











Provider NEWSLETTER

maryland
physicians care
Medicaid with a Heart

EDITION 2, 2022

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MPC NEEDS YOUR HELP!



HELP YOUR PATIENTS KEEP THEIR MEDICAID COVERAGE WITH MPC.



1. The public health emergency (PHE) will be ending soon.
2. Medicaid coverage may end after the PHE.
3. Help your patients keep coverage with MPC by contacting:
 - a. Maryland's Health Connection at <https://marylandhealthconnection.gov>
 - b. Calling 855-642-8572
 - c. Visiting MPC [Renew Membership](#) to assist your patients
4. Remind your patients to take these critical steps to keep their MPC coverage.



Maryland Physicians Care
offering **\$100** Gift Card

Get Your COVID-19 Shot.

Get **\$100**

It's Easy, It's Available, It's Safe, and It's FREE!

Maryland Physicians Care will offer a \$100 gift card to MPC members who became fully vaccinated between December 15, 2021, and March 31, 2022.

To qualify for the gift card, MPC members must:

- Be 12 years old or older
- Have received the full vaccination dosage between December 15, 2021, and March 31, 2022

What does "fully vaccinated" mean? For this program, you are considered fully vaccinated when:

- You receive the second dose of a two-dose vaccine series (Pfizer or Moderna), or
- A single dose of a single-dose vaccine (Johnson & Johnson).

To qualify for the gift card, MPC members must submit a redemption form on the [MPC website](#). MPC will verify that the member qualifies and is fully vaccinated before sending the \$100 gift card. **NOTE:** Completion of the redemption form does not guarantee a gift card.

COVID Vaccination and Treatment Update



MPC has made our members aware that treatment options are available for individuals who have tested positive for COVID-19. We encourage you to prescribe treatment options where appropriate.

Patient vaccination reports are available through MPC's Provider Portal or by request via MPC Provider Relations. This will assist practices with knowing the vaccination status of their patients.

Reminder registration with ImmuNet is required to administer the COVID-19 vaccination.

For more information about discussing the vaccine with patients, please see MDH's Vaccine [Communications and Outreach Strategies in Primary Care](#) toolkit.

Also, getting a free flu shot can protect patients and those around them, help reduce community spread, and decrease the severity of illness if patients do get sick.

Patient COVID Vaccination Roster



Primary care providers can access this report through MPC's Provider Portal or MPC Provider Relations. This will assist practices with knowing the vaccination status of their patients.

Per the Maryland Department of Health (MDH), registration with ImmuNet is required to administer the COVID-19 vaccination. Your practice must be registered with ImmuNet. Please refer to [Coronavirus Information for Providers](#) for information regarding registration, COVID-19 vaccines, and the MDH Quick Reference Guide for COVID-19 Vaccine Registration & Ordering.

For more information about discussing the vaccine with patients, please see MDH's [Vaccine Communications and Outreach Strategies in Primary Care](#) toolkit.

Getting a free flu shot can protect patients and those around them, help reduce community spread, and decrease the severity of illness if patients do get sick.

COMMUNICATION:

A Vital Part of the Provider-Patient Relationship

As a provider, you already know that how you communicate with your patients is one of the most important aspects of your provider-patient relationship. Sometimes it can be difficult to do as effectively as you would like due to stress, tiredness, or lack of time in an overburdened setting. Some studies reveal that part of litigations against doctors was a patient's dissatisfaction from not being heard or fully understood.

Effective communication has three basic components: verbal, non-verbal, and paraverbal. The paraverbal component includes tone, pitch, pacing, and voice volume. While communicating, most of us focus on the verbal component that constitutes only ten percent of the message delivered. In contrast, non-verbal and paraverbal components contribute ninety percent of the total message delivered.

Listening not only involves understanding the verbal component but also elicits patients' attitudes, needs, and motives behind the words: delving into the physical, social, and emotional impact of these problems on the patient's quality of life.

Here are some of the communication strategies that may help providers improve listening skills:

- Put patients at ease. Some patients may be nervous, so begin with a general non-medical inquiry to develop a comfortable setting.
- Show interest in what the patient is saying with your mannerisms (i.e., shoulder patting, head nodding, establishing, and maintaining eye contact at reasonable intervals), body language, and active involvement like leaning towards the patient. Remember that physical touching may not be socially acceptable for some cultures.
- Be careful not to interrupt patients when they're expressing something.
- Involve patients in the decision making. The treatment plan should conform to patients' understanding, beliefs, cultural values, and concerns.
- While concluding, ask patients if they would like to add something more.



Good communication leads to healthier, happier patients! For more specific communication strategies that may help improve your listening skills, here is the full article by the NIH National Library of Medicine: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4413084/>

Guidelines for Care

Maryland Physicians Care adopts preventive and clinical practice guidelines based on the health needs of our membership and opportunities for improvement identified as part of the quality improvement (QI) program.

