



## Provider Notice

Magellan of Virginia strives for the highest quality of service. Magellan is committed to continuous quality improvement of member care and services. We work to ensure provider and member feedback is received. The information listed below is a reminder to providers regarding the grievance process.

A grievance is a complaint by a provider, member or a member's authorized representative, and expressing dissatisfaction with the services or care a member or provider has received with Magellan or a provider/facility.

Grievances will be resolved within 30 calendar days from Magellan's date of receipt with the exception of clinically urgent grievances (expedited). Expedited grievances are resolved within two business days.

Once a grievance is filed, an acknowledgement letter will be mailed within five business days of receipt of the grievance. Providers and members have the option to remain anonymous during the grievance investigation.

The online provider grievance form can be accessed through the [Provider Forms](#) page on [Magellan of Virginia.com](#). The form is titled Grievance Reporting Form.

If you have a member that would like to file a grievance, please have the member call 1-800-424-4046 and the member can speak to any Magellan employee. Providers may also call our main access telephone number to file a grievance as well.

Please also reference Section Four of the provider handbook: The Quality Partnership. The provider input sections discuss provider feedback/lodging a grievance.