



CARELON BEHAVIORAL HEALTH ASO TRANSITION PROVIDER FREQUENTLY ASKED QUESTIONS

As of NOVEMBER 2024

Table of Contents

ABA.....	2
Administrative.....	2
ASO Transition.....	3
Authorizations.....	3
Billing, Audits and Claims.....	6
Clinical.....	9
Credentialing.....	9
Data Reporting and Analytics.....	10
Denials.....	11
Discharges.....	11
Eligibility.....	11
Network/Provider Relations.....	11
Optum/Incedo.....	12
Provider Manual.....	12
Portal Registration.....	13
Readiness and Testing.....	13
Staffing.....	14
Technical.....	14
Training.....	15



ABA

Optum just released a required treatment plan template for ABA. Will Carelon make additional changes to the required template?

Changes to the ABA treatment plan template would be determined by MDH and in consultation with Carelon. Changes would be communicated to providers in advance of implementation via provider alert.

Will requirements for ABA be the same between Carelon in PA and MD (i.e., specific requirements on outcome measures)?

ABA regulations for Maryland are found here [COMAR 10.09.28](#). As Maryland's Administrative Service Organization, Carelon will administer these services in compliance with Maryland's regulations.

Administrative

When will Carelon take over as the new ASO?

Carelon will go live as your new ASO on Jan. 1, 2025.

Given that the contract is going live on a holiday and the challenges of the last transition, will there be extra coverage to ensure that day, and the transition, goes smoothly?

Carelon is committed to ensuring a smooth transition and has been preparing our systems, in collaboration with the state, for many months. Our current transition plan allows for ample training and testing with the state and providers, and we are excited for a successful launch on Jan. 1, 2025, and will leverage appropriate staff coverage to support this success.

Is there a transition plan for Carelon to take over as the new ASO?

Yes, since March 2024 Carelon, MDH and Optum have been working on the implementation and transition planning for this contract. We will continue to work collaboratively and share implementation updates with key dates that impact providers as we transition all functions on Jan. 1, 2025.

Is there anything we as the provider office should be doing now to prepare?

Providers should ensure that all of their information is up-to-date and accurate with Medicaid via ePREP for Medicaid providers, and with BHA for non-MA service providers. Provider alerts come from the current BHASO and will transfer to Carelon as of 1/1/2025.

If you are not already receiving provider alerts, please send an email to:

marylandproviderrelations@optum.com. The subject line should read "Provider Alerts" with the provider's email addresses in the body of the email. At this time, communications about the transition and any provider forums or training will be shared through this alert system. There is no limit on the number of people within a program that can receive provider alerts and programs



and facilities who use only one point of contact should ensure that these alerts are shared throughout your organization.

[Will the phone # remain 800-888-1965?](#)

Yes, this number is owned by MDH and will remain unchanged. The management of this line will transfer to Carelon, and messaging will refer to Carelon as the BHASO as of Jan. 1, 2025.

[ASO Transition](#)

[How long will Optum be available after the transition to Carelon?](#)

Optum, as the Outgoing ASO, will be available to MDH post transition for various contractual responsibilities.

[What experience does Carelon have related to transitioning Medicaid services?](#) **NEW**

Carelon Behavioral Health has a long, 30-year history of implementing new programs for state and federal agencies and currently manages Medicaid programs in multiple states. We are partnering closely with MDH and behavioral health associates across 40 workstreams to ensure detailed attention to every element and ensure a seamless transition. Notably, our previous experience in the state of Maryland allows us to reuse, refine or rebuild technology previously deployed to support this implementation. As part of our implementation plan, we also plan to engage various providers in the fall to conduct end-to-end testing.

[How will this transition affect Medicaid redetermination?](#) **NEW**

The ASO processes eligibility files received from Medicaid. As such, the transition does not impact the Medicaid redetermination process.

[Authorizations](#)

[What system will providers use for authorizations?](#)

Carelon Behavioral Health uses our proprietary systems, known as [ProviderConnect](#), for authorizations. All authorization requests should be submitted through ProviderConnect beginning 1/1/25. Providers will also utilize Availity as our partner for claims submission, dashboarding and a variety of other functions. ProviderConnect and Availity are a one-stop shop for all things a provider needs to manage their Behavioral Health participants and are joined through single-sign on functionality to ensure that providers require only one provider ID and log on to access all our systems.



