Jai Medical Systems Managed Care Organization, Inc.

Provider Newsletter

Fall 2022 Volume LXXIV

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A Message from the **Director of Provider Relations**



Dear Provider,

We hope you are doing well and that your summer ended on a good note. Jai Medical Systems would like to take this opportunity to thank all of our providers for the care that you have provided to our members throughout the years and especially during the COVID19 Pandemic. Your hard work and dedication are greatly appreciated. I also wanted to share with you that this year marks Jai Medical Systems 25th year of operations. We appreciate your participation in our network and know that you are one of the main reasons why we are one of the top rated Medicaid Managed Care Organizations in the country.

In this newsletter, we will cover a variety of topics that you may find useful in your daily practice and in caring for our members.

Sincerely,

Hennrietta Dodoo Director of Provider Relations

Are you Active with ePREP? **ePREP PORTAL



Maryland Medicaid requires all providers rendering care to Medicaid beneficiaries enroll and maintain active status with Medicaid's electronic Provider Revalidation and Enrollment Portal (ePREP). Maryland's ePREP system is Medicaid's one stop shop for provider enrollment, re-enrollment, revalidation, information updates and demographic changes.

According to the Maryland Department of Health, all providers submitting claims for HealthChoice members must enroll and maintain active status with ePREP in order to receive claims payment. Failure to properly enroll and remain in an active status with Maryland Medicaid's ePREP system will result in claim denials.

If you are unaware of your current status with ePREP, please login into your ePREP account today by visiting www.ePREP.health.maryland.gov or contact the ePREP call center at 1.844.463.7768.

If you have any questions about the ePREP enrollment process, please feel free to contact our Provider Relations Department today at 1-888-JAI-1999.

Updates & Reminders:

HEDIS

On an annual basis, the quality of care delivered by Jai Medical Systems and its providers is evaluated using HEDIS. HEDIS is an acronym for the Healthcare Effective Data Improvement System. HEDIS is comprised of a variety of healthcare measures such as childhood immunizations, cervical cancer screenings and mammography, and was developed by the National Committee for Quality Assurance. For more information about HEDIS and HEDIS metrics, please visit our Provider Resources section of our website.

Provider Portal

Participating providers are encouraged to utilize our Provider Portal to inquire about member eligibility, claim status, appeal status, and much more. To begin using our Provider Portal, please visit our website at www.jaimedicalsystems.com

24 Hour Nurse Advice Line

Please inform our members about the availability of our 24 Hour Nurse Advice Line. Our 24 Hour Nurse Advice Line is staffed with registered nurses and can assist our members with non-emergent questions they may have about their health. Our Nurse Advice Line can be contacted at 1-833-359-0170.

Provider Satisfaction Survey

As part of our continued efforts to improve our services and the overall provider experience with our company, we request providers complete an annual provider satisfaction survey. Your feedback is essential. We request that you please complete the Provider Satisfaction Survey located on the back page of this newsletter. Completed surveys may be returned by fax to 410.433.4615 or by email to provider relations@jaimedical.com.

Provider Credentialing & Contact Information

In order to join and maintain participation status with Jai Medical Systems' network, each provider has to successfully complete all Credentialing and Recredentialing requirements. In addition, we kindly request that all providers provide us with the most up-to-date information about their organization. Organizational updates are important to ensure that we provide the most accurate information to our members and providers, and helps to ensure appropriate claims payment.

We also kindly request that all staff in your office are aware of their participation status with Jai Medical Systems. We do not want our members turned away because of a miscommunication! Please feel free to call the Provider Relations Department at 1-888-JAI-1999 with any questions related to credentialing or updating provider demographic information.

Claim Submission Guidelines

To ensure that your claims are processed quickly and accurately, please make sure to follow these simple guidelines regarding billing practices, referrals, and authorizations. When submitting claims, please ensure that you are following appropriate claim submission guidelines. Some key Jai Medical Systems claim submissions guidelines include:

- Attaching or faxing one copy of a valid completely filled out, legibly
 written referral, outpatient authorization, or inpatient authorization, when
 applicable, to Jai Medical Systems' Claims Processing Center (fax number
 1-866-381-7200) prior to claim submission.
- Including the full authorization number that is valid for the claim being billed in the appropriate field. The authorization/referral field is located in block 23 for the CMS 1500 form and block 63 for the UB-04.
- Indicating or attaching a copy of the member's primary insurance Explanation of Payment (EOP) or Remittance advice regarding the member's primary insurance and any payment made from a third party payor (TPP), if applicable, with the claim.

False Claims, Policies and You

The Federal and State False Claims Acts makes it a crime for any person or organization to knowingly present or conceal a false or fraudulent claim for payment to the United States government or to a government contractor, including claims submitted to Medicaid. To comply with the Federal Deficit Reduction Act, we would like to make you aware of your rights and responsibilities under the Federal and State False Claims Acts, administrative remedies, civil penalties, and the protections for whistleblowers under such laws. As an agent, contractor or vendor of Jai Medical Systems Managed Care Organization, Inc., our policies and procedures regarding this legislation not only apply to our employees, it also applies to you.

