

Fraud, Waste & Abuse Resources

Magellan Behavioral Health of Pennsylvania, Inc. (Magellan) does not tolerate Fraud, Waste or Abuse, either by providers or staff. Accordingly, we have instituted extensive procedures to both prevent and combat these problems. Many of our efforts focus on providing education and technical assistance. The following information includes some of the valuable resources that we depend on to promote compliance throughout our provider network.

- *Pennsylvania Medical Assistance (MA) Bulletins*. Remaining well-informed of new MA bulletins, changes in regulations, and other compliance-related communication from the Department of Human Services (DHS) and Office of Mental Health and Substance Abuse (OMHSAS) is a critical component of an agency's compliance oversight. Providers may search the archives dating back to 2011; and also be added to the state's listserv for release of future MA bulletins.
 - Bulletin Search: <https://www.dhs.pa.gov/docs/For-Providers/Pages/Bulletin-Search.aspx>
 - Archives: <http://listserv.dhs.pa.gov/ma-electronic-bulletins.html>
 - Join the listserv: <http://listserv.dhs.pa.gov/Scripts/WA.exe?SUBED1=ma-electronic-bulletins&A=1>
- *The Pennsylvania Code* is the Commonwealth's official publication of rules and regulations.
 - [Title 55](#) is dedicated to Human Services
 - [Title 49](#) is reserved for Professional and Vocational Standards (e.g. State Boards of Medicine, Psychology, Social Workers, Professional Counselors, etc)
 - [Title 28](#) includes regulations from The Department of Drug and Alcohol Programs (DDAP)
- *The Centers for Medicare and Medicaid Services (CMS)* developed guidelines in 2005 to assist providers in developing and implementing effective compliance programs that promote adherence to, and allow for, the efficient monitoring of compliance with all applicable statutory, and regulatory requirements. The program guidance may be accessed by utilizing the following link: <https://www.cms.gov/Medicare/Medicare-Contracting/Medicare-Administrative-Contractors/Downloads/compliance.pdf>

- *The Centers for Medicare and Medicaid Services (CMS) developed Program Integrity Documentation Toolkits:* <https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/Medicaid-Integrity-Program/Education/Documentation>
- *DHS Self-Audit Protocol.* Magellan supports the Centers for Medicare and Medicaid Services (CMS) Compliance Program Guidelines which includes a component on provider self-auditing. All providers should employ a Claims Audit Policy which includes a procedure and mechanism for comparing clinical documentation to the accuracy of billing. Self-auditing is a good tool to measure internal compliance and ensures compliance with MA regulations. Per DHS' Self-Audit Protocol, providers have several options for conducting the self-audits and expediting the return of inappropriate payment to the MCO/ Department. Additional information is available at the following link: <https://www.pa.gov/agencies/dhs/report-fraud/medicaid-provider-self-audit-protocol.html>
- *PROMISE Provider Handbooks and Billing Guide.* DHS has published provider handbooks and billing guides for all provider types that can be found here: <https://www.pa.gov/agencies/dhs/resources/for-providers/promise/promise-provider-handbooks-guides.html>
- *Magellan Monthly E-mail Blasts on Compliance.* Magellan proactively uses education as a preventative tool to provide our members with the highest quality of care. Since 2013, the Compliance Department at Magellan has committed to sending monthly e-mails to targeted providers regarding Compliance related topics. The e-mail alerts may be viewed by visiting the Providers page of the Magellan of PA website: <https://www.magellanofpa.com/for-providers/>. Users should then scroll down to Compliance Alerts and expand the section to view all alerts.
 - To sign-up to receive the communications directly to your e-mail, please contact Magellan's Compliance Officer Karli Schilling at kmschilling@magellanhealth.com
- In addition to knowing and understanding all applicable Medicaid Regulations, contracted providers should be familiar with the Magellan [National Provider Handbook](#), [Organizational Provider Handbook Supplement](#), and the [Pennsylvania HealthChoices Provider Handbook Supplement](#).
- *Important regulatory changes* that effect documentation practices, billing and other requirements are often communicated to providers via Magellan Compliance E-mail Alerts. Ultimately, it's a provider's responsibility to know the regulations. Therefore, we recommend that providers monitor the release of MA Bulletins on a regular basis and also sign-up for communications from other advocacy groups,

such as the [RCPA](#). Magellan maintains a comprehensive library of PA Code Title 55; MA Bulletins; and Policy Clarifications for all levels of care. We urge providers to develop their own resource libraries as well.