Starting in October/November, Carelon will be providing a series of training sessions on different dates and times, on both our ProviderConnect portal as well as Availity. This training will be provided regularly as we prepare for the launch of our contract on Jan. 1, 2025, and will continue through the entire contract. All training will be recorded and posted for providers to reference.

[How will authorization requests be impacted by this transition?](#)

Open and active authorizations will be pre-loaded into the system so providers can continue serving members without interruption. Carelon will also be loading historic Optum authorizations so that providers will be paid for authorized services. Providers seeking new authorizations will enter those into the ProviderConnect portal starting on Jan. 1, 2025.

Providers will still be required to obtain initial and concurrent authorizations for services that require it. Regulations and processes around authorizations are established via Maryland regulations and will continue under Carelon as they do today under Optum. As of 1/1/2025, instead of using Optum's portal, providers will use Carelon's ProviderConnect portal to submit authorizations. Carelon will be providing many training sessions for providers prior to the go-live date.

[Will there be a grace period for authorizations submissions?](#)

At this time, we do not anticipate a need for a grace period. Carelon will load open and active authorizations in advance and the ProviderConnect system is expected to be fully functional on 1/1/2025 for entry of new authorizations. Providers are expected to attend at least one of the ProviderConnect training courses and be prepared to enter new and concurrent authorizations into the system as of Jan. 1, 2025. These training opportunities will be shared well in advance and in various formats and session times.

[Will Carelon be making changes to authorization questions or flows?](#)

Portal functionalities are different for different ASO systems. Carelon is reviewing existing workflows and functional specifications for authorizations with MDH. We are comparing these to our portal functionalities to identify any new changes or enhancements and provide the best product to the Maryland provider community. More information about specific workflows and data will be available in upcoming provider training.

[Will the authorization forms be the same as they were with Beacon?](#)

Carelon is excited to bring our previous expertise and customized platform back to the State of Maryland. While much of Carelon's systems will be very similar to how providers experienced us in the market as Beacon Health Options, we are in the process of making enhancements and updates in order to best align with the Maryland Public Behavioral Health system needs and to best serve the provider community.

[Will Carelon have a process for obtaining authorizations for participants with an uninsured benefit?](#)

Yes, Carelon will be responsible for and is designing our systems to process the uninsured benefits for participants.



Can providers save an incomplete authorization form?

Yes, providers will be able to save authorizations in a draft form and return to them later to finalize and submit.

Will authorization letters be able to be downloaded?

Yes. Providers will be able to download their authorization letters that are submitted to Carelon's system, directly from ProviderConnect.

If we have attended a provider training but need additional support for submitting our claims and authorizations, what should we do?

Providers are encouraged to attend one of the many provider training courses that will be available and are welcome to ask questions throughout those sessions both live and in advance of the training. However, if you have attended one of these training sessions and want to request additional technical assistance, please send your request to the MDHtransitionsupport@carelon.com mailbox with your request and contact information.

Will the payer ID remain the same as it is now? **NEW**

Under Carelon, the Maryland Payor ID will be BHOMD.

Am I required to notify Carelon if or when authorizations are closed earlier than a previously approved end date? **NEW**

MD and Carelon strongly recommend notifying Carelon when an authorization can be closed if it is prior to the approved date, but it is not currently required. Notifying Carelon when an authorization is closed helps to avoid the perception of duplication of services and allows the clinical team to assist participants who are transferring to other levels of care.

Will authorization time spans or the auto approval process change? **NEW**

No. MDH establishes the authorization process, and it remains the same.

How far in advance can authorizations be requested? **NEW**

This parameter will vary based on the level of service. All authorization submission timeline requirements will be discussed during the training webinar.

How do I request authorizations for the Maryland RecoveryNet (MDRN)? **NEW**

Authorization requests for MDRN will be housed in ProviderConnect.

Will the authorization number be the same in Optum as in Carelon? **NEW**

No. The Carelon platform will generate a unique authorization number that will not match previous authorizations found in the Optum system.

Will Outcome Measurement System (OMS) surveys be required when getting authorizations every six months? **NEW**

The OMS was discontinued in 2020. There are and will remain certain federal reporting requirements impacting programs receiving public dollars. Carelon will be an active partner with



MDH regarding data elements that support the management of the public behavioral health system and providers will need to provide federally required information.

Does a new authorization request need to be submitted to transition minors to adult services in order to continue services? **NEW**

Yes. When a minor ages into an adult service a new authorization is needed.

Billing, Audits and Claims

Will there be a need to make new arrangements for claim payment?

