

# Provider Notification

**Notification Date: 7/16/2025**

**To: Hospitals**

**From: MDwise Provider Relations**

**Subject: Prudent Lay Process**

**Effective Date: 9/1/2025**

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## Summary

**MDwise will be using the Prudent Lay Process (PLP) for all emergency Services.**

## Impact

- **Hospital providers billing for ER services.**

## Action

- 1. Claim will match against ER auto pay list (list of diagnosis codes to indicate if the visit is emergent or non-emergent) \***
- 2. If diagnosis code on claim does not match a diagnosis code on the ER auto pay list, the claim will only pay a screening fee**
- 3. If the provider disagrees and feels the service should meet the emergency requirements outside of the ER auto pay list, the provider can request a PLP review**

- To request a PLP review, the provider will need to send a copy of medical records through the MDwise portal via a claims adjustment form to be reviewed within 90 calendar days from the date of the most recent Explanation of Benefits (EOB)

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Claim #2024120401957

Location Address
Member Name
Member ID
Account Name
Service Provider
Provider Tax ID
Mailing Address
Line Of Business
Claim Status

MDwise Provider Claim Adjustment Request

Complete the following required information.

Member Name
Member Medicaid ID #
MDwise Claim #
Date of Service
Provider Name
Tax ID #
Office Contact
Rendering NPI #
Email
Phone #
Claim Adjustment Form Submission Date
Fax #
Reason for Request

Reconsideration Reason (supporting documentation required)

☐ Service denied for lack of authorization  
Attach a copy of the authorization information or number
☐ Service denied as other insurance primary (COB)  
Attach copy of primary EOB
☐ Service denied as a duplicate  
Attach documentation
☐ Service denied for lack of attachment  
Attach any of the following: MSRP cost invoice, sterilization consent form, etc.
☐ Service denied for member not eligible  
Provide supporting documentation

☒ PLP Review  
Attach ER records to prove service was Emergent under PLP Review

Submit
Cancel

- Upon review by the prudent layperson, the claim can be deemed emergent and will be adjusted to pay in accordance with the IHCP fee schedule or determined to remain paid at the screening fee as non-emergent

\*If a member calls the 24-hour nurse hotline and is told to go to the emergency department, the claim will be treated as an emergency.