

## OneCare and OneCare Connect Behavioral Health Providers' Frequently Asked Questions

### How do I continue to see my CalOptima OneCare (OC) and OneCare Connect (OCC) patients?

- Providers may continue to see their patients/our members by contracting with CalOptima.
- Providers must continue to verify member's eligibility prior to providing services.
- CalOptima will provide continuity of care for a member who requests to continue seeing their provider by calling CalOptima's Behavioral Health Line at **1-855-877-3885**. Continuity of care means that a member can continue receiving care from their provider if certain criteria are met:
  - Member has existing relationship with the provider.
  - Provider accepts CalOptima's reimbursement rate.
  - Provider has no quality and credentialing issues.

### What are the advantages of contracting directly with CalOptima?

- As of January 1, 2020, CalOptima will directly manage behavioral health services for all programs. By contracting directly with CalOptima, you will ensure continuity of care and access to behavioral health services for your current OC and OCC members and the opportunity to expand your coverage to include our non-Kaiser Medi-Cal members.
- CalOptima continues to work with the County of Orange Health Care Agency to coordinate Substance Use Disorder Drug Medi-Cal treatment for members who need it.

### What is the authorization requirement and process for OC/OCC behavioral health services?

- Prior Authorization (PA) is required for psychological testing, partial hospitalization program (PHP), intensive outpatient program (IOP) and inpatient mental health services. All other outpatient mental health services do not require PA.
- Existing/open authorizations dated prior to January 1, 2020, will be honored by CalOptima.
- New PA requests should be sent to CalOptima's Behavioral Health Integration department beginning January 1, 2020.
  - Fax the completed Behavioral Health - Authorization Request Form (BH-ARF) to **714-954-2387**.
  - The BH-ARF is available on CalOptima's website at [www.caloptima.org](http://www.caloptima.org).

### Where do providers submit claims?

- OC/OCC claims with dates of service **prior to January 1, 2020**, should be sent to Magellan.
- Please send claims billed with **dates of service on or after January 1, 2020**, to CalOptima:

**Paper Claims Submission**  
OneCare or OneCare Connect  
P.O. Box 11065  
Orange, CA 92856

### **Electronic Claims Submission**

Office Ally

866-575-4120

www.officeally.com

Payer ID: "CALOP"

## **OneCare and OneCare Connect Behavioral Health Providers' Frequently Asked Questions Continued...**

### **What is the credentialing requirement?**

- CalOptima is required by state and federal laws to have up-to-date credentialing performed prior to execution of a contract. Initial credentialing is performed prior to contract execution and recredentialing is then performed at least every three years thereafter.
- CalOptima is enrolled with CAQH and utilizes the CAQH credentialing application with attestations that are current. If you are not credentialed as a CalOptima provider, please either update and re-attest within your CAQH account or sign up with CAQH.
- If you are currently credentialed with Magellan as a CalOptima participating provider, CalOptima **may** honor your credentialing and transfer your credentialed status if you meet the following requirements:
  - **Physicians Only** — You are a physician with current board certification; and/or,
  - **All Practitioners** — Your next recredentialing due date is on or after February 15, 2020.
  - **All Practitioners** — Your contract is not terminated with Magellan.

### **Additional questions?**

- Contact your Provider Relations Representative for further assistance.
  - **Email:** [ProviderServicesInbox@CalOptima.org](mailto:ProviderServicesInbox@CalOptima.org) or
  - **Phone:** 714-246-8600