There should be no significant impact on how providers submit claims payments to Carelon. We can receive claims through your chosen clearinghouse or partnership with Availity; we can also receive direct claims or batch submissions. The main difference providers will experience is submitting claims to Carelon Behavioral Health instead of Optum Maryland.

Will there be changes to the reimbursable codes and rates for providers?

Carelon is the administrative service organization for the Maryland Department of Health. MDH establishes coverage via regulations and transmittals. The fee schedules currently posted on Optum's website, are in effect and all coverage information posted on Optum's site will be transferred to Carelon's website. There could be modifiers added to codes to support or improve business processes under Carelon's system, but these would be communicated via provider alerts.

Will there be provider testing to ensure smooth claims payments?

Carelon will be working with providers to ensure we complete robust and meaningful testing prior to going live. There was a recent provider survey that asked for volunteers, and we will be discussing testing opportunities in the upcoming Provider Forums. Providers should ensure that they are signed up for Provider Alerts through the current ASO, Optum Maryland to stay aware of notifications of these opportunities.

Will we be able to bill our claims directly to Carelon the way we did when it was Beacon?

Yes. Providers will be able to submit directly to Carelon through our portal or through the use of a clearinghouse. The Carelon portal allows for either single or batch submission of claims.

Will providers be able to submit more than 6-line items on one claim form?

Yes. Carelon's ProviderConnects platform accepts up to 49 lines for HCFA and 99 lines for UB.

Will there be claim correction in the portal?

Carelon's systems allow for adjustments (Frequency 7) and voids (Frequency 8) which can be submitted electronically or via paper. For electronic claims, the CLM05-3 value will be 7 (adjustment) or 8 (void) and the original claim number will have to be submitted in the REF*F8 segment of the electronic claim.



Can I continue to bill electronically as I did when using Office Ally and PaySpan? What is the new payor ID?

Yes, providers can continue to bill electronically using direct billing or their clearinghouse of choice, including Office Ally and PaySpan. The Carelon Behavioral Health Payer ID will be communicated when full transition details are outlined for providers.

Will PaySpan still be used for receiving provider payments?

Yes, Carelon will utilize PaySpan to send payments to providers.

What is the claim processing timeline through Carelon?

Carelon's current contract is to meet or exceed performance guarantees of paying or denying 100% of all clean electronic claims within fourteen (14) calendar days and all claims within thirty (30) calendar days.

Is Availity going to be used for claim submission, or do you have your own portal?

Yes. Carelon will use Availity for Claims submissions. While providers may use their own clearinghouses, direct access to the Carelon portal for claim submission is only through Availity.

Should billers register separately?

Yes, each claims submitter will need to register with Availity to submit claims for Carelon.

Will agencies be able to do manual billing if we are not using a clearing house?

Yes, Carelon accepts both direct claims submission as well as batch submissions. You are not required to use a clearinghouse. However, Carelon does partner with Availity at no cost to providers and will provide training on how to enroll and utilize Availity.

Will Carelon assist with Optum audits and claims payment issues both retroactively and going forward? **NEW**

We encourage all efforts to be focused on working toward resolution prior to the transition. However, Carelon will receive the audit and payment history. Carelon and MDH will be able to access Optum reviews when necessary for a minimum of 90 days post transition (through 3/31/2025).

Why are providers now required to bill a new National Provider Identifier (NPI) with every location, but the same tax ID number? **NEW**

This NPI change is a new federal guideline and Centers for Medicare and Medicaid Services (CMS) requirement. This is not new for most behavioral health providers, though is new for some clinic settings. Each location requires a site-specific MA/NPI.

Who does the provider bill if a person has both a commercial insurance policy and Medicaid?

Medicaid is always the payer of last resort. As such, if there is a commercial policy for a covered service, Third Party Liability rules apply. Only if the service is not covered by the third party, would



Medicaid be billed. There are specific rules related to TPL that providers are responsible to adhere to.

Can I adjust claims directly in the portal? **NEW**

Yes. You can adjust the claims directly in the portal on the claim detail page.

Will all historical claims data be transferred to Carelon from Optum? **NEW**

Historical claims with dates of service 1/1/2022 and forward will be loaded to Carelon's system and will be viewable in ProviderConnect.

Will providers be able to process secondary insurances and upload explanations of benefits (EOBs) from the primary? **NEW**

Yes. Providers will be able to submit attachments for electronic claim consideration. For paper claims, attachments can also be included.

