

Behavioral Network Management	<p>PO Box 880609 San Diego, CA 92168-0609 Phone: 1-877-614-0484</p> <p>Network Management is responsible for developing and maintaining the Optum network of providers and can assist with questions related to network participation, credentialing, or provider records.</p>																										
Provider Demographic and Availability Updates CA regulations require you update us within 5 days of changes to your availability and 10 days for any demographic change to your practice.	<ul style="list-style-type: none"> ▪ Providerexpress.com* ▪ Fax: 866-641-5947 ▪ Email: provider_feedback@optum.com ▪ Phone: 1-877-614-0484 <p>*Login using your Optum ID or get one by clicking the "First-time User" link in the upper right hand corner at providerexpress.com.</p>																										
Optum Provider Line (Phones are answered 24 hours a day, 7 days a week)	<p style="text-align: center;">1-800-333-8724</p> <ul style="list-style-type: none"> ▪ Intake and Care Management, including authorizations. ▪ Claims Status & Inquiry ▪ Member Eligibility & Benefits <p>Various members may have account-specific customer service numbers. It is best to call the phone number listed on the provider remittance advice or member ID card.</p>																										
Scheduling Appointments <i>(Clients referred must be seen within the following time frame)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #e67e22; color: white;"> <th style="width: 33%;">Appointment Type</th> <th style="width: 33%;">Mental Health</th> <th style="width: 33%;">EAP</th> </tr> </thead> <tbody> <tr> <td>Routine/Non- Emergency</td> <td>Within 10 business days</td> <td>Within 3 business days</td> </tr> <tr> <td>Urgent</td> <td>Within 48 hours</td> <td>Within 24 hours</td> </tr> <tr> <td>Emergency</td> <td>Same day</td> <td>N/A</td> </tr> </tbody> </table>			Appointment Type	Mental Health	EAP	Routine/Non- Emergency	Within 10 business days	Within 3 business days	Urgent	Within 48 hours	Within 24 hours	Emergency	Same day	N/A												
Appointment Type	Mental Health	EAP																									
Routine/Non- Emergency	Within 10 business days	Within 3 business days																									
Urgent	Within 48 hours	Within 24 hours																									
Emergency	Same day	N/A																									
CLAIMS SUBMISSION We highly recommend that claims be submitted electronically at providerexpress.com If you are unable to file electronically, please use the appropriate address shown on the right.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 50%;">University of California</td> <td style="width: 16.6%;">PO Box 30760</td> <td style="width: 16.6%;">Salt Lake City, UT</td> <td style="width: 16.6%;">84130-0760</td> </tr> <tr> <td>UHC Community Plan of CA</td> <td>PO Box 30884</td> <td>Salt Lake City, UT</td> <td>84130-0884</td> </tr> <tr> <td>Wells Fargo</td> <td>PO Box 30884</td> <td>Salt Lake City, UT</td> <td>84130-0884</td> </tr> <tr> <td>Mail Handlers</td> <td>PO Box 30756</td> <td>Salt Lake City, UT</td> <td>84130-0756</td> </tr> <tr> <td>All Other Optum Claims</td> <td>PO Box 30755</td> <td>Salt Lake City, UT</td> <td>84130-0755</td> </tr> <tr> <td>United Health Care Options PPO</td> <td colspan="3">Please check the claims address on the member's ID card as these are submitted to the medical carrier.</td> </tr> </tbody> </table>			University of California	PO Box 30760	Salt Lake City, UT	84130-0760	UHC Community Plan of CA	PO Box 30884	Salt Lake City, UT	84130-0884	Wells Fargo	PO Box 30884	Salt Lake City, UT	84130-0884	Mail Handlers	PO Box 30756	Salt Lake City, UT	84130-0756	All Other Optum Claims	PO Box 30755	Salt Lake City, UT	84130-0755	United Health Care Options PPO	Please check the claims address on the member's ID card as these are submitted to the medical carrier.		
University of California	PO Box 30760	Salt Lake City, UT	84130-0760																								
UHC Community Plan of CA	PO Box 30884	Salt Lake City, UT	84130-0884																								
Wells Fargo	PO Box 30884	Salt Lake City, UT	84130-0884																								
Mail Handlers	PO Box 30756	Salt Lake City, UT	84130-0756																								
All Other Optum Claims	PO Box 30755	Salt Lake City, UT	84130-0755																								
United Health Care Options PPO	Please check the claims address on the member's ID card as these are submitted to the medical carrier.																										
Appeals & Grievances	<p>PO Box 30512 Salt Lake City, UT 84130-0512 Fax: 1-855-312-1470 Phone: 1-800-985-2410</p>																										
Wellness Assessment Forms (ALERT®)	<p>PO Box 27430 Houston, TX 77277 Fax: 1-800-985-6894 Phone: 1-877-369-2198</p>																										
Providerexpress Support	<p style="text-align: center;">1-866-209-9320 (Online chat support is also available at providerexpress.com)</p>																										
Language Assistance Program	1-866-374-6060	Hearing & Speech Impaired Line	1-800-842-9489 (TTY)																								