Guidelines are available for preventive services, as well as for the management of chronic diseases, to assist in developing treatment plans for members and to help them make healthcare decisions. Maryland Physicians Care evaluates providers' adherence to the guidelines at least annually, primarily by monitoring relevant HEDIS measures.

For the most up-to-date version of our preventive and clinical practice guidelines, go to <https://www.marylandphysicianscare.com/providers/resources/#provider-practice-guidelines>



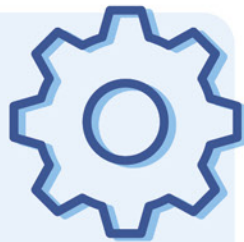
Cultural Competence Training Benefits

Cultural competence in health care is the ability of systems to provide care to patients with diverse values, beliefs, and behaviors, including tailoring health care delivery to meet patients' social, cultural, and linguistic needs. Studies demonstrate that cultural competence training has the following benefits:

- Significantly increase the cultural competence level of healthcare providers and is associated with increased patient satisfaction.
- Eliminates disparities in members' health status based on racial, ethnic, and cultural backgrounds.
- Improves the quality of services and health outcomes.
- Creates a competitive edge in the marketplace and decreases the likelihood of liability claims.
- Meets legislative, regulatory, and accreditation mandates.

MPC encourages all network providers to take cultural competence training. Several training resources can be found on the MPC website at <https://www.marylandphysicianscare.com/providers/cultural-competency-training/>. Detailed information such as a link to the resource, the topics covered, length, cost, and certifications or CEUs offered is included for each training resource.

MPC Correct Coding Corner:



URGENT CARE BILLING REQUIREMENTS

- If the group is registered in ePREP as provider practice type 99, the group NPI can be submitted as the rendering provider on the claim.
- If the group is NOT registered as provider practice type 99, the individual rendering provider NPI must be submitted.

RADIOLOGY SERVICES IN A NON-REGULATED FREESTANDING FACILITY

As a reminder, Maryland Physicians Care requires radiology services to be performed in a non-regulated freestanding facility. Services rendered outside of a non-regulated freestanding facility will require preauthorization.



BMI, Nutrition, and Exercise for Children and Adolescents

MPC reminds parents that children ages 3-17 years old should have an outpatient visit with a PCP or OB/GYN every year, and routine weight assessments and counseling for nutrition and exercise can help ensure children are healthy and/or have the guidance they need to engage in a healthier lifestyle. The HEDIS Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) covers these important topics.

During children and adolescents' visits with their PCP or an OB/GYN, the provider must assess the member's weight and provide counseling for nutrition and physical activity. The WCC measures align with the Child and Adolescents Well-Care Visits (WCV) measure. Both measures can be addressed with one visit. Providers can also cover all three measure components during sick visits and sports physicals.

When assessing weight, documentation should include height, weight, and BMI percentile. When counseling for nutrition, documentation should reflect discussion on appropriate food intake, healthy eating habits, weight-related issues including but not limited to eating disorders and body image, referrals, and educational materials provided. When counseling for physical activity, documentation should include discussion regarding exercise routines, sports activities, sports physicals, after-school programs, and educational materials.

Please remember that you may also get assistance with counseling/providing education on those topics by filling out the [Health Education Request Form](#) on the MPC website.

Visit RadMD for Clinical Authorization Information

RadMD is a user-friendly, real-time automated tool offered by National Imaging Associates (NIA) that gives instant access to submitting authorization requests for advanced imaging, cardiac, interventional pain management, and physical medicine procedures managed by NIA. RadMD provides information in an easily-accessible digital format and is available 24/7. Whether submitting authorizations or checking the status of ordered procedures, you will find RadMD to be an efficient, easy-to-navigate resource.



Both **ordering and rendering** providers can access various online tools and associated specialty information on the www.RadMD.com website. Providers have:

- Access to up-to-the-hour authorization information, including:
 - Date request initiated
 - Date procedure approved
 - Authorization validity period
 - Valid billing (CPT®) codes and more
- Ability to upload clinical documentation directly to RadMD
- Access to evidence-based clinical review criteria
- Technical support is available if you have questions while you and your patient's data is secure

Plus, **ordering providers** can access several key NEW RadMD tools that allow you to:

- View requests for additional information and determination letters
- View procedure-specific checklists of required documents
- Change the rendering provider
- Withdraw authorizations
- Track authorizations in alternative ways
- View and manage authorization requests with other users using Shared Access

Additionally, **rendering providers** can view approved, pended, and in-review authorizations for their facility and submit requests for advanced imaging procedures on behalf of the ordering provider.

