

# Fall 2016 Provider Newsletter



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## Molina Healthcare's 2016 HEDIS® and CAHPS® Results

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is a survey that assesses Molina members' satisfaction with their health care. It allows us to better serve our members.

Molina Healthcare has received results of how our members scored our providers and our services.

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Your Extended Family.

**Medicaid:** In 2016, Molina Healthcare showed improvement with members getting the care they needed. We still need to improve on the rating of our personal doctors, how well our doctors communicate with members as well as the rating of our overall healthcare.

**Marketplace:** In 2016, Molina Healthcare scored well with providing access to care for members, care coordination, and how well doctors communicate with members. We need to improve in plan administration functions, such as the ease of filling out forms and the explanation of the forms.

**MMP:** In 2016, Molina Healthcare improved on rating of health care quality and rating of health plan. We also demonstrated improvement with getting appointments and care quickly, getting needed prescription drugs, and getting needed care.

Another tool used to improve member care is the Healthcare Effectiveness Data Information Set or HEDIS®. HEDIS® scores allow Molina Healthcare to monitor how many members are receiving the services they need. Measures include immunizations, well-child exams, Pap tests and mammograms. There are also scores for diabetes care, and prenatal and after-delivery care.

**Medicaid:** In 2016, Molina Healthcare improved the HEDIS® measures related to HbA1c testing and monitoring diabetic members for nephropathy. We need to improve on making sure our diabetic members receive an eye exam and maintain their HbA1c levels below 8. We also need to improve on helping members control high blood pressure, cervical cancer screenings and well child visits.

**Marketplace:** In 2016, Molina Healthcare met the goal for HbA1c testing and nephropathy screening for members with diabetes. We need to improve our performance on cervical cancer screenings and eye exams for members with diabetes.

**MMP:** In 2016, Molina Healthcare performed well on the antidepressant medication management (continuation phase), follow-up after hospitalization for mental illness (within 7 days of discharge), and diabetes care nephropathy monitoring measures. We need to improve our performance on breast cancer and colorectal cancer screenings. In addition, we will need to improve on some diabetes measures (eye exam and hemoglobin A1c control).

You can look at the progress related to the goals that Molina Healthcare has set for the annual CAHPS® survey results and the annual HEDIS® measures in more detail on the Molina Website. You can also view information about the QI Program and print a copy if you would like one. Please visit the provider page on Molina's website at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com).

[MolinaHealthcare.com](http://www.MolinaHealthcare.com)

# Molina Healthcare's Special Investigation Unit Partnering With You to Prevent Fraud, Waste, and Abuse

The National Healthcare Anti-Fraud Association estimates between three and ten percent of the nation's health care costs, or \$96 to \$320 billion, is lost to fraud, waste, and abuse. That's money that would otherwise cover legitimate care and services for the neediest in our communities. To address the issue, federal and state governments have recently passed a number of laws, including required audits of medical records against billing practices. Molina Healthcare, like others in our industry, must comply with these laws and proactively ensure that government funds are used appropriately. Molina's Special Investigation Unit (SIU) aims to safeguard Medicare and Medicaid, along with Marketplace funds.

## You and the SIU

The SIU analyzes providers by using software that identifies questionable coding and/or billing patterns, along with issues involving medical necessity. As a result, providers may receive a notice from the SIU if they have been identified as having outliers that require additional review. If your practice receives a notice from the SIU, please cooperate with the notice and any instructions provided. Should you have questions, please contact your Provider Services Representative.

"Molina Healthcare appreciates the partnership it has with providers in caring for the medical needs of our members," explains Mary Alice Garcia, the Molina Associate Vice President who heads up the SIU. "Together, we share a responsibility to be prudent stewards of government funds. It's a responsibility that we all should take seriously because it plays an important role in protecting programs like Medicare and Medicaid from fraudulent activity."

Molina appreciates your support and understanding of the SIU's important work, and we hope to minimize any inconvenience the SIU audit might cause you and/or your practice.

To report potential fraud, waste, and abuse, you may contact the Molina AlertLine toll-free at (866) 606-3889. In addition, you may use the service's website to make a report at any time at <https://MolinaHealthcare.AlertLine.com>.



[MolinaHealthcare.com](https://MolinaHealthcare.com)

# 2016 Flu Season

The Advisory Committee on Immunization Practices (ACIP) continues to recommend annual influenza vaccinations for everyone who is at least 6 months of age and older. It's especially important that certain people get vaccinated, either because they are at high risk of having serious flu-related complications or because they live with or care for people at high risk for developing flu-related complications.

