



Maryland Medicaid's Maternal Opioid Misuse (MOM) Model

Overview

The Maryland Department of Health (the Department) is one of a cohort of states selected to implement the Maternal Opioid Misuse (MOM) model, with funding from the federal Center for Medicare and Medicaid Innovation. **The MOM model focuses on improving care for pregnant and postpartum Medicaid participants diagnosed with opioid use disorder (OUD) by working collaboratively with Medicaid managed care organizations (MCOs) to provide enhanced case management.** The MOM model began on July 1, 2021, as a pilot program serving Medicaid beneficiaries residing in St. Mary's County. Starting on July 1, 2022, MCOs will offer the model in additional counties. Starting January 1, 2023 the MOM model will be available statewide.

The MOM model funds enhanced case management by MCOs, focusing on:

- Increasing utilization of physical and behavioral health care, including medication for OUD; and
- Ensuring families have access to the community resources that they need through screening and referrals for the social determinants of health.

Health Care Providers and the MOM Model

Dedicated MOM case managers will be tasked with ensuring that each MOM participant has a minimum of one health care visit every month. MOM case managers will also create individual care plans for MOM participants. These care plans, which include the name and contact information of the MOM case manager, will be visible through CRISP to empaneled providers.

Providers can support the MOM participants by:

- Referring Potential Participants to their MCO
 - Serve as a referral source for potentially-eligible MOM participants by contacting their individual's MCO (**All providers**)
 - Complete the Maryland Perinatal Risk Assessment, both the initial and ongoing forms (**Somatic providers**)
 - Potential members can also complete the MOM Model Self-Referral Tool: <http://health.maryland.gov/EnrollMOM>
- Coordinating Care for Enrolled Participants
 - Communicate with MOM case managers, including in instances of missed appointments, loss to follow-up, positive drug and/or STI screens, when making referrals to specialists (*e.g.*, neonatologists), etc. (**All providers**)
 - Ensure pregnant individuals are provided with the opportunity to consent to data-sharing under the 42 CFR Part 2 Release of Information process (**SUD providers**)

For more information, visit: mmcp.health.maryland.gov/pages/mom-model.aspx

Contact: mdh.mommodel@maryland.gov