PROVIDER BULLETIN

A bulletin for the Molina Healthcare of Ohio provider networks

"It Matters to Molina" Corner

Information for all network providers

Thank you for the wonderful response to the "It Matters to Molina" question! Our winner is Kristen Grumbine from Dr. Jeffrey R. Patterson, OD.

The "It Matters to Molina" February question was: What is the <u>most efficient way</u> to submit a claim reconsideration to Molina?
  a. Fill out the Claim Reconsideration Form
  b. Email your Molina Provider Services Representative
  c. In the Provider Portal
  d. Submitting a request in Medicaid Information Technology System (MITS)

The correct answer is c.

March Question: Where on the Molina Provider Website would a provider find information on our "It Matters to Molina" (IMTM) Forum Training Presentations that are posted after the training date/time?
  a. Under the "Manual" tab on the "Provider Manual & Training" page, under "Provider Orientation and Trainings"
  b. Under the "Communications" tab, on the "IMTM" page, under "Molina Presentations"
  c. These are not posted on Molina's website, providers must reach out to their Provider Services Team for the presentation
  d. Under the "Health Resources" tab, on the "Provider Toolkits and Resources" page

Email your answer to OHProviderBulletin@MolinaHealthcare.com by March 15 to enter the drawing. The correct answer and drawing winner will be announced in the March Provider Bulletin.

In addition to participating in the monthly drawings, we want to hear from you. Please take time to share feedback with us about your experience working with Molina. Your feedback is important, and It Matters to Molina.

Overpayment and Incorrect Payments Refund Requests

Information for all network providers

In the event Molina finds an overpayment on a claim or must recoup money, a letter requesting the refund may be mailed to the Provider.

The Provider has 60 days from the date of the refund recovery letter to:
  a. refund Molina by check, or an accounts receivable will be established, and the amount of the overpayment will be deducted from the provider's next check(s)
  b. dispute the recovery by:
     Fax at (888) 396-1517
     Mail at Molina Healthcare Cost Recovery Unit of OH
     Attn: Corporate Claims Recovery
     P.O. Box 2470
     Spokane, WA 99210-2470

All recovery activity will appear on your remittance advice. Use the Return of Overpayment Form, located on the Provider Website, under the "Forms" tab, to submit unsolicited refunds or check returns.

Questions?

Provider Services – (855) 322-4079
8 a.m. to 5 p.m., Monday to Friday
(MyCare Ohio available until 6 p.m.)

Email us at OHProviderRelations@MolinaHealthcare.com

Visit our Provider Website at MolinaHealthcare.com/OhioProviders

How to Join WebEx

To join WebEx, call (404) 397-1516 and follow the instructions. To view sessions, log into WebEx.com, click on "Join" and follow the instructions. Meetings passwords are case sensitive. For trouble connecting to a Molina training, email Molina at OHProviderRelations@MolinaHealthcare.com and we'll assist you with getting connected immediately.

Connect with Us

www.facebook.com/MolinaHealth
www.twitter.com/MolinaHealth

Join Our Email Distribution List

Get this bulletin via email. Sign up at MolinaHealthcare.com/ProviderEmail.

Provider Training Sessions

Monthly It Matters to Molina Provider Forum Topic: Cost Recovery Process/Submitting Corrected Claims

In the event the Provider incorrectly receives a check or finds an overpayment, please follow the steps defined in our Provider Manual, under "Overpayments and Incorrect Payments Refund Requests."

Note: Providers have 365 days from the date of recovery to submit a corrected claim.

Availity Portal Training
Information for all network providers

As a reminder, Molina has chosen Availity as its exclusive Provider Portal. Throughout 2021, Molina's Provider Portal, including all features, functionality and resources will transition to Availity. This will be a phased transition, with access to both the Molina Provider Portal and the Availity Portal being available as features and functionality are deployed on Availity's Portal. Providers who currently utilize Availity for Managed Care Plans already have access to Molina on Availity.

Once registered with Availity at www.availity.com, providers will have access to the Availity Portal training by following these steps:
1. Log in to Availity Portal
2. Select Help & Training > Get Trained
3. In the Availity Learning Center (ALC) that opens in a new browser tab, search the catalog and enroll for this title: *Availity Overview for Molina Providers - Recorded Webinar*

For questions about enrolling in courses email training@availity.com.

Atypical Providers: Once registered with Availity, under "News and Announcements" select "Atypical Providers: Here's your Ticket to Working with the Availity Portal" to view training sessions.

Payment for Vaccines Furnished by FQHC or RHC
Information for Medicaid and MyCare Ohio network providers

The Ohio Department of Medicaid (ODM) has published a Medicaid Advisory Letter (MAL) to provide clarification of when and how a Federally Qualified Health Center (FQHC) or Rural Health Center (RHC) may submit a claim to ODM for the administration of a vaccine, along with how payment is made when a vaccine is furnished by an FQHC or RHC. Molina Healthcare will follow ODM's guidance.

