Magellan provider website orientation

www.MagellanProvider.com

November 2018
Features:

- User guides/demos
- National provider handbook and supplements
- Provider Focus newsletter
- Eligibility and benefits information
- Authorization inquiry
- Enhanced Provider Data Change Form
- Provider Profile
- Claims inquiry
- Claims Courier
- Electronic claim submission information
- EDI Testing Center
- Companion guides for various transaction types
- HIPAA billing code set guides
- EAP information and forms
- EAP online billing
- Recredentialing form for solo practitioners
- Clinical practice guidelines
- Medical necessity criteria
Agenda

**MagellanProvider.com**

*Your toolkit for serving Magellan members*

**Where to get information**

- Provider handbooks and supplements
- State- and plan-specific information
- EAP information
- Clinical practice guidelines
- Medical necessity criteria
- Online demos
- Other information to support your practice

**How to sign in**

- Provider sign in
- My Practice menu
  - *Administrator setup*

**How to access services**

- Check member eligibility
  - *Lookup contact information*
  - *Check health plan benefit information*
- Submit claims – three electronic options
  - *Submit a claim online – Claims Courier*
- Check claims status
- Request/view authorizations
- Sign up for electronic funds transfer (EFT)
- Check secure messages
- Display/edit practice information
- Manage outcomes
- Complete your provider profile

**Provider Focus**

*News and information for Magellan network providers*
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Your toolkit for serving Magellan members

Where to get information

How to sign in
How to access services

What is Provider Focus?
Provider handbooks and supplements

➢ From the *News & Publications* tab on the menu bar, select *Handbooks*.

➢ Review the Magellan National Provider Handbook, including appendices, and supplements.
## State-, Plan- and EAP-Specific Information

Click below to view handbook supplements, forms, and additional tools and information available for your use in serving members of specific health plans or in certain states.

Providers must be familiar with and follow the policies and procedures contained within all applicable supplements to Magellan’s National Provider Handbook.

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EAP information

➢ If you are an EAP provider, review the national handbook’s EAP Supplement and appendices.

EAP Provider Handbook Supplement

EAP Handbook Supplement (PDF)

Appendices

- Appendix A EAP Forms
- Appendix B FAQ (PDF)
- Appendix C Member Rights Policy (PDF)
- Appendix D CISM Handouts
- Appendix E Customized Programs: FOH (PDF) and USPS (PDF)
- Appendix F EAP Audit Tool (PDF)
- Appendix G Threat of Violence Grid (PDF)
- Appendix H Workplace Support Mandatory Referral Process (PDF)
- Appendix I EAP Guidelines (PDF)

Registering EAP Cases Online

When a member contacts Magellan for EAP services, we provide them with a MAT (case) number that they can give to you. When you – the treating provider – receive a member-supplied MAT number, you use that number to register the member via our provider website.

Our EAP registration tip sheet takes you step by step through the secure, online registration process. We also have a demo of the EAP registration functionality.

Viewing EAP Registration Packets

Providers can view and print EAP member registration packet documents securely online. Read more.

Trainings

- EAP provider orientation (PDF)
- Critical Incident Stress Management
Magellan’s clinical practice guidelines are available on our provider website at www.MagellanProvider.com.

We review and update each clinical practice guideline on a two-year cycle.
Clinical practice guidelines

- Magellan develops or adopts clinical practice guidelines (CPGs) to assist you in screening, assessing and treating common behavioral health disorders.

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Medical necessity criteria

- From the *Providing Care* tab, choose *Clinical Guidelines*, then *Medical Necessity Criteria*.

- We use these criteria to determine medical necessity for the disorders listed in the DSM-5™.

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**Medical Necessity Criteria**

Magellan uses MCG Care Guidelines, along with our proprietary clinical criteria, Magellan Healthcare Guidelines, as the primary decision support tools for our Utilization Management Program. Collectively, they are known as the *Magellan Care Guidelines*.

Effective July 1, 2018, all plans will use the 2018-2019 Magellan Care Guidelines unless noted in the State/Client-Specific Criteria section below.

All guidelines meet federal, state, industry accreditation, and customer contract requirements. They are based on sound scientific evidence for recognized settings of behavioral health services and are designed to decide the medical necessity and clinical appropriateness of services.