NIA also has a feature that allows clinical information to be uploaded directly into RadMD. Utilizing this upload feature on RadMD expedites your request since the information is automatically attached to the case and forwarded to our clinician for review.

To get started, simply go to www.RadMD.com, click the New User button, and set up a unique username/account ID and password for each user in your office or facility.

NIA will be conducting several RadMD informational webinars over the next three months and cordially invites the provider community to participate! These webinars offer a unique opportunity to learn more about the recent innovations to RadMD.com and how these enhancements can help providers better navigate the prior authorization process. For more information, provider education requests, or questions specific to NIA, please contact Charmaine Everett, Senior Manager at NIA: cseverett@magellanhealth.com or at 1-410-953-2615.



Pharmacy vs. Medical Rx Benefit Overview

MPC continues to evaluate new and existing medications for coverage under the pharmacy or medical benefit. The information listed below defines the pharmacy vs. medical benefit for medication coverage.

Pharmacy Benefit

- Most medications covered under the pharmacy benefit are self-administered by the member or caregiver
- Administered by our pharmacy benefit manager (PBM), Express Scripts (ESI)
- Providers can check the Preferred Drug List (PDL) here: [MPC Approved Drug Benefits](#)
- Providers should call ESI at 1-800-753-2851 to initiate a prior authorization and/or reference the approved drug benefits on our website for additional information: [MPC Prior Authorization for Medications](#)

Medical Benefit

- Most medications that a healthcare provider administers in the outpatient setting are reviewed under the medical benefit
- MPC reviews the majority of medical benefit medications
- MPC reimburses physician-administered/ordered standard drug pricing billed on professional claims at the Maryland Medicaid Fee Schedule (priced on Physicians Fee Schedule.)
- The table below highlights examples of medications that are reviewed exclusively under the medical benefit
- Providers are encouraged to fax their prior authorization request using the Medical Rx Coverage Determination forms to 1-800-953-8856

MEDICATIONS REVIEWED BY MPC	
Medication (generic)	Medication (generic)
Apretude (cabotegravir)	IV and Injectable Iron Products
Cabenuva (cabotegravir/rilpivirine)	Lemtrada (alemtuzumab)
Cubicin (daptomycin)	Oxumo (lumasiran)
Dalvance (dalbavancin)	Vyepti (eptinezumab-jjmr)

Pharmacy Process Update

Effective June 1, 2022, MPC will be transitioning the review of additional medications prescribed for the treatment of autoimmune disease to our vendor Eviti. Eviti will process prior authorization requests prescribed for the autoimmune medications listed here:

Fasenra (benralizumab)	Actemra (tocilizumab)	Cimzia (certolizumab)	Acthar gel (corticotropin)
Nucala (mepolizumab)	Kineret (anakinra)	Rinvoq (upadacitinib)	
Cosentyx (secukinumab)	Tremfya (guselkumab)	Skyrizi (Risankizumab-rzaa)	

The full list of medications prescribed for the treatment of autoimmune disease reviewed by Eviti can be found on the MPC provider website: [MPC Approved Drug Benefits](#). Prior authorization requests will be submitted to Eviti Connect® for Autoimmune Diseases via their web-based platform: [Eviti Connect® for Autoimmune Diseases](#). Eviti supports registration to their web portal and assists with entering prior authorization requests into the platform. Support services for Eviti can be reached at clientsupport@nanthealth.com or 888-482-8057, option #2.

Maryland Healthy Kids Program / EPSDT



Maryland's Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program is known as the Healthy Kids Program. These health care services allow for early identification and treatment of health problems before becoming medically complex and costly to treat. The Maryland Healthy Kids Program is developed by the Maryland Department of Health (MDH) in conjunction with other state departments and closely correlates with the American Academy of Pediatrics Periodicity Schedule.

MDH requires that Primary Care Providers treating members under 21 years old become EPSDT-Certified. To find out more about the application and certification process, visit <https://health.maryland.gov/mmcp/epsdt/pages/home.aspx>. Also found at this site are resources such as the childhood immunization schedule, preventive health schedule, recommended forms to use during the wellness visit, and billing guidelines.

HEDIS Measures Performance

The Healthcare Effectiveness Data and Information Set (HEDIS®) is a set of standardized performance measures updated and published annually by the National Committee for Quality Assurance (NCQA). HEDIS® is a tool used by most U.S. health plans to measure performance on important aspects of care and service. It is designed to provide purchasers and consumers with the information they need to compare the performance of healthcare plans reliably.

Through HEDIS®, Maryland Physicians Care (MPC) is accountable for the timeliness and quality of healthcare services delivered to its diverse membership. MPC reviews HEDIS® rates ongoing and continually looks for ways to improve. It is an important part of our commitment to providing access to high-quality and appropriate care to our members.

