What You Need to Know About Credentialing and Contracting

To clarify the process of becoming a Magellan* in-network provider, we’ve answered some of the most frequently asked questions we receive about credentialing and contracting. This information is a general guideline for solo practitioners.

We invite you to visit us online at [www.MagellanHealth.com/provider](http://www.MagellanHealth.com/provider) for more information about Magellan and the provider network.

**Q. How can I obtain a Magellan provider network application?**
A. Navigate to the website listed above and click on Provider Network/Join the Network. From the “Join the Network” page, select: “I am an individual/solo practitioner,” and follow the instructions for Magellan’s network inclusion screening process.

**Q. What do I have to do to be an in-network provider with Magellan?**
A. To be an in-network provider, you must be contracted with Magellan. Prior to contract execution, Magellan ensures that practitioners meet credentialing criteria and are approved by Magellan’s RNCC (Regional Network and Credentialing Committee).

**Q. What is credentialing?**
A. Credentialing is the process of reviewing, verifying, and periodically re-verifying your professional credentials in conjunction with Magellan’s credentialing criteria.

**Q. What does the credentialing process include?**
The credentialing process includes, but is not limited to:
- **Application Review** – We confirm that you have completed all portions of the application and have submitted all required supporting documents.
- **Credentials Verification** – We verify information including, but not limited to the status of your license, malpractice insurance coverage, education and training using criteria defined to meet accreditation, regulatory and client-specified requirements.
- **RNCC Review** – If your credentials meet minimum standards, your application is sent to a Regional Network and Credentialing Committee (RNCC) consisting of Magellan clinical staff and professional peers. The RNCC reviews applications subject to our business needs and in accordance with applicable state law.

**Q. How long does the credentialing process take?**
A. Once all the required documents have been submitted, the credentialing process generally can be completed within 90 days. However, some states and client contracts require a shorter credentialing time and we have processes in place to help meet those requirements.

**Q. How will I be notified if I am accepted into the Magellan networks?**
A. Once contractual requirements including meeting Magellan’s credentialing criteria have been met, Magellan will execute your provider agreement and send you a letter welcoming you to the Magellan provider network.
Q. **Will I be notified if I am not accepted into the Magellan provider networks?**
A. Yes. You will receive a letter explaining why your application could not be accepted, along with instructions on how to appeal the decision.

Q. **Once I’ve completed credentialing, are my credentials good for the life of my contract?**
A. No. As a condition of continued participation as a Magellan provider, Magellan recredentials providers no less than every three years. This process supports maintaining provider network quality.

Q. **What is the Magellan Provider Participation Agreement?**
A. Your Magellan Provider Participation Agreement is a contract between you and Magellan to render behavioral health care services in accordance with its terms to members whose care is managed by Magellan.

Q. **If I sign the Magellan Participation Agreement, will I be eligible to see all members whose behavioral health care is managed by Magellan?**
A. Not necessarily. You must meet Magellan’s contractual requirements, including approval by Magellan’s RNCC, to be eligible to treat Magellan members. Some of the products Magellan offers and some of the client companies we serve require specific provider credentials and additional contracting documentation.

Q. **How do I know for which Magellan lines of business I’m contracted?**
A. In states where the Magellan Provider Participation Agreement is in place, the lines of business for which you are contracted are based on the reimbursement schedules included with your agreement. The products and services Magellan offers are reimbursed under the following reimbursement schedules:

- **Pinnacle/HMO** – for most HMO, POS and Medicare benefit programs
- **Summit/Non-HMO** – for most non-HMO products
- **EAP** – for Employee Assistance Program (EAP) services
- **Navigator** – for special reimbursement arrangements requested by a client-company or companies.

Q. **Are my rates negotiable?**
A. No, individual rates are not negotiable.

Q. **Are there different reimbursement rates for different licensing levels?**
A. In most cases, yes. For most lines of business and in most states, Magellan reimburses in accordance with the recognized licensing levels in the state, not according to academic degree.

Q. **When does my contract become effective?**
A. Your contract becomes effective on the date Magellan signs the agreement or upon the effective date noted in the contract. Your contract will be executed only after successfully completing the credentialing process.

Q. **My Agreement refers to the Magellan Provider Handbook for policies and procedures. Where can I obtain this handbook?**
A. You can access the Magellan Provider Handbook and many state- or plan-specific handbook supplements online at [www.MagellanHealth.com/provider](http://www.MagellanHealth.com/provider). The Magellan provider website also offers a host of other resources and applications designed to make it easier for you to work with Magellan.