Table of Contents

Introduction ........................................................................................................................................... 4
Other Languages ........................................................................................................................................ 4
Interpreter Services during Visits with Your Provider (Servicios de Intérpretes) ............................. 6
Services Available.................................................................................................................................. 7
Getting Mental Health or Substance Use Disorder Services ................................................................. 8
Services Not Covered by Optum ............................................................................................................. 10
Transportation .................................................................................................................................... 10
Emergency Services .......................................................................................................................... 10
Mental Health Care in a Hospital ............................................................................................................ 11
Payment for Services .......................................................................................................................... 11
Outpatient Mental Health and Substance Use Disorder Services ......................................................... 12
Client Rights ....................................................................................................................................... 13
Non-Discrimination Policy .................................................................................................................. 13
Client Responsibilities ....................................................................................................................... 14
Fraud, Waste and Abuse .................................................................................................................... 14
Adverse Benefit Determinations ......................................................................................................... 15
Appeals ............................................................................................................................................... 16
Medicaid Fair Hearings ...................................................................................................................... 17
Grievances (Complaints) .................................................................................................................... 17
Advance Care Directives .................................................................................................................... 18
Privacy ................................................................................................................................................. 19
Optum Operations ................................................................................................................................ 19
Provider Directory ............................................................................................................................... 19
Introduction

As a Medicaid member, you are part of Medicaid’s Prepaid Mental Health Plan (PMHP). If you live in Salt Lake County, Salt Lake County Division of Behavioral Health Services (DBHS) is your PMHP. 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 Optum’s group of providers.

This handbook explains the Medicaid mental health and SUD services that the PMHP covers. You can also get this handbook and Optum’s Medicaid Provider Directory on Optum’s website www.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 in Spanish. You can also get this handbook on compact disc (CD) in English or Spanish. For help, call 1-877-370-8953.

Como miembro de Medicaid, usted es parte del ‘Prepaid Mental Health Plan’ (PMHP). Si vive en el condado de Salt Lake, Salt Lake County Division of Behavioral Health Services (DBHS) es su PMHP. DBHS utiliza Optum para ayudarlo a obtener servicios de salud mental y trastorno por consumo de sustancias (SUD). Mientras viva en el condado de Salt Lake, debe obtener sus servicios de salud mental o SUD a través del grupo de proveedores de Optum.

Este manual explica los servicios de salud mental y SUD de Medicaid que cubre el PMHP. También puede obtener este manual y el Directorio de Proveedores en el sitio web de Optum www.optumhealthslco.com. El Directorio de Proveedores tiene información sobre los idiomas que hablan los proveedores y otros detalles sobre cada proveedor.


Other Languages:

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

Spanish
ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame 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。

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


ध्यान दिनूहोस्: तपाईंले नेपाली बोलनुहरू भने तपाईंको निम्नति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ। फोन गर्नुहोस् 1-877-370-8953


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.

Interpreter Services during Visits with Your Provider

What if I need interpreter services when I visit my provider?
We know that it can be hard to talk with your provider if your first language is not English or you are hard of hearing. 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 or be with you at your mental health or SUD visits. The interpreter will help you understand what your provider tells you. Also, we might have providers who speak or sign your language. You can ask to get services from them.

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

What if I want to call Optum and I am deaf or hard of hearing or I have a hard time speaking?
You can call Relay Utah at 711. 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 or hard of hearing or you have a hard time speaking, call Spanish Relay Utah at 1-888-346-3162.
If you need a telecommunications device (TTY), go to relayutah.gov, or call the Utah Public Service Commission toll-free at 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 o tengo problemas de audición o tengo dificultades para hablar?
Puede llamar a Relay Utah al 711. 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 o 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 relayutah.gov o llame a la Comisión de Servicios Públicos de Utah al número gratuito 866-772-8824. En algunos casos, el dispositivo TTY puede estar disponible a un costo pequeño o sin costo para usted.

Other Free Aids and Services
Optum also provides other free aids and services to help you:
• Written information in other languages
• Written information in other formats (large print, audio, electronic formats and other formats)

Call Optum at 1-877-370-8953 and hit prompt #3 to talk to a Care Advocate.

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 substance use problems are covered. Outpatient mental health and substance use disorder (SUD) services include residential, day treatment, intensive outpatient and standard outpatient services.

