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| <p><b>Important Information</b></p>      | <ul style="list-style-type: none"> <li>• All inpatient services require authorization</li> <li>• All outpatient services in the below categories and/or outpatient services and procedures by a non-par facility or non-par provider require an authorization</li> <li>• The lists below are not all inclusive</li> <li>• Verification of eligibility and/or benefit information or authorization is not a guarantee of payment</li> <li>• Authorizations are subject to eligibility requirements and benefit plan limitations</li> <li>• Authorizations are issued for medical services and assumes that providers submit claims with codes billable under the current Medicaid or Medicare Fee Schedule, contact Provider Relations with questions</li> <li>• Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility, any claims received during the interim period and the terms of coverage applicable on the date services were rendered</li> </ul>  |
| <p><b>Out of Network</b></p>             | <p>Before seeking Out of Network care members should speak with their Primary Care Physician. The following services rendered Out of Network do <b>not</b> require authorization:</p> <ul style="list-style-type: none"> <li>• Urgent or Emergent Care, and</li> <li>• Maryland Medicaid Self-Referral Services (e.g. School-Based Health Centers, family planning services, renal dialysis for <b>University of Maryland Health Partners</b> members)</li> </ul> <p>See <b>University of Maryland Health Partners</b> member handbook for a full listing of Self-Referral Services.</p> <p>See <b>UM Health Advantage</b> Evidence of Coverage or <b>UM Health Partners</b> Member Handbook for a full listing of benefits.</p>   |
| <p><b>Authorization NOT Required</b></p> | <p>Below are examples of services provided in a setting other than Inpatient that do <b>not</b> require authorization prior to services being rendered.</p> <ul style="list-style-type: none"> <li>• Acupuncture for Substance Use (<b>Medicaid only</b>)</li> <li>• Blood &amp; Blood Products</li> <li>• Bone Mass Measurement</li> <li>• Bone Marrow Aspiration, Biopsy</li> <li>• Bronchoscopies</li> <li>• Cancer Screening</li> <li>• Chemotherapy</li> <li>• Chiropractic Services</li> <li>• Cholecystectomy (Laparoscopic)</li> <li>• Colonoscopy</li> <li>• Cystoscopies (Cystectomy, with Urethroscopy, with Lithotripsy)</li> <li>• Dental (Contact DentaQuest for details)</li> <li>• Diabetes (Self-Management Training, Nutritional Counseling, Screening and Supplies)</li> <li>• Diagnostic Imaging/Therapeutic X-rays*             <ul style="list-style-type: none"> <li>o Bone Density/Dexa Scan</li> <li>o Computed Tomography (CT and CTA)</li> <li>o Duplex Scan</li> <li>o Magnetic Resonance (MRI and MRA)</li> <li>o Mammogram</li> <li>o Stress Test</li> </ul> </li> <li>• Dialysis</li> <li>• Dilation &amp; Curettage (D&amp;C)</li> <li>• Electroencephalogram (EEG)</li> <li>• Emergent/Urgent Care (within US)</li> <li>• Endoscopies (EGD, ERCP)</li> <li>• Fractures and Dislocations</li> <li>• Hysteroscopies, Hysterectomies</li> <li>• Immunizations/Vaccinations*</li> <li>• Laboratory/Pathology</li> <li>• Nutrition Therapy</li> <li>• Office Visits for Physician/Practitioner Services             <ul style="list-style-type: none"> <li>o Primary and Specialty Consults/Evals</li> <li>o Pain Management Office Visits</li> </ul> </li> <li>• Podiatry*</li> <li>• Prenatal &amp; Postnatal Care</li> <li>• Preventive Care</li> <li>• Radiation Therapy</li> <li>• Self-Referral Services (<b>Medicaid only</b>)</li> <li>• Sleep Studies</li> <li>• Splints, Casts</li> <li>• Vision (Contact Superior Vision for details)</li> </ul> <p><i>*See Authorization Required section of UM Health Advantage Evidence of Coverage or UM Health Partners Member Handbook for exceptions</i></p> |

