

**Provider Advisory Board- Q4 2024**  
**December 18, 2024 \* 1:00pm – 2:00pm**  
**Meeting Minutes**

<b>Committee Member Present</b>	<b>First Name</b>	<b>Provider/Group Affiliation-Title</b>
Alinejad, M.D., M.S., C.P.E.	Nima	MHNV Chief Medical Officer ( <i>Chair</i> )
Brown	Leslie	MHNV Director Provider Relations
Cooper	Sara	MHNV VP Network Management & Operations ( <i>Co-Chair</i> )
Fernandez	Cynthia	MHNV Network Operations & Management Admin Asst. (Transcriber)
Gahagan	Kimberly	MHNV AVP Growth & Community Engagement
Haeri, MD	Sina	Ouma Health
Hollister	Nicholas	MHNV Medical Director BH
Kamyar, MD	Farzad	HR Pregnancy
Plauth, MD	Bill	Renown Health CMO
Taylor-Campbell	Jennifer	Ouma Health
Toledo, MD	Robert	Desert Treatment
Ventrelle, Psy.D.	David	Nevada Behavioral Health Systems
Walters, MPH	Sydney	Northern Nevada Hopes
Wise, APRN, CNM, P	Shannon	Ouma Health
Yanez	Laura	NAMI Western Nevada- Exec. Dir.
<b>Committee Member Not Present</b>	<b>First Name</b>	<b>Provider/Group Affiliation-Title</b>
Fry	Cybil	MHNV VP Quality Improvement & Risk Adj
Kamyar, MD	Manijeh	HR Pregnancy
Lagorio	Annette	Renown- Supervisor
Wilcox	Valerie	MHNV Clinical Programs Manager Behavioral Health

	<b>Topic</b>	<b>Discussion</b>	<b>Action/Recommendation</b>
I.	Call to Order	Meeting called to order at 1:02 pm by Sara Cooper- VP, Network Management and Operations. No Quorum (no voting items)	
II.	Old Business	None currently.	
III.	New Business		
A.	Provider Type 93 Implementation	Dr. Hollister provided info on new provider type for substance abuse treatment under NV Medicaid implemented as part of 1115 waiver. Replaces provider type 17/171 and 17/215.	Reach out to Sara Cooper if you have more questions or need more info to be connected with the right teams.

		<ul style="list-style-type: none"> <li>- To align and support various levels of SUD with ASAM</li> <li>- Residential treatment for individuals 22-64 years</li> <li>- New subtext created for individuals and groups (refer to slide 3)</li> <li>- Individuals who can link to a PT 93 group (refer to slide 4)             <ul style="list-style-type: none"> <li>o Highlighted can be identified as a clinical supervisor. Initiate by contacting supervisor, to group, then to individual</li> </ul> </li> <li>- Pending final release of fee schedule and coding from State. Met with state yesterday.</li> <li>- PA Requirement. Expect to match State guidelines for incoming new codes.</li> <li>- Start date 1/1/25 and apply to members admitted on or after 1/1/25.             <ul style="list-style-type: none"> <li>o Members admitted prior to 1/1/25 will be reimbursed under schedule they were admitted.</li> </ul> </li> <li>- Any authorizations for members currently admitted by FFS will be honored. Additional authorizations will be required for any services after that date.</li> <li>- Providers must enroll as PT93 with State Medicaid</li> <li>- Required to recredential through Molina if not credentialed as PT17, which will rollover.</li> <li>- The process for member currently admitted under FFS: State will send TOC file to the receiving MCO which includes details and prior auth's. There might be a delay in transfer, so it is imperative to keep line of communication open.</li> <li>- For members switching to Molina from FFS receiving services that were approved under FFS.: Authorizations for current services that are submitted within 10 days of the facility/provider becoming aware of the member's switch to Molina will be reviewed as current authorization requests and go through our normal UM process. Anything for current/prior services that come after 10 days will be considered as a retroactive review and will undergo the claims appeal process. The retroactive review process can be applicable to services that were initiated within 90 days of the date of the start for the members coverage under Molina.</li> </ul>	
B.	Model of Care Training for Medicare Network Providers	New 2025 Model of Care Training will be kicking off soon. The following specialty types will receive a bulletin and are mandated to complete the training: PCPs, Cardiology, Neurology and Hematology/Oncology. All providers should complete the training attestation and send to <a href="mailto:NVProviderRelations@molinahealthcare.com">NVProviderRelations@molinahealthcare.com</a> . Please complete first quarter of 2025.	

