

Provider Bulletin

February 2025

February is Heart Health Month

Heart Health Month is a time to raise awareness about heart disease and how to prevent it. The American Heart Association (AHA) has recently promoted primary prevention of cardiovascular disease (CVD) by recommending that Americans optimize “Life’s Simple 7.”

Life’s Simple 7 components include nonsmoking, body mass index <25 kg/m², ideal physical activity, ideal diet score, serum cholesterol <200 mg/dL without medication, blood pressure <120/<80 mmHg without medication and fasting glucose <100 mg/dL without medication.

For more information, please visit pmc.ncbi.nlm.nih.gov/ and search for “Life’s Simple 7.”

Provider manual updates

Molina Healthcare of Michigan updates the provider manuals for all four lines of business/products at least annually. Our 2025 Medicaid and Medicare provider manuals are now available at MolinaHealthcare.com/providers/mi/medicaid/home.aspx and MolinaHealthcare.com/providers/common/medicare/medicare.aspx.

Our 2025 Marketplace and Dual Options provider manuals will be available soon.



Model of Care provider training 2025

Molina Healthcare of Michigan is required to provide annual training regarding our Model of Care program for SNP (Special Needs Plan) enrollees. The Model of Care is the foundation for Molina's management policy, procedures and operational systems for our SNP population. To ensure that Molina remains compliant with Centers for Medicare and Medicaid (CMS) regulatory requirements for Model of Care training, a receipt of a completed attestation form is due to Molina no later than December 31, 2025.

What you need to do:

1. Take the Model of Care training. The written training materials on the Molina Healthcare Model of Care can be found on the Molina website at MolinaHealthcare.com/-/media/Molina/PublicWebsite/2025ModelofCareProviderTraining.pdf.
2. Complete and sign the Model of Care training attestation form (attestation form). For a copy of the MOC attestation, please visit the Molina Medicare website at MolinaHealthcare.com/providers/common/MOC/2025/MI (attestation).

Please note: If one (1) attestation form is being returned for a group or clinic, it must be signed by an individual with the authority to sign on behalf of the group/clinic. An attendance roster indicating which providers completed the training must be attached. A copy of the Model of Care training attestation form is available via a link at the end of the Model of Care training deckor on the MolinaHealthcare.com Medicare provider webpage.

3. Return attestation form. To return the attestation form to Molina Healthcare, please use the automated submit button or email it to MHMProviderServicesMailbox@MolinaHealthcare.com.

If you have any questions, please contact your Provider Relations manager directly or contact Molina Provider Relations at MHMProviderServicesMailbox@MolinaHealthcare.com.

Provider network management tool is now available

Molina has added features for new and current providers to our provider network management portal. All submissions to join the Molina network or to add, term and/or update requests should now be submitted through the portal. Providers and practice managers will have their own designated login and password. Updates, add-ons and all required credentialing documents can be made directly on the portal. Council for Affordable Quality Healthcare (CAQH) providers will have prepopulated information – minimizing the time it takes to fill out credentials. Delegated groups can upload rosters as needed, and non-delegated groups can add providers individually or via roster upload to make demographic updates such as:

- Change in office location, office hours, phone, fax or email
- Addition or closure of office location
- Addition or termination of a provider
- Change in taxpayer identification number (TIN) and/or National Provider Identifier (NPI)
- Open or close practice to new patients

Chronic Kidney Disease (CKD) is an under-recognized public health issue

Diabetes and hypertension are the leading causes of chronic kidney disease (CKD). Other risk factors include obesity, family history of CKD, history of acute kidney injury, patients over the age of 60 and being a member of a minority race or ethnicity. Health equity considerations remain a key concern for CKD as communities of color and other socioeconomically disadvantaged groups are disproportionately impacted.

It is estimated that about 90% of the estimated 37 million U.S. adults with CKD remain unaware of their condition. Because CKD is often asymptomatic, many patients are unaware they have the disease until it has progressed to later stages. Early identification of CKD in your at-risk patients creates the opportunity to slow or prevent disease progression.

Understanding which of your patients are at risk for CKD allows you to provide education, develop treatment plans and goals, or refer outside your practice as needed to help facilitate better outcomes for these patients. The American Diabetes Association and the National Kidney Foundation recommend annual screening for patients with diabetes using both the estimated Glomerular Filtration Rate (eGFR) and the urine Albumin Creatinine Ratio (uACR) lab tests. Patients with diabetes can have changes in either their eGFR, uACR or both, so it is important to track both tests. Together, the two tests, also known as the Kidney Profile, provide key information about kidney health, including determining the CKD stage and risk of progression.

The National Kidney Foundation also recommends annual screening for other populations at high risk of CKD including patients with hypertension, cardiovascular disease, a family history of kidney disease or a personal history of acute kidney injury.

