



# Provider Newsletter

For Molina Healthcare of Ohio, Inc. providers

Third quarter 2024

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# SSI Claimsnet, LLC (SSI Group) is Molina's clearinghouse

SSI Group is Molina Healthcare, Inc.'s clearinghouse.

Submitting claims electronically through clearinghouses or the Availity Essentials portal offers many advantages. These include:

- Improved Health Insurance Portability and Accountability Act (HIPAA) compliance
- Reduced operational costs associated with paper claims (printing, postage, etc.)
- Increased accuracy of data and efficient information delivery
- Fewer claim delays since errors can be corrected and resubmitted electronically
- Claims reach Molina faster with the elimination of mailing time

**How to submit electronic data interchange (EDI) claims:** A clearinghouse is the easiest way to submit EDI claims to Molina. You may submit EDI transactions through Molina's gateway clearinghouse, SSI Group, or use a clearinghouse of your choice. Molina offers additional options for electronic claims submissions if you do not have a clearinghouse. Log onto the Availity Essentials portal at [provider.MolinaHealthcare.com](https://provider.MolinaHealthcare.com) for more information.



# Update provider data accuracy and validation

Providers must ensure Molina has accurate practice and business information. Accurate information allows us to better support and serve our members and provider network. Maintaining an accurate and current Provider Directory is a state and federal regulatory requirement and a National Committee for Quality Assurance (NCQA) requirement. Invalid information can negatively impact members' access to care, member/primary care provider (PCP) assignments and referrals. Additionally, current information is critical for timely and accurate claims processing. Providers must validate their information on file with Molina at least once every ninety (90) days for correctness and completeness.

Failure to do so may result in your REMOVAL from the Molina Provider Directory.

Provider information that must be validated includes, but is not limited to:

- Provider or practice name
- Location(s)/address(es)
- Specialty(ies)
- Telephone and fax numbers and email
- Digital contact information
- Whether your practice is open to new patients (PCPs only)
- Tax ID and/or National Provider Identifier (NPI)

The information above must be provided as follows:

- Delegated and other providers that typically submit rosters must submit a complete roster that includes the above information to Molina.
- Medicare and Marketplace providers must log into their CAQH account to attest to the accuracy of the above information for each health care provider and/or facility in your practice contracted with Molina. If the information is correct, please select the option to attest. If it is incorrect, providers can make updates through the CAQH portal. Providers unable to make updates through the CAQH portal should contact their Provider Services representative for assistance.
- Medicaid and MyCare Ohio providers must update their demographic information in the ODM Provider Network Management (PNM) system within 30 days of the change. Molina may require additional information not available in the PNM system.

Additionally, in accordance with the terms specified in your Provider Agreement, providers must notify Molina of any changes, as soon as possible, but at a minimum thirty (30) calendar days in advance, of any changes in any provider information on file with Molina. Changes include, but are not limited to:

- Change in office location(s)/address, office hours, phone, fax or email.
- Addition or closure of office location(s).
- Addition of a provider (within an existing clinic/practice.)
- Change in provider or practice name, Tax ID and/or NPI.
- Opening or closing your practice to new patients (PCPs only).
- Change in specialty.
- Any other information that may impact member access to care.



## Provider communication survey

At Molina, we constantly strive to enhance our services to meet your needs. Your input is invaluable in helping us achieve this goal. Please take a few minutes to participate in our survey, which aims to understand how we can improve our communication methods to suit your preferences better.

Your feedback will directly influence how we engage with you, ensuring a more seamless and efficient communication experience.



Click the link below to access the survey:

[MolinaHealthcare.surveymonkey.com/r/VS5RGTG](https://MolinaHealthcare.surveymonkey.com/r/VS5RGTG)

Thank you for your time and contribution in making Molina the best it can be for you and your patients.

## NPPES review for data accuracy

Your NPI data in the National Plan & Provider Enumeration System (NPPES) must be reviewed to ensure accurate provider data. Providers are legally required to keep their NPPES data current.

When reviewing your provider data in NPPES, please update any inaccurate information in modifiable fields, including provider name, mailing address, telephone and fax numbers and specialty. You should also include all addresses where you practice and actively see patients and where a patient can call and make an appointment. 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 must confirm it is accurate by certifying it in NPPES. Remember, NPPES has no bearing on billing Medicare fee-for-service. If you have any questions about NPPES, you may reference NPPES help at [NPPES.cms.hhs.gov](https://NPPES.cms.hhs.gov).

