

Next Generation Medicaid Program: OhioRISE Implementation Quick Reference Guide

Information for Medicaid providers

Effective July 1, 2022, the OhioRISE (Resilience through Integrated Systems and Excellence) program will be launched for eligible Medicaid members. General program information and billing guidance are available under the sub-headers that follow. As updated information is available, Molina Healthcare will communicate additional details to our provider network promptly via updating this reference guide.

OhioRISE Program Description and Eligibility

OhioRISE is a specialized Medicaid managed care program that focuses on children and youth who have complex behavioral health (BH) and multisystem needs. Children and youth who are eligible for OhioRISE will receive their BH benefits through Aetna Better Health of Ohio, the plan selected for the OhioRISE program. Their physical health coverage will be provided by their managed care organization (MCO) or fee-for-service (FFS) Medicaid.

Children and youth who may benefit from OhioRISE:

- Have multiple needs that result from BH challenges,
- Have multisystem needs or are at risk for deeper system involvement, and/or
- Are at risk of out-of-home placement or are returning to their families from out-of-home placement.

Children and youth with multisystem needs often require help and services from community systems, which may include education, developmental disabilities, child protection, juvenile justice, mental health and addiction, and others.

Children and youth who may be eligible for OhioRISE:

- Are eligible for Ohio Medicaid (either managed care or fee-for-service),
- Are ages 0-20,
- Are not enrolled in a MyCare Ohio plan, and
- Require significant BH treatment, measured using the Ohio Child and Adolescent Needs and Strengths (CANS) assessment.

Children and youth may also be eligible for OhioRISE due to certain urgent conditions. For example, if a child or youth is in a hospital for BH conditions.

Enrollment timeframes:

- There will be a group of “Day One” prioritized children who are enrolled in OhioRISE effective July 1, 2022. The OhioRISE plan or a care management entity (CME), which are contracted by the OhioRISE plan, will be making outreach to these members before July 1.
- Eligibility after “Day One” can occur any day during the month.

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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

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- Submission of the Ohio Children’s Initiative CANS assessment in the state’s CANS IT system will determine whether the child or youth is eligible for OhioRISE enrollment.
- In urgent cases, enrollment into OhioRISE will be:
 - The date of admission for an inpatient hospital stay for mental illness or substance use disorder (SUD), or
 - The date of admission into a Psychiatric Residential Treatment Facility (PRTF).

How to check a Molina member’s enrollment in OhioRISE

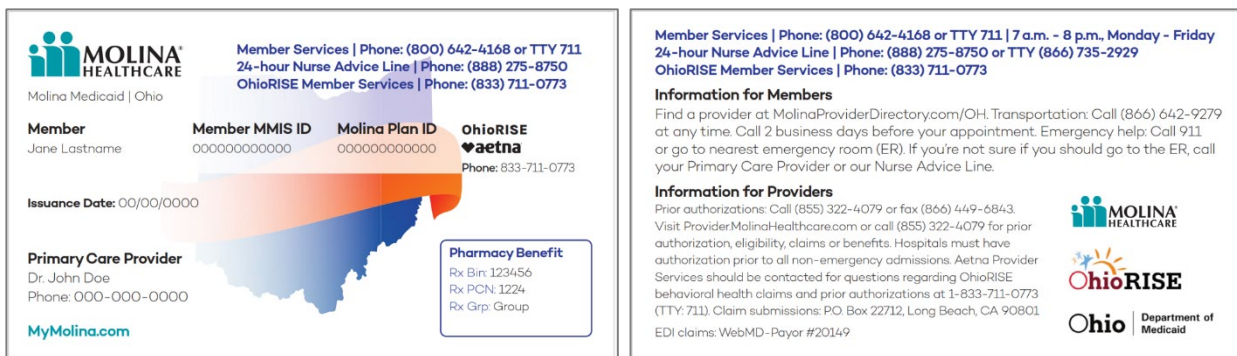
Providers have a few options to check a Molina member’s enrollment in OhioRISE:

- Access the Provider Portal at your convenience: provider.molinahealthcare.com/provider/login
 - The benefits program description will be displayed in the Provider Portal as “ABD OhioRISE,” “Adult Extension OhioRISE,” or “Healthy Families OhioRISE” and will show eligibility status once the provider populates the “as of date.”
- Access eligibility information in the Ohio Medicaid Information Technology (MITS) system.
- Contact the Ohio Department of Medicaid (ODM) Interactive Voice Response (IVR) system 24/7 at (800) 686-1516 to confirm eligibility.
- Check batch eligibility via a 270/271 EDI transaction.
- Contact Molina Provider Services at (855) 322-4079.

To ensure payment, Molina strongly encourages providers to verify eligibility at every visit and especially before providing services that require authorization.