**Medical Necessity Criteria (effective July 1, 2018)**

The [2018-2019 Magellan Care Guidelines](#) (PDF) become effective July 1, 2018, and include:

- *Magellan Healthcare Guidelines* -- These are publicly available at the link above.
- *MCG Care Guidelines* -- These are proprietary; to view a copy of the MCG Care Guidelines, contact Magellan at the number on the member’s benefit card, and a representative will send you a copy or grant you special online access.
Online demos

Access our demos of online tools from the Education tab, then Online Training.

Self-paced training modules are designed to help you navigate Magellan’s web-based applications in the areas of claims, electronic transactions and more.

Sample online demo
Other information to support your practice

• **Website user guides** - step-by-step instructions on how to complete administrative tasks on MagellanProvider.com. From the *Education* tab, go to *Online Training*.

• Extensive **claims coding information** to support your claims submission process, including companion guides for exchanging HIPAA-compliant EDI transactions with Magellan; DSM and ICD-10 diagnosis codes; CPT procedure codes and more. Go to the *Getting Paid* tab.

• **Tools for EAP reimbursement** are available from the *Getting Paid* tab. Choose *EAP Reimbursement*.
Other information to support your practice (cont’d)

• **Clinical forms** such as the Clinician Communication Form for coordination with members’ PCPs; member rights and responsibilities forms; and more. Go to the *Forms* tab and choose *Clinical Forms*.

• **Telehealth resources** for delivering your services to members via secure online sessions. Go to the *Education* tab and choose *Telehealth*.

• **Answers to frequently asked questions (FAQs)** pertaining to all Magellan applications. Click on the *FAQs* link at the top of the home page.
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Your toolkit for serving Magellan members

- Where to get information
- How to sign in
- How to access services
- What is Provider Focus?
Provider sign in

Sign in to access secure areas of our website.

- **Your username**: MIS number (Magellan Information System)
- **Your initial password**: Year of birth and last four digits of TIN/SSN (whichever number you bill under)
- **Practice groups**: Username = Group MIS number; initial password = 2003 and last four digits of the group TIN
- **Facility users**: Same process as practice group users

The account administrator grants access to other group personnel.
Welcome to the secure area of the provider website (after sign in).

Secure applications are accessed from the My Practice menu on the left.
Administrator setup

- The HIPAA-compliant *Administrator Setup* feature allows account administrators to add, delete and maintain additional user accounts within their practice entity.
- Although administrators cannot technically “delete” a user, they may change the users’ application access to “None.” This will prevent them from accessing any information.
- Only one administrator is allowed per practice.
- To change an administrator, you should contact us via the FAQs section.
Administrator setup (cont’d)

➢ The administrator enters information about the new user and selects the applications and TINs/MIS numbers the user will need to do his/her job.

➢ The administrator can mirror a new user’s access after an existing user OR set up the user manually.
MagellanProvider.com: Your toolkit for serving Magellan members

- Where to get information
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- What is *Provider Focus*?
Check member eligibility

This application allows you to determine if a member is eligible for your services.

NOTE: Payment of benefits is subject to the member's eligibility on the date of service and any other contractual provisions of the plan. To assure compliance with state mandates, please follow the pre-authorization instructions on the member’s health insurance card.

Search for a Member

Your search results will be limited to ONE record. The recommended search parameters are Member Name, Date of Birth, and State. At a minimum, you must enter State and Member Name or Member Number.

Use this application to determine if a member is eligible for your services
Lookup contact information

➢ Use the *Lookup Contact Info* tool to view phone numbers, addresses and plan information.
➢ Search by the entire plan name or partial name. All matching results will display.
Verify benefits

- After selecting the plan name, verify member co-payment, coinsurance and deductible by type of covered service, e.g., mental health, substance abuse, autism, etc.
Submit claims – three electronic options

- Submit, view or check status of claims from the My Practice menu on the left.

1. **Electronic Data Interface (EDI)** via Magellan’s direct submit process
2. EDI via a clearinghouse
3. Submission via **Claims Courier** — Magellan’s web-based claims submission tool

**TIP:** Access claims-related resources from the *Getting Paid* tab at the top of the webpage (does not require sign in).
Submit a claim online: Claims Courier

- Submit professional claims on a claim-at-a-time basis using Magellan’s secure web-based data entry application.
- Magellan must be the designated payer in order to process your submitted claims.
Check claims status

- Enter various search criteria to locate your claim(s).

![Check Claims Status (Claim Report)](image)

- Provider TIN: *
- **Required Field**
- Enter data for at least ONE of the following search options. You may use more than one option to narrow your search results.