- *Exclusionary Checks.* [Medical Assistance Bulletin #99-11-05](#), effective August 15, 2011, reminds providers that participate in the Medical Assistance Program to screen their employees and contractors, both individuals and entities, to determine if they have been excluded from participation in Medicare, Medicaid or any other federal health care program. All MA providers are required to develop policies and procedures for the screening of all employees and contractors, at the time of hire or contracting; and thereafter on an ongoing monthly basis. The following databases should be used:
 - List of Excluded Individuals/ Entities (LEIE): https://oig.hhs.gov/exclusions/exclusions_list.asp
 - System for Award Management (SAM): <https://sam.gov/content/home>
 - Pennsylvania Medichk List: <https://www.humanservices.state.pa.us/Medchk/MedchkSearch/Index>
- *Medicaid Disclosure.* Providers must also disclose the identity of all individuals and entities with an ownership or control interest of 5% or greater in the provider, including the identity of managing employees and agents; (2) certain business transactions between the provider and subcontractors/wholly owned suppliers; (3) the identity of any individual or entity with an ownership or control interest in the provider or disclosing entity, or who is an agent or managing employee of the provider or disclosing entity that has ever been convicted of any crime related to that person's involvement in any program under the Medicaid, Medicare, or Title XX program (Social Services Block Grants), or XXI (State Children's Health Insurance Program) of the Social Security Act since the inception of those programs.
 - Although providers are also required to report this information to the Department of Human Services during Medicaid enrollment and re-enrollment, it must be reported to Magellan during initial credentialing and whenever there is any change. Utilize the online submission form by logging into www.MagellanHealth.com/provider. After signing in, click "Medicaid Disclosure" under "MY Forms" on the left-hand menu.
- *Verification of Licensure.* Professional licensing protects the health, safety and welfare of the public from fraudulent and unethical practitioners. Verification of licensure should be performed for any health care professional. Licensure status and disciplinary history can be viewed online at: <https://www.pals.pa.gov/#/page/default>

- *Provider Focus Articles.* Magellan's Special Investigations Unit (SIU) routinely releases helpful education via [Provider Focus](#) newsletter publications. Recent SIU articles include:
 - **Winter 2025 - Conducting Routine Self-Audits:** As a healthcare provider, it is important that your recordkeeping and claims submission processes are accurate and compliant with applicable regulations. Keep your practice compliant and avoid financial risk with these tips.
 - **Summer 2024 - Medical Record Keeping:** In facility settings, practitioners who bill for their services using their own tax identification number as a separate entity are essentially operating as independent entities within the facility. Recently, Magellan's Special Investigation Unit (SIU) has reported several cases in which practitioners are not maintaining records for services rendered in a facility/nursing home setting.
 - **Summer 2024 - The difference between progress notes and psychotherapy notes:** Compliance with documentation standards matters. Magellan's Special Investigation Unit (SIU) discusses how progress and psychotherapy notes differ, and why it matters.
 - **Spring 2024 - Ensure timely filing of medical records:** Compliance with documentation standards matters. Magellan's Special Investigation Unit (SIU) has reported recent cases in which providers' medical records and/or amendments to medical records were not entered or signed in a timely manner. Magellan's SIU addresses current trends and shares insights and resources to help providers.
 - **Spring 2024 - Spravato vs. Ketamine: Are they covered?:** Recently, Magellan's Special Investigations Unit (SIU) and Payment Integrity Unit (PIU) have reported several cases that involved inappropriate billing for Spravato services and Ketamine assisted therapy. Here's what you need to know about billing for medically necessary services that are consistent with applicable regulations, policies and record-keeping standards.