

Optum Care IPA of New York (OCNY)

Welcome to Optum Care Network

Optum Care IPA of NY (OCNY) is an independent physician association (IPA) that partners with local provider groups to improve quality of care, clinical outcomes, and member satisfaction through collaboration in the care delivery system.

This Quick Reference Guide provides an overview of key information you will need when treating (OCNY) delegated membership.

Submitting a claim

- For electronic submissions, use payer ID: LIFE1 and Clearinghouse: Optum 360
- For paper submissions, use:
Optum Care Network Claims
PO Box 30781
Salt Lake City, UT 84130-0781

Electronic Fund Transfer (EFT)

Optum Care Network works exclusively with InstaMed as our free payer payments solution for providers. Please register for free ERA/EFT at instamed.com/eraeft.

Your Practice Performance Manager

Each practice in our network is supported by a dedicated Practice Performance Manager (PPM) who is your go-to resource. To connect with your Practice Performance Manager, please contact using the details they have provided.

Optum Care Service Center

Our Service Advocates are available to answer questions on topics such as provider search, claims, eligibility, and more.

Hours of operation:

Monday – Saturday, 8:00 am – 8:00 pm ET

Phone: 1-866-565-3468

Website: www.optumcare.com

You also can contact the Optum Care Service Center through secure e-mail on the Optum Care Provider Portal. Login through professionals.optumcare.com/portal-login

Credentialing and provider updates

Provider request for credentialing

Providers requesting participation with Optum Care should contact their local network manager. Health plan will retain the credentialing for network providers in 2022.

Physician and provider updates

To make NPI, TIN or provider demographic updates, providers will need to contact the health plans they are contracted with to fill out and submit the appropriate form(s).

Optum Care Provider Portal

The provider portal is a secure web tool providing access to eligibility, referral creation and submission, and the ability to view prior authorizations and claims information in real time. You'll also find our referral lookup tool, important forms, and many other resources. Login through professionals.optumcare.com/portal-login

Prior authorizations

Prior authorization and admission notification are required for certain services based on the patient's benefit plan.

Requesting prior authorization

Prior Authorizations should be submitted electronically online.

Online: Login through

professionals.optumcare.com/portal-login

Only if online is not an option:

Phone: 1-866-565-3468

Fax:

- New Auth (General): 1-855-248-4063
- Part B New Auth: 1-855-244-8503
- Clinical Submissions for New or Existing Auth: 1-877-940-3604

Hospital admission notification

Notify Optum Care Network of hospital admissions no later than 24 hours after admission and 24 hours post discharge. Notifications should be submitted electronically online.

Online: Login through

professionals.optumcare.com/portal-login

Only if online is not an option:

Phone: 1-866-565-3468

Fax for inpatient notifications and clinical submissions: 1- 844-700-5131

Specialists and facilities

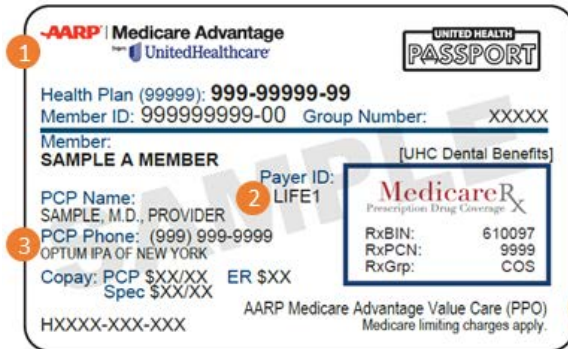
For a complete list of information on Optum Care specialists and facilities, please contact our service center or login to the provider portal and use the provider lookup tool at www.optumcare.com.

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Participating plans and samples of their ID cards

These member ID cards are samples for illustration only; actual information varies depending on payer, plan and other requirements.

