dures, and controls required for automation programs. The Administration also provides systems analysis, programming and data communications, and training and computer operation services for the Department's information systems throughout the State.

TECHNICAL OPERATIONS

Under Technical Operations are the Division of Medicaid Information Systems (MMIS); the MMIS—II Project; and the Division of Claims Processing.

DIVISION OF MEDICAID INFORMATION SYSTEMS
Alan R. Shugart, *Chief*
(410) 225-5408

Established in 1982, the Division of Medicaid Information Systems serves as the data processing unit for Medical Care Programs. The Division performs systems analysis and programming and maintains a teleprocessing network. It maintains and operates the Medicaid Management Information System (MMIS), an automated claims processing and information retrieval system mandated by the federal government. The Division also provides data processing for the Pharmacy Assistance Program; Geriatric Evaluation Services (GES); and Statewide Evaluation and Planning Services (STEPS).

MMIS—II PROJECT
John J. O'Brien, *Chief*
(410) 225-6937

Formed in 1993, the MMIS—II Project is working to replace the Medicaid Management Information System (MMIS). The Project will secure a certified MMIS from another state, enhance it to meet Maryland needs, install it on the State computer, and integrate it with new information systems technologies.

DIVISION OF CLAIMS PROCESSING
Joseph L. Fine, *Chief*
(410) 225-5795

The Division of Claims Processing originated as the Division of Invoice Processing and received its present name in Fiscal Year 1990. The Division processes all claims for payment made by providers of health care services under the Medical Assistance, Pharmacy Assistance and Prenatal Assistance Programs. Processing includes mail sorting, microfilming, entry of claims into the Batch and Invoice Control File of the Medicaid Management Information System, and processing of payments in excess of $1.5 billion annually for 12 million claims received. The Division maintains records of payments to, as well as collection from, the more than 25,000 health care providers enrolled in the Medical Assistance Program. The Division also serves as a centralized purchasing and inventory unit for the Administration.

PROGRAM OPERATIONS

Under Program Operations are Recipient Eligibility Programs; the Kidney Disease Program; and Maryland Access to Care (MAC) Recipient Services and Medical Assistance (MA) Provider Relations.

RECIPIENT ELIGIBILITY PROGRAMS
John P. Stewart, *Chief*
(410) 225-5406

Recipient Eligibility Programs began as the Division of Programs and Liaison. The Division was renamed the Division of Eligibility Services in Fiscal Year 1990 and was reorganized under its present name in November 1993.

Recipient Eligibility Programs is responsible for systems and procedures that update the Recipient Eligibility Master File; produce and issue Medical Care Program identification cards; and resolve eligibility problems. It also oversees the Pharmacy Assistance Program and the Buy-In Programs for Medicare Parts A and B. Under the Buy-In Programs for Medicare, the State, through the Medical Assistance Program, pays federal premiums for people certified by the local department of social services as unable to cover hospital insurance (Part A) or medical insurance (Part B).

KIDNEY DISEASE PROGRAM·
Barbara A. Bradford, R.N., *Chief*
(410) 225-5000

The Kidney Disease Program began in 1971. The Program financially assists Marylanders who are certified end-stage renal disease patients. This assistance for treatment is available only after all other medical and federal insurance coverage has been pursued.

MARYLAND ACCESS TO CARE
(MAC) RECIPIENT SERVICES &
MEDICAL ASSISTANCE (MA) PROVIDER RELATIONS
Dawn L. Grosshandler, *Chief*
(410) 225-5444

Recipient Hotline: (410) 225-5800
toll free: 1-800-492-5231

MAC Provider Hotline: (410) 225-5460
toll free: 1-800-934-6704

Medicaid Provider Hotline: (410) 225-5503
toll free: 1-800-445-1159

The Maryland Access to Care (MAC) Program began in December 1991 and was reorganized under its present name in November 1993. To improve the quality of health care for Medical Assistance recipients, the Program maintains a roster of primary care physicians. Recipients having difficulty finding their own physician may choose a primary care provider enrolled with the Program. That provider then refers the recipient to medical specialists as needed. The Program enrolls both recipients and providers and informs Medical Assistance recipients about the Program.