



Wes Moore, Governor · Aruna Miller, Lt. Governor · Meena Seshamani, M.D., Ph.D., Secretary

MARYLAND MEDICAL ASSISTANCE PROGRAM
Hospital Transmittal No. 325
January 20, 2026

TO: Hospital Administrators

FROM: Monchel Pridget, Acting Director *Monchel Pridget*
Office of Medical Benefits Management

RE: Medicaid Coverage and Benefits for Incarcerated Individuals

NOTE: **Please ensure that appropriate staff members in your organization are informed of the contents of this transmittal.**

This transmittal supersedes [PT 13-20 Hospital Services for State Correctional and/or Local Jail Inmates](#) and updates the Department of Public Safety and Correctional Services (DPSCS) Utilization Control Agent (UCA). Centurion of Maryland, LLC (Centurion) replaces Corizon Health as the current UCA.

The SUPPORT Act of 2018 and the Consolidated Appropriations Act of 2024 require states to suspend, rather than terminate, Medicaid coverage for all incarcerated individuals. In Maryland, while an individual's Medicaid eligibility span will continue, their Medicaid benefits will be suspended during the time that they are incarcerated, and the individual will be removed from their MCO during the entirety of their incarceration.

As stated in [PT 13-20](#), Maryland Medicaid will only pay for the following services during a period of incarceration:

- (1) Medically necessary inpatient hospitalizations for Medicaid eligible participants held in State correctional facilities, local jails, and residential facilities for justice-involved youth, including:
 - (a) Planned hospitalizations;
 - (b) Emergency Hospitalizations; and
 - (c) Bedside commitments;¹ and
- (2) Certain pre-release services either authorized by, or required by, federal law.

¹ This pertains to admitted hospital patients who are committed to DPSCS or a local jail, or who had been placed in a residential facility operated by the Department of Juvenile Services, while hospitalized.

Federal law prohibits states from using federal Medicaid funds to provide any other services for incarcerated individuals.

Hospital providers are responsible for following required utilization and payment procedures for Medicaid eligible inmates when hospitalized. Because inmates are removed from MCO enrollment during incarceration, hospitals are responsible for checking the Medicaid Eligibility Verification System (EVS) to verify that an inmate is enrolled in Medicaid. If an inmate has Medicaid coverage, then the hospital is responsible for following the required utilization review process for Medicaid fee-for-service (FFS). However, the federal Bureau of Prisons retains responsibility for payment of medical services rendered to inmates of federally operated institutions, including FCI Cumberland.

Planned Hospital Admissions

Prior to planned hospital admissions, Centurion, will inform the hospital if an inmate has current Medicaid enrollment. If an inmate is Medicaid enrolled, the hospital will be responsible for obtaining timely preauthorization from the Department's UCA for Medicaid FFS. The hospital will also be responsible for following all other utilization requirements, including concurrent and retrospective reviews.

Emergency Admissions

When an inmate has been admitted as an emergency, whether by ambulance or by DPSCS transportation, the hospital should immediately check EVS to determine if the inmate is Medicaid enrolled. If EVS confirms that the inmate is enrolled, the hospital should follow the required notification procedures for Medicaid FFS. For Medicaid FFS, the hospital is required to notify Telligen and start the concurrent review process within 48 hours of admission or by the next business day. In addition, the provider must notify Centurion Utilization Management within one business day of the admission.

Bedside Commitments

When a patient is admitted as an inpatient to a hospital and the court decides to commit the person to DPSCS during their hospital stay, the person's legal status changes after they are admitted. DPSCS shall assume responsibility for the bedside committed inmate on the date of the court's bedside commitment order. Since the patient was not an inmate upon admission, the hospital should have already checked EVS for Medicaid enrollment. If the patient is enrolled, the hospital is responsible for contacting either the UCA for FFS or the MCO for HealthChoice to start the required utilization review process at the time of the admission. The patient's bedside commitment status does not change Medicaid's coverage of the stay, and the hospital should continue to follow normal Medicaid utilization and payment rules for these inmates.

If an inmate qualifies for Medicaid but is not enrolled at the time of hospitalization, a Centurion Health Medicaid specialist will work with the hospital to complete and submit the application for Medicaid eligibility. The Centurion Health Medical Assistance Coordinator can be reached at (240) 329-4953. Once the inmate is enrolled in Medicaid, the hospital should follow procedures for obtaining a retrospective review with the UCA for Medicaid FFS reimbursement.

Outpatient Services

Outpatient services for Medicaid eligible participants held in State correctional facilities and local jails are not eligible for reimbursement through Medicaid. Centurion is responsible for payment of these services.

For questions regarding DPSCS requirements or procedures, please contact the following representatives:

CENTURION OF MARYLAND
Utilization Management Department
(866) 202-8690, option 1

CENTURION OF MARYLAND
Statewide Director of Nursing
(866) 202-8690, option 3

For questions regarding the Medicaid FFS requirements or procedures, please contact mdh.acutehospitalpolicy@maryland.gov.

This transmittal does not speak to requirements surrounding certain pre-release services required under federal law designed to help inmates transition back into the community. For questions regarding reentry, please contact mdh.medicaidreentry@maryland.gov.