

Welcome to the Magellan Provider IBHS Workgroup

NOVEMBER 7, 2024

Magellan
HEALTHCARE®



Welcome and Opening Remarks

Agenda

- Welcome
- Network Updates
- Provider Spotlight
- Clinical Updates/Reminders
- Availability/Online Authorizations
- Upcoming Forums, Technical Assistance, and Resources
- Questions



Network Updates



Network Team



Mitch Fash – Sr. Network Manager – MFash@magellanhealth.com

Jess Pearce – Sr. Network Management Specialist – Cambria County- jpearce@magellanhealth.com

Michael Ditty – Network Management Specialist – Lehigh/Northampton Counties - msditty@magellanhealth.com

Crystal Devine – Network Management Specialist – Montgomery County - cedevine@magellanhealth.com

Jessica Torano – Network Management Specialist – Bucks County - toranoj@magellanhealth.com

Jeff Stumm – Network Management Specialist – Contracts/Credentialing - jrstumm@magellanhealth.com

Alyssa Gorzelsky – Claims Resolution Specialist – amgorzelsky@magellanhealth.com



Billing Usual & Customary



When submitting claims please use your usual and customary charges vs contracted amount.

Why is this important?

When Magellan provides a rate increase, sometimes the rate increase will be effective prior to the rates being loaded into the system. If a provider bills above their contracted amount (U&C), Magellan will be able to adjust the claims without the provider needing to resubmit their claims again. If the claim billed is under the new amount Magellan will not be able to adjust to the new amount contracted.

With the most recent rate increases, it is important to check that current rates are paying at the higher amounts. Please verify all claims have been submitted with the higher contracted amounts. If claims were submitted and paid with a billed amount lower than your current contracted rates, you will need to resubmit for the higher amount.

Magellan is automatically sweeping claims to adjust to the higher amounts as long as they were billed at the new rates. No additional actions are needed by providers. Please be aware that this process will take some time to complete, but feel free to reach out with any questions.

Billing Reminders



- Do not bill member's home address or any location other than a contracted rendering service location. These locations are listed out on your contracts.
- Please bill with your contracted codes and modifies. Authorization codes may differ than what is listed on your fee schedule. Modifiers must be listed in the order that they show on the fee schedule.
- For any corrected claims, it is required to resubmit with the original claim number.
- For ACT 62 covered members, claims must go through the primary payer first before submitting to Medicaid, who is always the payer of last resort.



Claims Resolution



- Claims that providers feel were denied *incorrectly* or have questions about a denied claim, these are considered “Claims Inquiries”.
- Providers should contact the Magellan provider line and speak to a customer service associate.

Provider Services Contact Information:

Bucks/Montgomery: (877) 769-9779

Cambria: (800) 424-3711

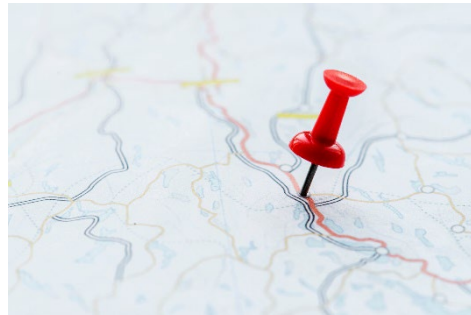
Lehigh/Northampton: (866) 780-3368

- If necessary, the customer service associate will submit a Service Request Application (SRA) to Magellan’s claims resolution team for further investigation.

Satellite Sites & Licensing



- IBHS licenses are issued regionally. There are 4 regional field offices: Western Field Office, Northeast Field Office, Southeast Field Office, and Central Field Office. A provider is only required to get multiple licenses if it provides services in multiple regions.
- If a provider has multiple locations in one region, they do not need each site licensed, unless the site provides on-site services. However, your service description must include all locations under the regional license as well as services being provided.
 - Example: Home, Community, and site based
- A provider is required to submit 1 service description for each IBHS license.
- If a provider's service changes, an updated service description must be submitted to the licensing field office for approval. If a provider's address changes, a provider must notify OMHSAS's licensing field office and, if the provider is enrolled in MA, it must also notify MA enrollment.
- *Not all locations in the region require MA enrollment unless providing on-site services.*