OhioRISE member information

Upon enrollment in OhioRISE, members will receive a welcome letter from the OhioRISE plan, and a new member identification (ID) card from Molina reflecting their OhioRISE eligibility. Below is a sample image of a Molina and OhioRISE member ID card. OhioRISE ID cards will include the OhioRISE name and Aetna logo on the front of the card and the OhioRISE member services phone number and OhioRISE logo on the back of the card. A member’s participation in the Coordinated Services Program (CSP) will be reflected on the ID card.



Please visit Aetna’s website at aetnabetterhealth.com/ohiorise for information regarding member benefits.

How to contact Aetna Better Health of Ohio, the OhioRISE plan

- OhioRISE Member Services phone number on and after June 1, 2022: (833) 711-0773 (TTY: 711)
- For contract requests for Aetna Better Health OhioRISE email OHRISE-Network@Aetna.com

Who and how to bill for services

Aetna OhioRISE Payer ID: 45221

Overall billing guidance for **OhioRISE enrolled members** has been provided by ODM. Reference the [OhioRISE Mixed Services Protocol](#) at managedcare.medicaid.ohio.gov, under “Learn About Managed Care,” by selecting “OhioRISE (Resilience through Integrated Systems and Excellence),” then “Resources for Community Partners and Providers,” and “4. OhioRISE Mixed Services Protocol.”

- Molina will process Medical claims only for OhioRISE-enrolled members for dates of service (DOS) on and after July 1, 2022. Please reference the linked Mixed Services Protocol and note the below additional guidance:
 - General outpatient hospitals must split the bill for Molina. BH services are to be billed to OhioRISE, and any medical services, such as laboratory or vaccines, must be billed to Molina.
 - BH emergency room claims must be billed to Molina.
 - The provider should bill Molina for the CANS assessment (if completed before or on the same day of OhioRISE enrollment.) All other BH services performed on the day of enrollment should be billed to OhioRISE. CANS assessments should be billed to OhioRISE after the program enrollment date. Starting July 1, 2022, H2000 is the only code that can be billed for a CANS assessment (brief or comprehensive). If the assessment takes more than one day, the DOS for billing purposes is the date it was completed and should be billed one time per assessment. NOTE: With the exception of hospitals, rendering providers must have the “ORC-CANS Assessor” specialty added to their Medicaid provider enrollment to bill this service. Hospitals billing for CANS assessments must have the “ORC-CANS Assessor” specialty added to their Ohio Medicaid enrollment.
 - Mobile Response Stabilization Services (MRSS) should be billed to Molina until the effective date of OhioRISE enrollment. From the OhioRISE enrollment date and forward, the MRSS services are billed to the OhioRISE plan. NOTE: Billing providers must have the “ORM-Mobile Response and Stabilization Service” specialty added to their Medicaid provider enrollment to bill these services.
- Claims sent to Molina in error will pay \$0 and redirect providers to submit to OhioRISE. Providers will receive CARC 301 and RARC N216 for these denials.

Please refer to the [OhioRISE Provider Enrollment and Billing Guidance](#) document or contact Aetna OhioRISE directly for more detailed billing guidance and technical assistance with claim submission. Find the OhioRISE Provider Enrollment and Billing Guidance document at managedcare.medicaid.ohio.gov, under “Learn About Managed Care,” then “OhioRISE (Resilience through Integrated Systems and Excellence),” and “Resources for Community Partners and Providers.”

Additional Resources

Visit managedcare.medicaid.ohio.gov/managed-care/ohiorise for information on this program and access to recorded and upcoming training sessions.

Visit [Mobile Response Stabilization Services \(MRSS\) | Department of Mental Health and Addiction Services \(ohio.gov\)](#) at mha.ohio.gov by selecting “Community Partners,” then “Early Childhood, Children and Youth,” and “Mobile Response Stabilization Services” for additional information on these services.

Visit the [Ohio Department of Medicaid Manuals and Rates \(ohio.gov\)](#) site at bh.medicaid.ohio.gov/manuals to access the most current BH Provider Manual.

Email OHBehavioralHealthReferrals@MolinaHealthcare.com if you require assistance initiating a CANS assessment.

Visit [Resources for Community Partners and Providers | Ohio Medicaid Managed Care](#) for important OhioRISE information, including Ohio Administrative Code rule summaries, billing guidance, educational and member materials, and more. Find the site at managedcare.medicaid.ohio.gov, under “Learn About Managed Care,” then “OhioRISE (Resilience through Integrated Systems and Excellence),” and “Resources for Community Partners and Providers.”

View the upcoming Molina Provider Manual with CANS and MRSS access standards, to be posted by July 1, 2022, on the Provider Website at MolinaHealthcare.com, under the “Manual” tab.