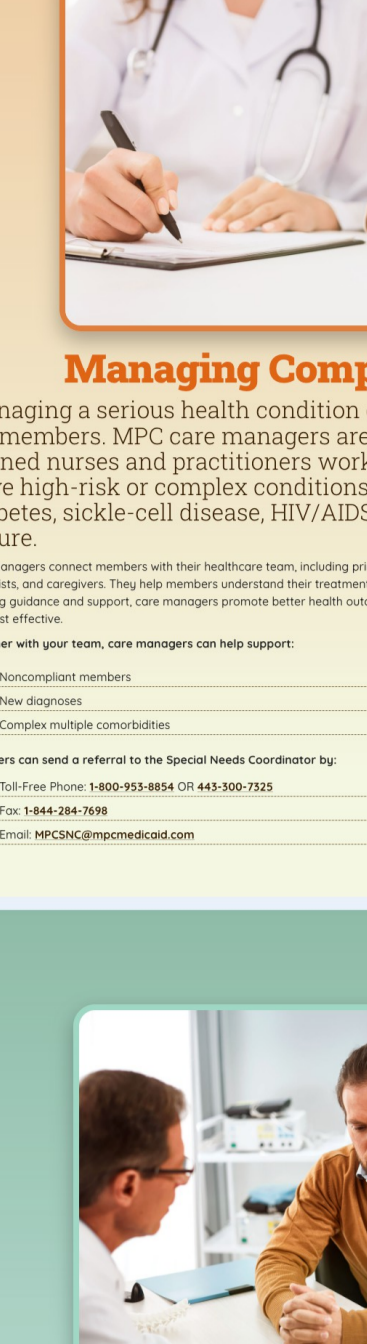


# Provider NEWSLETTER



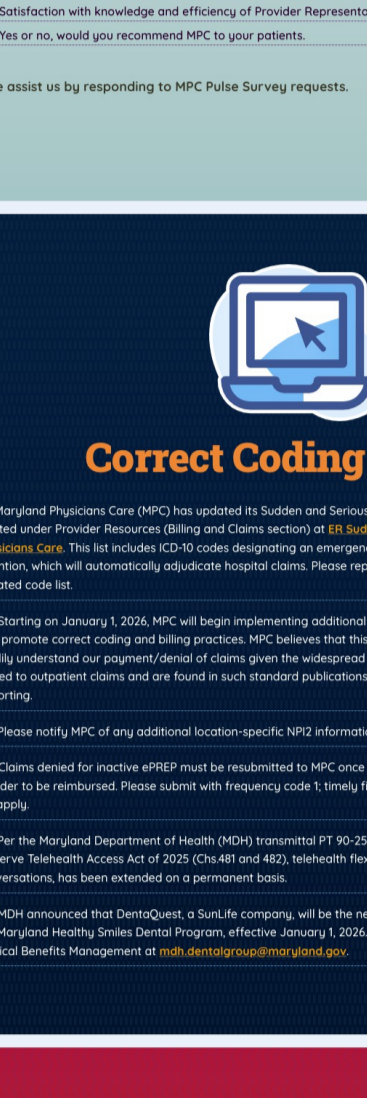
## HIV and AIDS Awareness and Resources

Providers play a large role in preventing, diagnosing, and treating HIV, viral hepatitis, STIs, and tuberculosis. These conditions significantly impact members' health. The CDC offers a variety of **Provider Resources**, including educational modules and training focused on key elements towards HIV care delivery.

World AIDS Day is observed on December 1st. It is a time to raise awareness of HIV and AIDS and honor those who have been affected by the virus. The CDC resources are helpful with providing patients with high quality and preventive care. The CDC also has a "Partner Coverage" web page available to assist providers and colleagues to discuss and discuss patients on HIV screening and prevention. The CDC recommends patients between the ages of 13 and 64 are tested at least once a year. It's important to have a conversation with patients to remove the stigma related to HIV and build trust. The CDC resources assist providers with reducing the stigma of HIV/AIDS, ensuring ongoing testing, addressing barriers to testing, and offering guidance and support. Call your practice to learn more about these resources and how they can help ensure care is both high-quality and cost-effective.