New IBHS Group Process



- If your agency is interested in expanding the IBHS Services currently being provided under your Magellan contract to include Groups & ABA Groups, please email MBHInterestedProviderApplication@magellanhealth.com.
- Please identify your agency and note whether your agency is seeking to add:
 - ✓ IBHS Group
 - ✓ IBHS ABA Group
 - ✓ Both

Network will respond by sending a link via DocuSign to be completed. This application will request submission of some documents for Magellan's review. Magellan will be asking your agency to submit a Group/ABA Group Service Description containing at minimum the following information: Address where group will occur, target population (including primary & MA secondary participants), clinical model of program, # of groups, size of each group, frequency of each group, length and frequency of sessions, open/closed enrollment, staff level of who will deliver the group service, family involvement in group service.

Once all the paperwork is received and reviewed, Magellan's clinical department will outreach to schedule a time to meet with your agency to verbally review and ask any outstanding questions. After, there is an internal, cross-department review process which will conclude with Magellan's decision and contracts as applicable.

Provider Expansion or Provider Changes



For Magellan, is your agency* ...?

- Moving locations
- Adding a new location
- Want to begin delivering 1:1 site-based services
- Want to begin delivering ABA Services or Individual Services

Please outreach Magellan's Network department identifying your expansion request or change to MBHInterestedProviderApplication@magellanhealth.com.

***Magellan should be notified prior to any changes as this can impact reimbursement.**

Availity Contact Information



- Availity provider support is available via Availity Client Services (ACS):
- E-ticketing – Available 24/7 on <https://www.availity.com>.
- Chat – Available throughout the day via Community Support on <https://www.availity.com>.
- Phone –1.800.AVAILITY (282.4548) Monday-Friday 8a.m. - 8p.m.ET

Network Reminders



- Magellan Credentialing is updated every 3 years. Providers will be directly notified from Magellan with a recredentialing application 6 months prior to the recredentialing date.
 - Please make sure your contact information is updated via the Magellan Provider website to ensure the applications are sent to the correct person.
 - Promise Medicaid Enrollment is due for revalidation every 5 years. This revalidation date is found directly on the Promise website.
 - Providers are encouraged to review this date and are responsible to revalidate as needed.
 - This is for all enrolled locations and for all provider type/specialty types
 - Example – individual 11/590, group 11/591, and ABA 11/592 are all individual provider type/specialty types.
- *Without active enrollment providers will be potentially affected with being reimbursed.



Provider Spotlight



Glenn Koch & Associates – Act 62: Provider Perspective

Danielle Zmitrovich

kochassociates1@aol.com





Clinical Updates/Reminders

Magellan Staffing Updates



New **Psychologist Advisor – Dr Adrianna Torres-O’Connor, PsyD started 10/28/24**

New BCBA Care Manager starting 11/11/24.

New Cambria Care Manager starting 11/25/24.



Magellan Staffing Updates



Emily W, our Lead Autism Care Manager, will be returning to Magellan December 18, 2024.





How to pick up a case currently unassigned?



1. A provider completes an initial assessment and submits the initial IBHS packet request to Magellan for MNC review via fax. They are unable to staff the case and have shared that openly with the family. On the TAR, in the provider section, please write “Unassigned”.
2. Magellan does the MNC review and enters an authorization for an unassigned provider.
3. Once a provider has been identified to deliver the approved services, that provider should submit to Magellan a TAR in order to have the authorization entered for the staffing provider.

How to pick up an initial assessment that was approved via a denial?

This initial assessment was administratively authorized as the most appropriate alternative level of care. Your agency will receive the paperwork from the original level of care requested along with the denial letter reflecting approval of the initial assessment.

1. Submit to Magellan via fax a Registration TAR so the authorization can be created for your agency.

Initial Assessment Registration



Packet submission for IBHS should submit the following documents through the online provider portal:

1. Registration Treatment Authorization Request (TAR) Form
2. Written Order

SHOUT OUT! KUDOS!



Dr. Siegler shared his observation that he is hearing more understanding of IBHS' short-term role in school-based services. Kids with certain needs qualify for FAPE. IBHS is called in to stabilize the child. At the point of stabilization, the discussion should switch to what level of support is needed to maintain their FAPE.

