

Monthly Provider Update

March 2025

Go Paperless! Get the Monthly Provider Update by Email

Providers can now sign up to receive monthly updates via email by filling out [the form on our Bulletins page](#).



Did you miss an update? You can locate Monthly Provider Updates from previous months and applicable supplemental bulletins in the **archive section of the Bulletins page**, or see full details of any ongoing reminders on the **Ongoing Reminders page**.

Please be sure to regularly check the **Bulletins page** on [mimeridian.com](#) for important **Medicaid and Medicare-Medicaid Plan (MMP)** provider updates. Policy changes, fee schedule updates, and urgent notices are posted throughout the month.

Upcoming Webinars and Events

Additional details and links to 2025 webinars are available on our bulletins page

Monthly Provider Webinars:

- Wednesday, April 2, 9-10 am EST
- Wednesday, May 7, 9-10 am EST

Bi-Weekly Provider Orientation Webinars:

- Thursday, March 20, 12 pm EST
- Thursday, April 3, 8 am EST

Meridian Patient Experience Provider Summit

Meridian is hosting a Provider Summit highlighting how Meridian and Providers can work together to make a positive impact. Enjoy light refreshments and network with other providers. Office managers and administration staff also welcome to attend. We are offering a \$100 Walmart gift card per practice as a token of appreciation for your participation in the summit.

April 11, 2025 | 2 – 5 pm EST

Hosted at The Carhartt Workshop

5800 Cass Avenue 2nd Floor Detroit, MI 48202

Save the Date: May 2, 2025

Kalamazoo Patient Experience Provider Summit

Registration will be available beginning 4/1/2025

Market-Wide Updates

March is National Kidney Month

Did you know that the National Kidney Foundation is offering support to help you manage your patients' disease progression? Simply refer patients using the easy-to-complete referral form and access the Provider Portal for seamless coordination. Please refer to our bulletins page for direct links to the above forms.

(Market-wide updates continued on next page)

Physician Self-Referral (42 U.S.C. § 1395nn)

- Prohibits a physician from making referrals for certain designated health services payable by a Federally funded entity to an entity with which he or she (or an immediate family member) has a financial relationship, unless the requirements of an applicable exception are satisfied; and
- Prohibits the entity from filing claims with a Federally funded entity (or billing another individual, entity, or third-party payor) for any improperly referred designated health services.

For additional information, please see our bulletins page for a direct link to an overview of the Physician Self-Referral law from the Centers for Medicare and Medicaid Services (CMS).

Members Empowered to Succeed Program (METS)

The Members Empowered to Succeed Program is an integrated, whole health approach to support members with significant behavioral health challenges. METS takes a unique approach to member care focusing on the individualized needs to create a recovery roadmap that is personalized to the member. We partner with both the provider and the member to ensure the member achieves the ultimate level of recovery and resiliency. For more, please see our bulletins page.

Asthma Medication Management – Medication Ratio Guidance

Please write asthma controller medication prescription for a 90-day supply. Many patients are filling rescue inhalers more than controller medications. For HEDIS compliance and improved health outcomes, please educate your patients on Asthma control and review prescription refill behavior for optimal outcomes.

Meridian (Michigan Medicaid) Updates

New Authorization Requirement: Out-of-Network Providers

To ensure our members continue to receive high-quality, coordinated care, we are implementing a new authorization requirement for out-of-network providers under our Medicaid line of business. Effective 5/1/2025, out-of-network providers will be required to obtain authorization before rendering services to our members. Please see our bulletins page for more details and a list of excluded services.

Prior Authorization Updates

Effective April 20, 2025, the following codes will require Prior Authorization:

- B4162 - ENTRAL F PED SPCL METAB NEEDS INHERITED DZ METAB
- S9379 - HOME INFUSION THERAPY INFUSION THERAPY NOC; DIEM
- B4155 - ENTRL FRMLA CATEG V MODULAR COMPONENT 100 CAL=1U
- O200T - PERQ SACRAL AUGMT UNILAT INJ
- O201T - PERQ SACRAL AUGMT BILAT INJ
- B4162 - ENTRAL F PED SPCL METAB NEEDS INHERITED DZ METAB
- 22899 - UNLISTED PROC SPINE

Effective April 21, 2025, the following code will require prior authorization:

- 41899 – Unlisted Procedure Dentoalveolar Structure

(Medicaid updates continued on next page)

Vaccines for Children (VFC) Program

Children aged 18 years or younger who are enrolled in Medicaid or are eligible for Medicaid can receive Vaccines for Children (VFC) Program benefits. At Meridian, we're here to ensure you're well-informed about this valuable benefit. If you're not already enrolled, let us help you get started today! Please see our Bulletins page for full details.

Pediatric Oral Health Reimbursement

Did you know you can get reimbursed for oral health screenings and fluoride varnish services for patients aged zero to three? Fluoride varnish can be successfully integrated into medical practice with the commitment and openness of PCPs and staff, along with training. Visit www.SmilesforLifeOralHealth.org for online courses and resources.

In Case You Missed It

Additional details can be found on our [Ongoing Reminders Page](#)

- **Recent Prior Authorization, Billing, and Policy Updates:**
 - Electric Tumor Treating Fields Clinical Policy (Effective 1/17/2025)
- The **CAHPS Survey season** takes place from February-June annually and the interactions you have with your patients makes an impact. We all play an important role in impacting our members' experience and members have the opportunity to share their experiences in the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey.
- The **Barrier Removal Fund** program is a partnership between Centene and the National Council of Independent Living (NCIL). This partnership is committed to providing equal access to quality health care and services that are physically and programmatically accessible for our members with disabilities and their companions. Please see our bulletins page for details on eligibility requirements to **apply for the Barrier Removal Fund grant funding for Michigan**.
- Effective January 1, 2025, Meridian will **no longer offer the Weight Watchers benefit**. Members interested in weight management can seek services through **Meridian's Lifestyle Management Program**.
- **Flu season** is here, and it's time for everyone to get **up to date on vaccinations**. With your patient's trust and their best interest at heart, it's up to you to **recommend they get their flu vaccine** as the best way to protect themselves and those around them.
- **Hepatitis C Virus Program:** The **recommended treatment for HCV is Mavyret**, which can be dispensed in eight-week supply. Providers who have prescriptive authority can prescribe Mavyret to their patients with a positive Hepatitis C diagnosis. **Prior authorization is not required for Medicaid**.
- **Medicare-Medicaid Plan (MMP) Dedicated Care Management:** All MMP members have a **dedicated care manager** who is a registered nurse or licensed social worker **assigned to support them with their healthcare needs**, navigating the healthcare system, and assisting with resources for SDoH needs.