Providers are and in referral to the Special Health Coordinator by:

- Toll-free phone: 1-800-955-8854 OR 410-300-7353
- Fax: 1-844-284-7898
- Email: [MPCNCR@mcpmedicaid.com](mailto:MPCNCR@mcpmedicaid.com)



## Managing Complex Care

Managing a serious health condition can be overwhelming for members. MPC care managers are here to help. These trained nurses and practitioners work with members who have chronic or complex conditions such as asthma, diabetes, sickle-cell disease, HIV/AIDS, or congestive heart failure.

Care Managers connect members with their healthcare team, including primary care doctors, specialists, physical therapists, and caregivers. They help members understand their treatment plan and why following it is important. By offering guidance and support, they help members grow to better health outcomes and help ensure care is both high-quality and cost-effective.

Together with your team, care managers can help support:

- Noncompliant members
- New diagnoses
- Complex, multiple comorbidities
- Caregiver support

Providers are and in referral to the Special Health Coordinator by:

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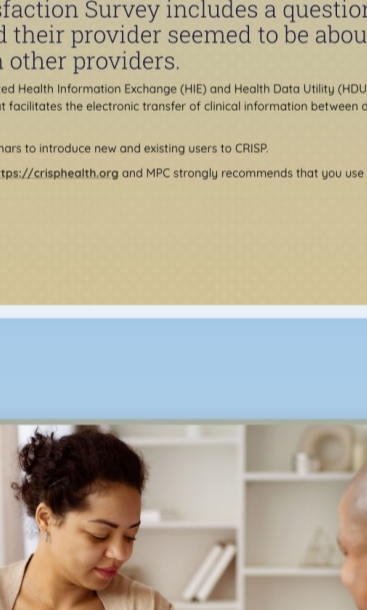
## Primary Substance Use Services for MPC Members

MPC is required to cover primary substance use services needed by enrollees, including screening, provision of early intervention, and/or referral for additional services, as appropriate.

The SBIRT (Screening, Brief Intervention, and Referral to Treatment) is an evidence-based approach used to identify and address risky substance use behaviors in healthcare settings for all ages and providers are encouraged to begin with the SBIRT during well-visit visits.

- Identify patients at risk for substance use disorders (SUDs).
- Provide early intervention to prevent or reduce substance use-related problems, and
- Connect patients with appropriate treatment and support services.

If it is hard practice to obtain a referral of information to the State's behavioral health/substance use vendor following the Primary Mental Health Services (PMHS) (PHS) 1-800-888-1965 for assistance or to answer questions 24 hours a day, 7 days a week.



## Discussing a Denial with MPC's Medical Director

MPC allows practitioners to speak with our Medical Directors or Pharmacists to discuss denial decisions made due to lack of medical necessity. The intent of the Peer-to-Peer (P2P) is to discuss the denial reason(s) with the ordering clinician or attending physician and the MPC decision maker.

For medical and medical benefit denial decisions, the requesting provider can speak to with an MPC Medical Director to conduct a P2P calling 410-402-8297.

For pharmacy benefit denial decisions, please contact the MPC UM Pharmacy team at 888-288-2520 for P2P requests.

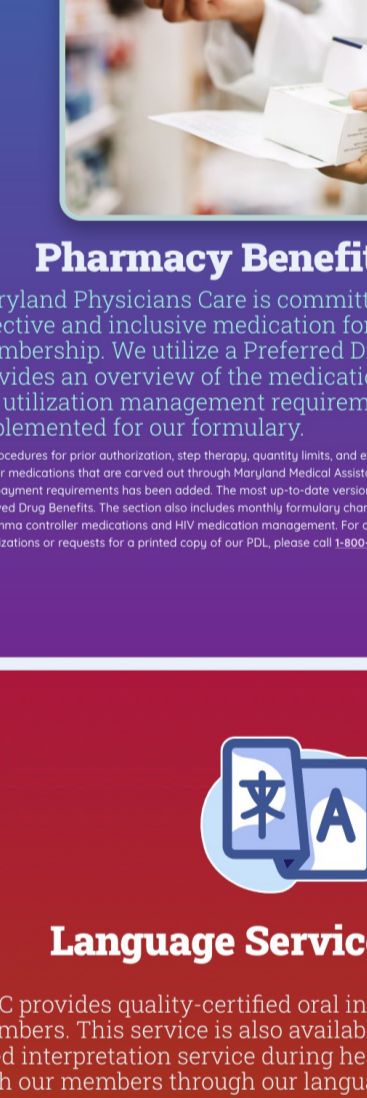
The following information needs to be provided when leaving the request for a P2P on MPC's secure line:

