



# Magellan Overview and Key Processes

*Idaho Residential Provider Training*



# Agenda – residential providers

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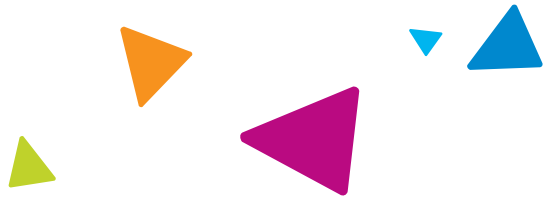
- » Welcome & introductions
- » Magellan of Idaho
- » The Magellan difference
- » Member transitions
- » Introduction to residential authorizations
- » Claims submission
- » Magellan of Idaho website
- » Provider support & resources
- » Wrap up & review

# Magellan of Idaho



Our Purpose:

Leading  
humanity  
to healthy,  
vibrant lives



Our Values:



**OWN IT**

If it is to be  
done, it's up to  
us to do it



**DELIVER**

We are relentless in  
the pursuit of value  
and results for our  
customers



**WIN TOGETHER**

We believe in the  
collective genius of  
our people and the  
magic of teamwork



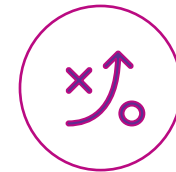
**CARE**

We care deeply  
about each other,  
our customers and  
the communities  
we serve



**STAND TALL**

We always  
do the  
right thing



**EVOLVE**

We embrace  
learning as a  
means to  
reinvention – in  
all that we do

# Regional offices

Region 1 (Panhandle)



Regions 1 & 2 supported by  
**Coeur d'Alene office**

Regions 3 & 4 supported by  
**Boise office**

Regions 5, 6 & 7 supported  
by **Pocatello office**

Region 2 (Northcentral)



Region 5 (Southcentral)



Region 3 (Southwest)



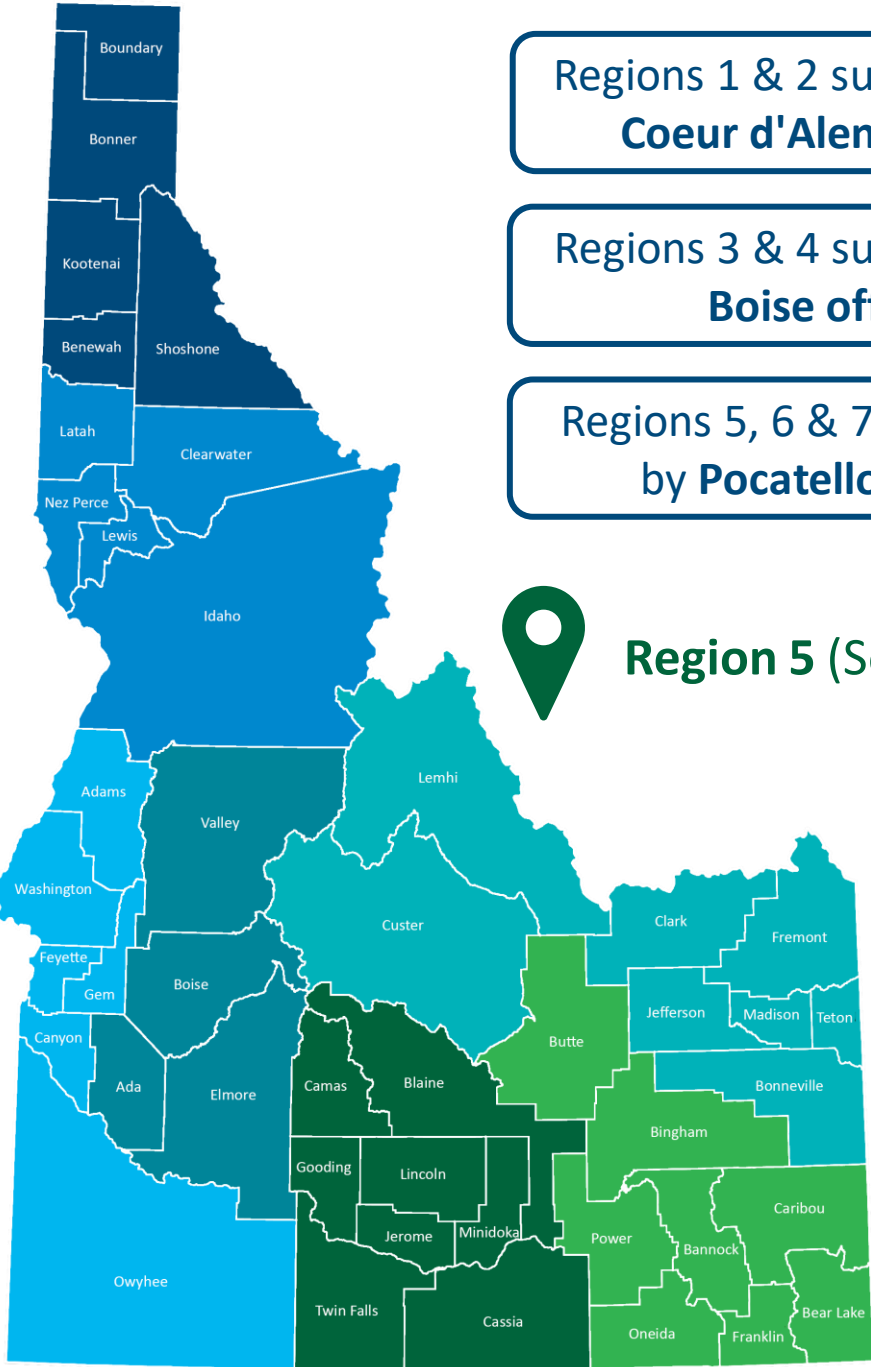
Region 7 (Eastern)



