali

ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निम्ति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ । फोन गर्नुहोस् 1-877-370-8953 ।

Tongan

FAKATOKANGA'I: Kapau 'oku ke Lea-Fakatonga, ko e kau tokoni fakatonu lea 'oku nau fai atu ha tokoni ta'etotongi, pea teke lava 'o ma'u ia. Telefoni mai 1-877-370-8953.

Serbo-Croatian

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-877- 370-8953.

Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1- 877-370-8953.

German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-877- 370-8953.

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-877-370-8953.

Cambodian

ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសាដោយមិនគិតល្អល គឺអាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ 1-877-370-8953.

French

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-877-370-8953.

Japanese

注意事項 : 日本語を話される場合、無料の言語支援をご利用いただけます。1-877-370-8953。

Arabic

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-877-370-8953.

Interpreter Services

What if I need interpreter services?

We know that it can be hard to talk with your provider if your first language is not English or you are deaf, hard of hearing, or have a hard time speaking. You can ask us for an interpreter. Interpreters are free and available in all languages, including sign language. An interpreter can help you over the phone and be with you at your mental health or SUD visits. The interpreter will help you and your provider understand each other. Also, we might have providers who speak or sign your language.

To ask for an interpreter or a provider who can speak or sign your language, call Optum at 1-877-370-8953 and press prompt 3 to talk to a Care Advocate.

¿Qué debo hacer si necesito servicios de interpretación?

Sabemos que puede ser difícil hablar con su proveedor si su primer idioma no es inglés o es sordo, tiene problemas de audición, o tiene dificultad para hablar. Usted puede pedir por un intérprete. Intérpretes son gratuitos and están disponibles en todos los lenguajes, incluyendo el lenguaje de señas. Un intérprete le puede ayudar por teléfono y acompañarlo a sus citas de la salud mental y para trastorno por consumo de sustancias. El intérprete puede facilitar la comunicación entre su proveedor y usted. También puede que tengamos proveedores que hablan su idioma o el lenguaje de señas. Para pedir por un intérprete o un proveedor que hable su idioma, llame a Optum al 1-877-370-8953 y seleccione el número 3 para hablar con un representante.

What if I want to call Optum and I am deaf, hard of hearing, or have a hard time speaking?

You can call Relay Utah at 711 or 1-800-346-4128. If you have a hard time speaking, you can also call Speech-to-Speech Relay Utah at 1-888-346-5822 and a trained person will help you. If you speak Spanish and are deaf, hard of hearing, or have a hard time speaking, call Spanish Relay Utah at 1-888-346-3162.

If you need a telecommunications device (TTY), go to relay.utah.gov or call the Utah Public Service Commission at 1-866-772-8824. In some cases, the TTY device might be available at little or no cost to you.

¿Qué sucede si deseo llamar a Optum y soy sordo, tengo problemas de audición, o tengo dificultades para hablar?

Puede llamar a Relay Utah al 711 o al 1-800-346-4128. Si le resulta difícil hablar, también puede llamar a Speech-to-Speech Relay Utah al 1-888-346-5822 y una persona capacitada lo ayudará. Si habla español y es sordo, tiene problemas de audición, o le cuesta trabajo hablar, llame a Spanish Relay Utah al 1-888-346-3162.

Si necesita un dispositivo de telecomunicaciones (TTY), vaya a relay.utah.gov o llame a la Comisión de Servicios Públicos de Utah al número gratuito 1-866-772-8824. En algunos casos, el dispositivo TTY puede estar disponible a un costo pequeño o sin costo para usted.

Services Available

What mental health and substance use disorder services are covered?

Inpatient hospital care for mental health problems and outpatient services for mental health and SUD problems are covered. Outpatient mental health and SUD services include residential, day treatment, intensive outpatient and standard outpatient services.

Outpatient mental health and SUD services include:

- Evaluations
- Psychological testing
- Individual and group therapy
- Family therapy
- Individual and group therapeutic behavioral services
- Medication management
- Individual skills training and development
- Psychosocial rehabilitation services (day treatment)
- Peer support services
- Detoxification from substances in a social setting
- Recreational therapy services
- Targeted case management services

Are any other services covered?

Yes, other covered services are:

- Electroconvulsive therapy (ECT)
- Interpreter services

These are some other services that can be covered based on your needs.

