



NON-PARTICIPATING PROVIDERS

Authorization Requirements

All out of network services require authorization except outpatient basic laboratory chemistries and basic radiology, emergency and post –stabilization services.

- An authorization request must be submitted prior to services being rendered except for emergency or post-stabilization services.
- Prior authorization forms can be printed from the Magnolia website at www.magnoliahealthplan.com under Provider Resources.
- Failure to obtain authorization may result in an administrative claim denial.

Authorization for non-participating providers may be requested by the following methods only:

Fax	1-877-650-6943 (Outpatient) 1-877-291-8059 (Hospital Inpatient)
Secure Email	magnoliaauths@centene.com
Phone	1-866-912-6285
Mail	Magnolia Health Plan Attention: Prior Authorization Department 111 East Capitol Street Suite 500 Jackson, MS 39201

Authorization Requirements for Non-Participating Providers

Effective July 1, 2014, authorization requests from non-participating providers will not be processed unless the request is accompanied by the information below each and every time a request for an authorization for care is submitted and verified:

- (1) Malpractice Insurance Face Sheet
- (2) Copy of practitioner's Mississippi medical license or advanced practice nurse or physician assistant license
- (3) Copy of valid Mississippi Medicaid Identification Number

(4) Completed W-9

(5) Completed Ownership & Disclosure Form

(6) All clinical information necessary to make a determination

All requests for authorization without all of the above documents attached will be rejected. To obtain the necessary forms, visit our web site at www.magnoliahealthplan.com.

Authorization Timeframes

Outpatient

- For all pre-scheduled services requiring prior authorization, providers should notify Magnolia fourteen (14) calendar days but no later than five (5) calendar days prior to the requested service date.
- The provider should contact the Utilization Management department via telephone, fax, mail or secure email with the appropriate clinical information to request an authorization.
- Expedited requests can be requested from the Utilization Management department as needed.
- Authorization is required for observation stays for all non-participating providers. The request must be received by Magnolia no later than 24 hours after discharge.

Inpatient

- All hospital inpatient stays require notification via an authorization request within two (2) business days of the admission.
- For pre-scheduled hospital inpatient services, providers should notify Magnolia at least fourteen (14) calendar days but no later than five (5) calendar days prior to the requested service date.
- The provider should contact the Utilization Management department via telephone, fax, mail or secure email with the appropriate clinical information to request an authorization.
- Expedited requests can be requested from the Utilization Management department as needed.
- Prior authorization is NOT required for emergency or urgent care services. Once the member's emergency medical condition is stabilized, certification for hospital admission or authorization for follow-up care is required as stated above.