

New In This Issue

- [Inpatient Admission Notification Process Reminder](#)
- [NF Private Room Billing Guidance](#)
- [Access2Care Email Address Update](#)

- [YMTM: Get to Know Your Provider Relations Rep.](#)
- [UPDL: 30-Day Change Notice](#)
- [Drugs Carved Out: FFS](#)
- [Q4 Provider Newsletter](#)
- [ODM Coverage: COVID-19 At-Home Test](#)

Updated In This Issue

- [Live Provider Training Sessions](#)
- [Availity Authorizations Update Reminder](#)
- [Notice of Changes to the Provider Manual](#)

Inpatient Admission Notification Process Reminder

Info for Medicaid providers

Effective Jan. 1, 2025, Inpatient admission prior authorization requests should be submitted **within two business days** following the written order for inpatient admission and include the following supporting clinical documentation:

- Specific request for inpatient level of care**
- Practitioner order specifying the level of care requested
- Clinical notes resulting from a period of observation (48 hours)
- Reason for inpatient level of care
- Estimated length of stay

**Important Note: The receipt of hospital demographics in the absence of a specific prior authorization request for review of inpatient level of care and supporting clinical documentation will not prompt an inpatient review.

Some exceptions to this policy include:

- Member expires
- Member transferred to higher-level acute care facility
- Member admitted for dialysis and/or end-stage renal disease

For stays of two days or less, Molina Healthcare of Ohio, Inc., will review and consider these for observation level of care.

Reminder: Out-of-network services always require PA, including authorization for observation days.

Previous Policy:

- Molina does not require PA for Observation Services for network providers.

- Molina does not require admission notification for Observation Services for network Providers.

Nursing Facility Private Room Billing Guidance
Info for Medicaid providers

Molina will reimburse the add-on payment for private rooms at qualifying nursing facilities (NFs) in accordance with Ohio Administrative Code (OAC) [5160-3-163](#) Nursing facilities: private rooms.

Find additional information in the [Nursing Facility Fact Sheet Private Rooms](#) document on the Nursing Facility Ohio Department of Medicaid (ODM) page at [medicaid.ohio.gov](#) by selecting Enrollment & Support under the Resources for Providers header, then Provider Types and Nursing Facilities. Many additional resources and billing guidelines for Nursing Facilities are also available on this page.

Access2Care Email Address Update

Info for Medicaid and MyCare Ohio providers

Molina's Non-Emergent Medical Transportation vendor, Access2Care, has updated their email address.

Effective immediately, the new address for Access2Care is CareManagementteam@mtm-inc.net.

The Access2Care hours of operation and phone number have remained the same.

- Phone: (866) 282-4836
- Routine Hours: 7 a.m. to 7 p.m., Monday through Friday
- Urgent Hours: 24 hours a day, 7 days a week

Email address A2CCareCoordinatio@amr.net will no longer be monitored.

You Matter to Molina: Get to Know Your Provider Relations Representatives

Info for all network providers

Our Molina Provider Relations team is here to help answer your questions and connect you with training opportunities. Throughout 2025, we will introduce you to our team members and explain how to contact us directly for assistance.

Alexandrea (Alex) Grier, Provider Relations Representative for Home Health Agencies, Waiver (Long-Term Services and Supports [LTSS]), Laboratories, Ancillary Dialysis Centers and Durable Medical Equipment (DME):

- **My favorite thing to do:** I've had a passion for live music ever since I was little, going to concerts with my parents. I continue to share my love of music with my family and feel nothing but pure joy when I see my kids singing and dancing in a crowd.
- **Interesting fact:** I collect snow globes. I have over 30 in my collection. It started as travel keepsakes, but now our family collection has grown to include my kids' favorite characters and fun activities we've enjoyed together. My favorite is one that was gifted to me with my grandma's snowman holiday dishware.
- **Why I serve our Molina providers:** Being with the company for 10 years has allowed me to gain insight into many areas of Molina. When a provider is experiencing a challenge, I truly enjoy collaborating and using my extensive knowledge to investigate the root cause and take action to support positive outcomes for the provider. I take pride in following provider inquiries until the issue has been resolved because having positive relationships and impactful results to the provider network will ultimately benefit the members.
- **Available by email at:** OHMyCareLTSS@MolinaHealthcare.com

Andrea Williams, Provider Relations Representative for Hospital or Hospital-Affiliated Physician Group:

- **My favorite thing to do:** My favorite thing to do is spend time with my three-year-old son. He is so funny and sweet.
- **Interesting fact:** I love to travel and enjoy going to the beach as often as possible.
- **Why I serve our Molina providers:** Helping our Molina providers helps our members. Our members are near and dear to my heart, and

if I can help that cycle move smoothly, then I am honored to be here to help.