C.	NPES Review	Review for data accuracy. Please keep CAQH profile and attestations current. Molina has begun recredentialing of providers and this is required.	
D.	Cultural Competency Training	Providers are contractually required to complete Cultural Competency Training annually and submit attestation to Molina. This applies to all providers contracted for all LOB. Providers are not required to complete the training offered by Molina but must complete attestation. Molina offers a five-module training available on Molina's website that has been approved by the State. This training may be used for other health plans as well.	
E.	You Matter Molina	<p>Molina's annual provider satisfaction results showed a score of 88.5% for question 16: Would recommend health plan to other physicians' practices?</p> <p>Five key areas to review for feedback</p> <ul style="list-style-type: none"> <li>- Claims/Finance</li> <li>- UM/Prior Auth</li> <li>- BH Network</li> <li>- Call Center</li> <li>- Provider Relations</li> </ul> <p><b>Have you seen issues with claims?</b> Responses:</p> <ul style="list-style-type: none"> <li>- Not using Availity.</li> <li>- Availity hasn't worked for this provider for 18 months despite meeting with them multiple times.</li> <li>-</li> </ul> <p><b>What suggestions do you have for improvement?</b> <b>Prior Auth Improvements?</b> Responses:</p> <ul style="list-style-type: none"> <li>- Won't do visits that require a PA</li> <li>- Separate prior auth's.</li> <li>- For cardiac Cath's.</li> <li>- Shannon Wise- Recently had asthmatic member needing more than albuterol. Requesting a list of medication that Molina requires a prior auth.</li> </ul>	<p>Reach out to Dr. Alinejad and/or Sara if you have any other questions or concerns.</p> <p>Dr. Alinejad and Leslie will provide Shannon with list of medications.</p> <p>Leslie Brown will research state provider types and connect with Dr. Haeri.</p>

		<ul style="list-style-type: none"> <li>- Dr. Haeri. Question on lactation consultant which in an accredited IDCLC and accepted in all other plans accept Molina. They have not been able to get a clear concise answer.</li> <li>-</li> </ul> <p><b>Improvements around network and BH Network</b>  <i>Seeing decrease in response time.</i>            Response:</p> <ul style="list-style-type: none"> <li>- Helpful to have resources of local NV Psychiatrists. Is there a document that is available with local psychiatrists who are accepting new patients for telehealth collaboration of care in higher acuity cases identified.</li> </ul> <p><b>Call Center Improvement</b>            Survey showed satisfaction decrease.            Where have you seen issues with the Call Center?            What suggestions do you have for improvement?</p> <p><b>Provider Relations Team?</b>            Have a Provider Relations representative been assigned to practice?            What have you seen issues with the Provider Relations?  <b>What suggestions do you have for improvement?</b>            Response:            2025 Improvements for Molina overall.</p>	Sara Cooper will follow up.
F.	NAMI Training	Very robust online and in-person calendar of events.	
G.	Feedback and Future Advisory Board Topics	Meeting invitations for 2025 have been sent out. In addition, payment for attending the quarterly meetings will be sent out through COUPA or MHNV Procurement. If you have not submitted the requested paperwork from COUPA or MHNV Procurement, please reach out to <a href="mailto:Cynthia.fernandez@molinahealth.com">Cynthia.fernandez@molinahealth.com</a> for assistance.	
IV. Open Discussion		None currently.	

V. Meeting Adjourned		Meeting adjourned at 1:45 pm.  Future Meetings 2025: <ul style="list-style-type: none"><li>• March 1</li><li>• June 18</li><li>• September 17</li><li>• December 17</li></ul>	