How do I submit paper claims? **NEW**

Providers may submit paper claims directly to Carelon. Please mail to ATTN: Maryland, P.O. Box 1850 Hicksville, NY 11802-1850.

Will I be able to submit Medicare claims through the Carelon system? **NEW**

No. Medicare claims must be submitted to Medicare.

What is the process for getting claims paid when the diagnosis code is not on Carelon's ASO list, but the MCO denies billing? **NEW**

The allowable diagnostic listing for behavioral health services is available on the Carelon website. For hospitals, if there are instances where a diagnosis code is denied by both Carelon and the MCO, please follow the process for submission to the [Dispute Resolution Committee](#) for the decision on who the payer should be. The rules around claims and benefit alignments are managed by the state and only administered by the ASO.

Are there transportation reimbursement rates? **NEW**

There are no reimbursable transportation services with Maryland Medicaid except those associated with the emergency petition process.



Does Carelon anticipate any issues with Third Party Liability processing similar to Optum? **NEW**

Carelon has strict TPL claims processing guidelines in place and is committed to processing claims accurately.

Clinical

Will Carelon continue to honor the TPP program for PRP?

Yes. Carelon is working closely with MDH and Optum to transition this Top Provider Program (TPP) for the launch of our contract on Jan. 1, 2025. Carelon has a wealth of experience with administering provider programs such as the Optum TPP program and looks forward to working with providers and the state on improvements to this program after going live.

Will health homes still be billed through eMedicaid? **NEW**

Health home billing will transition to Carelon's system. Providers delivering health homes services on and after Jan. 1, 2025, will enter services and complete billing through Carelon's system. Providers who delivered health homes services prior to Jan. 1, 2025, will enter those services and complete billing through eMedicaid.

Credentialing

How do I get credentialed as a Medicaid provider? **NEW**

There are no changes to the enrollment process for Medicaid participating providers. Enrollment, validation and re-validation is done through the Maryland Department of Health portal [ePREP](#). Specific credentialing turnaround times can be obtained via the ePREP website or calling 844-4MD-PROV.

For provider types which require a medical director, while providers do not need to enroll their medical directors separately as part of their ePREP application process, these clinics and programs will need to upload evidence of the requisite credentialing and background information relevant to that provider type.

Provider types required to have medical directors can access their specific ePREP application addendum here:

- [Outpatient mental health clinic](#) (provider type MC)
- [Opioid treatment program](#) (provider type 32)
- [Behavioral health crisis stabilization center](#) (provider type CF)
- All other behavioral health provider addenda are located [here](#).

How do I get credentialed as a non-Medicaid provider? **NEW**

Current non-Medicaid providers will be loaded into the ePREP system prior to Jan. 1, 2025, and will have access to the system for go live.

New, non-Medicaid providers will follow the process outlined below:



1. Providers will become licensed, certified, or receive approval from BHA or its designee to provide a non-Medicaid service.
2. Upon receipt of appropriate credentials, the provider will register with Carelon as a non-Medicaid provider and provide a copy of the license, certification or approval from BHA or its designee.
3. Upon registration, Carelon will provide information on how to access and navigate the Carelon system.

Data Reporting and Analytics

Will there be a reporting option for providers?

Yes. Carelon will grant provider-level access through our Intelligence Connect system for self-service reporting.

Can the data submitted into the provider portal be used with state and local health depts to better track outcomes measurement?

Yes. Carelon will provide LBHA and LAA specific access and reporting supplied with data from the provider portal, among other data sets. Some of this information will be at the detailed level, others aggregated for outcomes analysis.

Can I customize the reports available through the reporting platform? **NEW**

Providers will have access to a suite of reports allowing a more detailed look at participant eligibility, authorization, and claims data. Carelon will host dedicated training sessions to walk users through features, capabilities, and customization options available through the reporting platform.

Will providers be able to print out authorization expiration date reports to easily identify clients who are going to expire in the next month or upcoming months? **NEW**

Yes. The authorization dashboard can extract data to support all reporting needs for providers. Providers will have the ability to filter and sort via date fields and authorization status and eligibility.

What data will be available for download starting Jan. 1, 2025? **NEW**

All existing reports will be available to providers in January 2025. This will include historical content, authorizations, claims and eligibility reports. Carelon is also working on a suite of new and updated PowerBI reports, which will be forthcoming in the new year. Continue to watch for alerts for the latest information.