Outpatient mental health and substance use disorder 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
• Targeted case management services

Are any other services covered?
Yes, other covered services are:
• Electroconvulsive therapy (ECT)*
• Interpreter services

Also, if you have Traditional Medicaid, there are some other services that can be covered based on your needs. These services are:
• Respite care*
• Psycho-educational services*
• Personal services*
• Supportive living*
*These services are not covered if you are getting services for substance use problems only.

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

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

Your provider will offer you services after he or she meets 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.

Are there any limits on my mental health or substance use disorder services?
Respite care, psycho-education services, personal services and supportive living are not covered under the Non-Traditional Medicaid program.

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 www.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 also be provided outside of regular business hours. If you have any questions, call Optum at 1-877-370-8953 and hit prompt #3. A Care Advocate will help you find a provider.

How quickly can I be seen?
If you need emergency care, you will be seen right away. See Emergency Services, on page 8 for information on how to get emergency care. If you need urgent care, the provider will see you within 5 working days. If you do not have an urgent need for care, the provider will see you 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 hit 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 mental health or substance use disorder services?**

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

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 14 more days to make a decision. If we need more time, we will give you our decision in writing. If you are unhappy about this, you can file a grievance.

Sometimes, you or your provider might think it is important to make a decision quickly. If we agree, we will try to make a decision in 3 working days. 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 days. We will give you our decision in writing. We will also let the provider know our decision.

**Can I get mental health or substance use disorder services from a provider who is not in the Optum Provider Directory?**

In some situations, you can go to a provider who is not in the Provider Directory. You and the provider must get pre-approval before you get the services. For more information, call Optum at 1-877-370-8953 and hit prompt #3 to talk to a Care Advocate. You may have to pay for services that we have not pre-approved.

**When will Optum tell me if I can see a provider who is not in the Provider Directory?**

We will make a decision within 14 calendar days. We will give you our decision in writing. We will also let the provider know our decision.

**Can I get a second opinion?**

Yes. You can get a second opinion about your mental health or substance use 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 in the Provider Directory, or you can call Optum at 1-877-370-8953, hit prompt #3 to talk to a Care Advocate.
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 substance use 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 mental health services or substance use disorder services?

Traditional Medicaid Members
Transportation to your mental health services and SUD services is available. If you do not have your own transportation to your appointments, you can ask for a Utah Transit Authority (UTA) bus pass by calling the Department of Workforce Services at 1-801-526-0950 or 1-866-435-7414.

If UTA bus service is not in your area or if you cannot use the bus for some reason, transportation is covered under Utah Medicaid’s transportation program. For more information, please refer to the Utah Medicaid Member Guide. To ask for a copy, or if you have questions, call Utah Medicaid at 1-866-606-9422. You can also find information online at Medicaid.utah.gov. You can also call Optum at 1-877-370-8953 and hit prompt #3 to talk to a Care Advocate.

Non-Traditional Medicaid Members
Transportation is not covered by Medicaid.

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. You can call any time to talk with a crisis worker.

To get emergency care day or night, call the University Neuropsychiatric Institute’s (UNI’s) crisis line at 801-587-3000. They will help you with your emergency. They might send you to a treatment location, or send their crisis team to meet with you, if needed.

If you are already getting services from an Optum provider, you can call your provider on weekdays. If your provider is not available, call the UNI crisis line at 801-587-3000.

Also, day or night, you can go to any hospital emergency room for emergency care. Even if you are outside Salt Lake County, go to the nearest hospital emergency room. 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:
• University of Utah Neuropsychiatric Institute (UNI)
   501 Chipeta Way, Salt Lake City

• Jordan Valley Medical Center, West Valley Campus (formerly known as Pioneer Valley Hospital)
   3460 Pioneer Parkway, West Valley City

• St. Marks Hospital
   1200 East 3900 South, Salt Lake City

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

If a hospital other than those listed above 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 us if they want to admit you. Hospitals can call us at 1-877-370-8953. We might have you stay at that hospital or we might transfer you to one of our hospitals.

Payment for Services
Hospital Emergency Room Services
Will I have to pay for services in a hospital emergency room?

Traditional and Non-Traditional Medicaid Members
You will not have to pay for emergency services in a hospital emergency room.