IBHS Assessments should contain....



- The regulatory biopsychosocial information
- Standardized tool
- Data (baseline and current) & analysis of data
- Summary of Progress
- Barriers for progress if applicable and plan to address the barriers
- Service recommendations – *specify service hours per month and per setting**

**Magellan still sees BHT/BHT-ABA service hours per month combined to multiple settings. This makes determining MNC more challenging in addition to not meeting regulatory requirement and often result in a Request for Additional Information (RAI).*

Q: If a child is receiving services in multiple settings, do assessments need to be conducted in every setting that IBHS will be provided? What about summer camp settings?

A: The child should be assessed for each service that will be provided. As required by sections 5240.21(c)(7) and 5240.85(c)(6) of the IBHS regulations, the child should be assessed across the home, school, and other community settings. If a child is attending a camp, the graduate level professional should determine if the existing community assessment identifies the child's needs in the new environment or if an assessment in the new environment (camp) is needed.

OMHSAS Q&A: <https://www.pa.gov/content/dam/copapwp-pagov/en/dhs/documents/services/mental-health-in-pa/documents/ibhs-documents/Final%20-%20IBHS%20Webinar%20QA%205.11.21.pdf>

Q: How should assessment recommendations be written if seeking BHT/BHT-ABA in cyber school occurring at home?



A: Write as school but give as much information as possible. For example, BHT 40hr/month in school (cyber-school delivered in the home with biological parents supervising). ISPT meeting is still required.

Q: What Place of Service (POS) do we put on our BHT claims for this service delivery?

A: POS would be Home, the physical location where the member is receiving the service

Red flag:

- Caregiver intends to work on another floor of the home and wants BHT to work/supervise the member with their cyber schooling on another floor of the home. There needs to be a caregiver there to supervise and transfer skills to.

Q: I have plenty of information and data around the severity of behaviors or needs in this packet. That's enough for a concurrent authorization, right?



A: No. The MNC for Individual Services, ABA, and Group Services must take into account:

- Measured improvement and/or alternative/replacement behaviors

Or

- Reasonable expectation that services will reduce or ameliorate the therapeutic needs and increase coping strategies

Show the impact of the service.

What difference has the service made on their treatment goals?

If there is not progress, document the barriers for progress and how they are being addressed.

*Please ensure your clinicians know where to find the IBHS MNC:

<https://www.pa.gov/en/agencies/dhs/resources/medicaid/bhc/ibhs.html>

Barriers for Progress



Q: What is preventing the treatment team from making progress on the member's treatment goals?

A: The answer to this question should NOT be a diagnosis or the reason they are in treatment. For example, Autism diagnosis, being non-verbal, physical aggression, inattention, noncompliance.

Don't forget to also document how those barriers are being addressed in order to assist with progress going forward.

Alert: Services in school...



ALERT: Please make sure assessments occur across settings.

Magellan is seeing a large number of service hours occurring within a school type setting. However, we are also noticing the clinical information may be indicating a need for services within the home setting. The packet documents are not identifying this as a need. In conversations, providers often agree for the need for some services in the home but note barriers such as parents' work schedules, refusal by caregivers for this to happen, or clinician believing the home environment is not conducive for service delivery.

Unfortunately, sometimes these thoughts are shared and end with a period.

Magellan asks that these conversations continue and not end there. What's next? How will the team address these barriers? What's the plan to move these services forward?

Recommended ISPT Meeting Discussion Questions



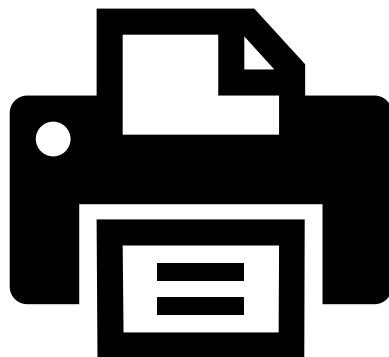
- What strategies currently work?
- Where has progress been seen?
- Are there any barriers for progress? If so, how can those be addressed?
- What are areas of need/concern within the school setting and how are they being addressed?
- What does the child need to learn to succeed?
- How will school staff reinforce replacement behaviors?
- What is the child expected to do and how can school staff reinforce in a way that the child can understand?
- Titration Plan
- Next steps by provider and school

Considering referring to Family Based Services (FBS)?