For additional information read the "MAL No. 655: Payment for Vaccines Furnished by a FQHC or RHC" document available on the ODM website at https://medicaid.ohio.gov, under "Resources" by selecting "Publications" then "ODM Guidance" and on the "Medicaid Policy" tab, under the "Medicaid Advisory Letter (MAL)" header.

Emailing PHI Securely
Information for all network providers

All emails that contain Protected Health Information (PHI) must be sent to Molina via a secure mail system. In order to email PHI securely:
- Follow your entity's secure messaging policies for drafting and sending messages
- Always review recipient's information before clicking "Send" to ensure the email is sent to the appropriate individual(s).
- Do not use PHI in the subject line of an email. Only the body of the email can be sent via secure transmission.
- Send the minimum required PHI to assist in identifying the issue.
- Do not send PHI to multiple health plans at the same time.

- Tues., March 30, 10 to 11 a.m., meeting number 177 648 0490, password JDppDpmr334

Quarterly Provider Orientation:
- Tues., May 18, 1 to 2 pm., meeting number 177 766 0069, password mxYzdX3fP54

To join WebEx, follow the instructions under "How to Join WebEx."

Notice of Changes to Prior Authorization (PA) Requirements
Information for all network providers

Molina posts new comprehensive PA Code Lists to our website quarterly. However; changes can be made to the lists between quarterly comprehensive updates. Always use the lists posted to our website under the "Forms" tab instead of printing hard copies. This practice ensures you are accessing the most up-to-date versions of Molina's PA requirements.

Notice of Changes to the Provider Manual
Molina posts a new comprehensive Provider Manual to our website semi-annually. However; changes can be made to the manual between comprehensive updates. Always refer to the manual posted on our website under the "Manual" tab instead of printing hard copies. This practice ensures you are accessing the most up-to-date versions of Molina's Provider Manual.

Did You Know?
Information for Medicare, MyCare Ohio Medicare and Marketplace Home Health providers

Did you know that as of Jan. 1, 2021, the Centers for Medicare and Medicaid Services (CMS) no longer issues up-front payment for Requests for Anticipated Payment (RAPs)? Molina aligned to this change.

Molina has updated the "Patient Driven Grouping Model (PDGM) FAQs" document, located on the MyCare Ohio Provider Website, under the "Manual" tab, on the "Quick Reference Guides & FAQs" page, and on the Medicare Provider Website, on the "Ohio" page, under the "Communications" drop-down menu.

CMS will still require Home Health providers to submit a RAP claim as part of consolidated billing edits. Molina will

Note: If you do not have a secure messaging system, please send Molina a non-secure email to request we reply with a secure email that can be used for further communication.

Provider Services Contact Page on Provider Website
Information for all network providers

Molina Provider Services has a contact page on the Provider Website to make it easier for providers to contact their Provider Services Representatives.

Visit the Provide Website, and under the "Contact Us" tab, select "Provider Services." You will find a list of designated email addresses based on provider types, including:

- Behavioral Health questions:
  BHProviderServices@MolinaHealthcare.com
- Hospital or hospital-affiliated physician group questions:
  OHProvider.ServicesHospital@MolinaHealthcare.com
- MyCare Ohio LTSS and Ancillary questions:
  OHMyCareLTSS@MolinaHealthcare.com
- Nursing Facilities questions:
  OHProviderServicesNF@MolinaHealthcare.com
- Physician practice questions:
  OHProviderServicesPhysician@MolinaHealthcare.com
- General questions:
  OHProviderRelations@MolinaHealthcare.com

2021 HEDIS® Data Collection
Information for all network providers

The Healthcare Effectiveness Data and Information Set (HEDIS®) from the National Committee for Quality Assurance (NCQA) is a tool used to report performance on quality of care and service. Molina started collecting this data in February. We appreciate your prompt response to requests.

Molina is required to collect and provide medical record documentation from our providers to fulfill state and federal regulatory and accreditation requirements. Health Insurance Portability and Accountability (HIPAA) regulations permit a covered entity (physician practice) to disclose protected health information (PHI) to another covered entity (health plan) without enrollees' consent for the purpose of facilitating health care operations.

Molina will reach out to providers via phone and fax with collection instructions and a corresponding member list. The following options are available for record submission:

- Providers may allow Molina Healthcare access to their Electronic Health Records (EHR) for quick access to records pertaining to the specific HEDIS® project
- Secure email, fax or mail
- An onsite visit by Molina; based on the volume of records

For EHR setup email RegionB_EMRSupport@MolinaHealthCare.com.

