



EMPOWERING PEOPLE ~ STRENGTHENING COMMUNITY

BILLING

FREQUENTLY ASKED QUESTIONS

Q. How long after submission of billing should we expect payment?

A. Providers should receive payment within 48 days of submission of a *clean claim*; this matches the prompt pay guidelines.

Q. Where can a Provider retrieve a copy of the “Billing Attendance Sheet”?

A. Forms are available on the MHP website and part of the initial contract.

Q. How would a Provider get connection to MCO in order to perform claims entry and auto authorizations?

A. You may contact your Provider Liaison for the MCO connectivity form.

Q. How do Providers resubmit a denied claim?

A. Providers should send a copy of denial letter, along with the invoice that was denied and the corrected information should then be forwarded to the billing department for reprocessing.