- Member name
- Member ID#
- Authorization number (if known)
- Caller's name and contact information
- Provider name (clinician to perform P2P)
- Provider phone number (not MPC)
- Provider's available dates and times?

\*Please note that MPC attempts to accommodate the provider's availability but if the provider's availability is more than three business days from the date of the request, the provider must file an appeal.

If the MPC Medical Director or Pharmacist returns the P2P request and is required to leave a message, the provider has two business days to return the call, or the denial will be upheld, and the provider will need to file an appeal.

For additional resources regarding the P2P process, please contact our Medical Director at 410-402-8297.



## Provider Pulse Surveys

We want to hear from you! The results are based on respondents rating of MPC's performance in various areas and are used to improve the provider's experience with MPC.

Here are a few examples of the survey questions:

- Satisfaction with accuracy and timeliness of claims processing
- Satisfaction with process for verification of member eligibility
- Satisfaction with timeliness and accuracy of provider reimbursement
- Yes or no, would you recommend MPC to your patients.

Please assist us by responding to MPC Pulse Survey requests.



## Correct Coding Corner

1. Maryland Physicians Care (MPC) has updated its Sudden and Serious Code list effective December 1, 2025. The list is located under Provider Resources Billing and Claims section of the SBIRT and Services List Updated - Maryland Physician Resources. The list includes ICD-10-CM and ICD-9-CM codes that are used to bill for medical services. The codes which will automatically adjust hospital claims. Please replace your Sudden and Serious Code list with the updated code list.

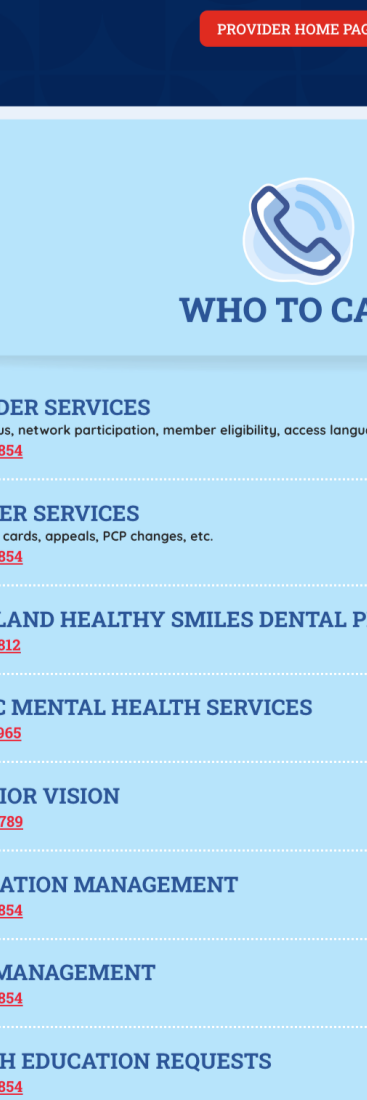
2. Starting on January 1, 2026, MPC will begin implementing additional enhancements to our claim editing programs. These enhancements include: 1) enhanced coding and billing of claims. MPC will review and flag claims that are not compliant with the current coding and billing of claims when the widespread use of these policies. These enhancements are limited to outpatient claims and are found in our standard publications as ICD-10-CM Official Guidelines for Coding and Reporting.

3. Please notify MPC of any additional location-specific MRI information.

4. Claims denied for inactive ePREP must be resubmitted to MPC once the ePREP is reactivated for the date of service in order to be eligible for payment. MPC will review and flag claims that are not compliant with the current coding and billing of claims when the widespread use of these policies. These enhancements are limited to outpatient claims and are found in our standard publications as ICD-10-CM Official Guidelines for Coding and Reporting.

