

**Magellan Behavioral Health, Inc.**  
**Provider Handbook Supplement**  
**for**  
***Arizona Biodyne***

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### Introduction

Welcome to the Magellan Health Services, Inc. (Magellan) Provider Handbook Supplement for Arizona Biodyne. This handbook addresses policies and procedures specific to Arizona providers for Blue Cross and Blue Shield of Arizona, Arizona Biodyne. The Provider Handbook Supplement for Arizona Biodyne is to be used in conjunction with the [Magellan National Provider Handbook](#). When information in the Arizona Biodyne Supplement conflicts with the national handbook, or when specific information in the Arizona Biodyne Handbook Supplement does not appear in the national handbook, policies and procedures in the Arizona Biodyne Supplement prevail.

In order to meet the behavioral health needs of their members, Blue Cross and Blue Shield of Arizona/Arizona Biodyne has contracted with Magellan to provide a continuum of services to individuals at risk of or suffering from mental, addictive, or other behavioral disorders.

Magellan offers a variety of behavioral health services to Arizona Biodyne members. These services include assessment and treatment planning, psychiatric services, medication management, inpatient services, intensive outpatient services, outpatient therapy, and substance abuse services. For more detail about the available behavioral health benefits, both providers and members may contact Magellan at the following phone number.

<p><b>Contact Magellan:</b> <b>1-800-224-2125</b></p>
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## Section 3: Dispute Resolution Process for Provider Grievances

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### Our Philosophy

Magellan supports compliance with all state and federal laws.

### Our Policy

Arizona Biodyne's dispute resolution process satisfies the requirements of Arizona state law for maintaining internal systems to resolve payment disputes and other contractual grievances with health care providers. It is available to contracted and non-contracted providers.

### What You Need to Do

When a provider disagrees with adjudication of a claim or adjustment, or wishes to grieve a nonpayment issue, the provider may initiate the grievance process, which has two levels of review.

Issues for which grievances can be initiated include:

- Whether a claim was clean
- Failure to timely pay a claim
- Amount paid (bundling software)
- Amount paid (other than bundling software)
- Amount or timeliness of interest payment
- Adjustment request
- Denials that require a provider write-off (for example: investigational/experimental)
- Network adequacy (other than the provider's contract status)
- Systemic or operational problems
- Coordination of benefits (COB) issues
- Reimbursement schedule disputes
- Fragmentation of incidental procedures
- Modifiers
- Mutually exclusive procedures
- Procedure unbundling
- Timely filing (See information in the Timely Filing section)

#### **Provider Grievance (Level 1)**

All grievances must be in writing and submitted to Arizona Biodyne no later than one year from the denial or other notification, or the date of the occurrence if the provider did not receive notification.

A level 1 grievance request should include:

- A reference to, or copy of, the action with which the provider disagrees.
- A written explanation of why the provider thinks the action is wrong, and a description of the relief that the provider is requesting.
- Documentation that supports the provider's position, such as medical records, operative reports or office notes.

## Section 3: Dispute Resolution Process for Provider Grievances

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### **Provider Grievance (Level 2)**

If Arizona Biodyne's level 1 grievance resolution is not satisfactory, the provider may request a level 2 grievance. The level 2 grievance must be submitted in writing to Arizona Biodyne within 30 days after receipt of the level 1 grievance determination.

The level 2 grievance must state the reason for dissatisfaction with the prior decision, and include any additional information for review. Arizona Biodyne will notify the provider of Arizona Biodyne's final decision within 30 days of the date the Level 2 grievance is received.

Send all provider grievances to:

Arizona Biodyne  
Attention: Provider Grievances  
2301 West Dunlap Avenue  
Suite 210  
Phoenix, AZ 85021

You also may use the optional [Provider Grievance Form](#).

### **What Magellan Will Do**

Arizona Biodyne staff members who were not involved in the initial determination will review the grievance, including any new information submitted to Arizona Biodyne. The provider submitting the grievance will be notified in writing of Arizona Biodyne's decision within 30 days of receipt.

Arizona Biodyne will mail all decisions to the provider's address on file. The decision is deemed received on the date of delivery, if hand-delivered, or, if mailed, on the earlier of the actual date of receipt or five days after the United States Postal Service postmark.

### **Other Information Regarding Grievances (Excludes FEP)**

- The provider grievance process described in this handbook supplement does not apply to denial of admission to the Arizona Biodyne network, termination from the network, or a complaint that is the subject of a health care appeal (HCA) under ARS 20-2530.
- The provider grievance process is distinct from the processes for health care appeals and member grievances. The grievance process is not intended to limit provider participation in the health care appeal process. Providers who are authorized to act on behalf of a member may submit a health care appeal to

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Arizona Biodyne to the extent permitted under the health care appeal process and ERISA.

- Record requests: Arizona Biodyne will no longer request records to support an appeal or grievance. Decisions will be made on the basis of submitted information in combination with records previously received.

### **Timely Filing**

Claims must be submitted to Magellan Health Services or through a preferred clearinghouse within **60 days** of the date of service or inpatient discharge. Claims must be submitted using the HIPAA compliant ASC X12 837 format. If claims are submitted after the timely filing limit, they will be denied for payment, subject to applicable Arizona and federal laws.

### **Address for Submitting Claims**

Arizona Biodyne c/o Magellan Health Services  
P.O. Box 2215  
Maryland Heights, MO 63043

## Section 4: Arizona Department of Insurance (DOI) Timely Pay and Grievance Law

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<b>Our Philosophy</b>	Magellan complies with all state and federal laws.
<b>Our Policy</b>	Magellan will provide information available from the Arizona Department of Insurance.
<b>What You Need to Do</b>	Become familiar with Department of Insurance Timely Pay and Grievance Law.
<b>What Magellan Will Do</b>	<p>Magellan’s responsibility to you is to operate a toll-free telephone number to respond to provider questions, comments and inquiries. That number <b>1-800-224-2125</b>.</p> <p>Magellan also will provide a copy of the DOI <a href="#">Timely Pay and Grievance Law</a> online.</p>

## Section 5: Subcontracting of Participating Provider Agreement

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**Our Philosophy**      Magellan does not allow subcontracting or sub-delegation of its Provider Participation Agreements.

**Our Policy**            Magellan Health Services, Inc. does not allow subcontracting or sub-delegation of the Provider Participation Agreement or of the Group Provider Participation Agreement.