

## Provider Claim Review program reimbursement

Groups participating in the Provider Claim Review (PCR) program have the opportunity to receive an activity-based fee for the administrative time to take an action (accept or reject) on a claim.

A properly-completed claim that is returned via the PCR portal application may be reimbursed one time, per project.



## **Required documents and deadlines**

To ensure accurate and timely reimbursement, the following is required:

- 1. Return completed page 2 or 3 of the Account Setup Form (provided by Optum).
- 2. Submit a copy of your W-9 to Optum.
- 3. Complete direct deposit (ACH) enrollment via Optum Pay. To enroll, visit:

https://myservices.optumhealthpaymentservices.com.

Your completed Account Setup Form (ASF), W-9 and Optum Pay enrollment should be submitted prior to submission of a completed claim to ensure that your reimbursement account setup has been completed by Optum.

Submission of these documents to Optum is required by the project end date provided to you by your Optum outreach operations representative. Failure to timely submit your ASF, W-9 and Optum Pay enrollment by the date provided to you by your Optum outreach operations representative will result in forfeiture of reimbursement for the program year.



## Returning the Account Setup Form and W-9

Return the completed ASF and W-9 via secure fax.

Secure fax server: 1-972-729-6103

## For questions:

Please call 866-985-8462 or email outreach.ops@optum.com.

For Medicaid Managed Care, risk adjustment standards, if any are applicable, are established by each state Medicaid agency and such standards often vary from state to state.