IBHS Tips, Tricks and Troubleshooting
Quick Reference Guide
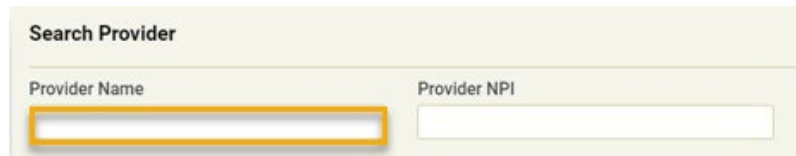
This guide assists you with requesting intensive behavioral health services (IBHS) using Magellan's authorization system.

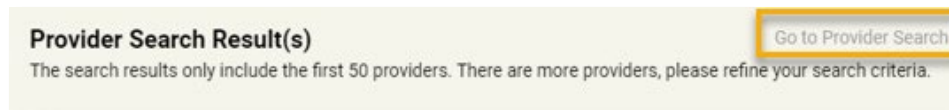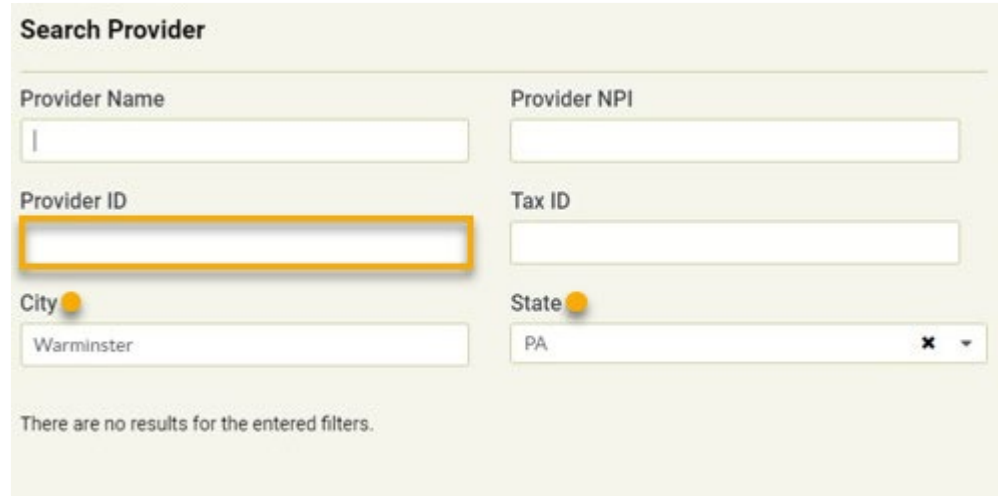| Tips, Tricks and Troubleshooting	
1. Provider ID vs. Magellan MIS Number	The Provider ID and Magellan MIS Number are the same. An MIS Number is the Provider ID that Magellan has assigned to you. This number allows us to process your claim efficiently and ensure the claim is paid to the appropriate provider rendering location and at the appropriate rates. You can find your MIS number on your contract.
2. 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**." b. Click "**Go to Provider Search**."

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

Provider ID

Tax ID

City ●

Warminster

State ●

PA   ✕   ▾

There are no results for the entered filters.

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3. Locate and Select the Correct Provider	To ensure that you have located the correct provider during a provider search, check the "**Type**" field to verify that it displays "**Organization**," and the "**Servicing Address**" field to verify that you have selected the correct provider location.

When the "**Type**" field displays "**Group**," that is likely the incorrect provider unless your contract is specific to a group. (IBHS providers will all be Organizations.)

4. Authorization Lookup Tip	To see the authorization requests you submitted for multiple members, it is critical that you first enable the **Provider Filter** feature.	

To see the authorization requests you submitted for multiple members, it is critical that you first enable the **Provider Filter** feature.

When you enter the authorization system, the circle next to **Provider Filter** is grey, which indicates you have not selected a provider. Before searching for an authorization, be sure to activate the **Provider Filter** feature and ensure that the circle is green.

If the Provider is not listed in the **Provider Filter**, then you can still submit an authorization request; however, *you will not be able to view authorizations* by the provider.

For more details on Provider Filters, view the *"Understanding the Provider Filter Quick Reference Guide."*

