



**Addendum Cover Page for Maryland
Medical Assistance Program Application
FACILITY/ORGANIZATION**

If you have questions, please contact the Provider Enrollment Helpline at **1-844-4MD-PROV (1-844-463-7768)**
Monday – Friday from 7am – 7pm.

All providers are required to use the electronic Provider Revalidation and Enrollment Portal, or ePREP (eprep.health.maryland.gov) for enrollment, information updates, provider affiliations and revalidations.

Please fill out the information below and upload the completed addendum to the “Additional Information” section under “Practice Information” within the ePREP (eprep.health.maryland.gov) “Applications” tab, along with any additional documents requested within the addendum.

Provider Information

NPI:

Tax ID:

MA Provider Number (if already enrolled in Maryland Medicaid):

If you are already enrolled as a Drug Clinic in the Maryland Medical Assistance Program and would like to enroll as a **Health Home provider, please visit the Health Home website (<https://mmcp.dhmh.maryland.gov/Pages/Health-Homes.aspx>) or contact **mdh.healthhomes@maryland.gov** for more information.

**After you receive your Medical Assistance enrollment approval,
please register with Optum Maryland for authorization.**

Visit maryland.optum.com to register with Optum Maryland for access to their Incedo Provider Portal

Should you have any questions regarding Optum Maryland registration, please contact:
Optum Provider Relations: Phone: (800) 888-1965 – Email: omd_providerrelations@optum.com

Please visit health.maryland.gov/ePREP for more information about ePREP



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Please upload this form to the “Additional Information” section under “Practice Information” within the ePREP (eprep.health.maryland.gov) “Applications” tab, along with any additional applicable supporting documents requested below.

*If you have not yet been issued an Opioid Treatment Services license by the Behavioral Health Administration (BHA), be sure to upload one of the following documents to ePREP:

- 1) Approval letter from the Behavioral Health Administration (BHA)

Only an option for revalidations:

- 2) Continuation letter from the Behavioral Health Administration (BHA) **AND** a copy of the expired approval letter or license under 10.47

Section I:

Please upload the following document to [ePREP](#) :

- 1. Documentation of a contract for drug testing with a laboratory (see attached document for more information)
- 2. License and credentials of all professional employed by or under or under contract with the provider including the Medical Director. **COMAR 10.09.80.03 ***
- 3. Pre-employment criminal history records for each employee. **COMAR 10.63.01.05**
- 4. Written policy regarding the criminal history of the program’s employees, contractors, and volunteers. **COMAR 10.63.01.05**

At a minimum, includes consideration of the following:

- (a) The age at which the individual committed the crime;
- (b) The circumstances surrounding the crime;
- (c) Any punishment imposed for the crime, including any subsequent court actions regarding that punishment;
- (d) The length of time that has passed since the crime;
- (e) Subsequent work history;



(f) Employment and character references; and

(g) Other evidence that demonstrates whether the employee, contractor, or volunteer poses a threat to the health or safety of a program participant, program staff, or a member of the public.

Please note:

(4) An individual may not be hired as an employee, contractor, or volunteer:

(a) For a program serving participants younger than 18 years old, if the individual has been convicted at any time of child abuse or child sexual abuse; or

(b) For a program serving participants 18 years old or older, if the individual has been convicted at any time of abuse or neglect of a vulnerable adult.



MARYLAND Department of Health

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

Documentation of a Contract for Drug Testing With a Laboratory

The bundled weekly rate for Opioid Maintenance Treatment (OMT) services includes reimbursement for point of care drug tests (code 80305) completed in the OTP's office as well tests sent out to laboratories (80306, 80307, and G0480- G0481) in accordance with the January 5, 2017 Maryland Medical Assistance Transmittal re: "Medicaid Billing for Drug Testing and Screening". Opioid Treatment Programs (OTPs) are responsible for paying laboratories for drug tests for their OMT patients.

All OTPs applying to participate in Medical Assistance (MA) must provide evidence of a contract with a laboratory of their choosing to provide drug testing services. Existing providers will also need to reaffirm the existence of such contracts during the revalidation process (all providers are required to revalidate every 5 years).

Adequate documentation of a contractual relationship with a laboratory needs to include at a minimum:

- OTP provider name and contact information for the OTP program director
- Laboratory provider name and the contact information for the person most responsible for the contract
- Effective dates of contract
- General information about the nature of the contract that demonstrates drug tests for OMT patients are exclusively reimbursed by OTP and not billable to the Department or the Department's designee.

Please include documentation of your contract with a laboratory with your application packet. Applications for provider type 32 will not be approved if documentation of a contract with a laboratory is not included.