

PROVIDER NOTICE:
Provider Manual Revision

Maricopa County Regional Behavioral Health Authority
Magellan Health Services of Arizona, Inc.

Provider Notice
Revision to PM Form 5.1.2 Notice of Extension

Date: October 26, 2009

Notice Number: 95

In accordance with ADHS/DBHS guidelines, providers are required to comply with the updated policies and procedures presented in provider notices. Where applicable, this information is incorporated into the ADHS/DBHS Provider Manual, Magellan Health Services of Arizona Edition. The full provider manual and provider notices are available at the [For Providers](#) area of Magellan's Web site, www.MagellanofAZ.com.

ADHS/DBHS has provided a revision to Provider Manual Form 5.1.2, *Notice of Extension of Timeframe for Service Authorization Decision Regarding Title XIX/XXI Behavioral Health Services*. The form has been updated with a clarifying statement to ensure consistency between the form and Provider Manual Subsection 5.1.7-C, *Notice of Action timeframes*. The new forms are effective for immediate use.

Please review the clean and tracked versions of both the English and Spanish forms below:

[PM Form 5.1.2, Notice of Extension \(Tracked\)](#)

[PM Form 5.1.2, Notice of Extension \(Clean\)](#)

[PM Forma 5.1.2, Aviso de Extension \(Tracked\)](#)

[PM Forma 5.1.2, Aviso de Extension \(Clean\)](#)

For additional information regarding this change, please see the ADHS/DBHS Policy Clarification Memorandum titled, *Notice of Extension of Timeframe*, posted online at the following location: http://www.azdhs.gov/bhs/provider/policy_memos.htm. The new forms will be posted shortly to the Magellan Provider Manual.

If you have questions about the information in this provider notice, please contact your provider relations liaison.

