Quick Reference Guide for Dialysis Centers

Kidney Resource Services Program Overview

Kidney Resource Services (KRS) provides guided access to a network of credentialed dialysis centers throughout the U.S. KRS, an NCQA-accredited provider of specialized renal disease management, works with Chronic Kidney Disease (CKD) and End Stage Renal Disease (ESRD) management services. KRS, CKD and ESRD programs conform to guidelines established by the National Kidney Foundation’s Kidney Disease Outcomes Quality Initiative (KDOQI); as such, the programs offer the best opportunities to educate members and direct them to our network providers.

Call Center Contact Information

Phone: (877) 801-3507, Prompt 3 – Health Care Provider
Fax: (888) 905-9492
Email: cmc.customer.service@optumhealth.com

Submitting Claims

Electronic Claims

OptumHealthSM Care Solutions
Payer ID # 41194
Ingenix/ENS (www.enshealth.com)

Paper Claims

OptumHealthSM Care Solutions
PO Box 30758
Salt Lake City, UT 84130

Electronic Claims is the preferred method of claims submittal.

www.myoptumhealthcomplexmedical.com

OptumHealth Care Solutions offers a Health Care Provider an extranet site to help contracted network participants manage their relationship with OptumHealth Care Solutions. The Manage Patients & Manage Claims sections of the OptumHealth Complex Medical Care (CMC) provider Web site allow you to view information about patients referred to you through OptumHealth Care Solutions and our payer clients.

You can:

- View claims repricing information and closed or rejected claims
- View active and closed case information
- View current client list

Request Access

If you have never visited the CMC provider Web site, you can request a password by visiting www.myoptumhealthcomplexmedical.com and clicking on “Request Access” and “Health Care Provider.” Once you have requested access, you will receive an e-mail notification from OptumHealth Care Solutions within 48 hours. Please add ALL centers that you require access to viewing.

Operational Reminders

Notification Form

The OptumHealth notification form (NF) is our organization’s form of a member ID card. This informs the center that a member will be accessing the OptumHealth contract with the effective date of the member’s case. This form has the claims mailing address and the Case Manager assigned to manage the case. Once a notification is received, you are able to submit claims to OptumHealth for pricing per your contract language.

We suggest that distribution of this information occur as indicated below:

- Billing and administrative staff are notified by the NF that claims are to be sent directly to OptumHealth.

Reminder: It is your organization’s responsibility to verify member benefits at the beginning of the case.

The medical centers and programs within OptumHealth are independent contractors who render care and treatment to members. OptumHealth does not provide health services or practice medicine. The medical centers and programs are solely responsible for medical judgments and related treatments. OptumHealth is not liable for any act or omission, including negligence, committed by any independent contracted health care professional, medical center or program. The OptumHealthSM Complex Medical Conditions Solutions are not a substitute for a doctor’s care.