How to Access Your Molina Member Roster
Information for all network providers

Contracted Primary Care Providers (PCPs) are able to access a roster of Molina members who are assigned to their practice via the Provider Portal.

accept, but not require, RAP claims in order to issue payment for covered home health services. Billed RAP claims will pay zero with Remit 97, "The benefit for this service is included in the payment/allowance for another service/procedure that has already been adjudicated." Additionally, Molina will not apply CMS payment reduction for failure to submit timely RAP claims.

Pharmacists as Providers
Information for providers in the Medicaid and MyCare Ohio networks

As of January 17, 2021 OAC rule 5160-8-52 "Services provided by a pharmacist" is effective. Before pursing contracting for these services with Molina, pharmacists must have an active enrollment status with the ODM and a collaborative agreement in place with a physician in order to render eligible services. Details regarding eligible Evaluation and Management (E&M) codes are available on ODM's website.

LabCorp COVID-19 Testing

LabCorp has partnered with Walgreens and CVS to provide no-cost, drive-up COVID-19 testing in certain locations in Ohio.

Individuals who wish to get tested will need to visit the Walgreens or CVS website to confirm testing locations and to answer a few screening questions before having the ability to select a location and time for the COVID-19 testing appointment.

COVID-19 (Coronavirus) Updates

Molina would like to thank you for the care you provide to our members. Please view the COVID-19 (Coronavirus) page on our provider website under the "Communications" tab for additional COVID-19 information.

As a reminder, billing members for Personal Protective Equipment (PPE) or additional COVID-19-related charges during the COVID-19 pandemic falls under the Balance Billing restrictions. For additional details see the "Balance Billing" section of the Provider Manual.

PsychHub on Provider Website
Information for all network providers

A PCP <u>does not</u> need to be designated as a member's PCP to provide services to the Molina member.

Sign Up to Receive the Provider Bulletin via Email
Information for all network providers

Please email us at OHProviderBulletin@MolinaHealthcare.com with your Provider Name, Tax Identification Number (TIN) and email address to sign up for all pertinent Molina Provider Bulletins.

Routine Hospice Reimbursement Methodology Update
Information for hospice providers in the Medicaid network

In accordance with Ohio Department of Medicaid (ODM) Hospice policy, Ohio Administrative Code 5160-56-06, Hospice Services: reimbursement, (C)(1)(a), routine hospice care should be paid at a higher rate for the first 60 days of each hospice episode. Molina's system was not configured to apply this methodology consistently and is now being updated to ensure alignment with the ODM policy.

Molina's claim system must identify multiple episodes of routine hospice care when there is a date gap of 60 days or more between any benefit periods. The number of episodes of routine hospice care will be equal to the number of times there is a date gap of 60 days or more between benefit periods. If there are no greater-than-59-days gaps, the number of episodes would be 1 episode. If there is one greater-than-59-days gap, the number of episodes would be 2 episodes. If there are 4 greater-than-59-days gaps, there would be 5 episodes. If the recipient enters back into hospice and the gap in the benefit plan is 59 days or less, the prior episode end date is updated, and the reimbursement is at the lesser rate. If the recipient enters back into hospice and the gap in the benefit plan is 60 days or more, the prior episode end date is updated, and the reimbursement is at the higher rate.

Update: Molina Partnering with MCG Health
Information for all network providers

As of Feb. 1, 2021, Molina is partnering with MCG Health, a clinical criteria tool that specializes in informed clinical guidance for value-based care. <u>MCG will be replacing Interqual</u>. MCG clinical solutions include:
- Inpatient & Surgical Care Guidelines
- Behavioral Health Care Guidelines
- Home Care Guidelines
- Recovery Facility Care Guidelines
- And more

MCG Care Guidelines provide fast access to evidence-based best practices across the continuum of care, supporting clinical decision-making and documentation. Benefits of this partnership include:
- Effective healthcare with evidence-based care guidelines
- Standardized clinical criteria review process
- Improved Quality of Care

The adoption of these new guidelines will not affect the process for notifying Molina of admissions or for seeking PA approval. To learn more about MCG, visit www.mcg.com or call (888) 464-4746.

Molina members and providers now have access to PsychHub via our Provider Website. PsychHub is an online platform for digital mental health education, including a library with more than 180 consumer-facing, animated videos focused on improving mental health literacy and reducing stigma about seeking care.

Providers can sign up for free to access content and videos as well as have access to behavioral health focused learning hubs. Some courses have Continuing Education Credits available for Clinical Psychologists, Clinical Social Workers and Licensed Professional Counselors. With the successful completion of courses, the provider will unlock industry-recognized certificates delivered electronically.

If a provider wants to enroll in one of the online courses on the PsychHub Learning Hub, they can enter the Molina defined coupon code instead of paying the fee for the course. For more information reach out to your Provider Services Team.

Fighting Fraud, Waste & Abuse
Do you have suspicions of member or provider fraud? The Molina AlertLine is available 24 hours a day, 7 days a week, even on holidays at (866) 606-3889. Reports are confidential, but you may choose to report anonymously.