- Respite care
- Psychoeducational services
- Personal services
- Supportive living

If you want more information on any of these services, call Optum at 1-877-370-8953, and press prompt 3. A Care Advocate will help you.

Services are provided by doctors, nurses, psychologists, licensed clinical social workers, clinical mental health counselors, SUD counselors, recreational therapists peer specialists, targeted case managers, etc.

Your provider will offer you services after they meet with you to talk about what you need. Your provider may recommend outpatient services, more intensive outpatient services, day treatment services, or treatment in a residential setting. If your provider thinks a different provider might be better for you, they will let you know.

Getting Mental Health or Substance Use Disorder Services

How do I get mental health or substance use disorder services?

If you or your child needs mental health or SUD services, you can see the Provider Directory at optumhealthslco.com. The directory has providers' addresses, phone numbers, services they provide, languages they speak and information on whether they are taking new clients.

After you choose a provider, call the provider to schedule your first appointment. Some services can be provided outside of regular business hours.

If you have any questions or need help finding a provider, call Optum at 1-877-370-8953 and press prompt 3. A Care Advocate will help you find a provider.

How quickly can I be seen?

Emergency Services

If you need emergency care, you will be seen right away. See *Emergency Services*, on page 11 for information on how to get emergency care.

Urgent Care

If you need urgent care, the provider will offer you an appointment within 5 working days.

Non-Urgent Care

If you do not have an urgent need for care, the provider will offer you an appointment within 15 working days. If your condition changes and you think you need to be seen sooner, call the provider. If the provider cannot see you sooner, call Optum at 1-877-370-8953 and press prompt 3 to talk to a Care Advocate. We will talk about your needs. We will help you find a different provider who can see you sooner.

Do I have to get approval before I get outpatient mental health or substance use disorder services from a provider in the Optum provider directory?

Optum does not need to pre-approve most outpatient mental health or SUD services. If Optum needs to pre-approve the service your provider wants to give you, Optum or your provider will let you know.

Can I get outpatient mental health or substance use disorder services from providers that are not in the Optum Provider Directory?

In some situations, you can go to a provider that is not in the Optum provider directory. You and the provider must get pre-approval before you get the service. For more information, call Optum at 1-877-370-8953 and ask to speak to an Optum team member.

When will Optum make a decision on a service that needs pre-approval?

If we need to pre-approve services, we can usually decide within 14 calendar days. If you or your provider want us to take more time to make a decision, let us know. Sometimes we might need more time to make a decision. Medicaid lets us take up to another 14 calendar days to make a decision. If we need more time, we will let you know in writing. If you are unhappy that we need more time, you can file a grievance. (See *Grievances*, page 19.)

If you or your provider think it is important to make a decision quickly, and we agree, we will try to make a decision in 72 hours. If you want us to take more time, or if we need more time to make a decision, Medicaid lets us take up to 14 more calendar days.

If we do not make a decision as soon as Medicaid wants us to, or we do not approve the service or approve less than you or your provider asked for, this is an adverse benefit determination. We will also send you a Notice of Adverse Benefit Determination letter explaining that you can ask for an appeal of this decision. (See *Adverse Benefit Determinations*, page 15 and *Appeals*, page 16.)

Are there any outpatient mental health and substance use disorder services that do not need pre-approval?

You do not need our approval to get emergency services. (See *Emergency Services*, page 11.)

You do not need our approval to get mental health or SUD services from a federally qualified health center (FQHC).

If you are an American Indian or Alaska Native, you do not need our approval to get mental health or SUD services from an Indian health provider. An Indian health provider is Indian Health Services, an Indian Tribe, Tribal Organization, or an Urban Indian Organization.

Can I get a second opinion?

Yes. You can get a second opinion about your mental health or SUD problem or services. You will not have to pay for a second opinion. If you would like a second opinion, you can go to another provider. If you want help finding a provider, call Optum at 1-877-370-8953 and press prompt 3 to talk to an Optum team member.

Services not covered by Optum

What services might be covered by Medicaid but not by Optum?

Some of the services that might be covered by Medicaid or your physical health plan but not by Optum are medical care, including medical detoxification in hospital for a SUD problem, dental care, vision care, and pharmacy. If you have questions about these services or any other services that might be covered by Medicaid, call your physical health plan or Medicaid at 1-800-662-9651.