  - **Member Information**
    - Last Name:
    - First Name:
    - Date of Birth: (mm/dd/yyyy)
    - Member No.:

  - **Subscriber Information**
    - Last Name:
    - First Name:
    - Subscriber No.:

  - **Date of Service**
    - From: (mm/dd/yyyy)
    - To: (mm/dd/yyyy)

  - **Other Information**
    - Claim No.: 
    - Check No.:

Enter only last 5 to 7 digits of check number. Omit leading zeros.

- **Status:**
  - [ ] In Process
  - [ ] Completed
  - [ ] Finalized
Request authorizations

➢ You can submit online authorization requests (as required by plan) under Request Member Care.
View authorizations

- The View Authorizations application allows you to review authorization information, and view, save and print authorization letters and enclosures.
- Authorization information is available for all authorizations, whether requested online or over the phone.

You can search by one of the following three options...

Sort the results...

and can either view online, or view, print or save in .pdf or .xls format.

Sample online demo
Sign up for electronic funds transfer (EFT)

It is mandatory that providers sign up for EFT for Magellan-paid claims

What are the benefits of EFT?
- Claims payments get to your bank account more quickly than the standard process of mailing and cashing or depositing a check.
- No risk of lost or misplaced checks.
- More time to devote to your practice.

Explanation of Benefits (EOB) are available on www.MagellanProvider.com
- Sign into the secure network.
- Click on Check Claims Status from the left-hand menu.
- Click on the EOB Search on the top tab.
Check secure messages

- **My Messages** lets you exchange detailed Protected Health Information (PHI) with Magellan while maintaining compliance with HIPAA privacy and security standards.

- Responses to your messages are directed back into your Inbox on the *My Messages* page.
Display/edit practice information

**Regularly updating your practice data** is critical to all transactions with Magellan.

**Practice data impacts:**

- Authorization notifications
- Recredentialing notifications
- Network/contractual-related communications
- Provider directories
- Claims payment

**Office managers/group administrators must be cautious** when updating practitioner information, particularly when the provider maintains a solo practice and/or works for other group practices.
What you need to do – solo and group practices

Notify Magellan within 10 business days of any changes in your individual practice information including:

- General information
- Contact information
- Access / availability
  - Promptly notify us if you are unable to accept referrals for any reason including:
    - Illness
    - Practice not accepting new patients
    - Professional travel, sabbatical, vacation, leave of absence, etc.

- Specialties
- Service, mailing or financial address

Group practices only

- Practitioners departing the group practice
- New practitioners joining the group practice
Display/edit practice information (cont’d)

What you need to do

✓ Access Magellan’s mandatory online Provider Data Change Form (PDCF) which allows you to update your information in real time.
1. Go to www.MagellanProvider.com
2. Sign in to the secure network.
3. Click Display/Edit Practice Information from left-hand menu.
4. Attest to the accuracy of your practice data on a quarterly basis.

✓ Training is available online under the Education heading on the provider website.

✓ Magellan provider network staff members also are available to assist with training.
Provider profile

This feature on our provider website allows providers to enhance the information that members see in our online Provider Search tools; you can:

- Upload a photo
- Include a personal statement
- Share awards and distinctions
- Share top attributes

Making more in-depth information about network providers available to members helps support consumer choice and ultimately contributes to the best care and positive clinical outcomes for members.

To access the provider profile:

1. Sign in to the website with your secure username and password at www.MagellanProvider.com
2. From the left-hand My Practice menu, select Display/Edit Practice Information
3. Click the Provider Profile tab

Practitioners who are part of a group also have the ability to sign in to the provider website and update their profile.
Help potential clients know how you could help them by completing the provider profile.
We encourage members to complete outcomes assessments regarding their care and share the results of these assessments with you.
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News and information for Magellan network providers

- **Provider Focus** is an award-winning, quarterly e-newsletter available on our behavioral health provider website. Click “Provider Focus” in the “Get Information” box.

- The publication provides network-wide information in addition to region- and plan-specific news you can use.

- Feature articles in **Provider Focus** include valuable information on topics that can directly impact your practice in key areas such as:
  - Current company events and new initiatives
  - Claims information and submission tips
  - Clinical findings and processes
  - Employee Assistance Program information
  - New products and services
  - Network efficiencies and survey results
  - Regulatory requirements and industry best practices
  - Quality improvement and medical services news
Thank you for attending!

The information contained in this presentation is intended for educational purposes only and should not be considered legal advice. Recipients are encouraged to obtain legal guidance from their own legal advisors.