

# Creating Encounters, Batching, & Billing Medicaid OPTUM Through WITS

## Elements Specific to Creating Medicaid Encounters in WITS

This instruction will cover unique billing steps for Medicaid billing through WITS only. Please refer to the SUD Provider eManual for detailed instructions on general billing.

1. **Getting here:** Login and locate client on Client Search screen. Go to Encounters and click on **Add Encounter Record**. Complete all required fields being careful to choose the correct Service.

**NOTE: Medicaid services are unique on the Service list: these services fall to the top of the list and all have the procedure code identified as the first part of the description. As an example, "(H0004) Individual Counseling – Substance Abuse" is a Medicaid service.**

**DIAGNOSIS NOTE: The Diagnosis screen under the Admission and the Treatment Plan should never identify a Secondary or Tertiary diagnosis of "000.00 None". Instead, choose to leave the Secondary and Tertiary fields blank or choose a diagnosis of Deferred with code 799.9.**

2. If the instruction on Adding Clinical Supervisor to All Encounters has not been implemented, choose Rendering Staff who is rostered with Medicaid-Optum.

**NOTE: Claims submitted with non-rostered staff will be denied. If Staff Profiles are configured using the instruction on Adding Clinical Supervisor to All Encounters, it is not necessary to change the Rendering Staff field on each Encounter.**

The screenshot shows the WITS system encounter form. A red box highlights the top section of the form, which includes fields for Note Type, ENC ID, Service, Parent Service, Program Name, Service Location, Start Date, End Date, Start Time, End Time, Duration, Emergency, and # of Service Units/Sessions. Below this, there is a section for Diagnoses for this Service, with Primary, Secondary, and Tertiary fields. The Primary field is populated with '304.30-Cannabis Dependence(DSM)'. Below the diagnoses, there are fields for Rendering Staff, Supervising Staff, and Referring Phys. The Rendering Staff field is populated with 'Ashenbrener, Sadie, LMSW'. At the bottom of the form, there are buttons for 'Cancel', 'Save', and 'Finish', along with a blue arrow pointing right. Red callouts '1' and '2' are present: callout '1' points to the Primary diagnosis field, and callout '2' points to the Rendering Staff field.

Note Type: Individual Counseling Note  
ENC ID: 1039045  
Created Date: 5/7/2014 12:14 PM  
Service: (H0004) Individual Counseling - Substance Abuse  
Parent Service: [Blank]  
Program Name: Ada CNTY Juvenile CT SVCS Benjamin/Adolescent Outpatient : 2/4/2014 -  
Service Location: Office  
Start Date: 5/6/2014  
End Date: 5/6/2014  
Start Time: 2:00 PM  
End Time: 2:45 PM  
Duration: 45 Min  
Emergency: [Blank]  
# of Service Units/Sessions: 3  
Pregnant No: [Blank]

**Diagnoses for this Service**  
Primary: 304.30-Cannabis Dependence(DSM)  
Secondary: [Blank]  
Tertiary: [Blank]

Rendering Staff: Ashenbrener, Sadie, LMSW  
Supervising Staff: [Blank]  
Referring Phys: [Blank]

**Administrative Actions**  
[Release to Billing](#) [Delete](#)

Cancel Save Finish

## Creating the Medicaid Claim Batch

- Getting here:** Click on Agency, Billing, Claim Item List. Click on **Create Batches**. Choose Medicaid – OPTUM and move it to the mover box on the right.

**NOTE: Medicaid Encounters must be released like all other Encounters in WITS. Medicaid claims must also be batched and billed.**

## Billing the Claim Batch

- Getting here:** Click **Agency, Billing, Claim Batch List**.
- Locate the newly created Medicaid-OPTUM batch. Click **Profile** in the Actions column.
- Click **Bill It** in the Administrative Actions box on the lower part of the screen.

**NOTE: A processor running in WITS will further prepare the Medicaid batch allowing the 837p to be downloaded from WITS. The processor runs once every hour.**

**Choose Plan(s) for Batching**

Available Plans: IDJC, ISC - Flat Rate Non-Auth OP/IOP, Medicaid - OPTUM

Selected Plans: Medicaid - OPTUM (3)

Buttons: Cancel, Clear, Go

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**Provider Claim Batch List**

Plan Name: Medicaid - OPTUM  
 Billing Form: [Dropdown]  
 Batch #: [Text]  
 FFS Type: Fee for Service

Created Date: [Text]  
 Transmit Date: [Text]  
 Status: [Dropdown]

Buttons: Clear, Go

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**Claim Batch List (Export)**

Batch #	Status	Batch For	FFS Type	Billing Form	Order	Charges	Service Mo/Yr	Created	Transmit	Actions
124140	Billed	Medicaid - OPTUM	FFS	837P	P	\$33.75	Mar 2014	5/2/2014	5/2/2014	<a href="#">Claim Items</a>   <a href="#">Profile</a>

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**Provider Claim Batch Profile**