Also, methadone provided by an Opioid Treatment Program (OTP) is not covered by Optum. OTPs can bill Utah Medicaid directly for the methadone service. You do not have to pay for the methadone.

Transportation

How can I get help with transportation to my outpatient mental health services or substance use disorder services?

If you do not have your own ride to services, you may be able to get help with rides.

- Ask for a Utah Transit Authority (UTA) Transit Card (bus pass) by calling Medicaid Health Program Representatives (HPRs) at 1-844-238-3091.
- If UTA bus service is not in your area or if you cannot use the bus for some reason, ModivCare may be able to help with rides. Call ModivCare at 1-855-563-4403.
- UTA Flex Trans is a special bus service that may be able to help. Call Flex Trans at 1-877-882-7272

To learn more about help with rides, see the *Utah Medicaid Member Guide* at [Medicaid.utah.gov](https://www.Medicaid.utah.gov).

To ask for a copy, or if you have questions, call Utah Medicaid at 1-866-608-9422.

You can also call Optum at 1-877-370-8953 and press prompt 3 to talk to a Care Advocate about your needs.

Emergency Services

Prior authorization is not required for emergency services.

What is an emergency?

- When you think your life is in danger
- When you believe you might harm yourself or others
- When your safety or others' safety is at risk

What are emergency services?

These are mental health or SUD services given to treat your emergency.

How do I get emergency services?

Optum has 24-hour emergency services seven days a week.

- Call or text the national Suicide Prevention and Crisis Lifeline at 988, 24 hours a day, 7 days a week, including holidays. You will be connected with a Utah crisis worker.
- If you are already getting services from an Optum provider, you can call your provider on weekdays. If your provider is not available, call or text the national Suicide Prevention and Crisis Lifeline at 988.
- Also, day or night, you can go to any hospital emergency room (ER) for emergency care. Even if you are outside Salt Lake County, go to the nearest hospital ER.

You do not need approval from Optum before you get emergency services.

Mental Health Care in a Hospital

How do I get mental health care in a hospital?

Mental health care in a hospital after an emergency is usually called post-stabilization care services.

Optum uses these hospitals in Salt Lake County:

- **Huntsman Mental Health Institute (HMHI) (formerly known as UNI)**
501 Chipeta Way, Salt Lake City
- **Jordan Valley Medical Center, West Valley Campus**
3460 Pioneer Parkway, West Valley City
- **St. Mark's Hospital**
1200 East 3900 South, Salt Lake City
- **Salt Lake Behavioral Health (Ages 13-17 only)**
3602 South 700 East, Salt Lake City

If you think you need hospital care, call Optum at 1-877-370-8953 or go to the nearest hospital.

If one of these hospitals or another hospital treats your emergency and wants to admit you to the hospital, the hospital must call Optum for approval. It's important to let the hospital know Optum is your Medicaid mental health plan so they can call Optum if they want to admit you. Hospitals can call Optum at 1-877-370-8953. We might have you stay at that hospital or send you to another hospital.

Payment for Services

Will I have a co-payment (co-pay) for outpatient services?

There are no co-pays for outpatient mental health or outpatient SUD services for any Medicaid members.

The *Utah Medicaid Member Guide* has information on co-pays, including information on groups of Medicaid members that do not have co-pays on any Medicaid services.

Hospital Emergency Room (ER) Services

Will I have to pay for emergency services?

You will not have to pay for emergency services in a hospital ER. If you have co-pays, there is a co-pay if you use the ER when it is not an emergency.

Mental Health Care in a Hospital

Will I have to pay for mental health care in a hospital?

If you have co-pays, the hospital can charge you a \$75 co-pay for each hospital stay but you will not have to pay more than the co-pay.

Some Medicaid members do not have co-pays. You can look at the *Utah Medicaid Member Guide* for information on individuals who do not have co-pays.

Outpatient Mental Health and Substance Use Disorder Services

Will I have to pay for outpatient mental health or substance use disorder services?