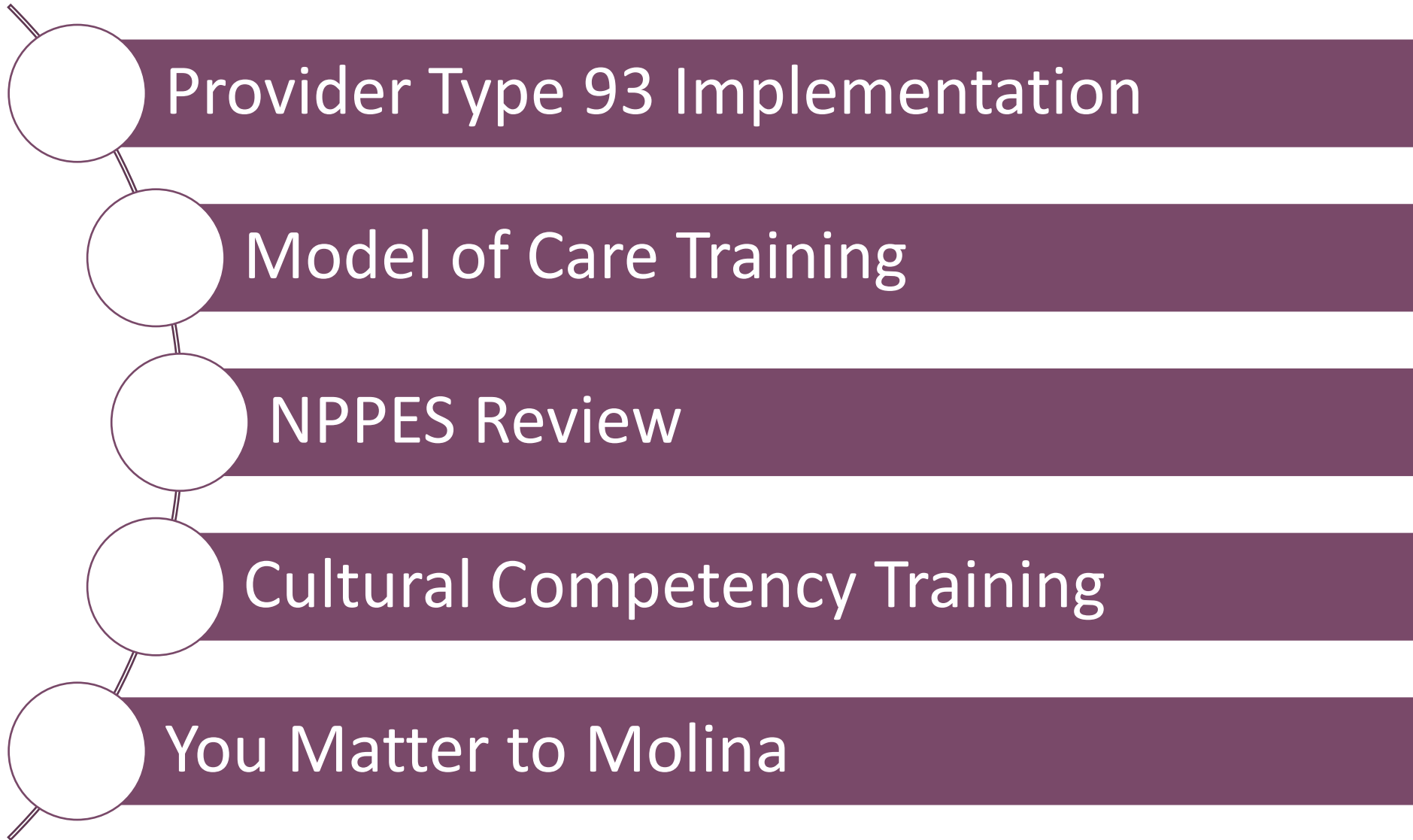
# Molina Health Plan of Nevada Provider Advisory Board

Q4 Meeting

December 18, 2024



# Agenda



## Provider Type 93 Substance Use Treatment Overview

### What is it?

- Implemented as part of the 1115 waiver to enhance data collection
- Replaces provider type 17/171 (methadone) and 17/215 (SUAM)

### What does it do?

- Enhances access to a broad range of SUD treatment levels in line with ASAM
- Allows for residential SUD treatment at an IMD for individuals 22-64 yo
- Develops new provider specialties

