

Texas Medicaid Autism Benefits

Frequently Asked Questions

Question	Answer
Do I need preauthorization for ABA services?	Yes, all ABA services require preauthorization. Complete the form or call us at 1-800-424-1602 for initial authorization and submit your treatment plan/concurrent review form for continued care via fax to 1-888-656-0266.
	Find the forms (after sign in) and other autism information at www.MagellanProvider.com/Autism and www.MagellanProvider.com/TXMedicaid .
How do I verify eligibility, benefits, and copayments?	Before providing care, please verify the member's eligibility using the Availity Essentials portal.
	Go to www.Availity.com and sign in using your Availity Essentials login. (Register for an account if you do not already have one.)
	From the Patient Registration tab, select Eligibility and Benefits Inquiry, then Magellan Healthcare from the list of payers.
	Or you can contact Magellan to speak to a customer service associate at the following numbers:
	For BCBS TX STAR members call 1-800-327-7390. For BCBS TX STAR Kids members call 1-800-424-0324. For DCHP STAR members call 1-800-424-1764
Where can I find the State rates?	You can find the State rates at https://www.tmhp.com/news/2021-07-26-reimbursement-rate-updates-autism-services-procedure-codes-effective-february-1 .
Where/how should I submit claims?	Providers are encouraged to submit claims electronically for services rendered to Texas Medicaid members by utilizing either direct submit, an approved clearinghouse, or Magellan's online claims application available through your secure login at www.magellanProvider.com .
	If you do not have the capability to submit claim forms electronically, you may use a CMS-1500 or UB-04 claim form. Submit paper claims for (Blue Cross and Blue Shield of Texas) Magellan Healthcare PO Box 2154

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	Maryland Heights, MO 63043
	(Dell Children's Health Plan) Magellan Healthcare PO Box 1325 Maryland Heights, MO 63043
	Magellan's payer ID: 01260
	Remember to use the modifiers as provided by TMHP in the Medicaid Autism Services Policy.
What is the claims process if a member has Medicaid as secondary coverage?	Submit the claim to the primary insurance first. Then, when submitting the claim to Magellan, include a copy of the explanation of benefits from the other insurance. If you do not provide an EOB with your claim submission to Magellan, your claim will deny, unless the services are listed on the coordination of benefits bypass list, which for Texas Medicaid, consists of HCPC codes.
Where can I find more information about Texas Medicaid?	Visit the Magellan provider website at www.MagellanProvider.com/TXMedicaid .
How do I become a Magellan provider for the Texas Medicaid ABA network?	If you are a provider who is already contracted with Magellan, you may only need to sign additional contract documents.
	If you are a provider who is not currently contracted with Magellan, or you will be using a different Tax ID number, you will be required to sign a contract with Magellan.
	 To confirm your contract status with Magellan, you may call Magellan's Provider Services Line at 1-800-788-4005.
	 To contract as a new provider, visit the Magellan provider website at <u>www.MagellanProvider.com</u>, select <i>Provider Network</i>, then choose <i>Join the Network</i>.
How do I enroll in Texas Medicaid?	You can submit provider enrollment applications online through Texas Medicaid & Healthcare Partnership (TMHP) at https://www.tmhp.com/topics/provider-enrollment .
Do both groups/facilities, as well as the licensed behavior analysts (LBAs), need to enroll with Texas Medicaid?	No, only the LBA must enroll with the Texas Medicaid, but should enroll with the Tax ID number that will be used for billing for ABA services.
What NPI number do I use for billing for services	The NPI number of the LBA who is providing or supervising services will be listed as both the rendering and billing provider, even if using a Tax ID number that belongs to a group or facility.