Non-Emergency Outpatient Services

You might have to pay your provider for a non-emergency outpatient service if:

- You get a service that is not covered by Optum or Medicaid; or
- You or your provider do not get pre-approval for a service Optum needs to pre-approve, or Optum denies the pre-approval request or approves less than was asked for; or
- You do not go to an Optum provider.

If any of the above happens, your provider might ask you to pay for the service. You should only be billed for the service if all four things below are met:

- The provider has a written policy for billing all patients for services that are not covered, not just Medicaid patients;
- The provider tells you before you get the service that you will have to pay for the service;
- You agree to pay for the service; and
- There is a written agreement signed by you and the provider that says what the service is and how much you will have to pay.

NOTE: If Optum did not approve a service you or your provider asked for, you can ask for an appeal of this decision before you agree to pay the provider for the service. (See the *Appeals* section on page 16.)

You might also have to pay your provider for a non-emergency outpatient service if:

- You ask for and get services during an appeal or during a Medicaid fair hearing. You would only have to pay if the appeal or fair hearing decision is not in your favor.
- You are not on Medicaid when you get the service.

Emergency Outpatient Services

You will not have to pay for emergency outpatient services.

Ambulance Services for Emergency Care

You will not have to pay for ambulance services for emergency care.

Member Rights

What are my rights?

As a Medicaid member, you have the right to:

- Get information on the Prepaid Mental Health Plan that is easily understood.
- Get written information on the Prepaid Mental Health Plan in a language and format that is easily understood.
- Be treated with respect and dignity.
- Have your privacy protected.
- Get information on all treatment choices in a way that is clear, and you can understand.
- Receive information on the Prepaid Mental Health Plan in a language and format that is easily understood.
- Take part in treatment decisions about services, including the right to refuse treatment.
- Be free from restraint or seclusion if it is used these ways:
 - To coerce (force) or discipline;
 - As a reaction (to retaliate) or for convenience;
 - As specified in Federal regulations on the use of restraint and seclusion
- Get a copy of your behavioral health record(s). You can also ask that they be amended or corrected when allowed by federal law.
- Get services in the amount you need and when you need them.
- Be free to use your rights at any time and not be treated badly by Salt Lake County DBHS, Optum, or your provider if you do.

If you believe you have not been allowed to use these rights, you can contact:

- Optum SLCo Complaints Hotline: 1-877-370-8953
- Salt Lake County DBHS: 1-385-468-4747
- Utah Medicaid's Constituent Services: 1-877-291-5583

Non-Discrimination Policy

Salt Lake County DBHS and Optum have non-discrimination policies that follow federal civil rights laws. We will not treat you differently (unfairly) based on race, color, national origin, sex, sexual orientation, gender identity, religion, age, or disability.

If you believe you have been treated differently you can file a complaint.

You can file a complaint in person or by mail, fax, or email with the Optum Compliance Manager.

In Person or mail: 12921 S. Vista Station Blvd, #200, Draper, UT 84020

Phone: 1-877-370-8953

Fax: 1-801-982-3159

Email: slcoreviews@optum.com

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at:

Phone: 1-800-368-1019, 1-800-537- 7697 (TDD)

Email: OCRmail@hhs.gov

Online: ocrportal.hhs.gov/ocr/smartscreen/main.jsf or hhs.gov/ocr.

Mail: Centralized Case Management Operations
U.S. Department of Health and Human Services
200 Independence Avenue, SW Room 509F, HHH Building
Washington, D.C. 20201

If you want to email or mail your complaint to the Office for Civil Rights, you can write your complaint or you can use their complaint form available at: hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html.

If you need help filing a complaint, call Optum at: 1-877-370-8953 and press prompt 2 to talk to an Optum team member.

Member Responsibilities

What are my responsibilities?

- Keep your appointments and be on time.
- Call the provider 24 hours in advance if you need to cancel an appointment.
- Be involved in your treatment plan and care.
- Tell Optum and your Medicaid eligibility worker of changes in your address, phone number or insurance.
- Complete any surveys that Optum providers give you.
- Respect the property, comfort and confidentiality of clients and staff.
- Notify your treatment provider when you want to stop getting services.

Adverse Benefit Determinations

What are Adverse Benefit Determinations?