Denials

How will I be able to find out the reason for a claims denial and resubmit the claim? **NEW**

In the system, you will be able to click the claim link to see the claim details and denial reasoning. Additional claims training will be forthcoming.

Discharges

Do I have to submit an official discharge? **NEW**

Requirements for submitting discharge reviews depend on the level of service or level of care. Carelon will cover the discharge submissions during training.

When will the Carelon participant release form be available to EHR/IT departments for electronic signature development? **NEW**

All providers can use their internal releases that they deem appropriate for their programs. The standard format available through Carelon will be made available by go live.

Eligibility

What happens to uninsured span open approvals? **NEW**

Open approvals will migrate over to the Carelon system on Jan. 1, 2025.

Network/Provider Relations

Will provider meetings remain on the same date and in the same format?

It is likely the dates and format will be the same with Provider Council 2nd Friday of the month. Any change to that schedule would be announced in advance.

When will provider alerts switch over from Optum?

Carelon will begin sending out provider alerts starting on Jan. 1, 2025. We are obtaining all historic provider alerts and will ensure that providers have access to these important communications on our website.

Can you confirm if we are automatically signed up for provider alerts even if we have joined one of your Webex?

Signing up for our Webex will not enroll you in the current or future provider alert system. In CY 2024, Providers should sign up for provider alerts with Optum Maryland. Carelon will share more details about our provider alert system and information that providers will need to prepare for the transition within the next few weeks.

If you are not receiving Provider Alerts, please sign up by sending an email to:

marylandproviderrelations@optum.com The subject line should read "Provider Alerts" with the provider's email addresses in the body of the email.



If a provider is contracted as in-network with a commercial line for Carelon will this affect our Medicaid status?

No. Carelon's systems ensure that our In-Network providers are not co-mingled with external provider systems such as Maryland Medicaid.

What is the provider relations communications plan aside from the forums? **NEW**

Provider Alerts and Bulletins will continue to be the primary means of communication for all updates and contractual requirements. Additionally, Carelon's provider relations team will continue to offer the Provider Council meetings along with other feedback and engagement opportunities.

Will each facility be assigned its own provider representative? **NEW**

No. All provider representatives will be trained to handle all calls, whether it is a solo provider group, program or facility. There will be an escalation process in place should it be necessary

Optum/Incedo

Will you still be using Incedo for authorizations?

No, Carelon uses ProviderConnect as our authorization portal and providers will receive training on this new portal in November/December of 2024.

Will Incedo continue to be the clearinghouse for billing?

NO. Carelon utilizes our own proprietary system called ProviderConnect for authorizations. We also partner with Availity for billing and claims functionalities.

Provider Manual

Will I be able to see the provider manual before the transition? **NEW**

We will ask some providers to help us review the manual during end-to-end testing prior to transition. The manual itself will be published on our [website](#) starting on Jan. 1, 2025.

Where can the provider manual be found? **NEW**

The provider manual is still being reviewed for the Carelon implementation and will be ready and posted to the Carelon Behavioral Health Website on Jan. 1, 2025. Until then, please access the Optum website for any provider manual needs.

Will the provider manual include video links that demonstrate how to navigate the provider portal? **NEW**

The provider manual will not include links on how to use the provider portal. However, the planned provider webinar courses will demonstrate how to navigate the provider portal. Recordings of these training sessions will be added to the Carelon's provider website for reference.

Will the provider manual include comprehensive guidelines for all levels of care? **NEW**

Yes. We have designed the manual to be specific and comprehensive for the providers. All programs and levels of care will be represented in the manual. There will also be dedicated



chapters devoted to audits, tools and regulations and information on specialty topics like mobile treatment instructions.

Portal Registration

How can I set up my Carelon account? **NEW**

Registration will open after the provider trainings are completed in December. Once Carelon's provider portal, ProviderConnect, is launched, you will be prompted to create a profile. Each provider will be given a Carelon ID to login. Continue to watch for Provider Alerts associated with the registration process.

Is the Carelon ID number the same as our Medicaid ID number? **NEW**

No. The Carelon ID is a specific number associated with you as a provider. Embedded in the file will be your other numerical identifiers including the Medicaid number.

Will our previous Beacon ProviderConnect usernames work with Carelon's system? **NEW**

No. You will need to create a new login.

Can you customize login profiles? **NEW**

Yes. You can customize the profile for any individual within your organization based on their role and the level of access.