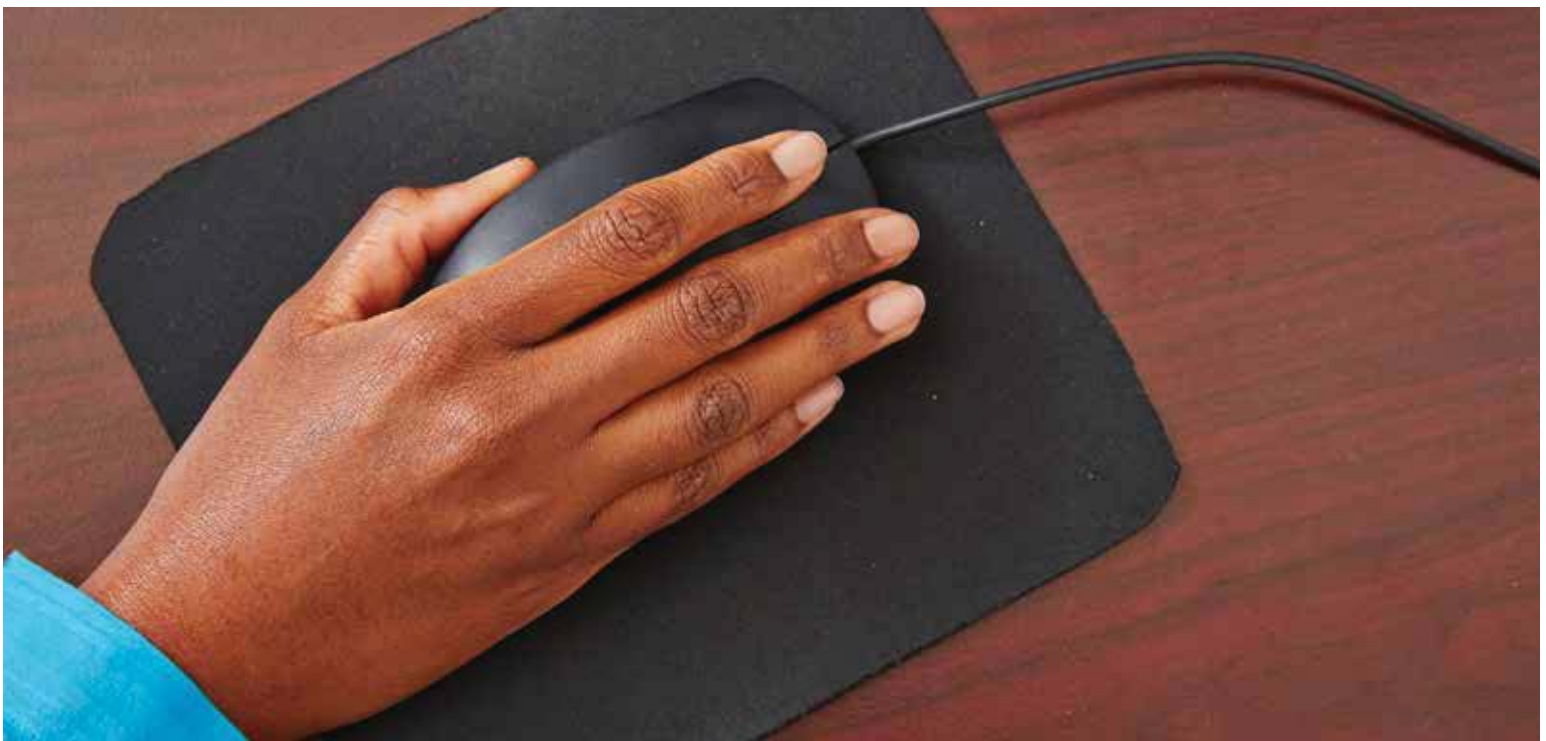
## **Important Updates:**

- Do not use the live attenuated influenza vaccine (LAIV) during the 2016-2017 flu season.
- Remove the FluMist from the vaccines for the Children Program.
- Providers should consider observing all patients for 15 minutes after vaccination.
- Patients with a history of severe allergic reaction to egg should receive their vaccine in an inpatient or outpatient medical setting, under the supervision of a health care provider.

For a complete copy of the ACIP recommendations and updates or for information on the flu vaccine options for the 2016 flu season, please visit the Centers for Disease Control and Prevention at <http://www.cdc.gov/flu/professionals/vaccination/>.

## Provider Web Portal

Visit the Provider Web Portal today and avoid unnecessary calls to Member Services. You can obtain information related to claims, eligibility verification, benefits clarification, and much more. Contact Provider Services to request training.



[MolinaHealthcare.com](http://MolinaHealthcare.com)

# Updating Provider Information

It is important for Molina Healthcare of Ohio (Molina Healthcare) to keep our provider network information up to date. Up to date provider information allows Molina Healthcare to accurately generate provider directories, process claims and communicate with our network of providers. Providers must notify Molina Healthcare of changes in writing at least 30 days in advance when possible, such as:

- Practice name change
- A change in practice address, phone or fax numbers
- Change in practice office hours
- New office site location
- Primary Care Providers Only: If your practice is open or closed to new patients (If PCPs choose to close their panel to new Members, Molina Medicare must receive 30 days advance notice from the Provider.)

Changes should be submitted on the Provider Information Update Form located on the Molina Healthcare website at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com) under the Provider Forms section.

Send changes to:

Email: [MHOProviderUpdates@MolinaHealthcare.com](mailto:MHOProviderUpdates@MolinaHealthcare.com)

Fax: (866) 713-1893

Mail: Molina Healthcare of Ohio

P.O. Box 349020

Columbus, OH 43234

ATTN: PIM

Contact your Provider Services Representative at (855) 322-4079 if you have questions.

## MEDICARE ONLY: Important Reminder about Member ID Cards

Most Members have Molina Medicare in addition to Medicaid coverage. For this reason, it's important to always ask the Member to show you both ID Cards at the time of service.

### Advantages:

- Shows that the Member is dually eligible
- Identifies who to bill; primary and secondary insurance
- Avoids Member complaints about incorrect member billing, which is prohibited by CMS/Medicare
- Tells you who to contact if prior authorization is required

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