Mental Health Care in a Hospital
Will I have to pay for mental health care in a hospital?
The hospital can charge you a $75 co-payment for each hospital stay, no matter how many days you are there.

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 get a service that is not pre-approved by Optum (the provider or you tried to get approval but Optum denied the request or approved 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 appeal this decision before you agree to pay for the service. See the Appeals Section on page 12.

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

• You ask for and get services during an appeal with or during a Medicaid state fair hearing.
• You would only have to pay if the appeal or state 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
Will I have to pay for ambulance services for emergency care?

Traditional and Non-Traditional Medicaid Members
You will not have to pay for ambulance services for emergency care.

Client Rights
What are my rights?
As a client, 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 other types of treatment in a way that is easily understood
- Take part in treatment decisions regarding your behavioral health care, 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 medical record(s). You can also ask that they be amended or corrected when allowed by federal law
- Get behavioral health 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 the County, by Optum, or by 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

You also have the right to be treated fairly and to get behavioral health care regardless of your race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

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 based on race, color, national origin, age, disability, sex, sexual orientation, or gender identity.
If you believe you have been treated differently because of your race, color, national origin, age, disability, or sex, sexual orientation, or gender identity, you can file a complaint.

You can file a complaint in person or by mail, fax, or email with the Optum Grievance Representative. **In Person or Mail:** 2525 Lake Park Blvd, West Valley City, UT 84120, **Phone:** 1-877-370-8953, **Fax:** 1-801-982-3159, or **Email:** slcoreviews@optum.com.

You can also file a complaint with Medicaid Constituent Services Representative, by **Mail:** P.O. Box 143106, Salt Lake City, UT 84114-3106, **Phone:** 1-801-538-6417, 1-877-291-5583, **Fax:** 1-801-538-6805, or **Email:** medicaidmemberfeedback@utah.gov

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at [https://ocrportal.hhs.gov/ocr/portal/lobby.jsf](https://ocrportal.hhs.gov/ocr/portal/lobby.jsf), **Mail:** Centralized Case Manager Operations, U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201, or **Phone:** 1-800-368-1019, 1-800-537-7697 (TDD), or **Email:** OCRComplaint@hhs.gov

If you want to mail or email your complaint, you can write your complaint or you can use the Office of Civil Rights complaint form available at: [http://www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html](http://www.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 hit prompt #2 to talk an Optum team member.

**Client Responsibilities**

**What are my responsibilities?**

**As a client, you are responsible to:**

- Keep your appointments and be on time
- If you need to cancel an appointment, call the provider 24 hours in advance
- 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

**Fraud, Waste and Abuse**

**Fraud**

Fraud includes using someone else’s medical benefits for your health care services, using someone else’s Social Security number to qualify for government assistance or providers billing for services that did not occur.
Waste
Waste is the planned use, throwing away or spending of health care or government resources in an unwise and wrong manner.

Abuse
Abuse is the planned misuse of health care or government resources. Examples of abuse include:

- Requesting and getting medications you do not need to use
- Doctors billing for services that did not occur

Why should I care about fraud, waste and abuse?
Health care fraud, waste and abuse are serious problems and affect the cost of health care services.

How do I report fraud, waste or abuse?
If you think someone is using your Medicaid information or committing fraud, waste or abuse, please call any one of the following:

- Optum at 1-877-370-8953
- The Office of Inspector General of Medicaid Services toll-free at 1-855-403-7283 or email mpi@utah.gov or go to their website: www.oig.utah.gov
- Department of Workforce Services Payment Error Prevention Unit at 1-800-955-2210 or email wsinv@utah.gov.

Adverse Benefit Determinations
What are Adverse Benefit Determinations?
Adverse Benefit Determinations are when Optum:

- Denies (turns down) or approves fewer services than you wanted
- Denies payment for a service that you might have to pay for
- 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 7)
- Does not settle an appeal or grievance you have with us as soon as we are supposed to
- Does not make a decision about getting services you have asked for in the amount of time Medicaid wants us to
- Your provider reduces or stops a service previously approved. If you agree with the change, it is not an action. It is only an action if you tell us you don’t want the change

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. You will have the right to appeal if you disagree with our action.
Appeals

What is an appeal?
An appeal is when you ask Salt Lake County DBHS to review the adverse benefit determination Optum made to see if we made the best decision.