- Providers are asked to outreach their Magellan Care Manager when considering a FBS referral.
- Don't wait till the recommendation or evaluation is already completed.
- This is a discussion, not a presentation resulting in a FBS approval.

Sending a Fax to Magellan....?



Please clearly write on the fax cover sheet what is being faxed to us:

- ✓ Change of BHT prescription
- ✓ 30-day extension request
- ✓ Availity was down. Faxing in this concurrent request.
- ✓ RAI response



Availity/ Online Authorizations

Viewing Auths in Availity



□ How can I view my authorization?

Providers can view authorizations by:

- Authorization #
- Member information
- Provider ID/MIS#

Instructions located here:

[System \(magellanprovider.com\)](https://magellanprovider.com)

Finding Authorizations



To go in and check an authorization status from the main screen, go into...

VIEW AUTHORIZATIONS

✓ **REQUEST MEMBER CARE**

The old process seems to work but it will not always be accurate so please go into Request Member Care to find the authorizations submitted through Availity.

Provider Search to View Authorizations



Provider Search

When you are on the **Prescreen** searching for the Servicing Provider (for outpatient service/procedure requests) or Servicing Facility (for inpatient requests), follow the steps below to complete a provider search:

- a. Type your agency's name. Click **"Search."**

The screenshot shows a form titled "Search Provider" with two input fields: "Provider Name" and "Provider NPI". The "Provider Name" field is highlighted with an orange border.

- b. Click **"Go to Provider Search."**

The screenshot shows a message box titled "Provider Search Result(s)" with the text: "The search results only include the first 50 providers. There are more providers, please refine your search criteria." A button labeled "Go to Provider Search" is highlighted with an orange border.

Provider Search to View Authorizations



- c. **Provider ID field** = Type this number in the field. *(This is the number Magellan has commonly referred to as your agency's MIS Number.)*
- Narrow the search results by using the other fields including City and State. Enter your agency's city and state in the field and click "**Search.**"
 - If you get a message saying that there are no results, remove one of the filters.

Search Provider

Provider Name	Provider NPI
<input type="text"/>	<input type="text"/>
Provider ID	Tax ID
<input type="text"/>	<input type="text"/>
City	State
<input type="text" value="Warminster"/>	<input style="text-decoration: none; border: none; padding: 2px 10px;" type="text" value="PA"/>

There are no results for the entered filters.

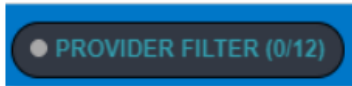
View Authorizations



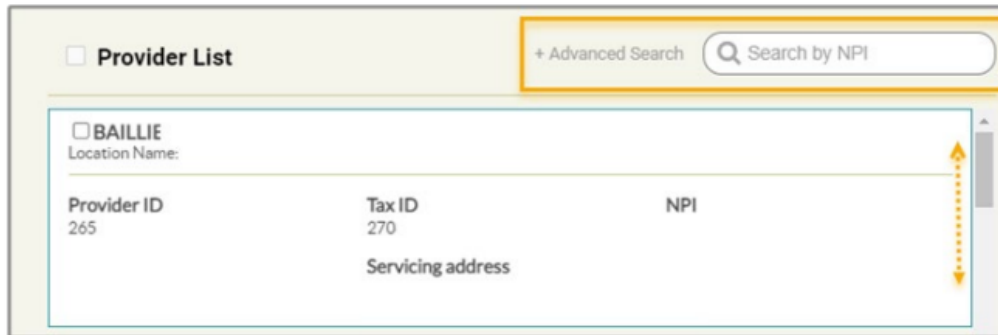
View All Authorizations for One Provider

To view all authorizations for a specific provider, you must first select the provider using the **Provider Filter** feature.

- a. Click on **PROVIDER FILTER**.



- b. Scroll to select the desired provider or perform a search using “Search by NPI” or the **Advanced Search** feature.



View Authorizations



c. Click the box next the desired provider.

