MONTHLY Provider Update

FEBRUARY 2022



MICHIGAN



COVID-19

COVID-19 Prior Authorization Policy Reversal

Effective April 1st, Meridian will be restoring the Medicaid prior authorization requirements to portions of temporary COVID-19 Durable Medical Equipment, Prosthetics, Orthotics and Medical Supplies (DMEPOS) Policies.

Please see our Bulletins page for details.



EDUCATION

PaySpan Provider Webinars

PaySpan offers monthly training webinars for providers. For additional information and to sign up, please visit the bulletins page or reach out to your Provider Network Representative.



OPERATIONS

Michigan Medicaid Redetermination

MDHHS recently announced that redeterminations will begin June 2023. Renewal packets will be sent to members on May 4, 2023. Notification will be sent to these members in March. Please be sure to remind your Medicaid patients to ensure the state has their correct contact information. For more information you can visit <u>our website</u> or the <u>MDHHS website</u>

Anti-Kickback Statute (AKS)

Anti-Kickback Statute (AKS), 42 U.S.C. § 1320a-7b(b) As a medical provider, you are a target for kickback schemes, because you can be a source of referrals for your fellow providers. Please see our bulletins page for details.

Discharge Notifications for Delivery Admissions

A notification of discharge for all deliveries must be sent to Michigan Meridian, in addition to notifying of admission for delivery. Providers can notify discharge and admission information to Michigan Meridian of a pregnancy and delivery in the following ways:

FOR MORE INFORMATION ON THESE UPDATES:

Visit the Bulletins page on mimeridian.com via the steps below:

- Under the "For Providers" tab, click "Bulletins"
- Complete the sign-up form on our Bulletins page to receive these updates in your inbox

Contact your local Provider Network Management Representative or Provider Services at 888-773-2647.

- Provider web portal where the form will auto populate with the provider's details.
- Filling out the Inpatient Medicaid Prior Authorization Form and faxing the notification to **1-833-467-1237**
 - The form can be found on mimeridian.com under Providers > Provider Resources > Manuals, Forms, and Resources in the Quick Links – Forms at the top of the page.

Medicaid and Medicare-Medicaid Plan (MMP) Claim Status

To obtain general claim status, please utilize the Provider Portal at **provider.mimeridian.com**. Meridian does not provide general claim status over the phone. Portal admins can grant billers additional access to the portal to obtain claim status. As a secondary option, Medicaid providers can call **1-888-773-2647** and MMP providers can call **1-855-323-4578**. Please utilize the IVR prompts to obtain general claim status.



PAYMENT INTEGRITY

Clinical & Payment Policies

To obtain copies of Meridian Medicaid Clinical Policies and Payment Policies, visit mimeridian.com. Meridian Medicaid policies can be found at https://www.mimeridian.com/providers/resources/medicalpolicies.html.

Corrected Claim Reminder

To avoid delays when processing claims, please be sure to submit replacement, corrected, or void claims with the appropriate bill type for UB-04 claims and resubmission codes for CMS 1500 claims along with original claim number. This would be applicable for paid or denied claims with the plan and will ensure that claims intended to replace, correct, or void an original claim will be processed correctly and will not be denied as duplicate, because of incorrect billing. For detailed information about voiding and replacement claims, please review the Provider Claims Manual under the Provider Resources tab on our website at **mimeridian.com** or reach out to your Provider Network Representative.

Optum's Comprehensive Payment Integrity (CPI) tool

To prevent overpayments due to waste or abuse, Meridian will be performing additional prepayment claim reviews starting April 3, 2023. Please see the bulletins page for additional details or contact your Provider Network Representative to learn more.