Who can file an appeal?
You, your legally authorized representative or your provider can file the appeal. If your provider files the appeal, you must give your written consent.

When do I have to file an appeal?
Your Notice of Adverse Benefit Determination letter will give complete information on the appeal process, including how soon you must tell Salt Lake County DBHS you want to appeal the decision. In most situations, you must tell them you want to file an appeal within 60 days from the date on the Notice of Adverse Benefit Determination letter.

However, if our decision was to reduce or stop services we had approved, and you want to keep getting the services, you must file your appeal on or before the later of the following: within 10 days of Optum mailing the Notice of Adverse Benefit Determination letter to you, or the effective date of the proposed decision. If you file your appeal on time, and you let Salt Lake County DBHS know you want to get the services while they make a decision, you may do so. If the appeal decision is not in your favor, you might have to pay for the services.

How do I file an appeal?
The Notice of Adverse Benefit Determination letter will tell you how to file an appeal. If you need help filing your appeal, call Optum at 1-877-370-8953.

You can also call Salt Lake County DBHS first to file your appeal. Call 385-468-4707, Monday-Friday, 8:00 a.m.-5:00 p.m. Ask to talk to the Quality Assurance Manager. Let him/her know you want to file an appeal. Even if you call first, you still must send your appeal in writing.

What if I need help filing my 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, they will give you a written decision within 30 calendar days after they get your appeal. Sometimes, they might need more time to make the decision. If they need more time, they will let you know in writing. Also, you might want them to take more time for some reason. If so, let them know. When you, your provider or they think it’s important to make a decision on your appeal quickly, they will usually make a decision within 72 hours.
Medicaid Fair Hearings

What can I do if I am unhappy with the appeal decision?
If you are unhappy with DBHS’s decision on your appeal, or DBHS 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, 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. DBHS will also give you the Medicaid fair hearing request form to send to Medicaid.

You must ask for a Medicaid fair hearing in writing using the form they give you.

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 of the documents that will be used at the fair hearing.

When do I ask for a fair hearing with Medicaid?
In most situations, you must ask for a fair hearing within 120 days from the date on DBHS’ appeal decision letter.

If Optum’s action was to reduce or stop services Optum had already approved, and you want to keep getting the services, you must ask for a fair hearing within 10 days of DBHS mailing the appeal decision letter to you. 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. If the fair hearing decision is not in your favor, you might have to pay for the services.

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 801-538-6576 or toll-free 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 my provider?
If you have a complaint about anything other than an action, 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 (with your permission) can file a grievance.

There is no deadline for filing a grievance. You may file a grievance at any time.

How do I file a grievance?
- Tell your complaint to your provider or a staff member you feel comfortable with
- Call the Optum grievance coordinator weekdays from 8 a.m. to 5 p.m. at 1-855-718-6743
- Give your complaint in writing to your provider or other staff
- Mail or fax your written complaint to Optum at:
  - Mail:  Optum, 2525 Lake Park Blvd., West Valley City, UT 84120
  - Fax:  1-855-718-6743
- Call Salt Lake County DBHS at:  1-385-468-4747 and ask to talk to Kelli Heaps
- If you don't want to talk to us or Salt Lake County DBHS about your grievance, you can call Medicaid on weekdays at 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 a.m. and 5 p.m.

When will I get a decision on my grievance?
You will get a decision within 45 calendar days after you file your grievance. Sometimes more time might be needed to make a decision. If more time is needed, your provider or Optum will let you know about this in writing. Once a decision is made, your provider or Optum will either talk to you about the decision on your grievance or send you a letter.

Advance 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 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 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 us at 1-877-370-8953, or talk to your provider or case manager.

If you have an Advance Care Directive and there is a problem with it being followed, call the Utah survey and certification agency at 1-801-538-6158 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 us at 1-877-370-8953.

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 us at 1-877-370-8953 if you have any questions.

Provider Directory

Where can I find an Optum Provider Directory?
You can go to the Optum website at www.optumhealthslico.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 a.m. and 5 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 us at 1-877-370-8953, weekdays between 8 a.m. and 5 p.m. We’ll answer any questions you have.