



Provider Newsletter

For Molina Healthcare of Nebraska, Inc. providers

June 2024

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National Plan & Provider Enumeration System

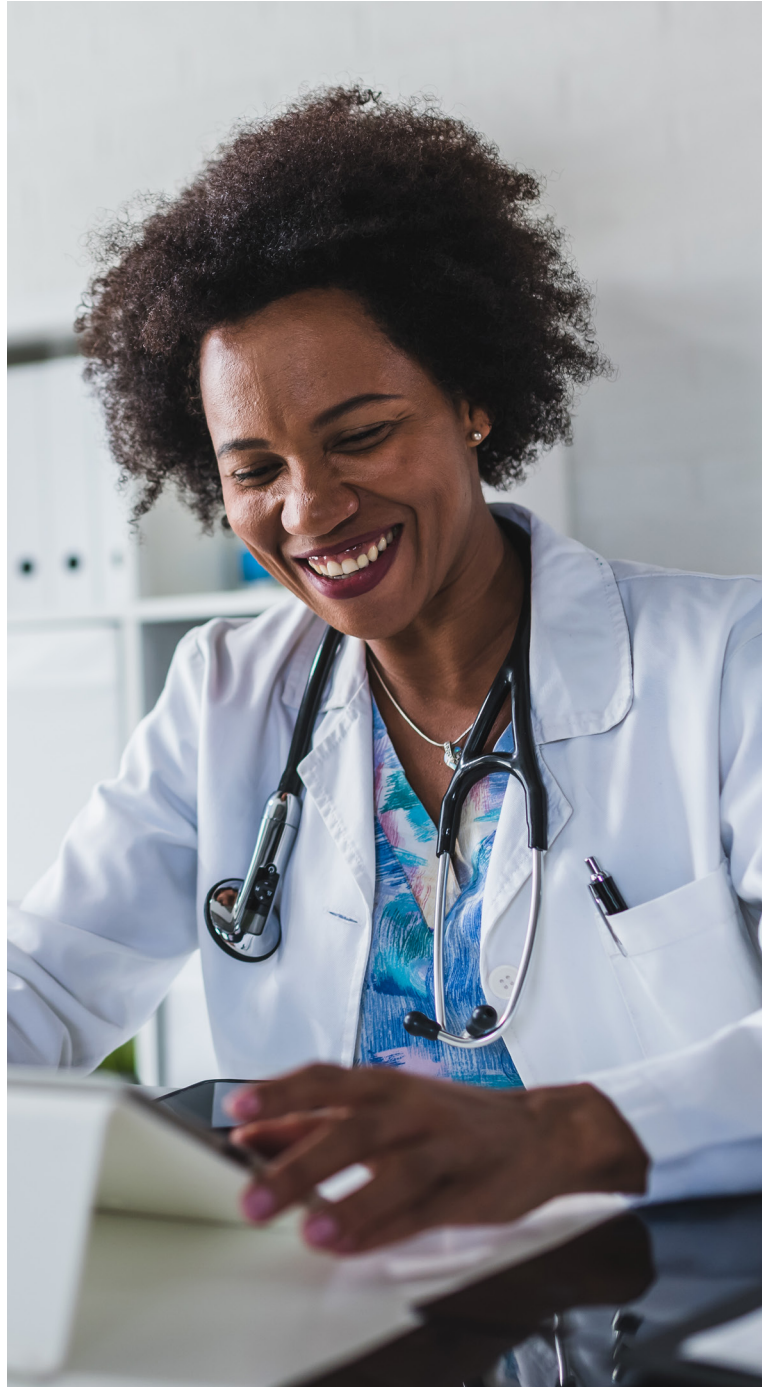
The Centers for Medicare & Medicaid Services (CMS) is encouraging managed care organizations (MCOs) to use the National Plan & Provider Enumeration System (NPPES) as a resource for online provider directories.

As a valued provider partner, we remind you to review your National Provider Identifier (NPI) data in the NPPES as soon as possible to ensure accurate provider data. As you may know, providers are legally required to keep their NPPES data current. By using NPPES, we can limit the need to contact you for updated directory information and provide more reliable information to Molina Healthcare of Nebraska members.

If providers keep the NPPES database up to date, we can download the NPPES database and compare the provider data to the information in our existing Provider Online Directory to verify its accuracy.

When reviewing your provider data in NPPES, please update any inaccurate information in modifiable fields, including provider name, mailing address, telephone and fax numbers, specialty and more. You should include all addresses where you practice and actively see patients. Do not include addresses where you could see a patient, but do not actively practice. Please remove any practice locations that are no longer in use.

Once you update your information, you certify it in NPPES. By updating the NPPES, you help ensure patients have accurate provider information, which improves access to care, maintains continuity of care, fosters trust in the healthcare system, and ensures regulatory compliance. Thank you for taking the time to regularly review your information stored in NPPES.



Balance billing



Molina would like to remind providers that, as described in your Agreement with Molina Healthcare of Nebraska, balance billing a member for covered services is prohibited, except for the member's applicable copayment, coinsurance, and deductible amounts.

Please note that covered services include health care services and supplies, including emergency services provided to members that are medically necessary and covered by Molina as a member benefit. In addition, it is the provider's responsibility to verify eligibility and obtain approval for services that require prior authorization.

Examples of balance billing:

1. Holding members who are dually eligible for Medicare and Medicaid liable for Medicare Part A and B cost-sharing.
2. Requiring Molina members to pay the difference between the discounted and negotiated fees and the provider's usual and customary fees.
3. Charging Molina members fees for covered services beyond copayments, deductibles, or coinsurance.
4. Requiring members to pay for a covered service that was denied or rejected by the health plan for valid/appropriate reasons.

Providers should email their **Provider Relations representative** if they have any questions.



Provider town hall

Molina is holding monthly provider educational sessions. As part of our commitment to providing continuous support and resources, these sessions aim to empower you with the latest insights, updates, and best practices in Medicaid billing.



You can register on the [Training & Resources](#) page of the Molina website.

These monthly sessions will provide:

- 1. Up-to-date information:** Stay informed about changes, updates, and regulations in the Medicaid billing landscape.
- 2. Expert guidance:** Gain valuable insights and tips to streamline your processes and maximize efficiency.
- 3. Interactive learning:** Engage in interactive discussions and question-and-answer sessions to deepen your understanding and enhance your skills.
- 4. Networking opportunities:** Connect with fellow Medicaid billers, share experiences and build a strong professional network.
- 5. Continuous support:** Access ongoing support and resources to address any challenges or questions you may have regarding Medicaid billing.

We look forward to connecting with you at our next training event.

We're here for you.

You can count on us to support you. Contact us whenever you need help.

24-Hour Nurse Advice Line

(999) 275-8750 (TTY: 711)
Available 24 hours a day,
7 days a week, 365 days a year

Claims

Availity Essentials Portal
(800) 282-4548
Monday-Friday
7 a.m.-7 p.m. CT

Compliance 24/7 Alertline

(866) 606-3889
Report fraud, waste and abuse
24 hours a day, 7 days a week,
365 days a year

Contracting

NEContracting@MolinaHealthcare.com

Member Services

(844) 782-2018 (TTY: 711)
Monday-Friday
8 a.m.-6 p.m. CT

Provider Contact Center

(844) 782-2678
Monday-Friday
7 a.m.-6 p.m. CT

Provider Relations

NEProviderRelations@MolinaHealthcare.com

Utilization Management

(844) 782-2678
Monday-Friday
7 a.m.-6 p.m. CT