- **Available by email at:** OHProviderRelationsHospital@MolinaHealthcare.com

UPDL: 30-Day Change Notice

Info for all Medicaid providers

ODM posted their Ohio Unified Preferred Drug List (UPDL) 30-Day Change Notice on Dec. 1, for an effective date of Jan. 1, 2025. Find it at medicaid.ohio.gov/stakeholders-and-partners/phm.

Drugs Carved Out: Fee-for-Service

Info for Medicaid and MyCare Ohio providers

Based on ODM guidance, Lenmeldy and Beqvez are covered under the Ohio Medicaid Fee-for-Service (FFS) medical benefit, including coverage for Medicaid Managed Care enrollees.

Outpatient Hospital Setting

- The hospital submits all services, except for the medication, provided on the date(s) of service on an outpatient claim to Molina prior to submitting the medication claim to FFS.
- The hospital submits a **FFS outpatient claim** for the medication and only bills for drug acquisition charges on revenue code 631 with J3490 or J3590 and medication-specific National Drug Code (NDC).

Inpatient Hospital Setting

- The hospital submits an inpatient claim for the admission, except for the medication, to Molina prior to submitting the medication claim to FFS.
- The hospital submits a **FFS outpatient claim** for the medication and only bills for drug acquisition charges on revenue code 631 with J3490 or J3590 and medication-specific NDC.

Reminder: Regardless of the setting and the payer (FFS or Molina) Lenmeldy and Beqvez must be prior authorized through FFS.

Q4 Provider Newsletter

Info for all network providers

The [Q4 Provider Newsletter](#) is available on the Provider Website under the Communications tab. Articles include:

- 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
- Molina's Special Investigation Unit is Partnering with You to Prevent Fraud, Waste and Abuse
- Clinical Policy
- Provider Manual Updates

ODM Coverage of COVID-19 at-Home Test Kit *Info for all Medicaid providers*

Effective Jan. 1, 2025, Molina, following ODM guidance, will no longer cover at-home COVID-19 test kits. Find additional information in the [ODM MAL 675: K1034 COVID-19 At-Home Test Kit Coverage](#), located at [medicaid.ohio.gov](https://www.medicaid.ohio.gov) by selecting Policies & Guidance under Resources for Providers and then selecting Medicaid Advisory Letters (MALs).

Updated: Live Provider Training Sessions *Info for all network providers*

Molina is offering the chance to enter a monthly drawing for a prize! To enter, join a provider training and share your name and email.

You Matter to Molina Forums:

- Cost Recovery: Wed., Jan. 29, 11:30 a.m. to 12:30 p.m.
- Medicaid Incident Reporting: Thurs., Feb. 27, 2 to 3 p.m.

General Provider Orientation:

- Wed., Jan. 8, 10 to 11 a.m.
- Thurs., Feb. 6, 1 to 2 p.m.

Specialized Provider Orientation:

- Managed Long-Term Services and Supports (MLTSS): Tues., Jan. 21, 2 to 3 p.m.
- Claims and Billing Orientation: Fri., Feb. 21, 10 to 11 a.m.

Molina Dental Services Training:

- Wed., Jan. 29, 9 to 10 a.m.
- Thurs., Feb. 27, 11 a.m. to 12 p.m.

Availity Essentials Portal Training: Visit the Help & Training section on the portal or contact training@availity.com for training.

Updated: Availity Authorizations Update *Reminder*

Info for all network providers

On Nov. 16, 2024, Molina transitioned to new functionality in Availity Essentials (Availity) for authorizations.

Molina's sunset of the current Single Sign-On (SSO) Payer Space has been delayed. Molina will send a new communication when updates are available about the upcoming sunset.

As a reminder, the new Availity tools include:

- **Authorization Request:** Use an easy five-step form to request an inpatient or outpatient authorization. Verify if an authorization is required using the built-in Prior Authorization (PA) Lookup Tool. Create templates for your common request types to automatically populate information in your request.
- **Authorization Inquiry:** While Availity is the preferred method for authorization submission, you can view the results of authorization requests submitted outside of Availity. You can also inquire about the status of an authorization request submitted by another organization.
- **Authorization Dashboard:** Check the status of all your authorization requests and inquiries from one central location. View results based on your preferences with robust filtering and sorting options. For easy access, any incomplete authorization requests are automatically saved in the drafts tab to resume and submit later.

For additional training on Availity Essentials, visit the Help & Training section on the portal.

Updated: Notice of Changes to the Provider Manuals

Info for all network providers

Molina has updated our Provider Manuals for a Jan. 1, 2025, effective date.