Does everyone have a unique login and password? **NEW**

Each user must have their own login username and password. There is an opportunity to link to an admin account. Additional details will be shared during training.

How will the account administrator(s) be selected? **NEW**

The provider will identify the administrator. Carelon will review the functionality and advise if there is a limitation on the number of account administrators per organization.

Can I use the same Availity account that I use for other insurance companies? **NEW**

Yes. When the payer space for Maryland goes live you can select that tile and log into ProviderConnect. The SSO will be engaged once the linkage activity is completed.

Readiness and Testing

Will Carelon use different provider groups as test sites to help understand the requirements and conditions that apply to the different groups before the actual launch date?

Yes. Carelon will be testing with a variety of providers across a variety of provider types and specialty services to ensure robust testing of the systems prior to go-live.

What does the testing consist of?

Carelon will partner with providers in end-to-end testing of the system, including creating authorizations and claims submission.



Staffing

What is your timeline for hiring staff to manage this benefit to aid in a smoother transition to this new ASO?

Carelon has already hired most of our leadership positions, including our CEO Oleg Tarkovsky, Chief Medical Officer, Drew Pate, Director of Clinical Staff, Carla Lester, Director of Provider Relations, Donna Shipp. We are excited to begin getting out into the community and introducing you to the team that will lead Maryland. The remainder of our staff will be hired, trained and ready to go between now and the go live date.

Technical

Has the claim system been upgraded since 2019?

Carelon still uses our Connects Administration System to adjudicate claims. While the system is the same, it has gone through enhancements over the years.

Can we upload batches in ProviderConnect?

Providers can upload batch claims through the Availity Portal.

Will I still need to use EVS, or will participant eligibility be accessible in the portal? **NEW**

EVS is always the source of truth. However, Carelon will also be loading eligibility and have it available in ProviderConnect. There is a one-day lag for file load, which means that while the system will mostly be accurate, there will be instances where eligibility could be impacted by that one day. There may be instances where the information requires clarification, but those instances should be few.

Will the Carelon system link to Qualifacts/Insync EMR? **NEW**

No, direct connections to EMRs will not be supported.

Will providers need to make any changes to payer enrollments in the system so claims and ERAs process correctly through Carelon instead of Optum? **NEW**

Yes. Registration with all supporting platforms, including clearinghouses, for all business associated with the transition of the ASO to Carelon will be required. The relationship with Optum ends on Dec. 31, 2024, with updated access pointing to Carelon, effective Jan. 1, 2025. For any specifics related to batch submissions to Carelon, please contact bh_claimsmigration@carelon.com.

Will the new system offer a database of Medicaid providers and providers for State funded services to help refer patients to outpatient care or other facilities as needed? **NEW**

Medicaid has its own provider directory, which will be accessible through the Carelon website. For non-Medicaid providers, Referral Connect will also be available. We are ensuring that the provider community will have the same features to find a network provider.



Will groups be able to see open claims/authorizations for other providers via the claim's dashboard option? **NEW**

No. Providers can only see their own claims and authorizations.

Is Carelon aware of Maryland Medical Assistance's new location NPI requirement?

Yes. All the new rules concerning the NPI and TINs will be administered throughout the portals with customization to profiles and linkage to the admin account. You will be able to connect the multiple NPIs in the system for billing through a drop-down selection menu.

Training

What can we do to prepare for the switch?

The number one thing providers can do is ensure updated information with MDH and sign up to receive provider alerts through Optum. Optum will email Provider Alerts to announce important information, such as changes within the PBHS, Maryland Department of Health (MDH) announcements, and important regulatory guidance.

You should register for Provider Alerts by sending an email to: marylandproviderrelations@optum.com. This subject line should read "Provider Alerts" and your email address should be in the body of the email.

Additionally, providers should register for Carelon Provider Regional Forums and training sessions that will help all providers get updates on the implementation.

Will training be available to allow providers an opportunity to get a better understanding of using ProviderConnect?

Provider training will start November/December, which includes ProviderConnect.

When will we get information to get access to your web portal?

More information about ProviderConnect will be released in Q4 of 2024.

Will the same training offered to providers regarding authorization be also available for LBHA's who are interested in becoming familiarized with the process?

Yes, all provider types and specialties will be able to attend training

Will there be one-on-one training, if needed? **NEW**

Our goal is to train providers by having multiple live and recorded webinar sessions. If additional assistance is needed, please reach out to Provider Relations at MDHtransitionsupport@carelon.com.