Provider ID	Tax ID	NPI
265	270	

Servicing address

d. Select **“APPLY FILTER”** at the bottom of the window to see all applicable authorizations.

APPLY FILTER **RESET**

Concurrent online authorizations



On 9/10/24 - **43%** of providers submitted them correctly in Availity.

Now, approximately **45%** of providers submitted them correctly in Availity.

***Please share with your staff submitting authorizations this Power Point and the step-by-step resources located [System \(magellanprovider.com\)](https://magellanprovider.com)**

Concurrent Issues in Online System



TruCare BH PROD Dashboard Members Tasks Providers Authorizations Scheduler Management

Authorizations

SUMMARY VIEW OP0124392677

Authorization # Authorization Type: All Include: Closed Voided

Date From Date To

Rx Authorizations are Disabled
Pharmacy Authorizations are not completed within TruCare.

Authorizations Summary

ASSIGN TO CASE ADD TASK LINK VIEW EDIT COPY VOID CLOSE REOPEN CREATE PDF

Authorization #	From Date	To Date	Servicing	Diagnosis	Diagnosis	Status	State	Case #	Updated L	Updated E
OP0124392677	03/15/2024	09/10/2024		Behavioral	F90.2	Partially Ap...	Open	-	03/14/2024	Caroline Sm...

VIEW EDIT VOID CREATE PDF

Line Item #	From Date	To Date	Stay Level	Service Type	Status (R/A/D)	Servicing Provider	Procedure Code
1-SP	03/15/2024	09/10/2024	-	Intensive Behaviora...	Approved (288/ 288/ 0)		97151HO
2-SP	03/15/2024	09/10/2024	-	Intensive Behaviora...	Pending (1661/ 0/ 0)		97152HO

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Authorization #	From Date	To Date	Servicing	Diagnosis	Diagnosis	Status	State	Case #	Updated L	Updated E
OP0124392677	11/07/2023	03/14/2024		Behavioral	F90.2	Approved	Open	-	11/03/2023	Heather Ch...

VIEW EDIT VOID CREATE PDF

Line Item #	From Date	To Date	Stay Level	Service Type	Status (R/A/D)	Servicing Provider	Procedure Code
1-SP	11/07/2023	03/14/2024	-	Intensive Behaviora...	Approved (206/ 206/ 0)		97151HO
2-SP	11/07/2023	03/14/2024	-	Intensive Behaviora...	Approved (1548/ 1548/ 0)		97152HO

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“Extending” a Service/Procedure Authorization



1. Search for the authorization in the main Dashboard screen by entering the authorization number in the **Authorization Number** field.

Dashboard

CREATE INPATIENT AUTHORIZATION | CREATE SERVICE/PROCEDURE AUTHORIZATION

Filter By

Member ID: Authorization Number: 1 Diagnosis Type:

Date of Service From Date: 03/08/2023 Date of Service To Date: Inpatient Service Types: Service/Procedure Service Types:

Include Closed Requested By Me

FILTER **RESET**

2. Select the **FILTER** button.
3. Highlight the authorization, and then select the **ADD/EXTEND SERVICE** button.

RESULT: The **Services** screen will display.

4. Select the **EXTEND** button once the authorization appears.

Dashboard

CREATE INPATIENT AUTHORIZATION | CREATE SERVICE/PROCEDURE AUTHORIZATION

Filter By: Include Closed: No | From Date: 03/08/2023 | Authorization Number: OPXXXXXX359

Inpatient Authorizations Summary

Member Name	Authorization #	Determination Status	From Date	To Date	Servicing Facility	Diagnosis Code	State
No records found							

Service / Procedure Authorizations Summary

Member Name	Authorization #	Determination Status	Start Date	End Date	State
SIMPSON, RYAN R	OPXXXXXX359	Approved	12/20/2022	03/20/2023	Open

ADD/EXTEND SERVICE **VIEW AUTH DETAILS**

RESULT: The **Prescreen** section will display with pre-entered authorization information automatically populated. Only certain fields will be editable.

Extend Service/Procedure Behavioral Health Authorization

Prescreen | Authorization Details | Services | Confirmation

Service Type: Electroconvulsive Therapy (ECT) Procedure Code: ANESTHESIA ELECTROCONVULSIVE THERAPY (00104)

EXTEND

1 Packet Attachment in Availity



THANK YOU! THIS IS GREAT!

