

Template: Provider\_MHC-ProviderNotice-ID\_081523  
Address: Idaho (333 West Rossi Street, Suite 100, Boise, ID 83706)  
Reply to: Magellan Healthcare (IdahoProvider@MagellanHealth.com)  
Subject: Providers must complete background check to finalize contracting

## **Attention: IBHP providers must submit background check clearance or waiver to complete network contracting.**

As you are aware, it is an Idaho Department of Health and Welfare (IDHW) requirement per IDAPA 16.05.06 to obtain a background check clearance or waiver. All providers who are new to the IDHW program (i.e., were not in the previous vendor's network or in the Medicaid fee-for-service system) must apply for a background check and get fingerprinted before Magellan can complete the credentialing and contracting process.

### **Background check process**

Visit the Idaho Background Check website at <https://healthandwelfare.idaho.gov/bcu> and scroll down to Background Check System Training to find the information you need to complete this process.

To obtain information on this topic, go to the [IDHW Background Check Unit](#) webpage. Scroll down to the "Background Check System Training" section to access video tutorials and the Background Check System (BSC) User Guide that has step-by-step instructions to initiate or manage your background check or waiver request, if applicable. If you need additional guidance, contact the Background Check Unit at 208-332-7990 or 1-800-340-1246 or by email at [bcu@dhw.idaho.gov](mailto:bcu@dhw.idaho.gov).

### **Acceptable submission documents**

Official Background Check Clearance letters, Waiver Granted letters, or roster reports generated from the Idaho Background Check Unit's website may be submitted as evidence. Ensure that each provider's name is clearly legible, and if you are sending a screen-print report, ensure the Department's website is visible as the source of the report.

### **Document submission process**

Once completed, please send Magellan proof of clearance by either taking a screenshot of the clearance in the BCS or by submitting a copy of your clearance letter from the BCS.

Submit evidence of your IDHW background check clearance or waiver letter (or official screenshot) to Magellan at [IdahoProvider@MagellanHealth.com](mailto:IdahoProvider@MagellanHealth.com).

Thank you in advance for your cooperation.

### **Questions?**

Please contact Magellan at [IdahoProvider@MagellanHealth.com](mailto:IdahoProvider@MagellanHealth.com).