

Weekly Friday Provider Call Agenda

(12/9/2016)

Program updates/announcements from today's meeting:

Clinical:

Authorization Submissions via Web

Magellan is aware that the online submission screens may still contain the outdated questions. This is currently being addressed within our IT department. You may either complete the online questions as they are or you may submit the updated Magellan SRA forms as an attachment to the request itself. The request will still be reviewed. Please do not fax the new forms without permission from a care manager with Magellan, as these will not be accepted.

Quality:

Outcome Measurement Questions

Outcome Measurement questions were added to the SRA forms in December 2015 and the online Discharge form in February 2016. Ideally, providers will submit information to these questions during initial service authorizations, at time of concurrent reviews, and at discharge. We recognize that there have been a number of changes to the SRA forms this year, and there will likely be more changes in the future. We have also made edits to the online discharge form in recent months. As a result of these ongoing changes, we wanted to remind providers to please answer the outcome measurement questions found on the SRAs and the Discharge form.

Magellan will use the information gathered from these Outcome Measurement Questions to better partner with DMAS to identify potential service gaps, member needs, and member/provider accomplishments. As we've begun to look at the initial data collected, we have come to realize there are a number of inconsistencies occurring in how questions are being answered, when questions are being answered, and what questions are being answered. To learn more about each of the outcome measurement questions asked and how to appropriately respond when answering, we would encourage providers to review the training that was created and posted to <http://www.magellanofvirginia.com/> in February 2016 called Service Request Authorization (SRA) Question Changes training presentation. If you have any questions about the Outcome Measurement questions, please contact the Quality Department at 1-800-424-4046 or through the [Contact Us](#) page.

Questions/Topics to be Covered in Today's Call (12/9/2016)

****Please note, all questions covered on the call are global questions. Global questions submitted by COB each Wednesday that are not listed below require additional research and will be covered on a future call. If you submitted a question that was specific in nature, you will receive an email with a direct response.***

Clinical:

- 1. It's my understanding that services in the 90832-90899 no authorization is required up to 26 visits. Is 26 based on units billed for these services, or 26 visits/Dates of Service? Also, how are we to know if the patient has used up some of the 26 at an external behavioral health provider? Is it that prior to seeing any Virginia Medicaid patient we should call Magellan to ask if authorization is required or not?**
- 2. Magellan has received several questions about individualized provider qualifications for psychiatric services. We will list the manual reference on where to obtain this information.**
- 3. Chapter 6, page 9 of the CMHRS manual speaks to a lapse of service in IIH, TDT and MHSS. Chapter 4 also addresses lapses for these specific services. Does the same requirement exist that if PSR lapses in service for 30+ days that the individual must be discharged and a new SSPI completed if services are still warranted/desired? If a non-billable contact is made with the individual within those 30 days, does a lapse still occur if a PSR service was not delivered during that time?**