

PREVENTION • TREATMENT • RECOVERY



Before it's **too late.**

Opioid Operational Command Center

Webinar Series – December 20, 2017

Agenda

Administrative Items

Welcome

Introductions:

- Alfred W. Redmer Jr. – Insurance Commissioner, Maryland Insurance Administration

Presentation:

- Maryland's Opioid Crisis and How the Maryland Insurance Administration Can Help

Questions

Maryland's Opioid Crisis and How the Maryland Insurance Administration Can Help

**Al Redmer, Jr. – Insurance Commissioner
Maryland Insurance Administration
December 20, 2017**



Background

- In 2015, Governor Larry Hogan appointed Lieutenant Governor Boyd Rutherford to lead the Heroin and Opioid Emergency Task Force. The Task Force is made up of State and local officials, as well as experts in the treatment of addiction, law enforcement, education and prevention.

Background

The State agencies involved include:

- Maryland Department of Health
- Maryland State Police
- Department of Public Safety and Correctional Services
- Department of Juvenile Services
- Maryland Institute for Emergency Medical Services Systems
- State Department of Education
- Governor's Office for Crime Control and Prevention
- Maryland Emergency Management Agency
- Department of Human Resources
- Maryland Insurance Administration
- Office of the Attorney General

Background

- A website has been established as a “one-stop shop” for all information.
- BeforeItsTooLateMD.org is the one-stop shop for individuals, families, educators, and health care professionals to get the educational resources they need to prevent this epidemic from spreading.

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Role of MIA in Opioid Crisis

The Maryland Insurance Administration (MIA) is the state agency that regulates insurance in Maryland.

The MIA:

- Licenses insurance companies and producers
- Examines the business practices of licensees to ensure compliance
- Monitors solvency of insurance companies
- Reviews/approves insurance policies and rates
- Investigates consumer and provider complaints and allegations of fraud.

Role of MIA in Opioid Crisis

The MIA can review complaints involving health benefit plans issued in Maryland, including:

- Claim denials based on medical necessity
- Denials of all or part of a claim for other reasons
- Other possible violations of Maryland insurance law.

Role of MIA in Opioid Crisis

The MIA cannot handle complaints about:

- Health benefit plans that were issued in another state
- Federal programs, including Medicare, Medicaid, or the Federal Employees Health Benefits Program
- Employee health benefit plans self-funded by an employer, even if an insurer is used to administer claims.

Role of MIA in Opioid Crisis

Outline of General Claim Denial and Complaint Process (This is this process if the denial is based on a reason other than medical necessity)

- Preauthorization may be requested unless it is for a prescription drug:
 - 1) to treat an opioid use disorder
 - 2) which contains methadone, buprenorphine, or naltrexone
- A claim is filed
- A denial is issued
- An appeal is filed with the carrier, unless it is related to an “urgent medical condition”. If it is related to an urgent medical condition, the complaint gets filed with the MIA directly
- A denial of the appeal is issued
- A complaint may be filed with the MIA

Role of MIA in Opioid Crisis

What should you do when a request for pre-authorization is denied for a reason other than medical necessity?

A.

- If the service has not been provided, AND
- It is for an “urgent medical condition”
(An urgent medical condition is one where the absence of medical attention within 72 hours could result in loss of life, seriously jeopardizing the member’s life or health, serious impairment to a bodily function, serious dysfunction of a bodily organ, the member remaining seriously mentally ill with symptoms that cause the member to be a danger to self or others, or would subject the member to severe pain that cannot be managed without the care or treatment that is the subject of the claim or preauthorization request)

THEN

- Call the MIA. The MIA can review an urgent medical necessity denial within 24 hours and you do not need to exhaust the appeals process.

Role of MIA in Opioid Crisis

B.

- If the service has already been provided
- If the service has not been provided, but it is not an emergency, then:
- Follow the health benefit plan's instructions to file an appeal. The instructions are normally on the notice of denial.

Role of MIA in Opioid Crisis

What should you avoid during if a claim is denied?

- Don't allow multiple denied claims to pile up.
- Don't call your provider representative to file an appeal. They are not able to assist you with the appeals process.
- Don't wait until the time to file an appeal has expired.
- Don't bill an HMO member for services.

Role of MIA in Opioid Crisis

How to File a Complaint with the MIA

- Have copies of the notice of the claim denial and the notice of appeal denial
- Include the patient's authorization to release medical records. Do not sign your name to the authorization.
- Use our complaint form or write a letter explaining the problem.
- File within 4 months of the appeal denial.

Role of MIA in Opioid Crisis

Medical Necessity Complaints

Medical necessity determinations include:

- A determination that a service is not medically necessary, efficient, or appropriate
- A determination that a service is custodial
- A determination that a service is cosmetic
- A determination that a service is investigational/experimental/unproven

Role of MIA in Opioid Crisis

Review of Medical Necessity Denials – Emergency Cases

- The MIA can review a medical necessity denial in an emergency case within 24 hours.
- ***You do not need to exhaust the appeals process to file a complaint in an emergency.***
- The MIA is always available.

Role of MIA in Opioid Crisis

Review of Medical Necessity Denials

- The MIA will send medical records and the other complaint documents to the health benefit plan.
 - 1) The Health Benefit Plan has 5 working days to respond to the complaint.
 - 2) Sometimes the health benefit plan will reverse its decision after receiving the documents.
- If the MIA does not have jurisdiction over the health benefit plan, the MIA will try to refer the complaint to the correct agency.
- The MIA will send the medical records and the health benefit plan's criteria to an Independent Review Organization (IRO).
- The IRO will use a physician with the appropriate specialty to review the denial.
- If the IRO determines the service is medically necessary, the denial is overturned.

Role of MIA in Opioid Crisis

Review of Medical Necessity Denials

- The IRO can also review the criteria used by the health benefit plan.
- The MIA can require that the criteria be changed if the criteria is not: objective, clinically valid, compatible with established principles of health care, or flexible enough to allow deviations from the norms when justified on a case by case basis.
- If the IRO finds that the services were medically necessary, typically the health benefit plan will just pay the claim. For people covered under the State employee plan, the IRO decision is binding.
- If the IRO finds that the services were not medically necessary, the MIA will usually issue a determination finding no violation
- The MIA offers the right to a hearing when there is a finding of “no violation”.

Role of MIA in Opioid Crisis

Contact Information

- For assistance in preparing an appeal or complaint:
Health Education and Advocacy Unit, Office of the
Attorney General, 1-887-261-8801 or 410-528-1840
- Maryland Insurance Administration:
1-800-492-6116 or 410-469-2244
www.insurance.maryland.gov

Role of MIA in Opioid Crisis

Additional Information on MIA's Website

- The MIA publishes an annual report on Appeals and Grievance (medical necessity) Complaints.
- Orders issued against companies can be viewed.
- A Public Information Act request can be filed.
- Consumer publications and complaint forms can be printed.

Questions?

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www.insurance.maryland.gov

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