We went from 62% of providers sending in 1 attachment within Availity to 84% since our last webinar.

For those still attaching each document separately, please work with your team to explore ways to upload just 1 document.



Frequent issues reported within Availity?



- *It won't let me see a member's authorization.*

Please refer to the previous slides about the 3 ways to view your authorizations.

- *I can't find the member.*

Try adding the member's MA county abbreviation (BUC, CAM, LEH, MNT, or NOH) before the MA ID# such as BUC0123456789.

Double check that their eligibility county hasn't changed or MA termed.

If it's a concurrent, try searching for their current authorization by searching their Auth # or searching Provider ID# instead of by member name.

- *I've tried all the tricks and it's still not working.*

Clear your cache and cookies.

Still having Availability issues??



Kristen can try to help triage next steps if you email IBHS@magellanhealth.com with the following information:

- Details of the issue and exactly where/what screens this is occurring on
- Submit a screenshot or 2 of where the problem is occurring
- **Gold Star** Approach would be generating a .HAR file if using Chrome browser.

There are some directions on the next slide on how to do this. Kristen also has these directions along with screenshots if you want that handy for help as well.

Generating a .HAR file



- Re-create the issue in Chrome, but stop right before clicking submit or whatever button is getting the error. Do a screenshot (#1) of as much of the screen as possible and send it to me.
- Then click the 3 vertical dots in upper right-hand corner.
- Choose more tools, developer tools:
- A tab opens to right of screen (on mine it opens as a separate window).
- At the top of the right-hand part, click Network, if it isn't chosen already:
- Now go back to the left part (TruCare screen) and finish clicking the submit button. Do a screenshot (#2) of the error message and send that to me. If the error message says something like “click here for technical details”, click it and do a screenshot (#3) of the technical details and send that to me.
- Go back to the right part and click the down arrow button. On my screen it is toward the right, but on yours it may wrap around to the next line on the left. This will download the .HAR file.
- It will prompt for a file location and file name. You can use the default values. It usually defaults to C:\Users\userName\downloads\ for the location. Send me that file.
- Also, make note of the current date/time, because IT may ask to look in the log file at the approximate time to see any error messages that were recorded.