5. For the Maryland Department of Health (MDH) transmitted PT 90-23 and in accordance with HB 869 / SB72, Superior Telehealth Access Act of 2023 (CH 48 and 49), telehealth services, including coverage of audio-only phone consultations, has been expanded on a permanent basis.

6. MDH announced that DentQuest, a dental company, will be the New Dental Administrative Service Organization for the Maryland Healthy Smiles Dental Program, effective January 1, 2026. Please direct any inquiries to the Office of Medical Benefits Management at [ombm@mdhsmd.org](mailto:ombm@mdhsmd.org).



## Utilization Management Affirmative Statement

MPC's Utilization Management Program ensures that all members receive quality, medically necessary services that are delivered in the right healthcare setting. MPC bases UM decision-making only on the appropriate medical necessity of the member's condition and the medical necessity of the services requested. For any questions regarding the program, please contact our Utilization Management team at 1-800-955-8854.



## Advancing Health Equity Through Routine PCP Visits

Regular primary care visits are a cornerstone of equitable healthcare delivery. For clinicians, these are an opportunity to close gaps in care and strengthen trust with patients. These visits also help providers to proactively address chronic conditions, screen for social determinants of health, and coordinate preventive services.

Patients from marginalized communities often face, or avoid care due to transportation challenges, financial strain, limited health literacy, and/or negative experiences with the healthcare system. To ensure equitable care, providers should consider using proactive outreach such as calls or text with a gentle reminder about upcoming visits and follow-up, addressing barriers to care, and providing transportation assistance.

When decisions regarding care are made, providers should consider the patient's unique circumstances, including their social determinants of health. When making decisions about care, providers can ensure that every individual has the opportunity to benefit from preventive and ongoing primary care.



## MPC Pharmacy: Utilization Management

MPC requires completed criteria and clinical documentation to be provided for ALL prior authorizations to support the requested treatment. Failure to supply required documents will delay the prior authorization review process. Please continue to complete prior authorization requests via the online prior authorization (ePA) process or via fax (1-833-896-0656) using our template forms found on our website here.

This pharmacy team is not responsible for the review of medical benefits decisions (administered by a healthcare provider). Please continue to fax prior authorization requests for these medications to the MPC UM team at 1-800-955-8854.



## Help Your Patients Keep Their Medicaid Coverage With MPC!

Maryland Medicaid requires members to renew their health coverage. Your patients must renew their coverage with Maryland Health Connection this year to keep their health insurance benefits.

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

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

For more information to assist your patients, please visit the MDH website at <https://mdh.maryland.gov/healthcare/membership-renewal>.



## HELP PREVENT FRAUD AND ABUSE

You can report fraud and abuse in the following ways:

- CALL MPC's Compliance Hotline at 1-846-781-6493
- GO ONLINE at <https://www.marylandphysicianscare.com/fraud-abuse/>



## CRISP

Using the Chesapeake Regional Information System for Providers (CRISP) improves continuity of care by providing you with information from other care team participants. It can also improve member satisfaction ratings. The annual Member Satisfaction Survey includes a question related to how informed the patient felt (perceived to be about healthcare received from other providers).

CRISP is the State Designated Health Information (DH) and Health Data Utility (DHU) for Maryland. They are a non-profit organization that facilitates the electronic transfer of clinical information between disparate health information systems. The list includes ICD-10-CM and ICD-9-CM codes that are used to bill for medical services. The codes which will automatically adjust hospital claims. Please replace your Sudden and Serious Code list with the updated code list.

CRISP offers monthly webinars to CRISP and existing users to CRISP.

You can access CRISP at <https://crisp.health.org> and MPC strongly encourages that you use CRISP as your day-to-day practice.



## Free Pregnancy-Related Support Services

**Pacify Application**

Maryland Physicians Care (MPC) offers a new Pacify App that connects members to Doula Services, Lactation Consultants, and Core Managers. Core Managers help members with their benefits, find a doctor, and schedule appointments. With 24/7 access to Lactation Consultants, members can receive breastfeeding support and answers to other feeding-related questions.