Region 4 (Valley)



Region 6 (Southeastern)



# Idaho regional care teams



## Regional care team members

Provider support specialists

Quality reviewers

Care managers

Transition of care coordinators

Recovery support coordinators

Family support coordinators

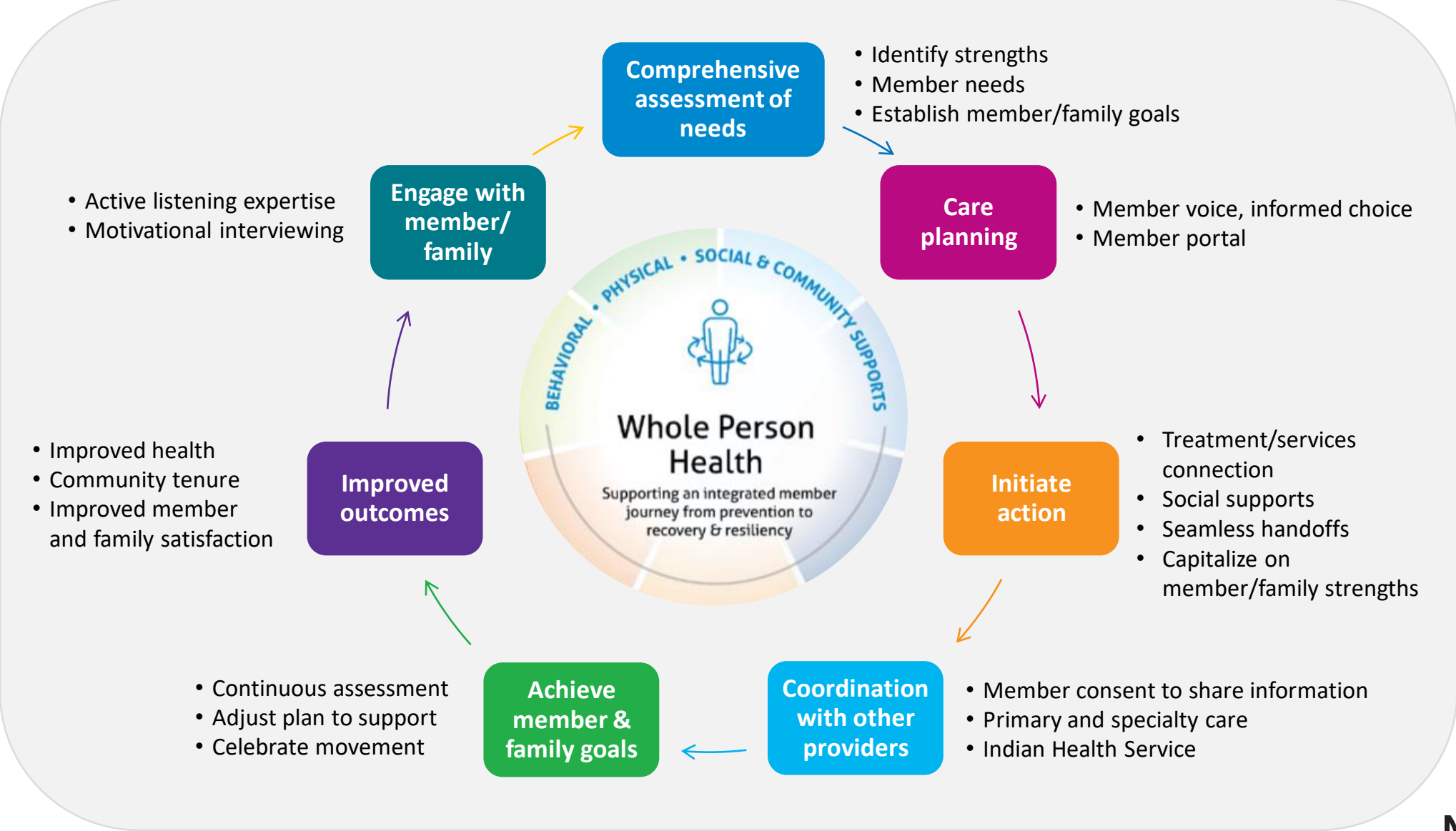


# Member experience – no wrong door



- Contact center
- Crisis
- Providers/PCPs
- Member data stratification
- Clinical care team
- Stakeholders
- Emergency responders
- Emergency departments

# Magellan's approach to member care





# Member transition planning



## Continuity of care and seamless transition for members and families

- Identify members in advance of program implementation (July 1, 2024)
- Participate in treatment, care and discharge planning with treatment team, member and families
  - Inpatient and SUD residential - 30 days prior to July 1, 2024
  - Youth in PRTF placements - 60 days prior to July 1, 2024



# Member transition planning (cont.)



## Continuity of care and seamless transition for members and families

- Enter authorizations beyond July 1, 2024 into Magellan's clinical platform
- Collaborate with IDHW and other vendors to integrate existing clinical documents into Magellan's clinical platform
- Assign Magellan Clinical team members to specific facilities
- Send new member packets with information about Magellan and the IBHP to all members



# Overview of Authorizations at Magellan



# Levels of care & clinical review guidelines



Facility/level of care	Clinical review guidelines
Inpatient Mental Health: Hospital	Modified MCG Care Guidelines
Inpatient Mental Health: Institution for Mental Diseases (IMD)	Modified MCG Care Guidelines
4.0 Medically Managed Intensive Inpatient Services	American Society of Addiction Medicine (ASAM), 3 <sup>rd</sup> ed.
3.7 Medically Monitored High Intensity Inpatient Services	ASAM, 3 <sup>rd</sup> ed.
3.5 Clinically Managed Medium Intensity Residential Services	ASAM, 3 <sup>rd</sup> ed.

# Concurrent reviews: Psychiatric residential treatment



## Psychiatric residential treatment

Concurrent reviews for  
residential treatment will  
initiate **30 days** after  
admission

*Includes Medicaid and non-Medicaid members*



# Concurrent reviews: Inpatient & psychiatric residential treatment



Information gathered during concurrent reviews: Medicaid and non-Medicaid

- Reason for admission / current risk level
- Diagnosis
- Treatment plan goals / updates to treatment plan
- Result of diagnosis tests
- Social determinants of health (SDOH) needs
- Referrals to other programs
- Physical health needs
- Medication management
- Crisis planning
- Discharge planning



# Residential treatment facilities (RTF) and psychiatric residential treatment facilities (PRTF)



- Magellan will collaborate with IDHW to develop the referral process for providers who recommend psychiatric residential treatment facility (PRTF) for youth.
- When a youth is admitted into a PRTF, the provider will submit a notice of admission to Magellan and will receive an authorization for 30 days. Concurrent reviews will begin at 30 days.