The criminal penalties for knowingly submitting fraudulent claims could include fines and/or imprisonment. In addition to criminal penalties, administrative remedies can include monetary penalties, costs of the civil action brought to recover any such penalty or damages, plus 3 times the amount of damages which are incurred by the government. These penalties are detailed in 18 U.S.C. Section 287 and 31 U.S.C. Section 3730 of the False Claims Act.

Also, according to the False Claims Act, federal law prohibits retaliation, and as a whistleblower, any employee, contractor, or agent is entitled to all relief necessary to be made whole if they are discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against by their efforts to stop a violation.

We welcome and encourage you to report anything suspicious. To report fraud & abuse or if you have any questions regarding our policies and procedures, please contact our Fraud and Abuse Compliance Officer at 1-888-JAI-1999. You can also write to: Jai Medical Systems, 301 International Circle, Hunt Valley, MD 21030. For more information regarding fraud and abuse, please visit our website: www.jaimedical.com.

Visit Us Online

There are many services available online to both our members and providers. The resources listed in the chart below are available on our provider portal or on our website at **www.jaimedicalsystems.com.** If you prefer, all of this information is also available in print and/or by telephone. You may request this information by calling the Provider Relations Department today at 1-888-JAI-1999.

Look on our website for additional information about our:	Provider Portal	General Website
Clinical Guidelines		*
Utilization Management Decision Process	*	*
Pharmaceutical Management		*
Formulary (including updates and notices)		*
Quality Assurance Programs	*	*
Fraud and Abuse Detection Program		*
Case and Disease Management Programs		*
Complex Care Program		*
Member Rights and Responsibilities		*
Co-Payment Information		*
Web-Based Physician Directory	*	*
Web-Based Hospital Directory	*	*

Updates & Reminders:

E-Rlast!

In order to receive our important updates and communications from Jai Medical Systems by email, please visit our website at www.jaimedicalsystems.com and sign-up for our electronic newsletter.

Prior Authorization

Jai Medical Systems requires a prior authorization (PA) be obtained for certain services and procedures.

Prior to submission of a PA request, approval for the applicable procedure should be received from the Primary Care Provider.

For a listing of procedures and services requiring a PA, please visit our website. If you do not see a procedure or service listed, or would like to see if a PA may be required for a particular service or procedure, please contact our Utilization Management Department at 1-888-JAI-1999.

Online Health Education

Health Education materials are available to Jai Medical Systems members online. Members can access these materials by registering on the member portal located at www.jaimedicalsystems.com.

Contact Us

301 International Circle Hunt Valley, MD 21030

Phone: 1-888-JAI-1999

Hours of Operation: Monday - Friday 9am-6pm

Provider relations@jaimedical.com



2022 PROVIDER SATISFACTION SURVEY

Please assist us by taking a few minutes to fill out this Provider Survey about Jai Medical Systems Managed Care Organization, Inc. (JMSMCO)

Once completed, please fax the Provider Survey back to us at 410-403-1816 or email: providerrelations@jaimedical.com.

For your convenience, you may also download this Provider Survey on our website: www.jaimedicalsystems.com.

Please return this survey by: December 15, 2022

By completing this survey, you will be entered to win a \$100 gift card (answers will not affect your entry).

rovider Last	Name:Provider First Name:			N	PI:		
Provider Last Name:Provider First Name: Organization Name:			Phone:				
am a:□PCP/	☐Specialty Care Provider (Specialty:)//	7Other:				
mail:	Individual Complete	ing Surve	y/Title: _				
OVE	PALL SATISFACTION	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	
1. I am sat	sfied with Jai Medical Systems.						
2. I would	recommend other providers to join the Jai Medical Systems' network						
3. The Jail	Medical Systems' provider network is adequate.						
THE	IAI MEDICAL SYSTEMS' CUSTOMER SERVICE DEPARTMEN	νT					
4. Is friend	ly, knowledgeable, and helpful.						
Is able t	assist with verifying member eligibility & PCP change requests.						
6. Is able t	assist with scheduling appointments and transportation.						
7. Provide:	excellent service overall.						
PROI	TDER RELATIONS AND CREDENTIALING						
8. Jai Med	cal Systems' Provider Relations Department is friendly,						
knowled	geable, and helpful.						
The cree	entialing and/or recredentialing process occurred in a timely manner.						
I receive	appropriate notification on the need to be credentialed or						
recreder							
 I receive 	excellent service from Jai Medical Systems' Provider Relations						
Departn							
	IZATION/CASE MANAGEMENT & AUTHORIZATION PROCES	SS					
	cal Systems' Utilization/Case Management Department is friendly,						
	geable, and helpful.						
	cal Systems effectively communicates and assists with coordination						
	al care, when necessary.						
	se Management and Disease Management programs to be helpful for	·					
	patients.						
	tand the referral and/or authorization process.						
16. Referral	s and/or authorizations are processed in a timely manner.						
	ITY ASSURANCE						
	cal Systems keeps me informed about its Quality Assurance						
	es and programs.						
		_	 	_			
I .	lications included on Jai Medical Systems' formulary adequately						
	needs of my patients and practice. MS/APPEALS						
	ns are processed in a timely manner.			1			
	ns are processed in a timely manner. cal Systems' reimbursement rates are competitive.	+			 		
	ns inquiries are answered promptly.	+			\vdash		
		+			 		
 I unders appropri 	tand the claim appellate process and feel my claims are reviewed						
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