



COMMONWEALTH of VIRGINIA  
*Department of Medical Assistance Services*

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DIRECTOR

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October 15, 2019

Mr. Benjy Green  
Magellan Complete Care of Virginia  
3829 Gaskins Road  
Henrico, VA 23233

Re: Corrective Action Plan (CAP) – Service Authorization Turnaround Times

Mr. Green,

The Commonwealth Coordinated Care Plus (CCC Plus) Compliance team has monitored the accuracy and timeliness of service authorizations through weekly reports submitted by Magellan Complete Care of Virginia (Magellan) since a Managed Care Improvement Plan (MIP) was issued to Magellan by the Department of Medical Assistance Services (DMAS) on February 13, 2019. As stated in the MIP, according to Section 6.2.10.1 – 6.2.10.3, the Contractor is required to adhere to the service authorization decision timeframes specified for standard, expedited, and extended service authorizations.

During the MIP period, weekly conference calls were held and bi-weekly reports were provided to the Department of Medical Assistance Services (DMAS) for evaluation. DMAS held a meeting with Magellan staff on July 3, 2019 to mitigate discrepancies identified in the report. However, despite 6 months of continued effort, Magellan failed to meet the timeframes required in the CCC Plus contract.

Furthermore, a Corrective Action Plan (CAP) request was issued to Magellan on August 16, 2019. An appeal for reconsideration was received by DMAS on September 4, 2019 based on the actions taken by Magellan to improve turnaround times across service categories during the MIP process. After reviewing this appeal and conducting analysis on current turnaround times of service authorizations, specifically LTSS – Standard, it has been determined that the CAP will remain in effect. However, no points will be assigned for this violation at this time. A review will be conducted in 60 days to determine the rate of improvement and determine if points and sanctions will be applied.

As a result of the errors in processing service authorizations according to identified timeframes, Magellan must document and implement a Corrective Action Plan (CAP) that addresses how adherence to the authorization decision timeframes specified in the CCC Plus contract will be

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accomplished. The CAP shall include the steps that will be taken to come into compliance with these requirements. Please ensure that the CAP includes a project plan or list of deliverables, milestones, due dates, and percentage complete that address the root cause(s) for the lack of compliance. A weekly update to this project plan will be required for monitoring progress. Failure to comply with the approved CAP will result in additional sanctions.

If you have any questions regarding these concerns, contract standards or CAP requirements, please contact Joshua Walker at 804-418-4464. Please sign, date and return acknowledging receipt to [ccpluscompliance@dmas.virginia.gov](mailto:ccpluscompliance@dmas.virginia.gov).

Sincerely,

A handwritten signature in blue ink, appearing to read "Jason Rachel", with a stylized flourish at the end.

Jason A. Rachel, Ph.D.  
Division Director  
Division of Integrated Care

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Acknowledge receipt via signature below of the attached CAP letter addressing service authorization turnaround times

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Benjy Green/Date

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LTSS - CCC Plus waiver (including waiver services through EPSDT), NF, long stay hospital, etc. - standard	Total Authorization Requests Processed	Percent of Requests Processed Timely *	Number of Requests Processed Timely - Calculated	Number of Requests Processed Untimely - Calculated	Number of Requests Processed Untimely - Reported**	Variance	Actual % Timely
July	1216	77.00%	936	280	281	1	76.89%
August	1109	64.00%	710	399	462	63	58.34%
September	1259	88.80%	1118	141	163	22	87.05%

\* Total Authorization Requests Processed and Percent of Requests Processed Timely figures extracted from monthly dashboard

\*\* Number of Requests Processed Untimely extracted from CMT Weekly Untimely SA TAT Dashboard Report