

May 21, 2021

Provider Alert: Updates to the Provider Manual

To all MedStar Family Choice-DC contracted providers:

We have made a few updates to the MedStar Family Choice—District of Columbia Provider Manual. A summary of the changes are as follows:

Section II: Provider Responsibilities

Under the sections Role and Responsibilities of MFC-DC Primary Care Providers and Role and Responsibilities of MFC-DC Specialty Providers, the following was added:

Prescription Drug Monitoring Program (PDMP) query required in DC. [Prescription Drug Monitoring Program Query and Omnibus Health Amendments Act of 2020](#) became effective on March 16, 2021. The Act requires prescribers and dispensers to query the PDMP:

- Prior to prescribing or dispensing an opioid or Benzodiazepine for more than seven consecutive days, and
- Every ninety days thereafter while the course of treatment or therapy continues, or
- Prior to dispensing another refill after ninety days.

[Click here to access a Pocket Guide for Safe Opioid Prescribing.](#)

Section III: MedStar Family Choice Outreach, Care Management and Utilization Management

Under the section Eligibility Verification an updated example of the DC Healthcare Alliance enrollees ID card has been included.

Section V: Benefits and Services

Under the section Transportation, updates were made to indicate that transportation is now a covered benefit for all MFC-DC enrollees.

Section VI: DHCF Quality Improvement and DFC-DC Oversight Activities

Under the section Enrollee Complaint/Grievance Procedure, updates were made and the new information is as follows:



MedStar Family Choice

DISTRICT OF COLUMBIA

If enrollees have a question or grievance about their health care, such as not being able to schedule an appointment, the way in which they were treated or having to travel too far to get healthcare services, they should call Enrollee Services at 888-404-3549 Monday through Friday, 8 a.m. to 5:30 pm. The Enrollee Service representative will:

1. Record the grievance and assign it a unique case ID number in MFC-DC's clinical system.
2. Provide written acknowledgement of the receipt of the Grievance within two (2) business days
3. Answer any questions
4. Tell the enrollee when he/she will have an answer. MFC-DC has up to 90 days to resolve to the grievance. MFC-DC may ask for additional time (up to an additional 14 days) to resolve the grievance if requested by the enrollee, provider, or if MFC-DC can show that additional time would be beneficial to the enrollee.
5. Forward the grievance to the appropriate person, who will:
 - a. Investigate the grievance;
 - b. Decide what steps will be taken; and
 - c. Help to resolve the grievance.

Please take the time to review this updated content as this is an extension of your existing contract. All changes and updates will be effective June 21, 2021.

The updated provider manual is available on our website at [MedStarFamilyChoice.com/For-District-of-Columbia-Providers](https://www.MedStarFamilyChoice.com/For-District-of-Columbia-Providers). For questions concerning this notice, or if you would like a copy mailed to you, please contact the MFC-DC Provider Relations department at **855-798-4244, option 2** or mfcdc-providerrelations@medstar.net, Monday through Friday, 8 a.m. to 5:30 p.m.

**It's how we
treat people.**