

Provider NEWSLETTER

maryland
physicians care
Medicaid with a Heart

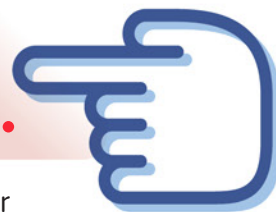
EDITION 3, 2023

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HELP YOUR PATIENTS KEEP THEIR MEDICAID COVERAGE WITH MPC!

Maryland Medicaid requires members to renew their coverage.



Medicaid renewals **will not** be automatic this year. Your patients **must** renew their coverage with Maryland Health Connection this year to keep their health insurance benefits. Patients can renew their insurance by:

- 1. GOING ONLINE** to Maryland Health Connection at <https://marylandhealthconnection.gov/>
- 2. CALLING** Maryland Health Connection's Customer Service at 855-642-8572
- 3. VISITING** MPC's website at [mpcMedicaid.com/renew-membership](https://mpcmedicaid.com/renew-membership)

REMIND your patients to take these important steps to keep their MPC coverage.

For more information to assist your patients, please visit the [MDH website](#).

Special Needs CM Referrals

For more information about HIV Care, Pre- and Post-Natal Care, and other Special Needs Populations, please visit the [HealthChoice Provider Manual](#) on our website.

Referrals to Case Management are effortless – the following information is required for a referral:

- Member Name, DOB, and Medicaid Number
- Reason for the referral
- A good contact number for the member
- Whether or not you have spoken with the member regarding the referral would be helpful, though not required



Information can be faxed, emailed, or called in:

Toll-Free: 1-800-953-8854 or 443-300-7325

Fax: 1-844-284-7698

Email: MPCSNC@mpcmedicaid.com

Maryland's Healthy Babies Equity Act



House Bill 1080 (Healthy Babies Equity Act) requires the Maryland Department of Health (MDH) to provide comprehensive medical care and other health care services to non-citizen pregnant women who would qualify for Medicaid but for their immigration status and their children up to the age of one year.

As of July 1, 2023, non-citizen pregnant Marylanders who would otherwise be eligible for Medicaid but for their immigration status may now be eligible for coverage. Pregnant women who meet the other Medicaid enrollment requirements, except for citizenship, are now eligible for full Medicaid coverage.

This includes those who are undocumented or are on visas that would otherwise not allow them to apply for Medicaid.

For more information, please visit [MPC's website](#).






Utilization Management Overview

Utilization Management is one way MPC monitors the medical necessity and cost effectiveness of the services our members receive. Participating and nonparticipating health professionals, hospitals, and other providers must comply with MPC's prior authorization and concurrent review policies and procedures. Noncompliance may result in delay or denial of reimbursement.

The concurrent review function provides a way to evaluate admissions while a member is hospitalized. Admissions are reviewed for medical necessity, and continuing services are evaluated for the appropriate use of inpatient medical resources. Services subject to concurrent review include but are not limited to those provided in acute and specialty hospitals, rehabilitation, and skilled nursing facilities, including inpatient hospice care.

Prior Authorization requests follow the decision timeframe mandated by the Maryland Department of Health. If all the necessary clinical information is received with the request, decisions are made within two business days and not more than 14 calendar days when additional information is required. Prior Authorization requests must be submitted on the MPC Prior Authorization form.

To ensure a timely response to your request, submit all clinical information required with your request. UM requests should be faxed to the applicable number below:

- Prior authorization for scheduled Inpatient and Outpatient services and transplants, fax 800-953-8856
 - Inpatient admission notification fax 800-385-4169
 - Concurrent Review clinical information fax 877-535-0591
 - Post Discharge services request fax 833-424-8013
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How to Access/Contact Utilization Management (UM) Staff



To speak with someone from the UM Department, please call 1-800-953-8854, then follow the prompts. Staff is available at least eight (8) hours a day during normal business hours for inbound collect or toll-free calls regarding utilization management issues. Staff can receive inbound communication regarding UM issues after normal business hours or by fax to 1-877-535-0591 or by phone at 1-800-953-8854, following prompts to Authorization/Concurrent review and leaving a voice message.

Communications received after normal business hours are returned the next business day.

Communications after midnight M-F are returned the same business day. Maryland Physicians Care TDD/TTY (Telecommunications Device for the Deaf/ TeleTypewriter) services are provided for members who need this service at 1-800-735-2258. Language assistance is also available, free of charge, for members to discuss utilization management issues.

MPC requires utilization management staff to identify themselves by name, title, and organization name. They verbally inform the member, facility personnel, the attending physician, and other ordering practitioners/providers of specific utilization management requirements and procedures upon request.





ER SUDDEN AND SERIOUS LIST

Please note that [ER Sudden and Serious List \(PDF\)](#) has been updated and shared on our website under Provider Resources (Billing and Claims section). This list includes ICD-10 codes designating an emergency room visit that require immediate medical attention, which will automatically adjudicate hospital claims.