### Individuals

- 701 - CADC
- 702 - LADC
- 703 - CADC-I
- 705 - LCADC-I
- 706 - PRSS
- 709 - LCADC

### Groups

- 704 - SUT in an IMD
- 707 - SUT Clinic
- 708 - Opioid Treatment Program



## Provider Type 93 Substance Use Treatment Overview

### Individuals who can link to a 93 group

- 93/701 - CADC
- 93/702 - LADC
- 93/703 - CADC-I
- 93/705 - LCADC-I
- 93/706 - PRSS
- 93/709 - LCADC
- 91 - Pharmacist
- 14/305 - LCSW
- 14/306 - LMFT
- 14/307 - CPC
- 20 - Physician
- 74 - Nurse Midwife
- 77 - Physician Assistant
- 26 - Psychologist
- 24 - Advanced Practice Registered Nurse
- 14/300 - Behavioral Health Outpatient Treatment
- 82/300 - Behavioral Health Rehabilitative Treatment

\*Highlighted types can be approved as clinical supervisors

## Provider Type 93 Substance Use Treatment Overview

### What do you need to know?

- Fee schedule and coding is pending final release from the state
- PA requirements are not changing
- Start date is 1/1/2025
- Must enroll as PT93 with state Medicaid
- PT17 (171/215) will roll over automatically for Molina credentialing
- Members currently admitted will require an updated PA

## Annual Model of Care Training

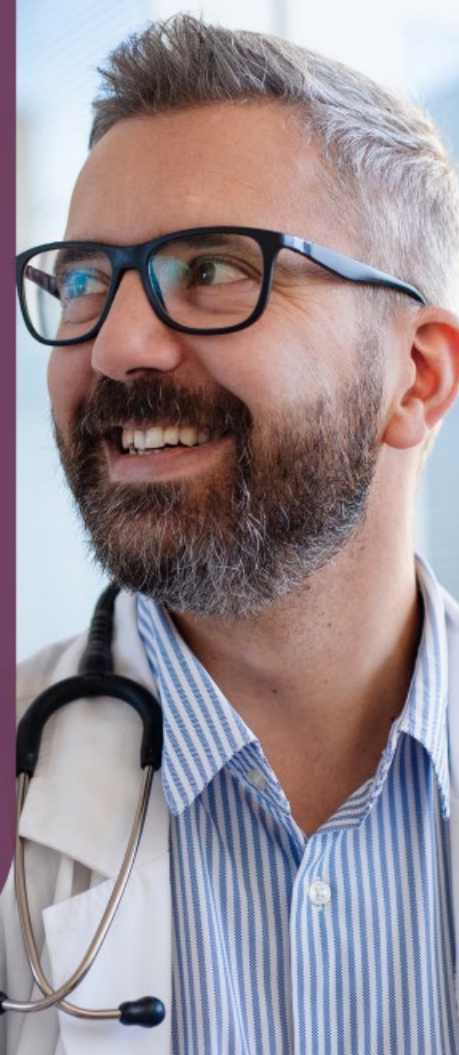
### Model of Care training is underway

Molina Healthcare, Inc. requires primary care providers (PCPs) and key high-volume specialists, including cardiology, hematology and oncology to receive training about Molina's Special Needs Plans (SNP) Model of Care (MOC), in alignment with requirements from the Centers for Medicare & Medicaid Services (CMS).

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 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](https://MolinaHealthcare.com/model-of-care-Provider_Training). The completion date for this year's training was due on December 31, 2024.

If you have any additional questions, please contact your local Molina Provider Relations representative at **(833) 685-2103**.



### 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://www.cms.gov/nppes).

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# Cultural Competency Training

## 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 provider 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/NV](https://www.molinahealthcare.com/NV). Please contact your Provider Services Representative if you have any questions.

# You Matter to Molina – Provider Satisfaction Survey






Composites, Attributes and Key Questions Report Card	2024		2023		2022		2023 PG Aggregate BoB	Percentile Ranking (Aggregate BoB)
	Valid N	Summary Rate	Valid N	Summary Rate	Valid N	Summary Rate		
<b>Overall Satisfaction</b>								
Q16. Would recommend health plan to other physicians' practices (% Yes)	96	88.5%	118	89.0%	112	92.0%	88.1%	59th

## We will review 5 key areas for your feedback

- Claims/Finance
- UM/Prior Auth
- BH Network
- Call Center
- Provider Relations










# You Matter to Molina – Provider Satisfaction Survey

Composites, Attributes and Key Questions Report Card	2024		2023	
	Valid N	Summary Rate	Valid N	Summary Rate
<b>Finance Issues</b>	<b>102</b>		<b>114</b>	<b>39.3%</b>
Q9A. Consistency of reimbursement fees with your contract rates	98		114	36.8%
Q9B. Accuracy of claims processing	99		112	40.2%
Q9C. Timeliness of claims processing	98		112	41.1%
Q9D. Resolution of claims payment problems or disputes	95		105	39.1%