## Cultural competency resources for providers and office staff

Let's partner to achieve health equity. Refresher training on cultural competency is available to review communicating with diverse patient populations. These trainings allow you and your staff to better understand and address disparities to improve health care. As our partner, assisting you is one of our highest priorities.

We are committed to improving health equity as a culturally competent organization. We support and adhere to the [National Standards for Culturally and Linguistically Appropriate Services \(CLAS\) in Health and Health Care](#) as established by the Office of Minority Health. We also maintain compliance with accreditation standards focused on health equity.

# Cultural competency resources for your office and staff

## Molina's building culturally competent health care: Training for providers and staff

Cultural competency can positively impact a patient's health care experiences and outcomes. Five short cultural competency training videos are available to providers and office staff on the **Culturally and Linguistically Appropriate Resources/Disability Resources** page on the Health Care Professionals site under the **Health Resources** tab at [MolinaHealthcare.com](https://www.molinahealthcare.com).

### Training topics:

#### Module 1: Introduction to cultural competency

- The need for cultural competency
- How culture impacts health care
- Implicit bias
- Federal requirements related to cultural competency (Affordable Care Act, Americans with Disabilities Act)

#### Module 2: Health disparities

- Examples of racial health disparities and health disparities among persons with disabilities Health equity
- Social Determinants of Health

#### Module 3: Specific population focus – seniors and persons with disabilities

- Social model of disability and accepted protocol and language of the independent living/Disability Rights Movement

#### Module 4: Specific population focus – LGBTQ+ and immigrants/refugees

- Health disparities among LGBTQ+ population
- Clear communication guidelines for health care providers interacting with LGBTQ+ patients
- Disparities among immigrant and refugee communities
- Clear communication guidelines for health care providers interacting with immigrant and refugee patients

#### Module 5: Becoming culturally competent

- Perspective-taking
- Clear communication guidelines
- Tips for effective listening
- Assisting patients whose preferred language is not English
- Tips for working with an interpreter
- Teach-back method
- Molina's language access services

Each training video ranges in length from five to ten minutes. Viewers may participate in all five training modules or just one, depending on topics of interest. Upon completing the training, please complete the Cultural Competency Training Attestation form available on the Culturally and Linguistically Appropriate Resources/Disability Resources page on the Health Care Professionals site under the Health Resources tab at [MolinaHealthcare.com](https://www.molinahealthcare.com).

Please email the signed and dated Cultural Competency Training Attestation by Dec. 31, 2024, to [OHAttestationForms@MolinaHealthcare.com](mailto:OHAttestationForms@MolinaHealthcare.com). Contact your Provider Relations Representative if you have any questions.

Note: Providers have the option to utilize their own Cultural Competency training that meets the federal requirement.

## Americans with Disabilities Act (ADA) resources: Provider education series

A series of provider education materials related to disabilities is now available to providers and office staff on Molina's website. To review the materials, please visit Molina's **Culturally and Linguistically Appropriate Resources/Disability Resources** page on the Health Care Professionals site under the **Health Resources** tab at [MolinaHealthcare.com](https://www.molinahealthcare.com).

### Resources consist of the following educational materials:

#### Americans with Disabilities Act (ADA)

- Introduction to the ADA and questions and answers for health care providers (i.e., which healthcare providers are covered under the ADA; how does one remove structural communication barriers; funds available to assist with ADA compliance costs).

#### Members who are blind or have low vision

- How to get information in alternate formats such as Braille, large font, audio or other formats that members can use.

#### Service animals

- Examples of tasks performed by a service animal; tasks that do not meet the definition of a service animal; inquiries you can make regarding service animals and exclusions, charges or other specific rules.

#### Tips for communicating with people with disabilities and seniors

- Communicating with individuals who are blind or visually impaired, deaf or hard of hearing; communicating with individuals with mobility and/or speech impairments and communicating with seniors.

Please contact your Provider Relations Representative if you have any questions.