MPC Correct Coding Corner:

AMBULATORY SURGERY CENTER ADDITIONAL REIMBURSEMENT

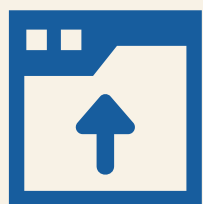
Effective September 1, 2023, MPC will allow additional reimbursement as a bill above for high-cost implantable items billed by an Ambulatory Surgery Center. An invoice with the items must accompany the claim submission. The invoice must include the member's name, identification number, HCPCS codes, and per-item price. Visit [MPC's website](#) for a list of these items.

Attention Ordering Physicians and Laboratories:

As of August 1, 2023, MD Medicaid coverage is now available for Biomarker Genetic testing for Cancers. Prior authorization is required for Biomarker testing. Please use MPC's code checker web tool ([Services - Prior Authorization - Maryland Physicians Care](#)) on MPC's website to confirm that prior authorization is required prior to ordering biomarker testing. The ordering Physician should request prior authorization, and we recommend the laboratory should not perform biomarker testing without confirming prior authorization. Prior authorization is not a guarantee for reimbursement.

Prenatal Aneuploidy Screening

Ordering physicians are required to obtain prior authorization for all lab services that require authorization including Non-Invasive Prenatal Testing (NIPT). Labs should not perform NIPT testing without confirming prior authorization, when required.



Updating ePREP

Maryland Medicaid's electronic Provider Revalidation and Enrollment Portal (ePREP) is a one-stop shop for provider enrollment, re-enrollment, revalidation, information updates, and demographic changes. Your information must be consistently kept up to date. Providers without enrollment or out-of-date information may not be paid for services to Maryland Medicaid recipients. The ePREP Call Center phone number is (844) 463-7768 and is available 9 am – 5 pm ET, Monday – Friday. Enroll or update your information [here](#). All Medicaid providers must revalidate with Maryland Medicaid at least every five years. To revalidate in ePREP, Maryland Medicaid will send a notice in the mail to prompt the provider to enter ePREP and submit a specific revalidation application.

Keep Your Demographic Information Up to Date



MPC wants your information to be up to date. It is important that we have your accurate information for our provider directory as well as for payment and credentialing purposes. By providing updated information, you can assist MPC in providing the best care we can for our members. It is 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 our secure [provider portal](#). Please let us know at least 30 days before you expect a change to your information.

Maryland Healthy Kids Program / EPSDT



The Maryland Department of Health Provides valuable resources on the [Maryland Healthy Kids Program/EPSTD](#) site. Below are links to the most recent Childhood Immunization Schedule, Preventive Health Schedule, and Questionnaires and Assessment Forms. Please pay close attention to the Laboratory Section of the Preventive Health Schedule, as many providers score lower on the EPSDT medical record reviews.

- [2021 Recommended Childhood Immunization Schedule](#)
- [2022 Maryland Healthy Kids Preventive Health Schedule](#)
- [Questionnaires and assessment forms recommended for use by MDH include Medical Family History; Mental Health; Substance Abuse; Childhood Abuse; Nutrition; Growth Charts, and more!](#)

Member Rights and Responsibilities

Members have rights and responsibilities that cover their treatment, privacy, and access to information. We have highlighted a few below.

MEMBER RIGHTS INCLUDE BUT ARE NOT LIMITED TO THE FOLLOWING:

- Receive health care and services that are culturally competent and free from discrimination.
- Be treated with respect to their dignity and privacy.
- Receive information on treatment options and alternatives, regardless of cost or benefit coverage, in a manner they can understand.
- Participate in decisions regarding their healthcare, including the right to refuse treatment.
- Request and receive a copy of their medical records and request that they be amended or corrected.

MEMBERS' RESPONSIBILITIES INCLUDE BUT ARE NOT LIMITED TO:

- Be on time for appointments and notify providers as soon as possible if they need to cancel an appointment.
- Show their membership card at every appointment and never allow anyone else to use their card.
- Provide the MCO and their providers with accurate health information to provide proper care.

Please read the full [Rights and Responsibilities statement](#) on Page 7 in the Provider Manual or directly on our [website](#).

Pharmacy Update

The management of opioid medications and access to these treatments remains a high priority for MPC. Through formulary management, opioid medications and quantity limits were assessed. Effective July 2023, MPC updated the opioid medications listed below with new quantity limits. Please note that existing prior authorization requirements and quantity limits remain in effect for the opioid therapeutic category.