1. Participating health plan logo	4. Plan name
2. Payer ID	5. Provider services toll-free number
3. Network name	6. Medical claims address



1 **AARP Medicare Advantage**
UnitedHealthcare **UNITED HEALTHCARE PASSPORT**

Health Plan (99999): **999-99999-99**
Member ID: 999999999-00 Group Number: XXXXX

Member: **SAMPLE A MEMBER** [UHC Dental Benefits]

PCP Name: **SAMPLE, M.D., PROVIDER** **2** Payer ID: **LIFE1**
PCP Phone: (999) 999-9999
OPTUM IPA OF NEW YORK

3 Copay: PCP \$XX/XX ER \$XX
Spec \$XX/XX

4 HXXXX-XXX-XXX AARP Medicare Advantage Value Care (PPO)
Medicare limiting charges apply



Customer Service Hours: 24 hours a day, 7 days a week Printed: x0x0/x00x

5 **For Members**
Website: www.memberurl.com
Customer Service: 1-999-999-9999 TTY 711
NurseLine: 1-999-999-9999 TTY 711
Behavioral Health: 1-999-999-9999 TTY 711
Dental: 1-999-999-9999 TTY 711

6 **For Providers** www.OptumCare.com 1-866-565-3468
Medical Claim Address: P.O. Box 30781, Salt Lake City, UT 84130-0781
Provider Authorizations: 1-866-565-3468
[UHC Dental Providers: www.dentalurl.com 1-999-999-9999]

UHC Renew Active **NO Referral Required** **OPTUM**

For Pharmacists 1-999-999-9999
Pharmacy Claims OptumRx P.O. Box 999999, Healthcare, US 99999-9999



1 **United Healthcare** Medicare National Network

Health Plan (99999): **999-99999-99**
Member ID: 999999999-00 Group Number: XXXXX

Member: **SAMPLE A MEMBER** [UHC Dental Benefits]

PCP Name: **SAMPLE, M.D., PROVIDER** **2** Payer ID: **LIFE1**
PCP Phone: (999) 999-9999
OPTUM IPA OF NEW YORK

3 Copay: PCP \$XX ER \$XX
Spec \$XX

4 RXXXX-XXX-XXX UnitedHealthcare Medicare Advantage Choice Plan 1 (Regional PPO)
Medicare limiting charges apply



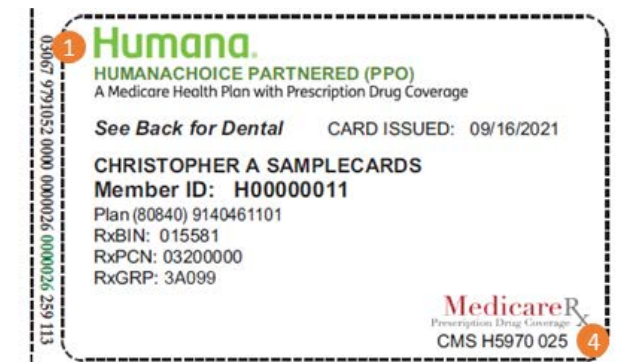
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Provider Authorizations: 1-866-565-3468
[UHC Dental Providers: www.dentalurl.com 1-999-999-9999]

UHC Renew Active **NO Referral Required** **OPTUM**

For Pharmacists 1-999-999-9999
Pharmacy Claims OptumRx P.O. Box 999999, Healthcare, US 99999-9999

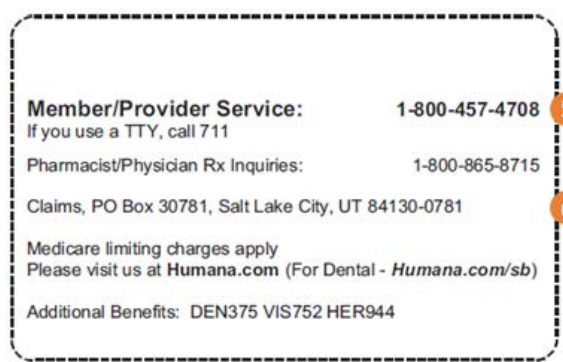


1 **Humana.**
HUMANACHOICE PARTNERED (PPO)
A Medicare Health Plan with Prescription Drug Coverage

See Back for Dental CARD ISSUED: 09/16/2021

CHRISTOPHER A SAMPLECARDS
Member ID: H0000011
Plan (80840) 9140461101
RxBIN: 015581
RxPCN: 03200000
RxGRP: 3A099

4 **MedicareRx**
Prescription Drug Coverage
CMS H5970 025



5 **Member/Provider Service: 1-800-457-4708**

If you use a TTY, call 711

Pharmacist/Physician Rx Inquiries: 1-800-865-8715

Claims, PO Box 30781, Salt Lake City, UT 84130-0781 **6**

Medicare limiting charges apply
Please visit us at Humana.com (For Dental - Humana.com/sb)

Additional Benefits: DEN375 VIS752 HER944