

PROVIDER BULLETIN

No. 13-32

Date: July 8, 2013

TO: All Medicaid Providers

FROM: Vivianne M. Chaumont, Director 
Division of Medicaid & Long-Term Care

BY: Lori Lewis, Program Coordinator/Managed Care
Division of Medicaid and Long Term Care

RE: Behavioral Health Managed Care changes effective September 1, 2013

Effective September 1, 2013, Medicaid is moving to full-risk managed care for all behavioral health and substance use disorder services. Magellan Behavioral Health of Nebraska has been awarded the contract and will begin paying claims for services provided September 1, 2013 and after. Payment for services provided to clients enrolled in managed care will not be paid by Medicaid Fee-For-Service after September 1, 2013.

Providers will need to be credentialed in the Magellan network in order to be reimbursed for services provided to clients enrolled in managed care. Providers currently in the Magellan Network do not need to re-enroll. Magellan will be sending all providers an amendment relative to the change of payer source. Providers will need to sign and return the amendment to Magellan in order to be reimbursed by Magellan for services provided.

Client enrollment the Magellan Behavioral Health will still be verified by calling the NMES line at 800-642-6092, or through the electronic Health Care Eligibility Benefit Inquiry (ASC X12N 270/271), or through the internet. To sign up for client eligibility access through the internet, visit http://dhhs.ne.gov/medicaid/Pages/med_eligibility.aspx

Additional Provider Bulletins issued to keep providers informed of changes that are being made to transition to behavioral health managed care.

If you have questions regarding the information in the bulletin, please contact Lori Lewis at Lori.Lewis@nebraska.gov or 402 471-6794.