

Monthly Provider Update

November 2024

Go Paperless! Get the Monthly Provider Update by Email

Providers can now sign up to receive monthly updates via email by filling out the form on our Bulletins page.



Did you miss an update? You can locate Monthly Provider Updates from previous months and applicable supplemental bulletins in the **archive section of** <u>the Bulletins page</u>, or see full details of any ongoing reminders on the **new Ongoing Reminders page**.

Please be sure to regularly check the **Bulletins page** on **mimeridian.com** for important **Medicaid and Medicare-Medicaid Plan (MMP)** provider updates. Policy changes, fee schedule updates, and urgent notices are posted throughout the month.

Upcoming Webinars and Events

Monthly Provider Webinars:

• Wednesday, December 4, 9 a.m. – 10 a.m. EST

Bi-Weekly Provider Orientation Webinars:

- Thursday, November 28, 12 p.m.
- Tuesday, December 10, 8 a.m.
- Thursday, December 26, 12 p.m.

Additional details and links to webinars are available on our bulletins page.

Market-Wide Updates

Practitioner Enrollment and Update Form Enhancements

Based on feedback from our Provider Network, we have worked to streamline our intake process for existing contracted providers to update their information, voluntarily terminate a practitioner from your contract, or add a new practitioner to an existing contract. Once submissions have been received, someone from Meridian will reach out within one business day to notify of receipt. We hope this new design simplifies these processes and would value any feedback you provide to your Provider Representative.

Closing Care Gaps

As the year ends, Meridian Quality is checking in on your progress closing care gaps. We understand it's a busy time and are here to support you. Please access the portal and review your Care Gaps Report to make the necessary calls to complete preventive visits and tests before 12/31/2024.

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Flu Season

Flu season is right around the corner, and it's time for everyone to get up to date on vaccinations. With your patient's trust and their best interest at heart, it's up to you to recommend they get their flu vaccine as the best way to protect themselves and those around them. Please see our bulletins page for additional details.

Meridian (Michigan Medicaid) Updates

Non-Emergency Transportation Prior Authorization Update

Effective for dates of service on or after October 1, 2024:

Meridian will cover non-emergent medical transportation (NEMT) for medically necessary Medicaid-covered services. Health plan enrollees will access NEMT through Meridian's transportation vendor, SafeRide.

Effective for dates of service on or after October 1, 2024:

Meridian will cover medically necessary, non-emergent ambulance transportation to Prepaid Inpatient Health Plan (PIHP) and Community Mental Health Services Program (CMHSP) related services. Prior authorization is required through Meridian.

Prior Authorization Supplemental Form

To streamline Prior Authorization Submissions by mail/fax, Meridian is rolling out a new Prior Authorization Supplemental Page to be utilized when an authorization request involves more than four procedure codes. This form will be available on our website in December 2024.

Upcoming Webinar: Introduction to Adverse Childhood Experiences (ACEs) and Trauma-Informed Care

We are pleased to once again partner with the Michigan ACE Initiative to provide a free, CME eligible webinar; *Introduction to Adverse Childhood Experiences and Trauma-Informed Care* on December 9, 2024, from 12:00-1:00 PM EST. Participants will understand the definitions of adverse childhood experiences and trauma and how they impact the patients they work with, recognizing signs and symptoms, and how to implement ACEs-related approaches. For more information and a link to register, please see our bulletins page.

Medical Record Review

Periodically, Meridian conducts a medical record review to ensure contracted practitioners maintain medical records in a current, detailed, and organized manner. Taking provider and service type utilization into account, a review of sample records from multiple health systems and provider offices was completed in October. Please see our bulletins page for a full list of criteria and an overview of results.

Medicaid Claims Billing Guide

Meridian has put together a resource with walkthroughs for common billing-related tasks that can be accomplished within the Provider Portal. For step-by-step instructions for claim corrections, claim adjustments, and appeals, please see the guide available on the bulletins page.



Public Comments to MDHHS on Michigan Medicaid Common Formulary

The Michigan Department of Health and Human Services (MDHHS) is soliciting comments from the public on the Michigan Medicaid Health Plan Common Formulary. The public (including Medicaid providers) may submit comments on the drugs included or not included on the Common Formulary, new drug products, prior authorization criteria, step therapy criteria and other topics related to drug coverage under the Common Formulary. The comments will be reviewed by MDHHS and the Michigan Medicaid Health Plan Common Formulary Workgroup and changes may be made to the Common Formulary based on comments received. Please send your comments by December 13, 2024 to Linda VanCamp, CPhT, Formulary Analyst, at MDHHSCommonFormulary@michigan.gov

In Case You Missed It

Additional details can be found on our Ongoing Reminders Page

- Recent Prior Authorization Requirement/Billing Requirement Updates:
 - o Home Health Infusion (effective 11/22/2024)
 - o Home Health Speech Therapy (effective 10/21/2024)
 - o Unlisted Procedure Codes (effective 10/21/2024)
 - o Abortion Services (effective 9/19/2024)
- **PCP Referrals to PHIP:** When making a referral to a PIHP, primary healthcare providers must communicate with the PIHP who is receiving the call to let them know they are about to transfer the beneficiary.
- **Michigan Clinical Consultation & Care (MC3)** offers no-cost psychiatry support to pediatric and perinatal PCPs in Michigan via same-day phone consults on diagnostic questions, safe medications, and appropriate psychotherapy. We want to make sure these resources are easily accessible for Meridian providers.
- Access and Availability Audit: At least annually, Meridian evaluates the ease that enrollees have in obtaining health care services from Meridian primary care, specialty care, and behavioral health providers. Please familiarize yourself with State requirements for access, which we have compiled on our bulletins page.
- EHR Access for HEDIS Care Gap Closure: Providing our highly trained staff access to your EHR system can increase accuracy of submitted data and HEDIS scores. For information regarding setting up access, and applicable HEDIS measures, please reach out to mihedis@mhplan.com.
- **Hepatitis C Virus Program:** The recommended treatment for HCV is Mavyret, which can be dispensed in eightweek supply. Providers who have prescriptive authority can prescribe Mavyret to their patients with a positive Hepatitis C diagnosis. Prior authorization is not required for Medicaid.
- MMP My Meridian Rewards: Encourage your MeridianComplete (Medicare-Medicaid Plan) patients to make healthy choices, by completing preventive or chronic disease services for a chance to earn gift cards through the My Meridian Rewards program.
- **Provider Satisfaction Survey:** Our annual provider satisfaction survey is underway! We hope you'll take a moment to share your feedback.
- Medicare-Medicaid Plan (MMP) Dedicated Care Management: All MMP members have a dedicated care manager who is a registered nurse or licensed social worker assigned to support them with their health care needs, navigating the health care system, and assisting with resources for SDoH needs. For more information call 1-855-323-4578 or your Provider Representative To find your provider representative's contact information visit mmp.mimeridian.com > For Providers > Enrollment Information > Service Area