

# **Provider Relations Post**

Brought to by: Washington Provider Relations Team

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# Don't forget open enrollment starts October 15!

# **2025 Product Preview: Washington Medicare**

Effective January 1, 2025, Molina Healthcare of Washington, Inc. (Molina) will no longer offer MAPD products in Washington State. This will impact 7,662 members currently enrolled in a Molina MAPD plan. Molina will continue to offer Dual Eligible Special Needs (D-SNP) products. This strategic decision allows Molina to concentrate on enhancing our D-SNP offerings. More information can be found on our website under Provider Communication at Washington Medicaid - Provider Notices

# **Provider Satisfaction Survey**

The 2024 Provider Satisfaction Survey was sent to randomly selected providers on September 12, 2024.

If you have received or do receive the survey, we ask that you please complete the survey as soon as possible. You may complete the survey by mail or online as detailed in the survey packet. On average, the survey takes approximately 15 minutes to complete. Survey responses are being accepted through Tuesday, December 10.

If you have any questions regarding this notification, please contact Molina Healthcare of Washington's Provider Call Center at (855) 322-4082 or locate your organization's Provider Relations Representative using our FAQ and Contact list.

# **Health Care Authority policy updates**

The Health Care Authority (HCA) has published new information regarding legislatively mandated Medicaid managed care rate increases authorized in the 2024 supplemental state operating budget. This includes increases in rates for July 2024 and January 2025.

#### Apple Health (Medicaid) billing guide updates

Effective October 1, 2024, the Health Care Authority (HCA) is publishing quarterly updates to many of the Apple Health billing guides. HCA is loading the revised billing guides as soon as they are finalized for publishing.

#### Telemedicine policy update

As of January 1, 2025, the teledermatology policy will end. If a provider would like to provide services via Store and Forward, HCA will continue to cover an E-consult. The policy will be updated on January 1, 2025. Dermatologists can provide a consultative service, or they can provide services directly to the client in-person or via telemedicine.

#### Acupuncture services change

Effective for dates of service on and after January 1, 2025, Apple Health (Medicaid) will begin covering acupuncture services for eligible clients aged 18 and older. For specific coverage, limitations, billing instructions, and billing guides will be updated to reflect these changes by January 1, 2025.

#### Chiropractic policy update/change

Effective January 1, 2025, chiropractic services will be covered for clients age 21 and over and billable on claim types physician and out-patient (J, F & M) including Code Description of Codes 98940 chiropractic manipulative treatment (CMT); spinal, 1-2 regions 98941 chiropractic manipulative treatment (CMT); spinal, 3-4 regions 98942 chiropractic manipulative treatment (CMT); spinal, 5 regions specific policies and limitations will be defined in Washington Administrative Code (WAC) and will be published in future HCA billing guides.

#### **Dental billing policy updates**

The ABCD/Mouth Matters billing guide instructs providers to bill CPT 99188 (fluoride varnish), CPT 99429 (Family Oral Health Education) and CPT 99499 (Periodic Oral Evaluation) with diagnosis code Z00.129. For clarification, any appropriate Z diagnosis code can be used to bill with the above procedures. This change is effective November 20, 2024.

#### Policy update/change- Breathalyzer test 82075

Effective January 1, 2025, HCA will cover Breathalyzer tests (CPT 82075) when medically necessary: six tests per client, per year. This policy pertains to physician claims only. Staff performing breathalyzers should be knowledgeable of collection, handling, recording, and storing procedures to ensure accuracy and reliability of the test results.

HCA Billing Guides, Fee Schedules and Policies can be found on the HCA Website at <a href="https://www.hca.wa.gov/billers-providers-partners/prior-authorization-claims-and-billing/provider-billing-guides-and-fee-schedules">https://www.hca.wa.gov/billers-providers-partners/prior-authorization-claims-and-billing/provider-billing-guides-and-fee-schedules</a>

# Molina policy updates and reminders

#### Delay in implementation of physician office laboratory testing policy

Molina of Washington will be delaying the implementation of the physician office laboratory testing (POLT) policy. This policy is undergoing further clinical review and will be implemented no earlier than January 1, 2025.

