



IBHP Claims Submission Reference Guide

Version 1.0

June 13, 2024

Table of Contents

Section I: Introduction	3
Section II: Electronic Submission of Claims	3
Option 1 (Fastest): Use a Magellan-Preferred Clearinghouse	4
Option 2: Individual Claim Submission via Availity Essentials	5
Option 3: EDI Claims	5
Option 4: Other Clearinghouses.....	6
Section III: Paper Submission of Claims	7
Section IV: Billing Codes.....	7
Section V: Additional Information.....	7

Section I: Introduction

This document includes important information on Magellan claims submission processes. Please read it carefully as you prepare to work with us to serve IBHP members.

Magellan is committed to timely and accurate payments of clean claims. [View detailed information about clean claims.](#)

Section II: Electronic Submission of Claims

Magellan Requires NPI on Electronic Transactions

Magellan requires providers to submit their National Provider Identifier (NPI) on all HIPAA-standard electronic transactions. All standard electronic transactions received without NPIs will be rejected. NPI numbers replace all government-issued identifiers, Medicaid PINs, and Medicare UPINs (as well as Magellan-assigned MIS numbers) on HIPAA-standard electronic transactions, including provider claims submitted electronically. **Taxpayer Identification Numbers (TINs) continue to be required on all claims – both paper and electronic.**

Because payment is calculated at the individual practitioner level (i.e., psychiatrists, psychologists, social workers, master's-prepared therapists, and clinical nurse specialists/nurse practitioners) for CPT-based services, groups and organizations should submit Type 1 professional NPIs for rendering providers, along with their group practice/organization Type 2 NPIs, according to the following instructions:

- For claims submitted via the ASC X12N 837 professional health care claim transaction, place the Type 2 NPI in the provider billing segment, loop 2010AA; place the Type 1 NPI in loop 2310B.
- On the CMS-1500 form, insert billing Type 2 NPI in Box 33a; insert service facility Type 2 NPI (if different from billing NPI) in Box 32a; insert Type 1 NPIs for rendering providers in Box 24J.
- On the UB-04 form, insert the main Type 2 NPI in Box 56; insert Type 1 NPIs for rendering providers in boxes 78 – 79.

You can submit your NPI by sending your NPI notification letter or email from the National Plan and Provider Enumeration System (NPPES) to Magellan at fax # 314-387-5584 or email to IdahoProvider@MagellanHealth.com.

To apply for your NPI, call 1-800-465-3203 or [email](#) to request a paper application. For the fastest receipt of your NPI, you should apply online at <https://nppes.cms.hhs.gov>.

Once you have obtained and submitted your NPI to Magellan, **include this number on all claims that you submit to us.**

For an overview and additional information on NPI, visit the [CMS website](#).

Options for Submitting Electronic Claims

Electronic transactions, including claims submitted to Magellan, must be HIPAA compliant so that member confidentiality is maintained.

The options below are listed in order of the amount of time and effort needed to establish electronic processes with Magellan. The list goes from shortest amount of time and effort to longest amount of time and effort.

Option 1 (Fastest): Use a Magellan-Preferred Clearinghouse

External EDI clearinghouses act as a middleman between the provider and Magellan and can transform non-HIPAA-compliant formats to compliant 837s. You may have to pay a fee to use them.

The clearinghouses listed in the chart below are preferred by Magellan because we already have trading partner agreements and integration with them. All of these clearinghouses can send and receive the necessary file formats to enable us to quickly process and pay claims.

Using one of these clearinghouses is the best way to ensure you can file claims timely and receive prompt payment once Magellan begins managing the Idaho Behavioral Health Plan on July 1, 2024.

When using one of these clearinghouses:

- Please ensure you use the proper payer ID for Magellan: **01260**. Use this payer ID for both 837P professional claims files and 837I institutional claims files.
- Please fax the [Electronic Remittance Advice Form for clearinghouses](#) (PDF) to the clearinghouse in order for you to receive your explanation of benefits/payments electronically. In addition:
 - You must have a W-9 and a National Provider Identifier (NPI) on file with Magellan.
 - You must be the owner of the Taxpayer Identification Number (TIN) under which claims are paid.
 - Use this form to terminate electronic remittance at any time.

Magellan-Preferred Clearinghouses	
<p>Availity PO Box 550857 Jacksonville, FL 32255-0857 1-800-282-4548 www.availity.com <i>Sign up at Availity.com</i></p>	<p>Change Healthcare* One Century Place 26 Century Blvd, Suite 601 Nashville, TN 37214 1-877-469-3263 www.changehealthcare.com</p>
<p>Office Ally PO Box 872020 Vancouver, WA 98687 1-866-575-4120 Fax: 1-360-896-2151 www.officeally.com</p>	<p>Payerpath 9030 Stony Point Pkwy Suite 440 Richmond, VA 23235 1-877-623-5706 www.payerpath.com</p>
<p>Trizetto Provider Solutions, LLC. One Financial Plaza 501 North Broadway 3rd Floor St. Louis, MO 63102 1-800-969-3666 www.cognizant.com/trizetto</p>	

***Note:** Due to Change Healthcare’s cybersecurity incident, claims submitted to Change Healthcare for Magellan are temporarily routed to Availity for processing.