# Concurrent reviews: ASAM Levels 3.0, 3.5 and 4.0



Information gathered during concurrent reviews: Medicaid and non-Medicaid

- Collaboration with formal supports
- Planning with family / natural support
- Medication-assisted treatment
- Treatment plan goals / updates
- Readiness to change
- Connection to SDOH needs
- Physical health needs
- Referrals to other programs
- Crisis planning
- Discharge planning





# Discharge reviews



**Discharge plan - agreement from member/family**

## Information gathered for discharge reviews

Inpatient, psychiatric residential, and ASAM 3.5, 3.7 and 4.0  
Medicaid and non-Medicaid



**Crisis plan**



**Medications**



**Name of provider, date and time of appointment**



**Connection to SDOH needs**

# Claims Submission



# Claims submission






- Magellan provider contracts require claims to be submitted within the required timely filing limits



Claims not received within the applicable required timely filing limits will be denied

# Claims submission

## Claims must contain:

-  No defect or impropriety, including a lack of any required substantiating documentation
-  HIPAA-compliant coding or other circumstance requiring special treatment that prevents timely payments from being made
-  Claims not containing all required information will be subject to denial



# Claims submission options



Providers have many options for submitting claims:

## Paper claim

- Mailed to Magellan



## Electronic claim

- Electronic data interface (EDI) via direct submit
- Web-based claims submission tool via Magellan's provider portal
- Contracted clearinghouse



# Paper claims submission



Hard-copy submissions  
physically mailed to Magellan



## CMS 1450 (UB) claim form

Used for *facility-based*  
services

## CMS 1500 claim form

Used for *non-facility-based*  
services



## EDI Direct Submit



Electronic claims  
upload process

- Supports **HIPAA 837P** and **837I** claim submission files
- Allows providers to send HIPAA transaction files directly to and receive responses from Magellan *without* a clearinghouse



## EDI Direct Submit



Electronic claims  
upload process

- Recommended if providers can create an 837 in HIPAA-compliant format
- Testing process to determine if Direct Submit is right for you
- No cost to providers





## Web-based Direct Submit



Web-based claims  
upload process

- Web-based claim submission tool via data entry application
  - For credentialed and participating providers
  - Professional claims ONLY (no institutional claims)
  - One claim at a time
  
- Allows providers to send HIPAA transaction files directly to and receive responses from Magellan *without* a clearinghouse



## Web-based Direct Submit



Web-based claims  
upload process

- Claims processed in real-time
- Provides immediate notification of the potential errors in claims submission for quicker resolution and timely resubmissions where required
- Recommended process for providers who submit a low volume of claims
- No cost to providers

## EDI submission via clearinghouse








Electronic claims  
submission  
process

- Clearinghouse transforms non-HIPAA-compliant formats to compliant 837 format
- Magellan accepts 837 transactions from several contracted clearinghouses
- Proper Payer ID is required for all clearinghouse submissions
  - 837P Professional: 01260
  - 837I Institutional: 01260
- Note there may be charges from the clearinghouse

# Review claims via Availity Essentials



## Availity essentials

-  Free, real-time access to payer information
-  Verify eligibility and benefits prior to submitting a claim
-  Check claims status
-  View/print remittance advice
-  Access Availity Essentials via [www.availity.com](http://www.availity.com)



# Provider support via Availity Client Services (ACS) Essentials



## Chat

Available daily via Community Support on [www.availity.com](http://www.availity.com)