Batch # 1111559  
 Batch For Medicaid - OPTUM  
 Created By Proctor, Lynn  
 Updated By Proctor, Lynn  
 Billing Form 837P  
 Order Primary  
 Service Month/Year 9/1/2013

Charge Amount \$39.78  
 Status Voided  
 Created Date 9/13/2013 3:23 PM  
 Updated Date 9/13/2013 3:27 PM  
 Transmit Date  
 Ignore Warnings No  
 FFS Type Fee for Service  
 HIPAA Processing Set  
 837 File Status  
 Transmission Message

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**Errors List (Export)**

Batch #	Level	Message	Created	Claim #	Item #

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**Administrative Actions**

[Awaiting Review](#) [Hold](#) [Void](#) [Bill It](#)

Buttons: Cancel, Save, Finish

## Verify the Medicaid Batch is ready for Download

7. Getting here: Click Agency, Billing, Claim Batch List.

8. Locate batch that was billed in step 6 above. Verify that a small box appears in the same row as the newly billed batch between the Batch # and Status columns.

## Download the Medicaid Batch

9. Click on Profile in the Actions column.

10. Click on Download 837 in the Administrative Actions box.

Batch #	<input type="checkbox"/>	Status	Batch For
111559	<input type="checkbox"/>	Voided	Medicaid -
111560	<input type="checkbox"/>	Billed	Medicaid - OPTUM
111581	<input type="checkbox"/>	Voided	Medicaid - OPTUM
111582	<input type="checkbox"/>	Billed	Medicaid - OPTUM

Provider Claim Batch List

Plan Name: Medicaid - OPTUM  
 Billing Form: [Dropdown]  
 Batch #: [Text]  
 FFS Type: Fee for Service

Created Date: [Text]  
 Transmit Date: [Text]  
 Status: [Dropdown]

Clear Go

Claim Batch List (Export) Download 837

Batch #	<input type="checkbox"/>	Status	Batch For	FFS Type	Billing Form	Order	Charges	Service Mo/Yr	Created	Transmit	Actions
124140	<input type="checkbox"/>	Billed	Medicaid - OPTUM	FFS	837P	P	\$33.75	Mar 2014	5/2/2014	5/2/2014	Claim Items   Profile

Provider Claim Batch Profile

Batch # 111559 Charge Amount \$39.76  
 Batch For Medicaid - OPTUM Status Voided  
 Created By Proctor, Lynn Created Date 9/13/2013 3:29 PM  
 Updated By Proctor, Lynn Updated Date 9/13/2013 3:27 PM  
 Billing Form 837P Transmit Date  
 Order Primary Ignore Warnings No  
 Service Month/Year 9/1/2013 FFS Type Fee for Service  
 HIPAA Processing Set  
 837 File Status  
 Transmission Message

Batch #	Level	Message	Created	Claim #	Item #

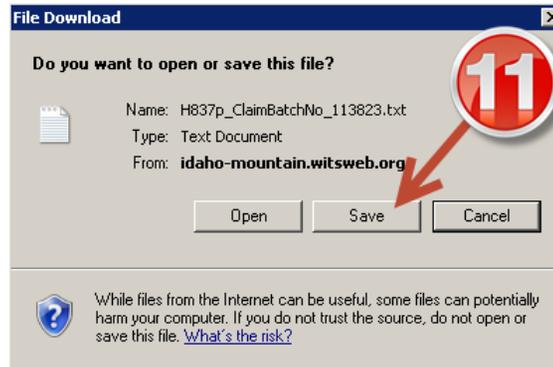
Administrative Actions

Download 837

Finish

11. Click **Save** on the File Download pop-up window. Save the file on your computer or your agency network.

**NOTE: Be sure to keep track of where the 837 file is saved. It is recommended that you develop an organization structure that allows you to track which each batch that has been uploaded.**

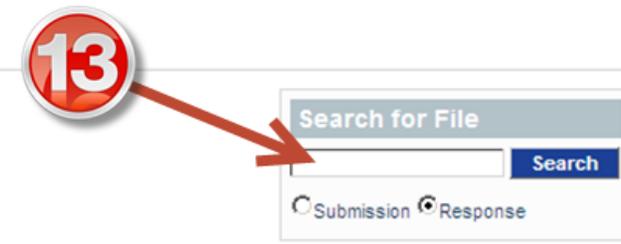


## Upload the Medicaid Batch to Connectivity Director

12. Getting here: Go to <https://www.unitedhealthcarecd.com>. Login to Connectivity Director.



13. Upload the 837 file to Connectivity Director by clicking on Search on the Home page and locating the file saved in step 11 above.



14. Verify that the 837 file and claims were accepted by Connectivity Director by clicking on the Submissions tab. There will be two messages: one for the batch and one for the claims.

**NOTE: It is strongly recommended that providers register for an online account with Medicaid-OPTUM to follow the adjudication of claims. Adjudication results will not appear in WITS. It is the providers responsibility to manage the adjudication of claims.**