Reminders for Behavioral Health Providers Following Enrollment/Re-Enrollment

Behavioral Health provider types 14 (Behavioral Health Outpatient Treatment) and 82 (Behavioral Health Rehabilitative Treatment) can prevent some prior authorization and billing problems following re-enrollment by ensuring that all individual service providers (QMHPs, QMHAs and QBAs) are linked to your group/billing National Provider Identifier (NPI) upon re-enrollment.

When you have completed the enrollment/re-enrollment process (all individual service providers’ NPIs have been linked to the group/billing NPI), you are ready to obtain prior authorization (PA) with your group/billing NPI regardless of the service being requested. Once you have re-enrolled, if your active PA was authorized with a group Atypical Provider Identifier (API), then bill the claim with that group API. If your active PA was authorized with an NPI, then bill the claim with the NPI of the rendering and billing providers. Please review the CMS-1500 Claim Form Instructions for proper use of NPIs/APIs on claims.

Attention Provider Groups: After you enroll/re-enroll and receive your enrollment notification letter, please send an email to KAMcGrath@magellanhealth.com to request new provider training, which will cover the PA process and timeline, the appeal process, the resources available on the website, and more.

Note: Provider types 14 and 82 must re-enroll in Nevada Medicaid by Oct. 31, 2011. Submission of a re-enrollment application does not guarantee the provider’s current enrollment will continue. If it is found that providers/groups do not meet the criteria for their provider type and/or specialty, their re-enrollment will be denied and their current enrollment will be terminated.