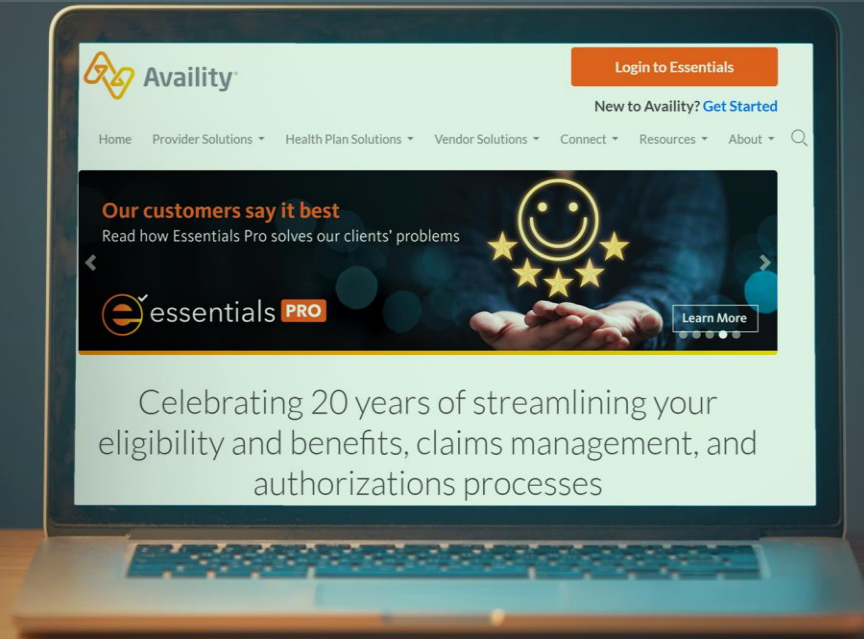
## E-ticketing

Available 24/7 on [www.availity.com](http://www.availity.com)



## Phone

1-800-AVAILITY (282-4548)  
Monday-Friday 8 a.m.-8 p.m.ET



# Claims reimbursement



**Electronic funds transfer (EFT)**

**Reduced administrative burden  
benefits your practice**

**Secure payments directly deposited into your bank**

➤ Magellan network providers must sign up for EFT through our contracted vendor site and receive all payments electronically

➤ Our vendor will conduct a secured transmission test with your bank to make sure payments transfer properly

# ECHO Health



ECHO Health is the payment processing platform that will provide electronic funds transfers (EFTs).



### ECHO Health will handle:

- EFT
- Checks
- Virtual credit cards
- Provider EOBs & EOPs



**You must submit a claim BEFORE signing up for EFT**

# Reimbursement rate



## **Methodology & rates**

Magellan follows the state methodology for hospital types, such as acute care and psychiatric, using All Patients Refined (APR) Diagnosis Related Groups (DRG) methodology and rates

## **Exclusions**

Facilities excluded from APR DRG methodology are reimbursed at per diem rates, such as Institutions for Mental Diseases (IMDs) and in-state critical access hospitals, psychiatric residential treatment facilities (PRTFs), and residential treatment centers (RTCs)



Methodology and rates come from the state of Idaho



# Provider Support & Resources



# Magellan of Idaho website



# Magellan of Idaho website content



## ✓ News and Events

- Trainings and webinars
- Special events
- Quarterly *Provider Focus* newsletter
- Provider communications
- Press releases
- Discover Magellan Healthcare

## ✓ Provider Resources

- Letter of Intent Submission
- Provider Handbook
  - Contractual expectations
  - Credentialing and recredentialing
  - Regulatory requirements/changes
  - Quality partnership
  - Provider reimbursement and claims

## ✓ Member Resources

- Emergency contacts
- Community referrals
- Eligibility questions
- IBHP program descriptions
- IBHP program updates

# Contracting & Credentialing



# Letter of Intent process



### How do I submit It?

Submit a Letter of Intent by going to:  
[MagellanofIdaho.com](http://MagellanofIdaho.com)



### How long does it take?

Estimated time to complete  
5-7 minutes



### What information is needed?

Contact information:  
name, email,  
provider taxpayer ID (TIN),  
address, NPI, services

The Letter of Intent (LOI) confirms your intent to deliver behavioral health services and provides Magellan with information for the contracting process.

# Magellan's network



## Magellan's approach to network development

Our goal is to implement a **strengths-based plan** focused on **increasing access, enhancing quality, expanding choice and improving consumer experience.**

We understand the critical need to **work collaboratively** with members, families, providers, advocates, Idaho government officials and other stakeholders.

# Contract types



Magellan will contract with all qualified providers to participate in the network, allowing continuity of care for members.