- **Medicaid:** Molina has posted the [2025 Next Generation Molina Medicaid Provider Manual](#) and the [Significant Update by Chapter: 2025 Medicaid Provider Manual](#) document on the Medicaid Provider Website under the Provider Manual page on the Manual tab.
- **MyCare Ohio:** Molina has posted the [2025 MyCare Ohio Provider Manual](#) and the [Significant Update by Chapter: 2025 MyCare Ohio Provider Manual](#) document on the MyCare Ohio Provider Website under the Provider Manual page on the Manual tab.
- **Medicare:** Molina has posted the [Medicare Provider Manual](#) on the Medicare Provider Website under the Provider Manuals drop-down menu.

- **Marketplace:** Molina has posted the [Marketplace Provider Manual](#) on the [Marketplace Provider Website on the Forms and Documents page](#).

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.

Reminder: Molina posts new comprehensive Provider Manuals to our website semi-annually. However, changes can be made to the Manual between semi-annual updates. Always refer to

In Case You Missed It: View the complete articles on the Provider Bulletin page under the Communications tab of our Provider Website, under the identified month, noted in parentheses ().

- **Provider Authorization Appeal Extension of Timeframe:** Effective Jan. 1, 2025, Molina will allow 60 days for a provider to conduct a Prior Authorization Appeal (Pre-Claim). This is separate from a Member Appeal. ([December](#))
- **New Molina CES Edit: Facility Medicaid Modifier Not Appropriate:** Effective Jan. 1, 2025, based on guidance from CMS, an edit will fire when a facility claim is billed with an appended modifier that is not appropriate for a facility services or not appropriate for the code it has been appended to. ([December](#))
- **National Drug Code (NDC) Denials Reminder:** If your claim is denied for "missing/invalid NDC National Drug code" please review the NDC billed on your claim prior to submitting the dispute. Ensure the NDC is correct and valid for the HCPCs code you are submitting which is included on the claim. ([December](#))
- **Hospice Room and Board Payments Reminder:** Molina's Hospice Room and Board reimbursement methodology is aligned with OAC 5160-56-06 Hospice services: reimbursement for 95% of the Nursing Facility per diem rate. ([December](#))
- **New Molina CES Edit 9164:** As of Dec. 1, 2024, Edit 9164 will deny claims when the primary procedure code is found in the current claim line or claim lines in history for the same date of service or same patient encounter as the add-on procedure, and the claim line has a non-profile flag. ([November](#))
- **Procedure Codes T2042-T2045 Update:** Per ODM, procedure codes T2042-T2045 should only be billed to Ohio Medicaid for members who are not covered by Medicare. Based on ODM guidance, Molina will be requesting recoveries. ([November](#))
- **ODM Update:** Terminations have resumed for failure to complete Medicaid Agreement Revalidations in PNM: On Jan. 23, 2024, ODM began terminating providers who failed to complete their revalidation prior to their specified deadline. ([May](#))
- **PA Request:** The preferred method of PA submission is through Availity. Availity offers a more streamlined provider experience compared to faxing. Contact training@availity.com for training. Note: Using an older version of the PA request form may cause delays in processing. ([March](#))
- **Medicaid Enrollment Requirements:** Any provider, group ordering or referring who is not enrolled and noted as "active" in the ODM PNM system will receive denials for claims submitted to Molina. Claim denials will continue until the provider's Medicaid enrollment is noted as an "active" status. Providers who update their records after claims begin rejecting will need to submit corrected claims once the records are updated. Visit medicaid.ohio.gov for additional information. ([March](#))

<p><u>Questions and Quick Links</u> Provider Services: (855) 322-4079 Mon. – Fri. 7 a.m. to 8 p.m. for Medicaid, 8 a.m. to 6 p.m. for MyCare Ohio and 8 a.m. to 5 p.m. for Medicare and Marketplace • Email: OHProviderRelations@MolinaHealthcare.com • Provider Website: MolinaHealthcare.com/OhioProviders</p>	<p><u>Connect with Us</u> facebook.com/MolinaHealth x.com/MolinaHealth <u>Fighting Fraud, Waste and Abuse</u> Suspect member or provider fraud? The Molina AlertLine is available 24 hours a day, 7 days a week at (866) 606-3889. Reports are confidential but you may choose to report anonymously.</p>	<p><u>Join Our Email Distribution List</u> Did you receive this provider bulletin via fax? Sign up to receive the Provider Bulletin via email, or to request removal from our fax distribution list by clicking the Sign up to receive Molina's Provider Bulletin via email here link on the Provider Bulletin page of our website.</p>
---	--	---