Upcoming Forums, Technical Assistance & Resources

Compliance

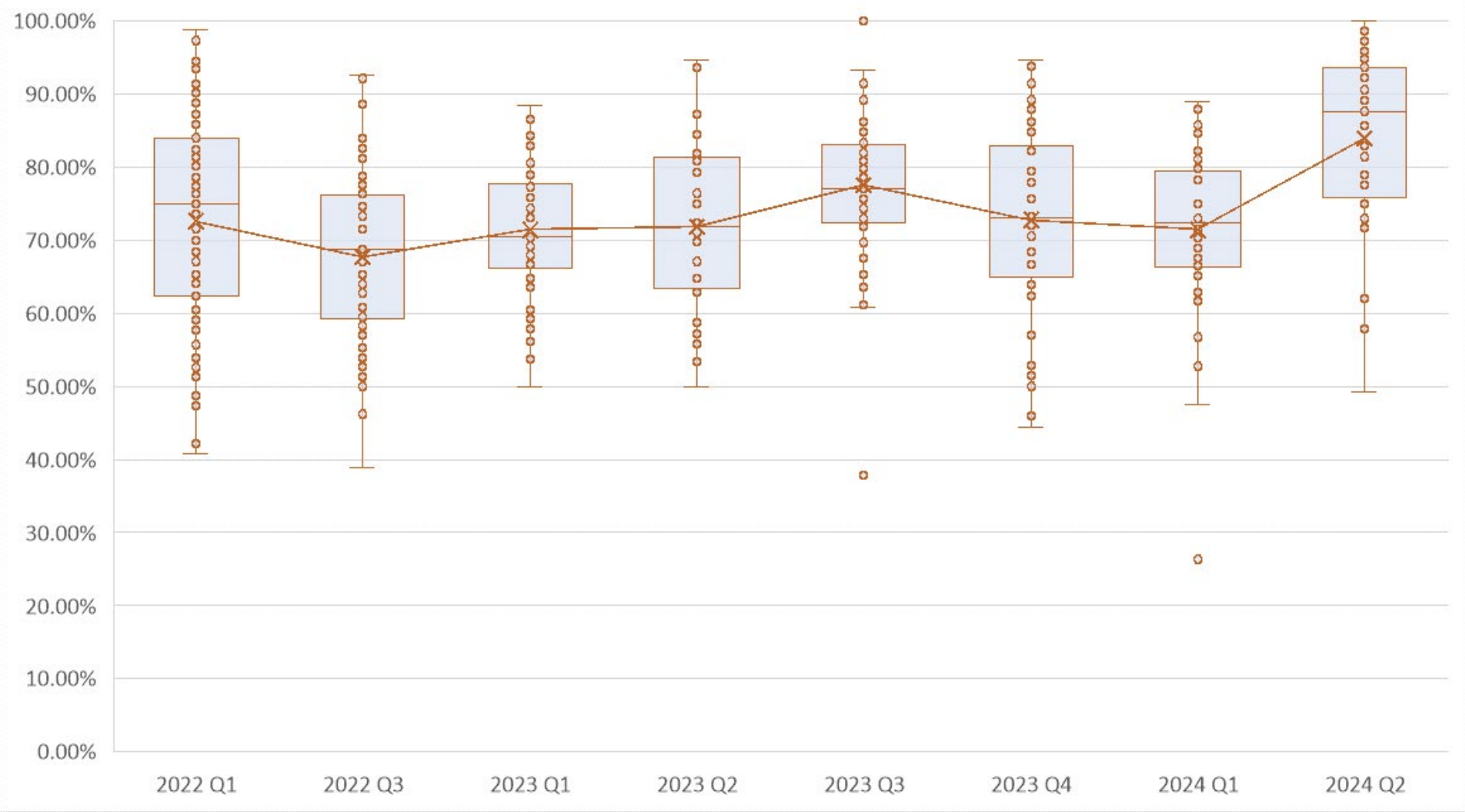


- [Compliance Blasts: Providers Page | Magellan of PA](#)