Current Opioid QL	
MORPHINE SULF 5 MG SUPPOS	180 supps/30 days
MORPHINE SULF 10 MG SUPPOS	180 supps/30 days
MORPHINE SULF 20 MG SUPPOS	180 supps/30 days
MORPHINE SULF 30 MG SUPPOS	180 supps/30 days
MORPHINE SULF 10 MG/5 ML SOLN	1,350 mL/30 days
MORPHINE SULF 100 MG/5 ML CONC	135 mL/30 days
MORPHINE SULF 20 MG/5 ML SOLN	675 mL/30 days
CODEINE SULFATE 15 MG TABLET	180 tabs/30 days
CODEINE SULFATE 30 MG TABLET	180 tabs/30 days
CODEINE SULFATE 60 MG TABLET	180 tabs/30 days
HYDROCODONE-ACETAMIN 2.5-108/5	2,750 mL/30 days
HYDROCODONE-ACETAMIN 5-217/10	2,750 mL/30 days
HYDROCODONE-ACETAMN 7.5-325/15	2,750 mL/30 days
HYDROCODONE-ACETAMIN 2.5-325	150 tabs/30 days
HYDROCODONE-ACETAMIN 5-300 MG	150 tabs/30 days
HYDROCODONE-ACETAMIN 7.5-300	150 tabs/30 days
HYDROCODONE-ACETAMIN 10-300 MG	150 tabs/30 days

The **Provider** Web Portal

MPC offers a convenient and secure access portal that is available 24/7.

- View, submit, and adjust claims for service dates
- 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



Referrals and MPC

Please note that MPC does not require referrals for specialist care.

Create your account today!

Prevention & Wellness



IMPORTANCE OF PHYSICAL ACTIVITY

As practitioners and providers, we know about the importance of physical activity. We know that exercise and physical activity can benefit long-term health in many ways. Along with burning calories to maintain a healthy weight, exercise can help prevent illnesses by strengthening the patient's body.

Exercise has also been shown to:

- Lower your risk for heart disease, diabetes, and other long-term health problems.
- Make your lungs and muscles stronger.
- Help you sleep better.
- Reduce the risk of falling or recover better from a fall.

Your patients can do workouts anywhere – in the home, at the park, in a studio – you name it! Your patients can try these [5 Minute, Feel Good, Anytime, Anywhere Workouts](#) for quick workouts designed to enrich the body and mood.

BENEFITS OF GOOD SLEEP

As practitioners and providers, we know about the importance of healthy sleep habits. Behaviors during the day – not just before going to bed – can affect how well one sleeps. Food and drink choices, schedule, evening routine, and many other activities all affect one's ability to sleep.

If your patients say they aren't sleeping well, they can take several steps, both during the day and before bed, to improve their sleep.

- 1. Keep a consistent sleep schedule.** Try to go to sleep and wake up at about the same time every day – even on weekends. This reinforces the body's sleep cycle, making it easier to fall asleep and wake up daily.
- 2. Create a relaxing bedtime routine – and stick with it.** Keep a relaxing and consistent routine; it helps the body recognize that it's bedtime when the patient starts the routine. The best time to start the routine is 30 to 60 minutes before bed.
- 3. Turn off electronic devices before going to sleep.** Electronic devices emit blue light, which can reduce the melatonin levels in the body. Patients might think that not looking at a phone close to bedtime is enough, but keeping a phone near the bed can disrupt sleep. The message notifications, buzzing, and light that can suddenly pop on in the middle of the night can wake a patient up momentarily, leading to interrupted sleep.
- 4. Limit your caffeine intake.** The effects of caffeine can last 3 to 7 hours after consumption. Although it's usually best to limit caffeine intake to the morning hours, remember that everyone has a different tolerance. The less caffeine one consumes, the more sensitive one may be to its effects.

VISIT OUR WEBSITE

FIND INFORMATION ON:

- Quality Improvement Program
- Population Health Management Programs
- Case Management Programs
- Health and Wellness
- 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

MARYLAND HEALTHY SMILES DENTAL PROGRAM

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



Help Prevent Fraud and Abuse

MPC needs your help to prevent fraud and abuse! Fraud and abuse are against the law. We encourage you to report anything suspicious, and you can report fraud and abuse without fearing retaliation. MPC reports all suspected incidences of fraud and/or abuse to the Maryland Department of Health, Office of Inspector General for further investigation, which may result in criminal penalties.

Examples of fraud and abuse include:

- Someone using an ID card that does not belong to them
- Providers billing for services or supplies that were not provided
- Providers giving excessive or unnecessary tests and services
- Selling prescription medications or making changes to a written prescription
- Falsely reporting household income
- Not living in Maryland but receiving Maryland Medicaid

You do not need to give us your name or contact information to report fraud and abuse, but we will keep it confidential if you do. You must provide us with as much information as possible when you report fraud and abuse because it will help us conduct a thorough investigation. You can report fraud and abuse in the following ways:

- **CALL** MPC's Compliance Hotline at 1-866-781-6403 and leave a detailed message.
- **GO ONLINE** at [MPC Fraud and Abuse](#) to complete the Fraud and Abuse Form.
- **WRITE** to the Compliance Officer at MPC, 1201 Winterson Road, 4th Floor, Linthicum Heights, MD 21090

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