



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

**MARYLAND MEDICAL ASSISTANCE PROGRAM**  
**Hospital Transmittal No. 271**  
**November 14, 2019**

To: Hospital Providers

From: Jill Spector, Director  
Medical Benefits Management

Re: Hospital Services for State Correctional and/or Local Jail Inmates

**Note: Please ensure that appropriate staff members in your organization are informed of the contents of this transmittal.**

---

As stated in Hospital Transmittal No. 218 dated April 6, 2012, the Maryland Department of Health (MDH) is responsible for payment of medically necessary inpatient hospitalizations for Medicaid eligible State Correctional and/or Jail Inmates under the Maryland Medicaid Program. Federal law prohibits states from using federal Medicaid funds to provide services for incarcerated individuals, except for hospital inpatient stays that last longer than 24 hours. Hospital providers remain responsible for following required utilization and payment procedures for Medicaid eligible inmates when hospitalized.

Additionally, hospitals are responsible for checking the Medicaid Eligibility Verification System (EVS) to determine if the inmate is eligible for Medicaid coverage. If the inmate has Medicaid coverage, then the hospital is responsible for following the required utilization review process for either Medicaid fee-for-service (FFS) or the managed care organization (MCO) in which the inmate is enrolled.

Inpatient admissions for inmates include planned inpatient hospitalizations, emergent care hospitalizations, and “bedside commitments” (i.e., admitted hospital patients who are committed to the Department of Public Safety and Correctional Services (DPSCS) while hospitalized).

### **Planned Hospital Admissions**

Prior to planned hospital admissions, Corizon Health, the DPSCS Utilization Control Agent, will inform the hospital if the inmate has current Medicaid eligibility. If the inmate is Medicaid

eligible, the hospital will be responsible for obtaining timely preauthorization from either the Department's Utilization Control Agent (currently Telligen) for Medicaid FFS or the appropriate MCO for HealthChoice. The hospital will also be responsible for following all other utilization requirements, including concurrent and retrospective reviews.

### **Emergency Admissions**

When an inmate has been admitted as an emergency, whether by ambulance or by DPSCS transportation, the hospital should immediately check EVS to determine if the inmate is Medicaid eligible. If EVS confirms that the inmate is eligible, the hospital should follow the required notification procedures for either Medicaid FFS or the MCO. For Medicaid FFS, the hospital is required to notify Telligen and start the concurrent review process within 48 hours of admission or by the next business day. For HealthChoice enrollees, the hospital must follow the timeframes established by the MCO.

### **Bedside Commitments**

For situations when a patient is admitted as an inpatient to a hospital and the court decides to commit the person to DPSCS during their hospital stay, the person's legal status changes after he or she is admitted. The date of the bedside commitment order from the court is the date DPSCS shall assume responsibility for the bedside committed inmate. Since the patient was not an inmate upon admission, the hospital should have already checked EVS for Medicaid eligibility. If the patient is eligible, the hospital is responsible for contacting either Telligen (FFS) or the MCO (HealthChoice) to start the required utilization review process at the time of the admission. The patient's bedside commitment status will make no difference in Medicaid coverage of the stay, and the hospital should continue to follow normal Medicaid utilization and payment rules for these inmates.

Some inmates may potentially qualify for Medicaid eligibility but are not enrolled at the time of their hospitalization. For these inmates, a Corizon Health Medicaid specialist will work with the hospital to complete and submit the application for Medicaid eligibility. The Corizon Health Medicaid specialist can be reached at (443) 410-4058. Once the inmate is Medicaid eligible, the hospital should follow procedures for obtaining a retrospective review with Telligen for Medicaid FFS reimbursement.

### **Outpatient Services**

Outpatient services for State Correctional and/or Local Jail Inmates are not eligible for reimbursement through Medicaid or the MCOs. Corizon Health is responsible for payment of these services.

Questions concerning DPSCS requirements or procedures should be directed to any of the following representatives:

Annette Smith-Rich, RN, CCHP  
Director of Corizon Maryland ReEntry  
410-913-8346 (cell)  
443-410-4229 (office)  
[Annette.Smith-Rich@corizonhealth.com](mailto:Annette.Smith-Rich@corizonhealth.com)

Bettie Dorneval  
Corizon Medical ReEntry Case Manager, Coordinator/Medicaid Liaison  
443-410-4058 (office)  
[Bettie.Dorneval@corizonhealth.com](mailto:Bettie.Dorneval@corizonhealth.com)

Hannah J. Fenning  
Corizon Medical ReEntry Case Manager, Coordinator  
Site Office: 240-420-1203  
Regional Office: 443-410-4584  
[Hannah.Fenning@Corizonhealth.com](mailto:Hannah.Fenning@Corizonhealth.com)

Questions concerning the Medicaid FFS requirements or procedures should be directed to:

Denise James, Chief  
Division of Hospital Services  
Maryland Department of Health  
201 W. Preston Street  
Baltimore, Maryland 21201  
(410) 767-1939  
[denise.james@maryland.gov](mailto:denise.james@maryland.gov)

Questions concerning the HealthChoice requirements or procedures should be directed to your contacts at the HealthChoice MCOs.