

**PROVIDER NOTICE:**  
**Provider Manual Revision**

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

## ***Provider Notice***

### **Revision to PM Form 7.5.1 Maricopa Demographic Form**

**Date: February 15, 2010**

**Notice Number: 122**

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](http://www.MagellanofAZ.com).

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#### **Revision to PM Form 7.5.1 Maricopa Demographic Form**

Attached for your review is an updated PM form 7.5.1 Maricopa Demographic form. Please disregard the form sent in Provider Notice 121. This form is effective February 15, 2010, and will be posted to the Provider Manual shortly.

#### **[Maricopa Demographic form 7.5.1](#)**

*If you have any questions about this provider notice, please contact your provider relations liaison.*

