



What You Need to Know About Group Contracting and Group Member Credentialing

To clarify the process of becoming a Magellan* network group provider, we've compiled a list of frequently asked questions we receive about credentialing and group contracting. This information is a general guideline for group practices.

We invite you to visit us online at www.MagellanProvider.com for more information about Magellan and our provider network.

Q. How can I obtain a Magellan network application for my group?

A. Go to MagellanProvider.com and from the top menu click on *Provider Network*, then *Join the Network*. From the *Join the Network* page, select: "I am representing a group practice," and follow the instructions for Magellan's network inclusion screening process.

Q. What does a group practice need to do to be considered an in-network group provider with Magellan?

A. To be an in-network group provider, the ***group must be contracted with Magellan***. Individual practitioners within the group must meet credentialing criteria and be approved by Magellan's Regional Network and Credentialing Committee to be eligible to see our members. Reimbursement is in accordance with the applicable reimbursement schedule(s) attached to your group contract.

Q. What is credentialing?

A. Credentialing is the process of reviewing, verifying and periodically re-verifying a practitioner's professional credentials in accordance with Magellan's credentialing criteria.

Q. Who can I contact to obtain a Magellan network application for a new group member?

A. After signing in at MagellanProvider.com, your website administrator should click on *My Practice* from the left menu, then click on *Display/Edit Roster*, then *Roster Maintenance*. There, he or she can add and enter requested information for your new group member. Magellan staff then will be in contact and send required documents for completion. If you need help signing in or navigating the website, please call 1-800-788-4005.

Q. What does the credentialing process include?

A. 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 the information including, but not limited to, the status of a practitioner's license, malpractice insurance coverage, education and

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training using criteria designed to meet accreditation, regulatory and client-specified requirements.

- *RNCC review* – If the practitioner’s credentials meet minimum standards, the application is sent to the Regional Network and Credentialing Committee (RNCC), which consists 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 you have submitted all required documents, 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 can I help avoid delays in credentialing?

- A. You can be sure to:
1. Establish a CAQH profile, keep your application current and accurate at all times, and authorize Magellan to access your application.
 2. Explain gaps in CAQH application work history. Resumes with a gap in work history of six months or more during the last five years must be explained in writing.
 3. Upload a current malpractice facesheet to CAQH.
 4. Return all supplemental documents requested by Magellan.

Q. Can a practitioner who is a member of a contracted group but not credentialed by Magellan receive referrals as an in-network provider?

- A. No. Practitioners within a contracted group must be individually credentialed by Magellan to be referral-eligible. The expectation is that all members of a group will be credentialed with Magellan. To avoid claims problems, new group members should not deliver service to members until they are credentialed.

Q. How will my group be notified if we are accepted into the Magellan networks?

- A. Upon acceptance, your group will receive a welcome letter along with a fully executed group participation agreement.

Q. Will we be notified if our group is not accepted into the Magellan provider networks?

- A. Yes. If we are unable to contract with your group, or credential individual practitioners within your group for our provider network, you will receive a written explanation as to why your group cannot be contracted or individuals within the group cannot be credentialed.

Q. Once group practitioners complete credentialing, are their 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 Group Provider Participation Agreement?

- A. Your Magellan Group Provider Participation Agreement is a contract between your group and Magellan to render behavioral healthcare services to members whose care is

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managed by Magellan in accordance with the terms of the agreement.

Q. If the group signs the Group Provider Participation Agreement, will each practitioner in the group be eligible to see all members whose behavioral healthcare is managed by Magellan?

A. Not necessarily. **All individual providers in the group must be credentialed by Magellan.** Also, some of the products Magellan offers and some of the client companies we serve require specific provider credentials and additional contracting documentation.

Q. What if group membership changes?

A. You must notify Magellan as soon as possible in writing or on www.MagellanProvider.com (after your secure sign-in) if a new group member joins or if a practitioner leaves your group practice. You may *fax* a notification in writing to 1-888-656-1121. New group members will need to complete the credentialing process prior to seeing members. Members of a group will be able to utilize Magellan's web tools at www.MagellanProvider.com. If you need help signing in or navigating the website, please call 1-800-788-4005.

Q. If a group member leaves the practice, is he or she still considered a Magellan in-network provider?

A. No. Unless the practitioner leaving the group practice also holds an executed individual Provider Participation Agreement with Magellan, he or she will no longer be considered an in-network provider after leaving the group practice.

Q. For which Magellan plans is our group contracted?

A. In states where the Magellan Group Provider Participation Agreement is in place, the plans for which your group is contracted are based on the reimbursement schedules and contract addenda included with the Group Agreement.

The products and services Magellan offers are reimbursed under the following reimbursement schedules:

- ***Pinnacle/HMO*** – for ***most*** HMO, POS and Medicare benefit plans
- ***Summit/Non-HMO*** – for ***most*** non-HMO plans
- ***EAP*** – for Employee Assistance Program (EAP) services

Q. Are my rates negotiable?

A. No, rates are not negotiable.

Q. Are there different reimbursement rates for different licensing levels within the group?

A. In most cases, yes. For most plans, Magellan reimburses in accordance with the recognized licensing levels in the state.

Q. When does our contract become effective?

A. The contract becomes effective the date it is executed by Magellan or on the date specified in the contract.

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Q. The group provider 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 state- or plan-specific handbook supplements, online at www.MagellanProvider.com. The Magellan provider website also offers a host of other resources and applications designed to make it easy for you to work with Magellan.