## Molina's language access services

Language access services ensure mutual understanding of illness and treatment, increase patient satisfaction and improve health care quality for patients with limited English proficiency. Molina ensures good communication with members by providing language access services. Providing language access services is a legal requirement for health care systems that receive federal funds; a member cannot be refused services due to language barriers. Molina provides the following services directly to members at no cost when needed:

- Written material in other formats (i.e., large print, audio, accessible electronic formats, Braille)
- Written material translated into languages other than English
- Oral and Sign language interpreter services
- Relay service (711)
- 24-hour Nurse Advice Line
- Bilingual/bicultural staff

Molina's materials are always written simply in plain language and at required reading levels. For additional information on Molina's language access services or cultural competency resources, contact Provider Services or visit [MolinaHealthcare.com](https://www.molinahealthcare.com).

# 2024 Molina Model of Care provider training

In alignment with requirements from the Centers for Medicare & Medicaid Services (CMS), Molina requires PCPs and key high-volume specialists to receive training about Molina's Special Needs Plans (SNP) Model of Care (MOC).

Find a list of the key high-volume/high-impact specialists in the Molina Healthcare of Ohio **Annual Mandatory D-SNP Medicare Model of Care Training** Provider Bulletin.

The SNP MOC is the plan for delivering coordinated care and care management to special needs members. Per CMS requirements, managed care organizations (MCOs) are responsible for conducting their own MOC training, which means multiple insurers may ask you to complete separate training.

MOC training materials and attestation forms are available on the **Medicare Provider Website**. The completion date for this year's training is Dec. 31, 2024.

If you have any additional questions, please contact your local Molina Provider Relations Representative at:  
**[OHAttestationForms@MolinaHealthcare.com](mailto:OHAttestationForms@MolinaHealthcare.com)**.





## Helping members in their language

Our health plan members speak many different languages.

As of late 2023, for Medicaid members, the majority of language translation requests were for Spanish, accounting for 62% of the total. This was followed by 8% for Nepali, 6% for Somali, 5% for Arabic, 2% each for Russian, French, Mandarin and Haitian Creole, and 1% each for Ukrainian and Swahili.

For Medicare members, Spanish had the highest volume of language translation requests at 58%, followed by 12% for Nepali, 10% for Vietnamese, 3% each for Korean, Mandarin, Arabic, Cantonese and Russian, 2% for Amharic and 1% for Bengali.

Among Marketplace members, 63% of the language translation requests were for Spanish, followed by 6% for Mandarin, 5% for Arabic, Uzbek and Vietnamese, 4% each for Russian and Haitian Creole and 1% each for French, Somali and Cantonese.

Lastly, for Medicare-Medicaid Plan members, 60% of the requests were for Spanish. This was followed by 7% for Russian, 6% each for Arabic, Nepali and Somali, 3% for Vietnamese and 1% each for Amharic, Mandarin, Gujarati and Cambodian.

Please contact Molina if you need assistance addressing the language needs of your patients. We also provide resources for providers.

## New Medicare benefit

**A 100-day supply of medications is now available.**

Molina Medicare Advantage members are now eligible\* to receive 100-day supplies of their medications as part of their insurance benefit for the same copay as their 90-day supply.

Recent studies have shown higher medication adherence rates across hypertension, diabetes and statin therapeutic classes for members utilizing 100-day pharmacy fills. Providers can improve overall health outcomes and STAR ratings by writing 100-day prescriptions for the applicable Rx categories and encouraging members to utilize this benefit.

The advantages:

- Maximize patients' health plan benefits
- Improve medication adherence
- Save the patient money (a 100-day supply is the same cost as a 90-day supply)
- Improve overall access to medications
- Enhance member experience

\*100-day medication refills are applicable for non-specialty and non-controlled substances in-network pharmacies.



## Clinical policy

Molina's clinical policies (MCPs) are located at [MolinaClinicalPolicy.com](https://MolinaClinicalPolicy.com). Providers, medical directors and internal reviewers use these policies to determine medical necessity. The Molina Clinical Policy Committee (MCPC) reviews MCPs annually and approves them bimonthly.

Medicaid Only: Molina of Ohio has Medicaid-specific clinical policies on our Medicaid Provider Website, on the [Molina Ohio Clinical Policy](#) page.

The Molina Clinical Policies accessible on the page are specific to Molina Healthcare of Ohio Medicaid only and can be used as a tool to guide providers in their medical decisions. Molina has established Molina Clinical Policies that function as one of the sets of guidelines for coverage decisions or determinations. Please know that these Molina Clinical Policies do not constitute plan authorization, nor are they an explanation of benefits.