During this interim period, we ask that our providers continue to refer lab testing to in-network laboratory providers as appropriate.

#### **Provider administered drugs**

When providers bill for a provider-administered drug, they must use the correct CPT/HCPCS coding. All billing should include the 11-digit National Drug Code (NDC) number the manufacturer or labeler assigns to a pharmaceutical product and attaches to the product container at the time of packaging.

Please note the NDC must be on HCA's preferred drug list (PDL) at <a href="https://www.hca.wa.gov/billers-providers-partners/program-information-providers/apple-health-preferred-drug-list-pdl">https://www.hca.wa.gov/billers-providers-partners/program-information-providers/apple-health-preferred-drug-list-pdl</a>.

If there is no HCPCS available and it is appropriate to bill with an unlisted drug code (J3490, J3590, J7999), per HCA's billing guide and fee schedules, providers **must bill their actual acquisition cost for the drug**.

A copy of any manufacturer's invoices for all drugs (regardless of billed charges) must be maintained in the member's record and made available upon request. In addition, if a drug is noted on the PDL as being carved out for MCOs, providers must bill HCA directly.

Any claims paid for provider-administered drugs with incorrect coding, paid above acquisition cost, not on HCA's PDL, or for MCO carve-out drugs may be recovered through payment integrity reviews.



# **Apple Health Expansion for Adults**

Effective July 1, 2024, HCA has launched the Apple Health Expansion (AHE) for adults, providing health care coverage to adults with certain immigration statuses.

HCA planned to enroll up to 13,000 people into Apple Health Expansion for Adults across Washington. For more detailed information on enrollment, please visit the HCA announcement at <a href="https://www.hca.wa.gov/about-hca/news/announcements/apple-health-expansion-enrollment-cap">https://www.hca.wa.gov/about-hca/news/announcements/apple-health-expansion-enrollment-cap</a>

If a AHE member requires interpreter services, reach out to Molina to arrange these services. For additional details about this new program, visit the Apple Health Expansion page at <a href="https://www.hca.wa.gov/about-hca/programs-and-initiatives/apple-health-medicaid/apple-health-expansion">https://www.hca.wa.gov/about-hca/programs-and-initiatives/apple-health-medicaid/apple-health-expansion</a>

# **Model of Care certification**

In alignment with requirements from the Centers for Medicaid & Medicare Services (CMS), Molina Healthcare requires providers who care for Molina Dually Eligible Special Needs members to receive training about Molina Healthcare's Special Needs Plans (SNP) Model of Care (MOC). This training is a requirement for PCPs and key high-volume specialists including Psychiatry, OB/GYN, Hematology and Oncology. Per CMS requirements, Managed Care Organizations (MCOs) are responsible for conducting their own MOC training, which means you may be asked to complete separate trainings by multiple insurers.

MOC training materials and attestation forms are available at MolinaHealthcare.com/model-of-care-Provider Training. The completion date for this year's training is December 31, 2024. See upcoming training opportunities below.

If you have any additional questions, please contact your local Molina Provider Relations representative, or contact Provider Services at (855) 322-4082.



# **Provider seminars and trainings**

Molina training opportunities

**Lunch and Learn: Claims Reconsiderations and Appeals** we will be hosting a lunch-and-learn session on December 6, 2024, at 12:00 p.m. to 1:00 p.m. You can register for the lunch and learn using the link on the Provider Trainings webpage located under the Communications section on our website: <a href="Washington">Washington</a> Medicaid - Provider Trainings.

#### **Model of Care Provider Training**

To help providers, meet this contractual requirement we will be hosting a series of MOC Webinars. This training will allow attendees to get the required training and to have the attestation process completed at the end of the training. To register for the Model of Care Provider Training Series please use the link on the 'Provider Trainings' section of our website at Washington Medicaid - Provider Trainings.

#### **How to contact Molina**

The contact information below is intended to provide you, our valued provider, with contact information to assist you in caring for our members.

- Provider Services (855) 322-4082
- Provider Contracting (855) 322-4082
- Claims (855) 322-4082
- Visit our website at MolinaHealthcare.com/WA