1. Where have you seen issues with claims?
2. What suggestions do you have for improvement?








# You Matter to Molina – Provider Satisfaction Survey

Composites, Attributes and Key Questions Report Card	2024	
	Change	Summary Rate
<b>Utilization and Quality Management</b>		<b>30.5%</b>
Q10A Access to knowledgeable UM staff		29.0%
Q10B Procedures for obtaining pre-certification/referral/authorization information		27.0%
Q10C Timeliness of obtaining pre-certification/referral/authorization information		27.3%
Q10D Health plan's facilitation/support of appropriate clinical care for patients		27.8%
Q10E Access to Case/Care Managers from this health plan		28.6%
Q10F. Degree to which the plan covers and encourages preventive care and wellness		43.5%

1. Where have you seen issues with prior auth?
2. What suggestions do you have for improvement?








# You Matter to Molina – Provider Satisfaction Survey

Composites, Attributes and Key Questions Report Card	2024	
	Change	Summary Rate
<b>Network/Coordination of Care</b>		<b>28.8%</b>
Q11A. Number of specialists in the network		27.6%
Q11B. Quality of specialists in the network		32.6%
Q11C. Timeliness of feedback/reports from specialists		26.3%
Q11D. Number of BH providers in the network		23.6%
Q11E. Quality of BH providers in the network		29.6%
Q11F. Timeliness of feedback/reports from BH providers		25.0%






1. Where have you seen issues with the BH network?
2. What suggestions do you have for improvement?

# You Matter to Molina – Provider Satisfaction Survey

Composites, Attributes and Key Questions Report Card	2024	
	Change	Summary Rate
<b>Health Plan Call Center Service Staff</b>		<b>37.1%</b>
Q13A Ease of reaching health plan call center staff over the phone		30.6%
Q13B Process of obtaining member information		48.5%
Q13C Helpfulness of health plan call center staff in obtaining referrals for patients in your care		31.9%
Q13D Overall satisfaction with health plan's call center service		37.4%

1. Where have you seen issues with the call center?
2. What suggestions do you have for improvement?


# You Matter to Molina – Provider Satisfaction Survey










Composites, Attributes and Key Questions Report Card	2024	
	Valid N	Summary Rate
<b>Provider Relations</b>		<b>44.6%</b>
Q14. Have a Provider Relations representative assigned to practice (% Yes)		54.2%
Q15A Provider Relations representative's ability to answer questions and resolve problems		52.3%
Q15B Quality of provider orientation process		40.2%
Q15C Quality of written communications, policy bulletins, and manuals		41.2%

1. Where have you seen issues with the Provider Relations?
2. What suggestions do you have for improvement?

# NAMI Training Calendar

- Advocacy
- Culture & Faith
- Discussion Groups
- Education Classes
- NAMI Basics
- NAMI Connection
- NAMI ETS
- NAMI FaithNet
- NAMI Family & Friends
- NAMI Family Support Group
- NAMI Family-to-Family
- NAMI Homefront
- NAMI IOOV
- NAMI Peer-to-Peer
- NAMI Sharing Your Story with Law Enforcement
- NAMI Smarts
- Presentations & Seminars
- Wellness

< > This Month December 2024 

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4 6:00 pm - 7:30 pm  NAMI Connection (Weekly In-Person) 6:00 pm - 7:30 pm  NAMI Family Support Group (Weekly In-Person) 6:00 pm - 7:30 pm  Youth Support Group/Activities + 1 More	5 6:00 pm - 7:30 pm  NAMI Connection Weekly Thursdays Online	6	7
8	9	10 6:00 pm - 7:30 pm  NAMI Family Support Group (2nd Tuesdays; Online)	11 6:00 pm - 7:30 pm  NAMI Connection (Weekly In-Person) 6:00 pm - 7:30 pm  Youth Support Group/Activities 6:00 am - 7:30 am 	12 6:00 pm - 7:30 pm  NAMI Connection Weekly Thursdays Online	13	14

## Mental Health Education - NAMI Southern Nevada

# Feedback and Future Advisory Board Topics



# Thank you!

2025 Schedule will be sent out with invites by Cynthia Fernandez

