Optum

MnFIRE FAQ

Q1. What is the MnFIRE hotline number?
A1. 1-888-784-6634

Q2. Does the 5-day rule mean that it is expected that an appointment is set up within 5 business days?
A2. Yes, Clinicians in the MAP network are expected to accept eligible firefighters and their family members within 5 business days of the appointment request.

Q3. How does Optum determine expertise in working with firefighters?
A3. Clinicians must have "Police/Firefighter" area of expertise indicated on their Optum profile.

Q4. Is the reimbursement $125 for all codes?
A4. Yes, all codes are reimbursed at the same rate for all license levels.

Q5. Why is 90791 or 90837 not included as a reimbursable code?
A5. Paid for by a member's employer, EAP is a health and wellness benefit designed to provide assessment and referral, as well as a brief counseling intervention. The typical EAP benefit offers a limited number of sessions with a mental health or substance use disorder clinician for counseling services.

Q6. Will Optum provide the DX to use when submitting a claim?
A6. No, Optum will rely on the provider's expertise in determining the proper diagnosis.

Q7. Is the limit … 5 visits per family unit or per family member?
A7. Optum allows virtual visits and/or face-to-face services with MnFIRE network clinicians with an area of expertise and area of training in treating firefighters for up to **5** visits per member, per problem, per year.

Q8. Will the provider get a copy of the authorization letter?
A8. The firefighter or family member shall receive an authorization number and receive a copy of the authorization letter by mail or email. Optum will not send the letter to providers; however, a provider can request a copy of the letter from the member. Providers may also call **1-866-694-9662** to verify MAP authorization details. Members can also get a authorization number from LAWW starting 1/1/2022. Liveandworkwell.com – access code MnFIRE.

Q9. Is this program for all MnFIRE individuals whether they work part-time or full-time?
A9. Yes, the program is designed for anyone that is an active firefighter/first responder including volunteer firefighters.

Q10. Are virtual visits covered?
A10: Yes, If the services are provided virtually via telephone or video conference, the 02 Place of Service Code must also be included on the claim.

Q11: Can back-dated authorizations be given?
A11: No, firefighters and their family members must utilize the MnFIRE Hotline and go through the assessment process to obtain an authorization prior to their first appointment.

Q12: Can the providers obtain the assessment information that takes place during the time of the call?
A12. No, unfortunately that information is not provided to the rendering provider.

Q13: Can an individual utilize their MAP benefit and then EAP if they have those or is it only one or the other?
A13: Yes, if a firefighter or their family member has a medical plan, they can opt to utilize the EAP services under their medical plan.

Q14. Q: How does a provider determine if they are part of the network?
A14. Provider can check their practice profile on *providerexpress.com* or contact their dedicated provider relations advocate.

Q15. Can they get more than 5 visits a year with a different DX?
A15. The firefighter or family member can switch over to their medical plan for coverage of additional visits. In some instances, the provider can call into the MnFIRE MAP line (**1-888-784-6634**) to inquire if additional visits can be obtained based on review of each individual case.

Q16. Does the assessment screening that is completed by Optum include possible disassociation?
A16. No, the assessment does not include possible disassociation.

Q17. Is PTSD required for the program?
A17. No, PTSD is not required for the program.

Q18. Will there be reimbursement for no shows or late cancels?
A18: No, Optum standard policy for no shows or late cancels will apply.

Q19: Software programs requires providers to do an assessment and bill 90791 with new patients. How are they supposed to over-ride their software programs?
A19: Optum cannot direct and recommends referring to the software's support team.

Q20: Will providers be required to detail MAP sessions for worker's compensation cases?
A20: No, the MAP sessions are confidential, and the information will not be shared with worker's compensation cases.

Q21: Can a claim be submitted without a DX?
A21: No, all claims require a diagnosis code for claim processing.

Q22: What is the payor ID for submitting claims?
A22: Please use the payer ID 87726.