| University of Maryland Health Partners<br>(Maryland Medicaid)   | University of Maryland Health Advantage<br>(Medicare Advantage)  |
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| <p>Obtaining prior authorization is the responsibility of the PCP or treating provider. Members who need prior authorization should work with their provider to submit the required clinical data.</p> <p>Submit the request in one of the following ways:</p> <ul style="list-style-type: none"> <li>o via fax to 410-779-9336 or 443-552-7407/7408</li> <li>o via telephone at 800-730-8543 or 410-779-9359</li> </ul> <p>A copy of our preauthorization request forms are also available at: <a href="http://www.umhealthpartners.com">www.umhealthpartners.com</a><br/>For Providers ⇨ Authorization Guidelines</p>                                 | <p>Obtaining prior authorization is the responsibility of the PCP or treating provider. Members who need an organization determination should work with their provider to submit the required clinical data.</p> <p>Submit the request in one of the following ways:</p> <ul style="list-style-type: none"> <li>o via fax to 844-328-5952</li> <li>o via telephone at 800-730-8543 or 410-779-9359</li> </ul> <p>A copy of our preauthorization request forms are also available at: <a href="http://www.ummedicareadvantage.org">www.ummedicareadvantage.org</a><br/>Provider Resources</p> |
| <b>Authorization Required</b>   | Below are examples of services provided in a setting other than Inpatient that require authorization prior to services being rendered.   |
| <b>DME/Prosthetic</b>   |  |
| <ul style="list-style-type: none"> <li>• All Rental Services</li> <li>• All Purchased Equipment and/or Supplies over \$500</li> </ul>   |  |
| <b>Home Visits</b>  |  |
| <ul style="list-style-type: none"> <li>• Home Health Visits (Skilled Nursing, Physical Therapy, Occupational Therapy, Speech Therapy, Social Work, Home Health Aide) Authorization not required for Initial evaluation, but required for all additional services thereafter</li> <li>• Home Infusion</li> <li>• Hospice Care <b>(Medicaid only)</b></li> <li>• Private Duty Nursing for members under 21 years of age <b>(Medicaid only)</b></li> <li>• In some situations, like where the member is homebound and a physician provides home visits no authorization is required, contact Health Services for additional information</li> </ul>         |  |
| <b>Medical/Surgical Procedures</b>  |  |
| <ul style="list-style-type: none"> <li>• Biofeedback</li> <li>• Bone Marrow Harvesting, Transplantation</li> <li>• Bone Stimulation</li> <li>• Cell Harvesting (Stem Cell, T-Cell)</li> <li>• Nerve Block, Facet Joint Injections, Chemodenervation</li> <li>• Neurostimulation</li> <li>• Pain Management procedures including Joint, Trigger Point &amp; Spinal injections</li> <li>• Reconstructions, Reductions, Implantations</li> <li>• Skin/Subcutaneous Tissue Excisions, Acne Surgery, Dermabrasions, Chemical Peels, Plastic Surgery, Cosmetic Surgery, Removal of Lesions</li> <li>• Vein Ablation Therapy, Ligation or Stripping</li> </ul> |  |
| <b>Pharmacy</b>   |  |
| <ul style="list-style-type: none"> <li>• Formulary and Non-Formulary products requiring a PA (Prior Authorization), QL (Quantity Limit), or ST (Step Therapy) review</li> <li>• All Medicare Part B versus Part D determinations</li> <li>• See Carve Outs/Delegation section for CVS Caremark contact information</li> </ul>   |  |
| <b>Radiology Services</b>   |  |
| <ul style="list-style-type: none"> <li>• Positron Emission Tomography (PET)</li> </ul>  |  |

