



Provider Notice

This is a follow-up to the provider communication, “[Roster Staff and Provider Screening Requirements](#)” dated May 25, 2017. Magellan of Virginia, on behalf of the Department of Medical Assistance Services, must screen providers, including licensed roster staff, in order to comply with Federal law. These requirements can be found in 42 CFR 455 subpart E: Provider Screening and Enrollment.

Organizational providers are required to report licensed (i.e. LMHP) roster staff at all contracted service locations, at which point Magellan will complete the screening for each individual practitioner. We are developing a notification process in order for providers to have the results from the rosters Magellan collected this past June. In 4th quarter 2017, providers will be able to see the screening results for each roster practitioner on the web. In the meantime, we are requesting providers verify their current roster for **each service location** by visiting www.magellanhealth.com/provider. Once you have logged in, select the “Display/Edit Practice Info” link under the “My Practice” heading on the left hand side. Select the “Provider TIN/MIS” for the roster that you wish to view and click “Go”. From there, click the “Roster Maintenance” option. We strongly encourage you to add and/or remove roster staff for each service location by using the roster maintenance option on the web.

As a reminder, this will have an impact to billing and claims submissions. Medicaid cannot reimburse providers who do not have an approved screening and claims submitted with a provider that does not have an approved screening will be denied. Magellan will send another communication 30 days prior to the implementation with the effective date of the billing changes. A provider training will also be held.

If you have any questions regarding the information in this communication, please contact the Network Department at 1-800-424-4536.