

PROVIDER NOTICE:
Provider Manual Revision

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

Provider Notice

Revision to Provider Manual Section 10: Maricopa Provider Deliverables

Date: January 6, 2010

Notice Number: 107

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.

Revision to Maricopa Provider Deliverables

In an effort to improve the communication between Magellan Health Services and the provider community regarding provider information, there has been a revision to the Provider Deliverables document in Section 10 of the Provider Manual. The change reflects the addition of various requests and notifications under the Provider Information header. These changes are in line with Magellan Health Services Network reporting requirements to ADHS/DBHS.

1. Providers are required to provide written notice of termination, within 15 days after issuance of the termination notice, to each behavioral health recipient who was seen on a regular basis by the terminated provider.
2. Providers are required to provide written notice to affected behavioral health recipients at least thirty (30) days before implementation of program changes.

Please take some time to review the updated process in following documents:

[Maricopa Provider Deliverables](#) (clean)

[Maricopa Provider Deliverables](#) (new language shown in red font)

Letter Templates for Required Notifications

[15 Day Notification Letter to Behavioral Health Recipient of Provider Site Move](#)

[15 Day Notification Letter to Behavioral Health Recipient of Transition of Care Due to Contract Termination](#)

[15 Day Notification Letter to Parents of Transition of Care](#)

[15 Day Notification Letter to Parents of Transition of Care Due to Contract Termination](#)

[Provider Notification to MHS of Change](#)

[Provider Notification to MHS of Provider Site Move](#)

[Provider Notification to MHS of Termination](#)

The changes are effective immediately, and the revised documents will be posted shortly to the Magellan Web site at: <http://www.magellanoftaz.com/mypage-en/for-providers/provider-manual.aspx>. Questions regarding these changes should be directed to Brenda Benage, Magellan Chief of Network Operations, at (602) 797-8341 or BLBenage@MagellanHealth.com.