Adverse benefit determinations are when:

- Optum denies (turns down) or approves fewer services than you wanted.
- Optum denies all or part of a payment for a service that you might have to pay for.
- Optum or your provider does not offer your first appointment within the required amount of time for emergency, urgent or non-urgent care and you are not happy with this (see *Getting Mental Health or Substance Use Services* on page 9).
- Optum does not settle a complaint (grievance) you have with us as soon as Medicaid wants us to.
- Salt Lake County DBHS does not settle an appeal you have asked for as soon as Medicaid wants them to.
- Optum does not make a decision about approving services you have asked for as soon as Medicaid wants us to.

- Your provider reduces, suspends, or stops a service previously approved. If you agree with the change, it is not an adverse benefit determination. It is only an adverse benefit determination if you tell us you don't want the change.
- Optum denies your request to dispute a financial liability.

How will I know if Optum is making an Adverse Benefit Determination?

We will send you a letter called a Notice of Adverse Benefit Determination. If you disagree with our adverse benefit determination, you can ask for an appeal.

Appeals

What is an appeal?

An appeal is a review by Salt Lake County DBHS of an adverse benefit determination Optum made to see if we made the best decision. If the adverse benefit determination is because Salt Lake County DBHS did not settle your appeal as soon as Medicaid wants them to, they will send you a Notice of Adverse Benefit Determination letter. In the letter, they will explain that you can now ask for a Medicaid fair hearing and how and when to ask for one. (See *Medicaid Fair Hearings* on page 18.)

Who can ask for an appeal?

You, your legally authorized representative, or your provider can ask for the appeal.

When do I have to ask for an appeal?

Your Notice of Adverse Benefit Determination letter will give information on the appeal process, including how soon you must tell Salt Lake County DBHS you want an appeal. You must ask for an appeal within 60 calendar days from the date on the Notice of Adverse Benefit Determination letter.

If our adverse benefit determination was to reduce, suspend, or stop services we had already approved, and you want to keep getting the services during the appeal, you must ask for continuation of services on or before the later of the following:

- 10 calendar days of Optum sending the Notice of Adverse Benefit Determination letter to you;
or
- The effective date of our proposed decision to reduce, suspend, or stop services.

If you ask Salt Lake County DBHS for an appeal on time, and you let them know on time that you want to keep getting the services while they make a decision, you can keep getting the services. You might have to pay for the services if the appeal decision is not in your favor.

How do I ask for an appeal?

The Notice of Adverse Benefit Determination letter will tell you how to ask for an appeal.

You can ask for an appeal:

- in writing using the appeal request form we gave you with your Notice of Adverse Benefit Determination letter. Send your written appeal request to:
Salt Lake County Division of Behavioral Health Services
Quality Assurance Manager
P.O. Box 144575
2001 South State Street, Suite S2-300
Salt Lake City, UT 84114-4575
or email: SLCoAppeals@saltlakecounty.gov
or fax: 1-385-468-4740
- by calling Salt Lake County DBHS. Call them at 1-385-468-4707, Monday- Friday, 8:00 a.m. - 5:00 p.m. Ask to talk to the Quality Assurance Manager. Let them know you want to ask for an appeal.

What if I need help asking for an appeal?

If you need help, call Optum at 1-877-370-8953, Monday – Friday, 8:00 a.m. - 5:00 p.m. and ask to talk to the Compliance Manager.

When will Salt Lake County Division of Behavioral Health Services tell me the decision on my appeal?

Usually, Salt Lake County DBHS will give you a written decision no later than 30 calendar days from the day they get your appeal request. Sometimes they might need more time to make a decision. Medicaid lets them take up to another 14 calendar days to make a decision. If they need more time, they will let you know by phone as quickly as possible and in writing within two calendar days. Also, you or your provider might want them to take more time for some reason. If so, let them know.

Can I get a decision more quickly on my appeal?

If you or your provider thinks waiting 30 calendar days for their decision could harm your health, life, or ability to maintain or regain maximum function, you or your provider can ask for a quick appeal. This means Salt Lake County DBHS will usually make a decision within 72 hours. Sometimes they might need more time to make a decision. Medicaid lets them take up to 14 more calendar days to make a decision. If they need more time, they will let you know by phone as quickly as possible and in writing within two calendar days. Also, you or your provider might want them to take more time for some reason. If so, let them know.