**Home Visiting Services**

Maryland Physicians Care offers a home visiting benefit for pregnant members. Home Visiting Services provide support to pregnant members during pregnancy and childbirth. These tools support parents and children during the postpartum period through the first year of life.

Please direct members to visit MPC Pregnancy-Related Support Services to learn more, or to call MPC Customer Service at 1-800-955-8854.



## Improve Your Office Efficiency by Using MPC's Many Self-Service Tools

Did you know that Maryland Physicians Care (MPC) has many time-saving self-service options available to providers on MPC's website and portal? These tools assist with more efficiently supporting your office administrative functions such as submitting and checking claims, authorizations, and appeals.

Be sure you are registered to use the secure online web portal:

- Review Member Panel Re-determination Dates occurring within the next 90 days
- Review Gaps in Care Reports
- Search check sheet eligibility
- View, manage, and download your patient list
- View claims
- View and submit service authorizations
- Communicate with us through secure messaging
- Manage your account
- Control website access for your office

Other Provider Resources Available on the MPC website:

- Provider Billing Guidance
- Appeals Submission
- Search Appeal Status
- Electronic Funds Transfer Guidance
- Operations Updates
- Searchable Drug Formulary
- Searchable Prior Authorization Requirements
- Download the Provider Manual
- Learn about MPC's Diabetes Prevention Program
- View Pregnancy-Related Support Services
- View Maryland Healthy Kids Preventive Health Schedule



## Pharmacy Benefit Coverage

Maryland Physicians Care is committed to delivering a cost-effective and inclusive medication formulary for our membership. We utilize a Preferred Drug List (PDL) that provides an overview of the medications we cover and details the utilization management requirements we have implemented for our formulary.

The procedures for prior authorization, step therapy, quantity limits, and exclusions are highlighted in the PDL. Reference information for providers is located in the Provider Resources Billing and Claims section of the SBIRT and Services List Updated - Maryland Physician Resources. The list includes ICD-10-CM and ICD-9-CM codes that are used to bill for medical services. The codes which will automatically adjust hospital claims. Please replace your Sudden and Serious Code list with the updated code list.

CRISP offers monthly webinars to CRISP and existing users to CRISP.

You can access CRISP at <https://crisp.health.org> and MPC strongly encourages that you use CRISP as your day-to-day practice.



## Language Service Support

MPC provides quality-certified oral interpreter services for providers. This service is also available for providers who need interpretation service during healthcare encounters with our members through our language line vendor.

You have an MPC member in your office who needs assistance with interpretation, please call us at 1-800-955-8854 and request interpreter services.



## Utilization Management Criteria

To support Utilization Management (UM) decisions, MPC applies nationally recognized, evidence-based medical criteria. These criteria are tailored to meet the unique needs of individual members and reflect the characteristics of the local healthcare delivery system.

The medical review criteria include:

- Criteria required by applicable state or federal regulatory agencies
- Applicable InterQual Criteria as the primary decision support for most medical diagnoses and conditions
- MPC Clinical Policy Guidelines

UM decision-making criteria are available upon request following a denial to obtain a copy. Please call MPC's Utilization Management Department at 800-955-8854. Then follow the prompts to request the Customer Service Department.



## Family Planning Benefits

Family Planning Benefits provide individuals and couples with resources, information, and support when making decisions about reproductive health, family planning, and when to start a family. Providers should offer timely family planning appointments with patients. These appointments should be scheduled within 10 days of the member's request.

Maryland Physicians Care offers a variety of family planning services for members, such as:

- Office visits for family planning services
- Laboratory tests, including pap smears
- Oral contraceptives that must have 30-minute visits to be dispensed for refills
- FDA-approved contraceptive devices, methods, and supplies
- Immediate postpartum insertion of IUDs
- Emergency contraceptives and condoms without a prescription
- Voluntary sterilization; however, this is not a self-referred procedure.
  - MPC members must be 21 years of age and use an in-network provider or have prior authorization to use out-of-network providers.

Many pregnant members are eligible for Medicaid during pregnancy and postpartum. During this time, they receive full benefits and are automatically enrolled in the Family Planning Waiver Program to support their continued care.