Option 2: Individual Claim Submission via Availity Essentials

While individual claim submission is not ideal, you can set up an account on Availity Essentials quickly and begin submitting claims upon service start date through Availity Essentials. There is no cost to register for or use Availity Essentials.

- If you are already using Availity Essentials with another payer, you do not have to do anything.
- If you do not already use Availity Essentials, [click here to set up your account now](#).
 - Availity has complimentary webinars and resources to help you get started with your registration. [Click here to learn how to get started](#).

For more information on how to use Availity Essentials with Magellan, visit our [On-Demand Training](#) page on MagellanoIdaho.com.

Option 3: EDI Claims

You can send HIPAA-compliant 837 files directly to Magellan in bulk, without accompanying claim

data entry or the involvement of a clearinghouse, through Magellan's Direct Connect. Direct Connect is available to all providers regardless of claims submission volume. There is no charge to you for using the service.

IMPORTANT:

- *Direct Connect setup takes 6 to 8 weeks and requires a significant time investment and technical expertise on your part. If you wish to enroll in Direct Connect, please do so immediately.*
- *Some provider billing systems are not capable of producing 837 files. Confirm that your billing system can produce an 837 before initiating Direct Connect setup with Magellan.*

To get started:

- Email EDISupport@MagellanHealth.com or contact Magellan EDI Support at 1-800-450-7281, extension 70536.
- Register for an account on our EDI Testing Center website at www.edi.magellanprovider.com.
- Click on the "Public Resources" tab and read the documents in the folder, including, but not limited to, the Companion Guides, file guidelines, FAQs, and submission information.

You will be assigned an IT analyst to guide you through the process and address any questions as you follow the next steps:

- Create your EDI test file(s).
- Follow the steps to upload your test file(s).
- You will get immediate feedback with the test results.

Once you have completed the process, you will be able to exchange production-ready EDI files with Magellan.

Option 4: Other Clearinghouses

You may already work with a clearinghouse that is not on Magellan's preferred list. Please note that some clearinghouses do not have all the capabilities needed to work with Magellan. We strongly recommend you switch to a preferred clearinghouse so that you will be ready to file claims on July 1, 2024, and get paid as quickly as possible.

The following clearinghouses are not contracted with Magellan; however, we do have connections set up with them. Not all of them can send claim/837 files to and/or receive electronic remittance advice (ERA)/835 files from Magellan. If you want to use one of these or another clearinghouse not on our preferred list, please verify that they can send claim/837 files to Magellan. If you want to receive ERAs, please verify that the clearinghouse can also receive ERA/835 files from Magellan.

IMPORTANT: *If your clearinghouse cannot send claim/837 files to Magellan, please use one of our*

preferred clearinghouses, as it will take 6 to 8 weeks for other clearinghouses to establish connections with us.

Non-Preferred, Non-Contracted Clearinghouses with Connections with Magellan:

- Claim Remedi (AKA Waystar) – *Note: Waystar cannot currently accept ERA/835 files from Magellan*
- Claim.MD
- Eligibleapi
- Nuesoft Technologies (AKA Advanced MD)
- Orion Healthcare Technology
- Rumpelstiltskin, Inc
- TK Software
- ViaTrack Systems

When using one of these clearinghouses:

- Ensure you use the proper payer ID for Magellan: **01260**. Use this payer ID for both 837P professional claims files and 837I institutional claims files.
- Fax the [Electronic Remittance Advice Form for clearinghouses](#) (PDF) to the clearinghouse in order for you to receive your explanation of benefits/payments electronically. In addition:
 - You must have a W-9 and a National Provider Identifier on file with Magellan.
 - You must be the owner of the Taxpayer Identification Number (TIN) under which claims are paid.
 - Use this form to terminate electronic remittance at any time.
- There may be charges from the clearinghouse.

Section III: Paper Submission of Claims

We strongly encourage all providers to submit claims to Magellan electronically via one of the methods above; however, if you opt to file on paper, mail claims to:

Magellan Healthcare, Inc.
P.O. Box 1029
Maryland Heights, MO 63043

Section IV: Billing Codes

For the proper procedure code and/or modifier(s) to use for claims, consult your Magellan agreement and reimbursement schedule.

Section V: Additional Information

Please see *Section 5: Provider Reimbursement* in the [IBHP Provider Handbook Supplement](#) for additional claims information, including timely filing submission timeframes.

Magellan will schedule special office hours to answer claims submission questions. Please check our website at MagellanoIdaho.com/training-events for dates, times, and links.