If Salt Lake County DBHS denies your request for a quick appeal, they will let you know by phone as quickly as possible and in writing within two calendar days.

How do I ask for a quick appeal?

You or your provider can ask for a quick appeal by calling DBHS at 1-385-468-4707, Monday-Friday, 8:00 a.m. -5:00 p.m. Ask to talk to the Quality Assurance Manager. Let them know you want to ask for a quick appeal.

Medicaid Fair Hearings

What can I do if I am unhappy with the appeal decision?

If you are unhappy with Salt Lake County DBHS's decision on your appeal, or they cannot make a decision on your appeal as soon as Medicaid wants them to, this is what you can do:

- You, your legally authorized representative, or your provider can ask for a fair hearing with Medicaid. In the appeal decision letter, Salt Lake County DBHS will tell you that you can ask for a fair hearing.

The letter will tell you how and when to ask for the fair hearing. Salt Lake County DBHS will also give you the Medicaid fair hearing request form to send to Medicaid.

- At a fair hearing, you can speak for yourself, or you can have a relative, friend, lawyer, or anyone else speak for you. Before and during the fair hearing, you, and any person helping you, can present documents. Also, you, and any person helping you, can look at all the documents that will be used at the fair hearing.

When do I have to ask for a fair hearing with Medicaid?

In most situations, you must ask for a fair hearing within 120 days from the date of Salt Lake County DBHS' appeal decision letter.

If the fair hearing is about Optum's decision to reduce, suspend, or stop services Optum had already approved, and you want to keep getting the services during the fair hearing, you must:

- ask for a fair hearing within 10 calendar days after Salt Lake County DBHS sends you the appeal decision letter; and
- on the hearing request form, ask that the services be continued.

If you file your fair hearing request in time, and you ask to keep getting the services during the fair hearing, you may do so. You might have to pay for the services if the fair hearing decision is not in your favor.

How do I ask for a fair hearing with Medicaid?

You must ask for a fair hearing in writing. Fill out the fair hearing request form included with your appeal decision letter. You can also get a hearing request form from Medicaid by calling Medicaid at 1-801-538-6576 or at 1-800-662-9651.

What if I have questions or need help asking for a fair hearing with Medicaid?

Call Optum at 1-877-370-8953, Monday – Friday, 8:00 a.m. - 5:00 p.m., and ask to talk to the Compliance Manager.

Grievances (Complaints)

What if I have a complaint about Optum or a provider?

If you have a complaint about anything other than an adverse benefit determination, this is called a grievance. Examples of grievances are complaints about the quality of care, services given to you, rudeness of a provider or a provider not respecting your rights.

Who can file a grievance?

You, your legally authorized representative, or your provider can file a grievance. A grievance can be filed at any time.

How do I file a grievance?

- Tell your grievance to your provider or a staff member you feel comfortable with.
- Call the Optum Compliance Manager weekdays from 8 a.m. to 5 p.m. at 1-877-370-8953.
- Give your grievance in writing to your provider or other staff.
- Mail or fax your written grievance to Optum at:
 - Mail: Optum SLCo
12921 S. Vista Station Blvd., #200
Draper, UT 84020
 - Fax: 1-855-718-6743
 - Email: slcoreviews@optum.com
- Call Salt Lake County DBHS at: 1-385-468-4747 and ask to talk to Quality Assurance Manager
- If you don't want to talk to us or Salt Lake County DBHS about your grievance, you can call Medicaid Constituent Services weekdays at 1-801-538-6417 or 1-877-291-5583.

What if I have questions or need help filing my grievance?

Call Optum at 1-877-370-8953, weekdays between 8:00 a.m. and 5:00 p.m.

When will I get a decision on my grievance?

We will give you a decision no later than 90 calendar days from the day we get your grievance. Sometimes we might need more time to make a decision. Medicaid lets us take up to another 14 calendar days to make a decision. If we need more time, your provider or Optum will let you know by phone as quickly as possible and in writing within two calendar days.

Once we make a decision, your provider or Optum will either talk to you about the decision or we will send you a written decision.

Advance Health Care Directives

What if I am ill and can't make health care decisions?

You can give other people instructions about your decisions for your health care. This is called an "Advance Health Care Directive". This will tell us in writing what health care choices you want made if you get very sick and can't decide for yourself.