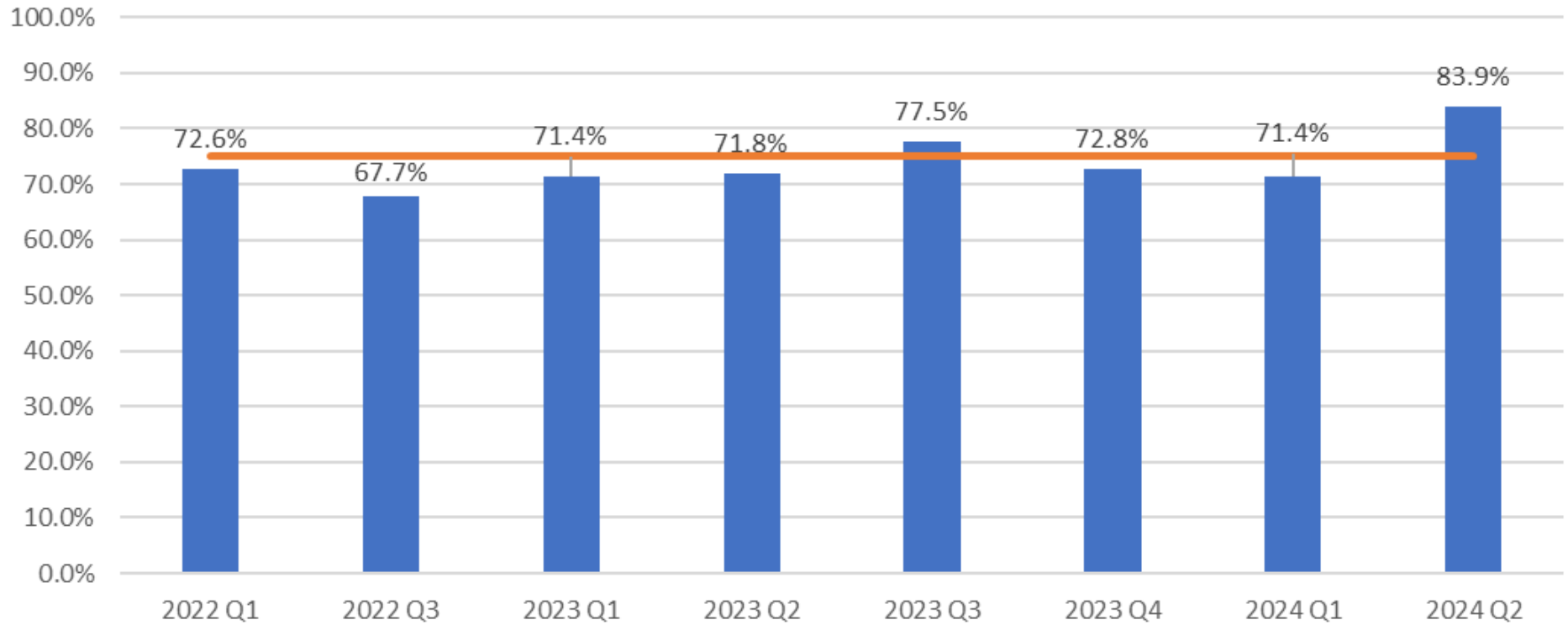


IBHS Data Comparison by Quarter





IBHS Data Comparison by Quarter



Quality Newsletter



- ✓ Updates on key initiatives
- ✓ Advance notification of upcoming activities
- ✓ Summary sharing of significant outcomes
(e.g.,
performance measures, member experience)
- ✓ Data sharing (e.g., from Population Assessments, language thresholds)
- ✓ Reader's Nook
- ✓ Feature Articles
- ✓ Safety Standouts
- ✓ Rewinds
- ✓ Notifications of upcoming trainings
- ✓ Other resources

Email mbhofpa@magellanhealth.com if you'd like to be added to the distribution. Archives available at magellanofpa.com>Providers Page>Quality Improvement

<https://www.magellanofpa.com/for-members/services-programs/ibhs/#>



IBHS Summary Video



Caregiver FAQ



- Offered on the IBHS Member Page as well as the IBHS Provider Page.
- Developed in collaboration with the Autism Action Committee along with Lehigh and Northampton county partners and IBHS providers.
- A tool to use with parents, schools, and caregivers when discussing the role of IBHS.

<https://www.magellanofpa.com/for-members/services-programs/ibhs/>

<https://www.magellanofpa.com/for-providers/services-programs/intensive-behavioral-health-services-ibhs/>



Helpful Resources for Online Authorizations



Self-Service Provider Training Materials are available at www.MagellanProvider.com/authsystem: You will find written training materials and instructional videos. Recommend checking out the following step-by-step instructions and other helpful tools:

- Create an Intensive Behavioral Health Services (IBHS) Authorization
- IBHS Tips, Tricks, and Troubleshooting
- View Authorization Status
- Understanding the Provider Filter
- Authorization system FAQs
- Live video demonstration from 3/22/23
- And many more resources....

External Written Orders/Assessments - REVIEW



- IBHS OMHSAS report requires BH-MCOs to report any Written Orders or Assessments done outside of Magellan's billable codes. Ex. A WO completed by a Developmental Pediatrician.
- Please e-mail ibhs@magellanhealth.com the following information when you encounter a member with an external Written Order and/or when you have a member with an external WO/assessment (outside billable codes) and are awaiting treatment.

Member Name	Member ID	EXTERNAL SOURCE WO	NAME OF EXTERNAL SOURCE WO WRITER/ ORGANIZATION	COMPLETED WO/ASSESSMENT (EXTERNAL SOURCE) PENDING TREATMENT (YES/NO)	AGENCY NAME	AGENCY MIS
Maeve Whaland	MNT12345678	YES	CHOP	Yes	NeurAbilities	601453949



Tuesday, February 25, 2025 - 9:00am to 11:00 A.M.

Link – To be provided

Register in advance for this meeting

After registering, you will receive a confirmation email containing information about joining the meeting.

No invites are sent. This info can always be found at the bottom of our

IBHS provider webpage:

<https://www.magellanofpa.com/for-providers/services-programs/intensive-behavioral-health-services-ibhs/>



Questions?



Thank you!

Confidentiality statement



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