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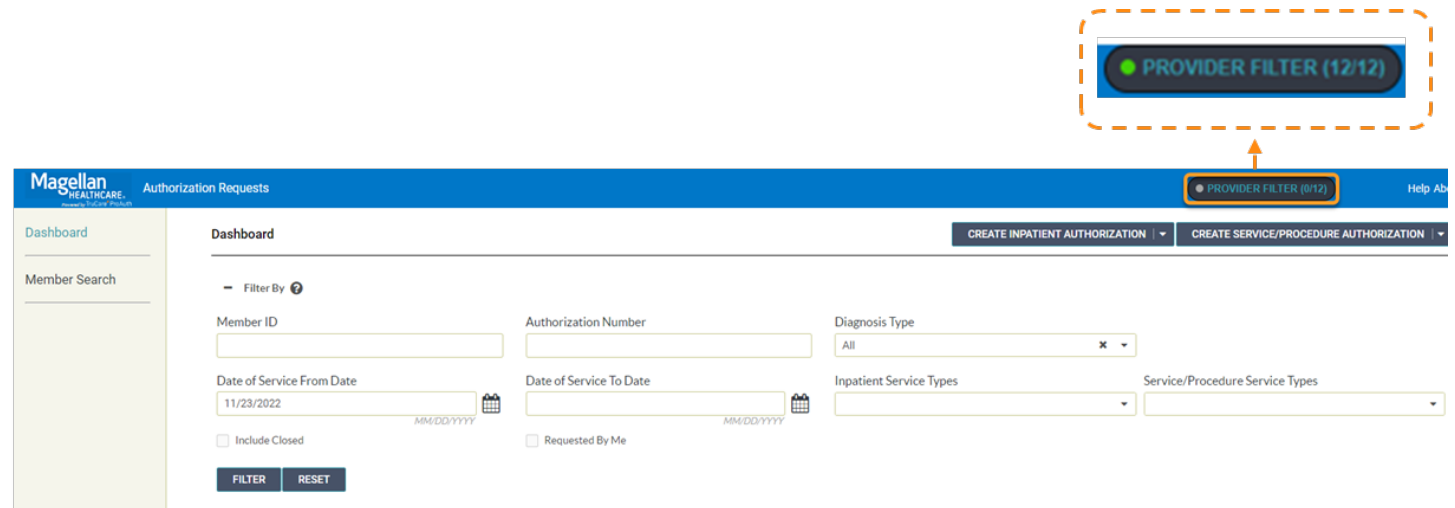
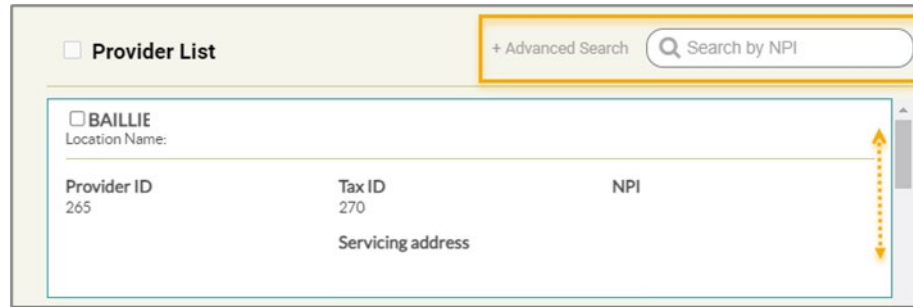|	
5. Authorization Search	Once you have enabled the Provider Filter, you can search for an authorization in two ways: a. Search for a specific authorization from the **Dashboard**. On the Dashboard, first expand the "**Filter By**" field by selecting the **+** symbol. When the search fields display, enter the authorization number including the inpatient or outpatient prefix, then click the "**FILTER**" button. b. Search for authorizations for a specific member using the **Member Search** screen. On the **Member Search** screen, it is best practice to select the radio button for the "**Search by Name and Date of Birth**" field to *search using the member's name and date of birth first*. Then, click "**SEARCH**."

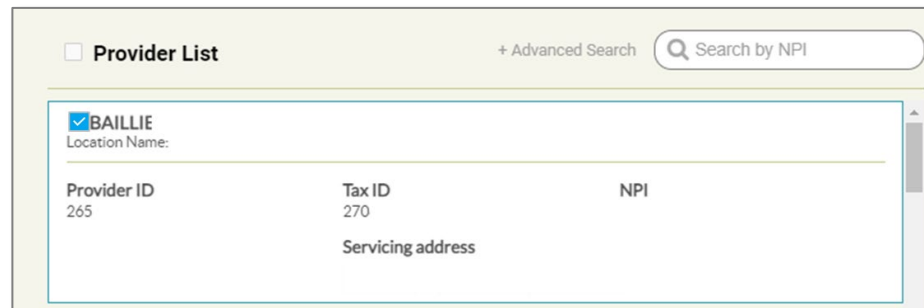|		
6.	**View All Authorizations for One Provider**	To view all authorizations for a specific provider, you must first select the provider using the **Provider Filter** feature. a. Click on **PROVIDER FILTER**. b. Scroll to select the desired provider or perform a search using "Search by NPI" or the **Advanced Search** feature. c. Click the box next the desired provider. d. Select "**APPLY FILTER**" at the bottom of the window to see all applicable authorizations.

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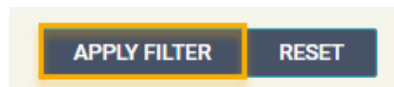
7. 999 Unit Limit	The Magellan authorization system presently allows you to add up to 999 units to an authorization. If the authorization requires more than 999 units, you will need to add the excess units as a secondary service by clicking the **ADD SERVICE** button on the **Services** screen.

The system returns you to the **Prescreen** to add the new service.

IMPORTANT:

a. You *must* complete the required fields as outlined in the "**Complete the Prescreen**" section of this guide for the new service.

b. The **Primary Diagnosis** field populates with the diagnosis information from the previous **Prescreen** and *cannot be changed*.

c. You *must* also complete the required fields as outlined in the "**Authorization Details**" section of this guide for the new service.

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8. Uploading Documents	The Magellan authorization system may require providers to upload documents into the system during the authorization request.

IMPORTANT:

a. The document name ***cannot include punctuation***. *Note: The end of the name can still include .PDF, .doc, etc.*

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b. Once uploaded you will see that it has been added.

The number (1) displayed indicates that one attachment has been added.

*An Attachment is required.   ADD NOTE   ADD ATTACHMENT (1)   CLINICAL CRITERIA

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