Request: providers should not be denied payment for services delivered without an authorization since January 1, 2020. MDH and Optum urged providers to continue providing services in the absence of a working authorization system. Despite their best efforts, the following barriers have prevented providers from consistently obtaining authorizations in a timely fashion:

- Beacon authorizations haven’t transferred to Optum (multiple providers)
- Time-outs and errors occur with such frequency that providers are unable to maintain auth submission at needed pace (multiple)
- Dummy authorizations created by Optum in order to allow payment take up the date span needed for real authorizations. This prevents providers from submitting real auths for the same date span (Thrive)
- Authorizations not visible to providers (Volunteers of America, Therapeutic Living for Families)
- The prior ASO platform stopped a provider from proceeding to obtain an authorization if the client had an open authorization with another provider. Optum’s system doesn’t have that check in place.
  - Authorization denied because client had an open authorization with other provider (Leading by Example and Channel Marker). Denials are coming weeks and months after the request was submitted – leaving provider at risk for large volume of services delivered in the interim.
- Providers can’t close open authorizations in the system because form doesn’t save
- Incedo system will not automatically end the initial and begin the first concurrent authorization. (multiple providers)
- Optum not processing the initial request by the time we are required to complete the concurrent. This is time-sensitive as 6-month authorizations will be ending this month and in June.
- Unable to do non OMS authorizations or split authorization between two providers (Arundel Lodge, BHP)
- Forms have been disappearing including uninsured eligibility forms and data capture forms (Cornerstone, Arundel Lodge, Carroll County Youth Services Bureau)
- Discharges take 10 days to register
- Providers unable to submit auths because they are missing locations in Incedo (Advantage Psychiatric)
- Uninsured spans: Approvals for uninsured coverage is taking months. When will these requests be processed within the required timeframe?
- Untimely Denials of Clinical Authorization.
  - Authorizations taking too long – 14 days to approve request for crisis therapy (Thrive)
  - 33 PRP auths requests for Jan and Feb are still in process - we do not know why and do not know who to follow-up with. We have held up entering any for March and beyond. (Crossroads Community)
  - 10 RRP auths requests for Jan and Feb are still in process - we do not know why and do not know who to follow-up with. We have held up entering any for March and beyond. The only choice for RRP is “trial visit” so that is what was chosen along with PRP (because we didn’t know what to choose) and all the RRP were voided but left the PRP for those RRP clients “in process.” (Crossroads Community)
  - Because of the long delay in approving auths, there is no opportunity to provide supplementary clinical information or discuss the decision or consider a lesser level of care.
  - Initial auth requests from February haven’t been approved (Charles Co Freedom Landing)
- Authorization Workflow Errors.
o Supported Employment. Once you choose the auth plan—there are no services listed to check off - hit “next” and get an error box saying “no services found.” Cannot complete an auth due to this. We have auths that need to go back to 1/1/20. (Crossroads Community)

o there is no Print option for the request or the approval – we have to print screen & paste so we know what we did.

o When you choose “Respite” in the auth plan your only choices are “Adult in/ out of home.” You have to go further into the auth request where it allows you to choose “child”. We only found this out because another agency figured this out – nothing came from Optum or was covered in the trainings.