## Organization/Facility

A facility or agency licensed and/or authorized by the state, which operates to provide behavioral health services



## Individual

A clinician who provides behavioral health services and bills under their own Tax ID/SS#

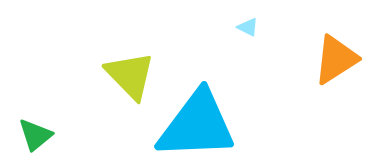


## Group

A practice contracted with Magellan as a group entity and as such bills as a group entity for the services performed by its Magellan-credentialed clinicians



# Credentialing application



Magellan network providers must have a Magellan provider agreement in order to bill Magellan for provision of covered services

Magellan credentials each facility separately and requires a separate credentialing application

## Organizational credentialing instructions



Do not photocopy for additional locations, as each application is barcoded uniquely to the specific provider ID/location



Complete all relevant fields and ensure your responses are legible



Be sure to sign and date each application you submit



Confirm your Medicaid enrollment is current



Provide updated roster



Return all required documents



Confirm accurate and complete facility demographics reported



# Credentialing checklist for submission



- All current state and federal licenses and certificates
- All accreditation information
- A *current* copy of organization's (a) medical malpractice, (b) errors and omissions, and (c) comprehensive general and/or umbrella liability insurance certificates of coverage, including the limits of liability and policy period (At least \$1M/\$3M coverage is required)
  - If organization is a governmental entity, a signed statement that organization is covered under Tort Claims Liability Act or similar legislation is required
- Copy of most recent state site visit report *for non-accredited organizations*
- Completed Organization Behavioral Health Staff Roster

