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## HIX Expansion

MeridianChoice has expanded its service area to Metro Detroit with affordable premiums for members. These plans are among the lowest in Michigan and became available in 11 Michigan counties, more than doubling the 2016 presence. This will be the second year in a row Meridian has offered a product with the lowest premium and is one of only four Michigan Marketplace plans to raise premiums less than 10% from 2016 to 2017.

## UM Decision-Making

Providers may obtain the criteria used to make Utilization Management (UM) decisions by accessing the Provider Manual on our website or by calling 866-606-3700 for a printed copy. UM decision-making is based only on appropriateness of care, service and existence of coverage. Meridian and its customers do not specifically reward practitioners or other individuals for issuing denials of coverage or care. Financial incentives for UM decision-makers do not encourage decisions that result in underutilization. Meridian has processes in place to ensure that our UM staff is available to receive calls from members or providers to discuss UM decisions or practices.

You may call during normal business hours, Monday through Friday from 8 a.m. to 5 p.m. After normal business hours or holidays, you may contact Meridian toll-free at 888-437-0606 for assistance.

### We've Updated Our Logo!

We are proud to reveal our new logo and brand philosophy! Meridian has continued to grow and care for our members for nearly 20 years. We saw that simply putting care first isn't enough. We want to provide the best care for our members and include care in everything we do. So, we put "Care. Above All Else," a mission that turned into our new brand philosophy.

With a new motto set on care, we created a new logo that does the same. Four ribbons come together in the shape of an "M" for "Meridian." The four ribbons represent our four core values; Integrity, Passion, Vision and Quality. Using these values every day allows us to put "Care. Above All Else."



# PrimeMeridian

MICHIGAN

## Meridian Announces MeridianCare Continuum

Meridian is excited to announce **MeridianCare Continuum**, a new program designed specifically to support MeridianComplete (MI Health Link) and MeridianCare in-network physicians and their patients throughout Michigan. Meridian expects to grow MeridianComplete and MeridianCare enrollment substantially over the coming months and years. Meridian is investing in resources and technologies that enhance value-based reward systems for physicians, and support the coordination of care and health outcomes for members.

Beginning January 1, 2017, MeridianCare Continuum will offer patients and physicians in our MeridianCare and MeridianComplete nurse case managers, care coordinators, social workers, Pharm. D/Pharm. Tech, home-visiting physicians, hospitalists, SNFists, and Population Health Management Portal (PatietPro360).



### A SURVEY MAY BE COMING YOUR WAY!



In order to better serve our provider population, you may be receiving a survey via email or at your office regarding your satisfaction in several areas of the health plan. We would greatly appreciate your feedback!

## CRITICAL INCIDENTS

A Critical Incident is any situation that causes immediate harm to the patient's health, safety, or benefits, including but not limited to, abuse, neglect and exploitation. As a provider, you are a mandated reporter; this means that you are required to report these incidents.

### Identifying Signs of a Critical Incident:

- ✓ The patient is unable to explain the source of injury
- ✓ The patient states they are not allowed to talk to you and you must talk to their caregiver
- ✓ The patient states there is no food in their home
- ✓ The patient tells you their caregiver needs money for what should be covered benefits (medications, supplies, etc.)

If you are aware of suspicious injuries, please email [criticalincidents@mhplan.com](mailto:criticalincidents@mhplan.com) with any questions or contact your Provider Representative.

## Required Taxonomy Codes Effective 2017

Taxonomy codes are designed to categorize the type, classification and/or specialization of health care providers. To ensure accurate and timely claims processing and payment effective January 1, 2017, Meridian will require all claims, both paper and electronic, to include the taxonomy code of the rendering provider. The taxonomy code included on the claim must also match the taxonomy code Meridian has on file for the rendering provider. To submit or update this information please complete the provider enrollment form located on our website at [www.mhplan.com/providerenrollmentform](http://www.mhplan.com/providerenrollmentform).

Claims received on or after January 1, 2017 that do not contain the taxonomy code of the rendering provider will be rejected as not a clean claim. Claims must be resubmitted within the claims filing timeframes.

For electronic claims, please confirm with your EDI vendor where this information is to be included. For paper claims on a CMS 1500 this information may be included in box 24j and on a CMS UB-04 81CC A-D. More detailed instructions are provided under the provider resources section of our website [www.mhplan.com](http://www.mhplan.com).

**If you have any questions or would like additional information, contact your local Provider Network Development Representative or the Provider Services department at 888-773-2647.**

## FORMULARY CHANGES

The Medicaid Formulary is available on Meridian's website. Visit [www.mhplan.com/mi](http://www.mhplan.com/mi) and click on the plan you are contracted with. Next, click on "Providers," and lastly "Pharmacy" to view the formulary or call MeridianRx at 866-984-6462 to request a printed copy. In the Formulary, you can find valuable information related to:

- A list of pharmaceuticals included in the benefit plan, including restrictions and preferences

- Instructions on how to use the pharmaceutical management procedures 
- An explanation of limits or quotas
- How prescribing practitioners must provide information to support an exception request
- Meridian's process for generic substitution, therapeutic interchange, and step-therapy protocol
- Updates to the formulary

## Know Your Rights!

Make sure you know your rights as a provider with Meridian! To learn more about your rights, your patient's rights and much more, check out your Provider Manual. Your Provider Manual will also provide important info on:

- Medical Necessity Criteria
- Notice of Privacy Practices
- Clinical Practice Guidelines
- Programs that Meridian offers to members

Visit [www.mhplan.com/mi/providers](http://www.mhplan.com/mi/providers) and click on "Provider Manual." From there you can download and save a copy or you can request a printed copy from your local Provider Network Development Representative. **Have questions? Call 888-437-0606 to speak with the Network Development department.**



## Meridian's Provider Portal

Be sure to sign up for Meridian's provider web portal. To do this, go to <http://corp.mhplan.com> and click on "For Providers." Under "Provider Tools," you will see the link for the Provider Portal. Here are a few things you can do through the provider web portal:

- ✓ Submit claims and view statuses
- ✓ Enter Primary Care Physician authorizations online
- ✓ Run patient profiles for a quick review of encounters and HRA information
- ✓ Download HEDIS® reports and self-report HEDIS® data
- ✓ Order HEDIS® reminder postcards for your patients with the click of a button at **absolutely no cost to you!**



## What's New with the Flu Vaccine?

According to the CDC, the 2016-2017 flu season will have a few differences than previous years:

- Only injectable flu shots are recommended
- Vaccines have been updated to better match circulating viruses
- Use a high-dose shot made with adjuvant for older people

Remind your patients that everyone six months and older should get a flu vaccine this season. The flu vaccine is free of charge for Medicaid-eligible children under age 18 who are eligible through the Vaccines for Children Program. For Medicaid members, the flu shot is covered when receiving the vaccine from their primary care provider's office. For Medicare members, the flu shot is covered as a Part B benefit.

**For more information on the 2016-2017 flu vaccine, please visit [www.cdc.gov](http://www.cdc.gov).**