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| <b>Authorization Required (cont.)</b>  | Below are examples of services provided in a setting other than Inpatient that require authorization prior to services being rendered.  |
| <b>Rehabilitative Therapies</b>  |   |
| <ul style="list-style-type: none"> <li>• Cardiac Rehabilitation (<b>Medicaid only, Medicare</b> authorization required only after 36 sessions exhausted)</li> <li>• Pulmonary Rehab (<b>Medicaid only, Medicare</b> authorization required after 36 sessions exhausted)</li> <li>• Authorization not required for Initial evaluation, but required for all additional services thereafter for: <ul style="list-style-type: none"> <li>o Physical Therapy (PT)</li> <li>o Occupational Therapy (OT)</li> <li>o Speech Therapy (ST)</li> <li>o Seating Evaluations</li> </ul> </li> </ul> <p><b>UM Health Partners (Medicaid only)</b> under 21 covered by the state</p> |   |
| <b>Other Services</b>  |   |
| <ul style="list-style-type: none"> <li>• Meals Post-Discharge from a Hospital or SNF</li> <li>• Non-Emergency Ambulance Transportation (<b>Medicare only, see also Carve Outs/Delegation</b>)</li> <li>• All CPT codes classified as Category II and all HCPCS codes classified as Unlisted by the AMA, except for Category II codes related to Value Based Purchasing</li> </ul>  |   |
| <b>Carve Outs/Delegation</b>   |   |
| <b>University of Maryland Health Partners (Maryland Medicaid)</b>  | <b>University of Maryland Health Advantage (Medicare Advantage)</b>   |
| <b>Dental for Children &amp; Pregnant Women:</b><br>Healthy Smiles 855-934-9812<br><b>Dental for Adults:</b> DentaQuest 800-341-8478   | <b>Dental:</b> DentaQuest 844-474-6334  |
| <b>Elective Abortions:</b> Local Health Department   | <b>Hospice:</b> Original Medicare   |
| <b>HIV/AIDS services (viral load, genotypic, phenotypic, or other resistance testing):</b> Maryland Medical Assistance Beneficiary Hotline 800-492-5231  |   |
| <b>Medical Day Services:</b> Maryland Medical Assistance Beneficiary Hotline 800-492-5231  |   |
| <b>Mental Health &amp; Substance Use Disorder:</b> State of Maryland's Specialty Mental Health System: 800-932-3918<br>(Anti-Psychotic Peer Review Line for children 0-9 years old: 855-283-0876)<br><b>Mental Health &amp; HIV Medication:</b><br>Xerox (Providers) 800-932-3918<br>Xerox (Members) 800-492-5231  | <b>Mental Health &amp; Substance Use Disorder:</b><br>Beacon Health Options 844-470-6334  |
| <b>Non Emergent Medical Transportation:</b><br>Local Health Department   | <b>Non Emergent Medical Transportation:</b><br>MTM Inc.: 844-476-6334 ( <b>UM Health Advantage Dual only</b> )  |
| <b>Outpatient PT, OT, ST &amp; Audiology for recipients under the age of 21:</b> Maryland Medical Assistance Beneficiary Hotline 800-492-5231  |   |
| <b>Pharmacy:</b> CVS Caremark Member Services 855-566-8397<br>CVS Caremark Prior Authorization 877-418-4133<br>Authorization requests for Formulary and Non-Formulary products requiring a PA (Prior Authorization), QL (Quantity Limit), or ST (Step Therapy) review<br><br>Formulary Search Tool can be found online:<br><a href="http://www.umhealthpartners.com">www.umhealthpartners.com</a>  | <b>Pharmacy:</b> CVS Caremark Member Services 844-786-6762<br>CVS Caremark Prior Authorization 855-344-0930<br>All Part B versus Part D determinations, as well as authorization requests for Formulary and Non-Formulary products requiring a PA (Prior Authorization), QL (Quantity Limit), or ST (Step Therapy) review<br><br>Formulary Search Tool can be found online:<br><a href="http://www.ummedicareadvantage.org">www.ummedicareadvantage.org</a> |
| <b>Skilled Personal Care:</b> Maryland Medical Assistance Beneficiary Hotline 800-492-5231   |   |
| <b>Speech Augmentation:</b> Maryland Medical Assistance Beneficiary Hotline 800-492-5231   |   |
| <b>Vision:</b> Superior Vision 800-879-6901  | <b>Vision:</b> Superior Vision 844-475-6334   |



# UNIVERSITY of MARYLAND MEDICAL SYSTEM

## HEALTH PLANS

In 2015, the University of Maryland Medical System (UMMS) acquired Riverside Health Inc. As part of the acquisition, the University of Maryland Medical System Health Plans is the new parent company offering Medicaid and Medicare health plans.

“The acquisition of Riverside Health will pave the way for UMMS to enter the Medicaid and Medicare managed care market in Maryland. We are very fortunate to draw on Riverside Health’s expertise and infrastructure as we move ahead toward offering a benefit plan including a Medicare Advantage product. Offering insurance products fits well with our model to be a comprehensive health services provider to the people of Maryland and beyond.”

**Robert A. Chrencik, President and Chief Executive Officer of University of Maryland Medical System**

“Riverside Health was founded with the goal of improving health care for the most vulnerable by bridging the gaps between providers and payors. Joining UMMS provides us the opportunity to create synergies to continuously improve the services we provide our members.”

**Mark Puente, President and Chief Executive Officer of University of Maryland Medical System Health Plans  
(formerly Riverside Health, Inc.)**



### UNIVERSITY of MARYLAND HEALTH PARTNERS

University of Maryland Health Partners is a Medicaid Managed Care Organization that serves members in the Maryland HealthChoice program.

The Department of Health and Mental Hygiene (DHMH) provides Medical Assistance, also called Medicaid coverage to individuals determined to be categorically eligible or medically needy. Medicaid coverage is automatically given to individuals receiving certain other public assistance, such as Supplemental Security Income (SSI), Temporary Cash Assistance (TCA), or Foster Care.



### UNIVERSITY of MARYLAND HEALTH ADVANTAGE

University of Maryland Health Advantage is an HMO and HMO-SNP Plan with a Medicare contract and a State of Maryland Department of Health and Mental Hygiene (Medicaid) program contract. Enrollment in University of Maryland Health Advantage depends on contract renewal. University of Maryland Health Advantage offers greater value than original Medicare, with lower out-of-pocket costs.

Medicare Advantage Prescription Drug Plan (HMO)

- For those with Medicare Parts A & B only

Medicare Advantage Dual Eligible Special Needs Plan (HMO-SNP)

- For those with both Medicare (Parts A & B) and Medicaid (not enrolled in Medicaid Managed Care)

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