# Provider Engagement

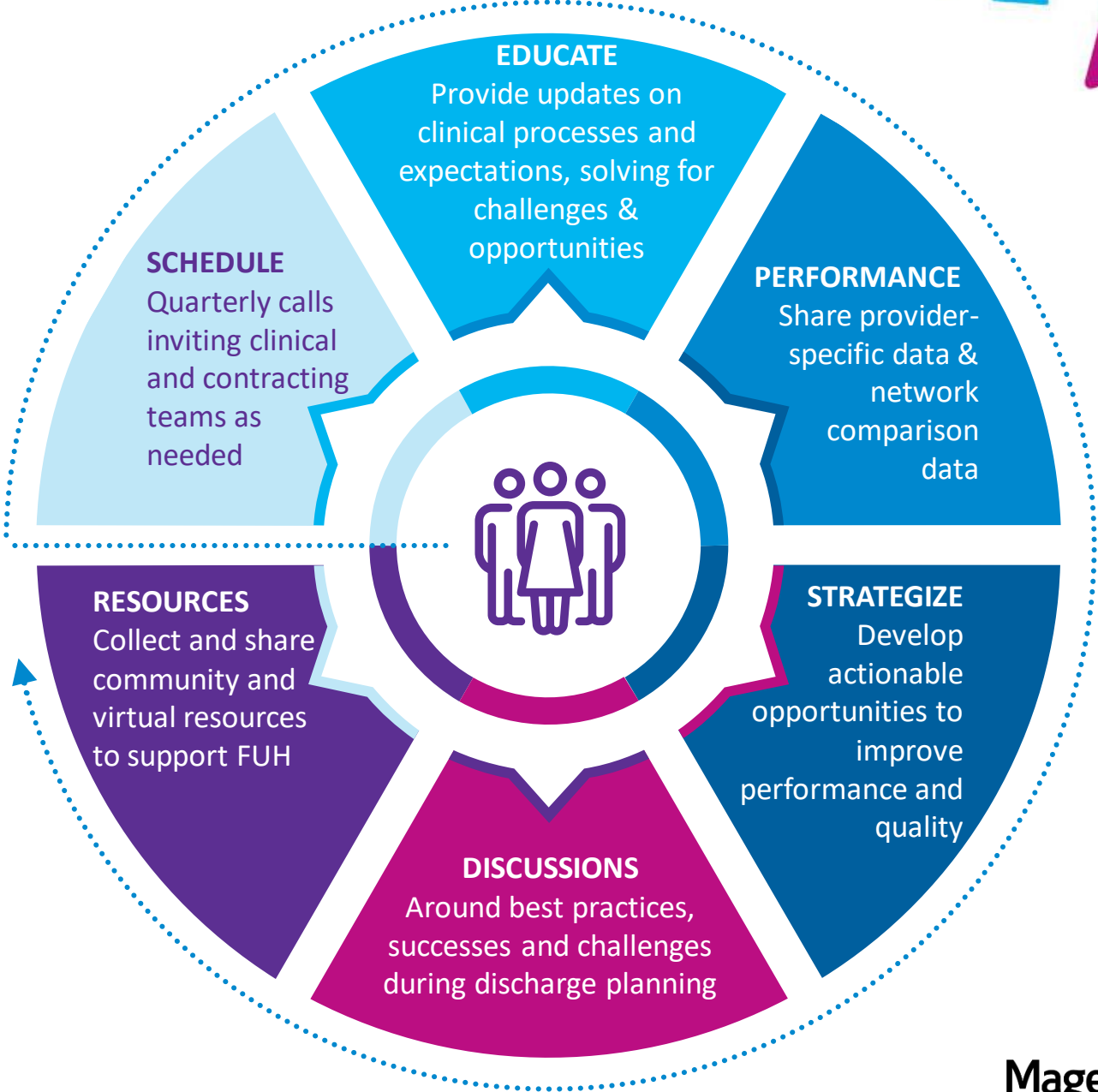


# Provider partnership team



Quarterly meetings with all facilities that have 50+ admissions in a year

Enhancing Magellan relationships while improving HEDIS measures, targeting cost of care, and developing innovative strategies



# Quarterly provider newsletter



The screenshot shows the homepage of the Magellan Provider Focus newsletter. At the top left is the Magellan Healthcare logo. To its right is a search bar labeled "Search Provider Focus" with a "Go" button. Below the search bar is the main title "PROVIDER focus" in large green letters, with the subtitle "News & information for Magellan network providers" underneath. A "Spring 2023" badge is positioned above the "features" section. The "features" section contains a list of links: "Support kids' healthy habits", "Share these resources during Mental Health Month", "Help members find the right provider", "Got insights? Make an impact", "Medical necessity criteria updates to occur this Fall", "Magellan provider satisfaction survey yields insights", "Increase your potential for referrals", and "One way to encourage recovery and resiliency". Below this is the "region/plan-specific news" section with a list of regions: California, Commercial Health Plans in AL, AZ, CO, CT, DE, FL, HI, IL, LA, MD, NC, NJ, OH, OR, PA, SC, TN, TX, Employer Plans Nationwide, Louisiana C SoC, Pennsylvania HealthChoices, Virginia Medicaid, and Wyoming CME. The main content area features a large image of two women in a meeting. To the right of the image is a featured article titled "We all can encourage recovery and resiliency" with a "Read More >" link. Below the image is a "featured articles" section with four columns of article teasers, each with a "Read More >" link.

