

MDH Notice 2018

Medicaid Managed Care Organizations (MCOs) are required to notify enrollees of payment denials.

COMAR 10.09.71.04 E Requires written notice of any action, action is defined as

(3) “Action” means:

(a) Denial or limited authorization of a requested service, including:

- (i) The type or level of service;
- (ii) Requirements for medical necessity;
- (iii) Appropriateness;
- (iv) Setting; or
- (v) Effectiveness of a covered benefit.

(b) Reduction, suspension, or termination of a previously authorized service;

(c) Denial, in whole or part, of payment for a service;

(d) Failure to provide services in a timely manner;

(e) Failure of an MCO to act within the required time frames; or

(f) The denial of an enrollee’s request to dispute a financial liability, including:

- (i) Cost sharing;
- (ii) Copayments;
- (iii) Premiums;