Endorsed by the National Kidney Foundation, Kidney Disease Improving Global Outcome’s (KDIGO) “Heat Map” is a helpful tool for staging, risk stratifying and monitoring kidney disease based on the Kidney Profile test results. The KDIGO heat map provides clinicians with a useful algorithm for when to treat and when to refer to a nephrologist.

Molina offers incentives to support provider performance in the Kidney Health Evaluation for Patients with Diabetes HEDIS® measure. Depending on contract and performance, the incentive is between \$25-\$50 per eligible member.

For more information and resources regarding CKD, please visit the National Kidney Foundation of Michigan website: <https://nkfm.org/healthcare-professionals/>.

Prognosis of CKD by GFR and albuminuria categories: KDIGO 2012				Persistent albuminuria categories		
				Description and range		
				A1	A2	A3
				Normal to mildly increased	Moderately increased	Severely increased
				<30 mg/g <3 mg/mmol	30–300 mg/g 3–30 mg/mmol	>300 mg/g >30 mg/mmol
GFR categories (ml/min/1.73 m ²) Description and range	G1	Normal or high	≥90			
	G2	Mildly decreased	60–89			
	G3a	Mildly to moderately decreased	45–59			
	G3b	Moderately to severely decreased	30–44			
	G4	Severely decreased	15–29			
	G5	Kidney failure	<15			

Green: low risk (if no other markers of kidney disease, no CKD); yellow: moderately increased risk; orange: high risk; red: very high risk.



New Availity Payer Space application: Care Coordination Portlet

The Availity Essentials portal recently launched a new “Care Coordination Portlet” (CCP) application. Health care providers can use the application to access tools, including the member profile, comprehensive care team details, online submission of pregnancy notification forms, care coordination requests and much more.

The CCP application is available within the Payer Spaces section of the Availity portal.

New resources regarding Molina’s doula coverage available online!

Molina is pleased to provide additional resources regarding our doula services coverage. The resources – available in our online “You Matter to Molina” section – under the “Molina Doula Information and Advisory Council” drop-down menu – include the following:

- Links to MDHHS resources for doulas
- Doula Contracting Quick Facts Guide
- “Molina Michigan Healthy Beginnings Program” and “What is a Doula?” handouts for providers

To access these resources, please visit MolinaHealthcare.com/providers/mi/medicaid/comm/YouMattertoMolina.aspx

Provider orientations

To join any of the following orientations, please visit our “You Matter to Molina” website section for providers. Below are dates/times for upcoming live orientation sessions.

- Thursday, February 27, 9 a.m. - 10:30 a.m.
- Thursday, March 27, 9 a.m. - 10:30 a.m.

Claim submission information and requirements

Molina strongly encourages providers to submit claims electronically, including secondary claims. Electronic claims submission provides significant benefits to the provider, including:

- Helps to reduce operation costs associated with paper claims (printing, postage, etc.)
- Increases accuracy of data and efficient information delivery
- Reduces claim delays since errors can be corrected and resubmitted electronically
- Eliminates mailing time and claims reach Molina faster

Molina offers the following electronic claims submission options:

- Submit claims directly to Molina via the Availity Essentials portal
- Submit claims to Molina via your regular EDI clearinghouse

If electronic claim submission is not possible, please submit paper claims to the following address: Molina Healthcare of Michigan, Inc., PO Box 22668, Long Beach, CA 90801.

When submitting paper claims:

- Paper claim submissions are not considered “accepted” until received at the appropriate Claims PO Box
- Claims received outside the designated PO Box will be returned for appropriate submission
- Paper claims must be submitted on original red and white CMS-1500 and CMS-1450 (UB-04) claim forms.
- Paper claims not submitted on the required forms will be rejected and returned. This includes black-and-white forms, copied forms and any altering, including handwritten claims
- Claims must be typed with either 10 or 12-point Times New Roman font, using black ink

For more information, please see CMS claims submission guidance at [cms.gov/Medicare](https://www.cms.gov/Medicare).

Find out more in Molina’s quarterly provider newsletter

In addition to our monthly provider bulletin, we publish quarterly newsletters for our health care provider partners. This newsletter includes medical management policies and procedures to support providers in delivering quality health care services to your patients/Molina members. Below is a list of some articles in our fourth-quarter 2024 edition:

- Model of Care training is underway
- Third-party liability on explanation of payments
- 2024-2025 flu season
- Early and Periodic Screening, Diagnostic and Treatment program

To view our quarterly newsletters, visit MolinaHealthcare.com/providers/mi/Medicaid/home.aspx for this newsletter under the Communications tab. Our next edition for first quarter 2025 will be available online soon.