- Current events & new initiatives
- Clinical findings & processes
- Industry best practices
- Learning opportunities & resources
- Claims & quality improvement tips
- New regulatory requirements
- Plan-specific news & more!

[MagellanProviderFocus.com](https://MagellanProviderFocus.com)

# Provider meetings and forums



In-person and webinars



Gain input and knowledge of local providers to enhance service delivery



Discuss Magellan initiatives



Inform providers of transition timelines

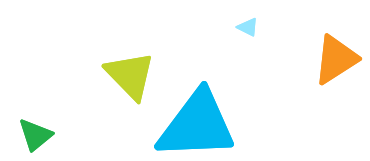


Discuss contracting activities and solicit feedback

*Establish strong collaborative partnerships*



# Provider Advisory Committee



- ✓ Hosted quarterly by Magellan
- ✓ Discuss Magellan initiatives and timelines
- ✓ Solicit suggestions and ideas to assist in implementing state and region-wide program initiatives
- ✓ Open forum to explore ways to promote diversity, equity, and inclusion, and best practices
- ✓ Review trends in the delivery of care
- ✓ Gain input and knowledge of local providers to enhance service delivery
- ✓ Annual report of provider satisfaction results
- ✓ 10-15 providers included as a representative of the Idaho market

# Contacting Magellan



Email

[IdahoProvider@MagellanHealth.com](mailto:IdahoProvider@MagellanHealth.com)

- Ask questions
- Request contracting materials
- Speak your mind
- Share information
- Discuss concerns
- Ask for help
- Brainstorm solutions
- Get added to Magellan's provider contact list

# Provider Feedback





# Provider feedback



What is working?