- At the first prenatal visit for ALL Medicaid members, the Maryland Department of Health (MDH) requires the completion of the Assisted Family Risk Assessment (AFRA).
- The AFRA helps to support our pregnant members.
- The form MUST be completed and faxed to the Local Health Department (LHD) in the member's residence town/city by the due date.



## 2025 Member Satisfaction Results Are Available!

The Consumer Assessment of Healthcare Provider and Systems (CAHPS®) Survey is an anonymous survey that asks health plan members about their experience with their healthcare, including their experience with the care and service provided by their providers.

Physicians and office staff are critical drivers of performance on the survey. The 2025 CAHPS® Survey results for both Children and Adults are available on the website <https://www.marylandphysicianscare.com/quality>. If you are not a provider, you can assist MPC in providing the best care we can for our members. It is also important for us to know if you plan to move, change phone numbers, or change your information. Call 1-800-955-8854 to update or verify your contact information or email. You can also check your information on our secure portal for services to Maryland Medicaid members. If you have any questions, please contact Customer Service at 1-800-955-8854 and ask for the Quality Management Department.



## Keep Us Informed

MPC needs to be notified if your practice is unable to accept new members. It is important that we have accurate information in our provider directory as members use the directory to select practitioners. By providing updated information, you can assist MPC in providing the best care we can for our members. It is also important for us to know if you plan to move, change phone numbers, or change your information. Call 1-800-955-8854 to update or verify your contact information or email. You can also check your information on our secure portal for services to Maryland Medicaid members. If you have any questions, please contact Customer Service at 1-800-955-8854 and ask for the Quality Management Department.



## MPC Provider Portal

What can I do on the portal? MPC Provider Portal

- Check the status of claims
- Review Remittance Advices
- View PCP Member Panels
- Check Member's Eligibility
- Request Prior Authorization
- Download our Care Report
- Access Portal Tools
- Add multiple users



## Where can I find the MPC Portal User Guide?

Open the Provider Web Portal, then MPC Provider Portal User Guide on the top right. The MPC Provider Portal is your one-stop online tool for managing user accounts and accessing eligibility and claims data. You can also access the Gaps in Care Reports. If you haven't created an account already, go to our secure portal to create your account and get started today.



## Enroll in ePREP

If you are enrolled in the electronic Prior Authorization (ePREP) program, you must complete the ePREP enrollment process. Enrollment is a requirement for Maryland Medicaid providers. It is a one-step process for provider enrollment, re-enrollment, re-validation, information updates, and demographic changes. These steps are available on the website <https://www.marylandphysicianscare.com/ePREP>. If you are not a provider, you can assist MPC in providing the best care we can for our members. It is also important for us to know if you plan to move, change phone numbers, or change your information. Call 1-800-955-8854 to update or verify your contact information or email. You can also check your information on our secure portal for services to Maryland Medicaid members. If you have any questions, please contact Customer Service at 1-800-955-8854 and ask for the Quality Management Department.



## Visit Our Website

Find information on:

- Quality Improvement Programs
- Population Health Management Programs
- Care Management Programs
- Health Workforce Programs
- Clinical Practice Guidelines
- Utilization Management, including decision-making criteria, affirmative statement, and staff availability
- Pharmacy and Prescription Drug Information
- Benefits and Coverage
- Member Rights and Responsibilities
- Protected Health Information (PHI) and Disclosure
- Provider Manual
- Member Handbook
- Provider Directory
- Credentialing Rights



## WHO TO CALL

**PROVIDER SERVICES**  
1-800-955-8854, member eligibility, access language services during patient encounters, etc.  
800-953-8854

**MEMBER SERVICES**  
Benefits, ID cards, appeals, PCP changes, etc.  
800-953-8854

**MARYLAND HEALTHY SMILES DENTAL PROGRAM**  
855-934-8422

**PUBLIC MENTAL HEALTH SERVICES**  
800-888-1965

**SUPERIOR VISION**  
800-728-9795

**UTILIZATION MANAGEMENT**  
800-783-8974

**CARE MANAGEMENT**  
800-953-8854

**HEALTH EDUCATION REQUESTS**  
800-953-8854

**RETAIL PHARMACY MEDICATION UM**  
888-288-2520

## Referrals and MPC

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