MPC recently made HEDIS® gaps-in-care reports available on the provider portal and provides HEDIS Tip Sheets on the website to assist practices with identifying HEDIS® measures to engage members in care. <https://www.marylandphysicianscare.com/wp-content/uploads/2022/03/Measure-Year-2022-HEDIS-Tip-Sheet.pdf>



Meeting Appointment Accessibility Standards



Are your patients able to obtain services when they are needed? Maryland Physicians Care monitors the availability of our network practitioners. Availability is key to member care and treatment outcomes.

Maryland Physicians Care follows the accessibility requirements set forth by applicable regulatory and accrediting agencies. We monitor compliance with these standards annually and use the results of monitoring to ensure adequate appointment availability and reduce the unnecessary use of emergency rooms.

Please review the appointment availability standards below. They are also available in the Provider Manual.

Type of appointment	Scheduling time frame
Life-threatening emergency care	Same day as request
Urgent care	Within 48 hours
Routine appointments	Within 30 days of request
General physical examinations and new patient examinations	Within 90 days of date of enrollment, unless a shorter time frame would be medically appropriate
Routine pregnancy well care	Within ten days of request

Access to Care Management (CM)

Members with high-risk, complex, or catastrophic conditions, including asthma, diabetes, sickle cell disease, HIV or AIDS, and congestive heart failure, often have difficulty facilitating care on their own. An MPC care manager may be able to help. Care managers are advocates, coordinators, organizers, and communicators. They are trained nurses and practitioners who promote quality and cost-effective outcomes by supporting you and your staff, as well as your patients and their caregivers. A care manager provides a communication link between the member, his or her primary care physician, the member's family, and other healthcare providers, such as physical therapists and specialty physicians. Care managers help members understand the benefits of following a treatment plan and the consequences of not following the plan outlined by the physician.



Providers can directly refer members to care management by emailing our Special Needs Coordinator at MPCSNC@mpcmedicaid.com. Providers may call 1-800-953-8854 for additional information about the care management services offered by MPC.



Fraud and Abuse

MPC needs your help to prevent fraud and abuse!

We encourage you to report anything suspicious you may have seen. You may report fraud and abuse without the fear of reprisal by calling MPC's Compliance Hotline at 1-866-781-6403 or visiting [MPC Fraud & Abuse](#).

The Provider Web Portal



Maryland Physicians Care offers a convenient and secure access portal that is available 24/7.

- View and adjust claims for service dates after 1/1/2021
- Easily check patient eligibility
- View, manage, and download your patient list
- View and submit service authorizations
- Communicate with us through secure messaging
- Maintain multiple providers on one account
- Control website access for your office
- View historical patient health records
- Submit assessments to provide better patient care

VISIT OUR WEBSITE

FIND INFORMATION ON:

- Quality Improvement Program
- Population Health Management Programs
- Case Management Programs
- Clinical Practice Guidelines
- Utilization Management, including Decision-making Criteria, Affirmative Statement, and Staff Availability
- Pharmacy and Prescription Drug Management
- Benefits and Coverage
- Member Rights and Responsibilities
- Protected Health Information Use and Disclosure
- Provider Manual
- Member Handbook
- Provider Directory
- Credentialing Rights

If you do not have internet service, you can reach us by phone (numbers listed in “Who to Call”) for more information.

WHO TO CALL

PROVIDER SERVICES

Claims, status, network participation, member eligibility, etc.

1-800-953-8854

MEMBER SERVICES

Benefits, ID cards, appeals, PCP changes, etc.

1-800-953-8854

DENTAQUEST

Adults only

1-800-685-1150

HEALTHY SMILES DENTAL SERVICES

1-855-934-9812

PUBLIC MENTAL HEALTH SERVICES

1-800-888-1965

SUPERIOR VISION

1-800-428-8789

UTILIZATION MANAGEMENT

1-800-953-8854

CASE MANAGEMENT

1-800-953-8854

HEALTH EDUCATION REQUESTS

1-800-953-8854

Keep Us Informed

Maryland Physicians Care wants to provide the best care we can to our members. That means it's important for us to know if you plan to move, change phone numbers, or change your network status.

Call **1-800-953-8854** to update or verify your contact information or status. You can also check your information on the secure [MPC Provider Portal](#). Please let us know at least 30 days before you expect a change to your information.



Enroll in ePREP

Are you enrolled in the electronic Provider Revalidation and Enrollment Portal (ePREP)? ePREP is a requirement for Maryland Medicaid providers. It is a one-stop shop for provider enrollment, re-enrollment, revalidation, information updates, and demographic changes. Please ensure you are enrolled and that your information is consistently kept up to date. Providers who do not enroll or have outdated information may not be paid for services to Maryland Medicaid recipients. Review these [TIPS](#) for getting started and for additional resources. Enroll or update your information at eprep.maryland.health.gov.



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