Where are there opportunities to change?

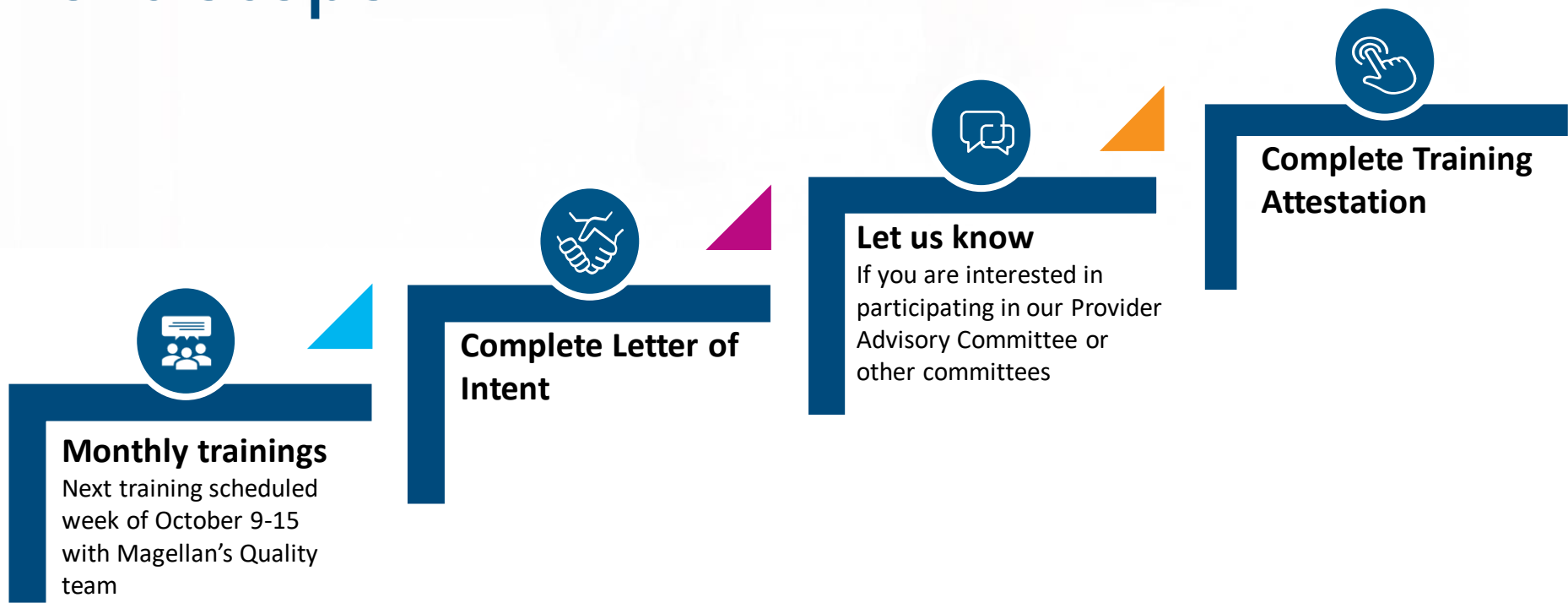


**We look forward to working with you!**

Topics for future residential provider trainings?

Interest in participating in ongoing Magellan committees?

# Next steps

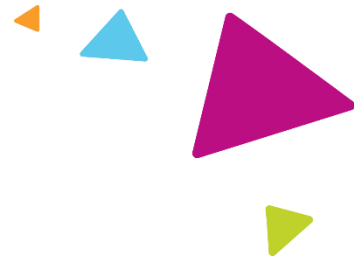




**Thank you!**

**Magellan**  
HEALTHCARE®

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