Once you have filled out the Advance Health Care Directive form, be sure to give a copy to all of your health care providers. You should also keep a copy and give one to your family members. If you would like the form or need more information, please call Optum at 1-877-370-8953, or talk to your provider or case manager.

If you have an Advance Health Care Directive and there is a problem with it being followed, call the Utah Department of Health and Human Services, at 1-801-273-2994 or 1-800-662-4157.

Privacy

Who can read or get copies of my medical record?

Optum and all of its providers follow federal laws about privacy of your mental health and SUD services record. Optum does not use or share your protected health information except as federal law allows. When allowed by federal law, only the minimum necessary information is shared. Your provider will talk with you about privacy when you first get services. If you have any questions about privacy, call Optum at 1-877-370-8953. For complete information, please see the Optum Notice of Privacy Practices at: optumhealthslco.com.

Fraud, Waste and Abuse

What is health care fraud, waste, and abuse?

Doing something wrong related to Medicaid could be fraud, waste, or abuse. We want to make sure that health care dollars are used the right way. Fraud, waste, and abuse can make health care cost more for everyone.

Some examples of fraud, waste, or abuse are:

By a Provider

- Billing for services that have not been provided.
- Overcharging a Medicaid member for covered services.
- Not reporting a patient's misuse of a Medicaid ID Card.

By a Medicaid Member

- Letting someone else use their Medicaid ID card.
- Changing the amount or number of refills on a prescription.
- Not being truthful to get on Medicaid.

How do I report fraud, waste or abuse?

You can contact:

Optum at: 1-877-370-8953

Provider Fraud, Waste, or Abuse

You can also contact the Utah Office of Inspector General of Medicaid Services (OIG):

- Phone: 1-855-403-7283
- Email mpi@utah.gov
- Online: oig.utah.gov

Medicaid Member Fraud, Waste, or Abuse

You can also contact the Department of Workforce Services:

- Phone: 1-800-955-2210
- Email: wsinv@utah.gov

You will not need to give your name if you report fraud, waste, or abuse. Also, your Medicaid benefits will not change if you make a report.

Optum Operations

What if I want to know more about how Optum is set up and works?

We will answer any questions you have about how we are set up, including questions about our grievance system, billing practices, confidentiality policy, and how we choose providers and what is required of them. If you ask, we will give you a copy of our Preferred Practice Guidelines for mental health and SUD services. Call Optum at 1-877-370-8953 if you have any questions.

What if I want to know how Optum uses my medical information?

You can find the Optum Health Plan Notices of Privacy Practice at optumhealthslco.com/content/ops-optslcty/salt-lake-county/en/consumers---family.html.

Provider Directory

Where can I find the Optum Provider Directory?

You can go to the Optum website at optumhealthslco.com and on the left side of any page you will see **Find a Medicaid Provider Search**. Click on this and you will be able to use the search tool to find a provider in your area.

What if I want a paper copy of the Provider Directory?

Please call Optum at 1-877-370-8953, weekdays between 8:00 a.m. and 5:00 p.m. and ask for a paper copy. We will send it to you in the mail.

What if I have questions about a provider?

If you have any questions about our providers, please call Optum at 1-877-370-8953, weekdays between 8 a.m. and 5 p.m. We'll answer any questions you have.

Directorio de Proveedores

¿Dónde puedo encontrar el Directorio de Proveedores de Optum?

Puede visitar el sitio de Internet de Optum en optumhealthslco.com y a la izquierda de cualquier página, verá **“Find a Medicaid Provider Search” (Encuentre un Proveedor de Medicaid)**. Haga clic en ese enlace y podrá usar la herramienta de búsqueda para encontrar un proveedor en su área.

¿Qué puedo hacer si quiero una copia impresa del Directorio de Proveedores?

Llame a Optum al 1-877-370-8953, los días hábiles, de 8:00 a.m. a 5:00 p.m., y pida una copia impresa. Se la enviaremos por correo.

¿Qué puedo hacer si tengo preguntas sobre un proveedor?

Si tiene alguna pregunta sobre nuestros proveedores, llámar a Optum al 1-877-370-8953, los días hábiles, de 8:00 a.m. a 5:00 p.m., Responderemos cualquier pregunta que tenga.