STATE OF MARYLAND
DHMH
Maryland Department of Health and Mental Hygiene
Larry Hogan, Governor – Boyd K. Rutherford, Lt. Governor – Van T. Mitchell, Secretary

Office of Health Services
Medical Care Programs

MARYLAND MEDICAL ASSISTANCE PROGRAM
Hospital Transmittal No. 245
MCO Transmittal No. 113
Nursing Home Transmittal No. 261
December 8, 2016

TO: MCOs
Nursing Homes
Specialty Pediatric Hospitals
Chronic Hospitals

FROM: Susan J. Tucker, Executive Director
Office of Health Services

RE: Roles and Responsibilities of Nursing Facilities, Specialty Pediatric Hospitals and Chronic Hospitals when Admitting HealthChoice MCO Members

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

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The purpose of this transmittal is to inform nursing facilities, specialty pediatric hospitals, and chronic hospitals of a change in HealthChoice MCO coverage and to remind providers of their roles and responsibilities when admitting Medicaid participants. This transmittal replaces Hospital Transmittal No. 180, MCO Transmittal No. 36, and Nursing Home Transmittal No. 179 dated January 10, 2003 (https://mmcp.dhmh.maryland.gov/docs/PT12-03.pdf).

The Medicaid Program covers nursing facility services for individuals who need skilled nursing, rehabilitation or health-related services above the level of room and board. Please see Nursing Home Transmittal Nos. 213 and 237 for more information on level of care standards at: https://mmcp.dhmh.maryland.gov/docs/PT%2032-08.pdf and https://mmcp.dhmh.maryland.gov/MCOupdates/pdf/PT%2010-12%20Various%20Programs.pdf.

Beginning on January 1, 2017, MCOs will be responsible for payment for their members for up to 90 days in a nursing facility, specialty pediatric hospital, or chronic hospital (COMAR 10.09.67.12). For an admission occurring prior to January 1, 2017, MCOs were only responsible for the first 30 days.

Facility staff must verify Medicaid eligibility using the State's online Eligibility Verification System (EVS) or phone 1-866-710-1447 to determine Medicaid status and to identify if the individual is enrolled in an MCO. For individuals who are not enrolled in an MCO, the facility must contact the Department's Utilization Control Agent (UCA). If the individual is enrolled in an MCO, even if Medicaid coverage is secondary insurance, the facility must contact the MCO. The MCO is

responsible, in collaboration with the facility staff, to determine the purpose of the admission and the expected duration. The facility must inform the MCO of the requested admission and obtain the MCO's approval prior to the admission. When it is not possible to contact the MCO prior to the admission, the MCO must be informed of the admission by the next business day. MCO contact information is provided at the end of this transmittal.

Responsibility for Payment

- If an individual is financially and medically eligible for Medicaid, and is not HealthChoice eligible or has not yet been assigned to an MCO, all services will be covered by Medicaid fee-for-service for up to 30 days and the individual will not be enrolled in an MCO. On day 31, the individual can apply for Medicaid services in a nursing facility, specialty pediatric hospital, or chronic hospital if applicable.

- If an individual is enrolled in an MCO at the time of admission to a nursing facility, specialty pediatric hospital, or chronic hospital, the MCO is responsible for preauthorizing the stay and the MCO is responsible for all payment of services during the stay, up to and including the 90th day, as long as the individual continues to be enrolled in the MCO and meets the level of care standard.

- If a HealthChoice eligible individual loses Medicaid eligibility while in a nursing facility, specialty pediatric hospital, or chronic hospital and subsequently regains Medicaid eligibility, the individual will not be re-enrolled in the MCO.

- If an individual enrolled in an MCO becomes ineligible for HealthChoice (qualifies for Medicare or becomes age 65) while in a nursing facility, specialty pediatric hospital or chronic hospital, the individual will be disenrolled from the MCO and the remaining stay will be covered under Medicaid fee-for-service if all requirements are met.

Please note that an individual may be in the process of being assigned to an MCO at the time of admission. If the Department is not informed that the individual is in a facility, the MCO enrollment transaction will occur. The facility will need to take action to invalidate the MCO enrollment by immediately faxing DHMH Form 257 to the HealthChoice Enrollment Unit at 410-333-7141. Do not send requests for disenrollment for anyone who was in an MCO on the day of admission to the facility.

Stays Expected to Exceed 90 Days

It is the facility's responsibility to contact the Department's UCA to affirm that the individual continues to need the institutional level of care beyond the 90th day. The MCO must work collaboratively with the facility to ensure that this process occurs on a timely basis. In order to assure the individual is disenrolled from the MCO on the 91st day, the facility should request the appropriate level of care from the Department's UCA on the 75th day of admission. An MCO's financial responsibility ends on the 91st day, or the day the Department's UCA receives all necessary information to determine the need for the institutional level of care, whichever is later.

Questions related to medical eligibility nursing facility or specialty hospital services may be directed to the Division of Long Term Care Services at 410-767-1736.

MCO Contacts

MCO	TELEPHONE	FAX
Amerigroup	410-981-4057 410-981-4000 x-44267	877-855-7559
Jai Medical Systems	410-433-5600 – Opt 10	410-433-8500
Kaiser Permanente	703-439-8225	855-414-1707
Maryland Physicians Care	410-401-9459	860-902-8745
MedStar Family Choice	410-933-2241	410-933-2274
Priority Partners	410-762-5303 410-762-1576	410-762-5303 410-762-1576
UnitedHealthcare	866-604-3267 301-865-0419	855-695-2398
University of Maryland Health Partners (formerly Riverside Health)	410-779-9359	410-779-9336