PROVIDER BULLETIN
A bulletin for the Molina Healthcare of Ohio provider networks

PCP Assignment and Changes
Information for providers in the Medicaid and MyCare Ohio networks

The Ohio Department of Medicaid (ODM) requires all members be assigned to a Primary Care Provider (PCP). Members are always encouraged to choose their PCP. However, if a PCP is not selected, Molina Healthcare must assign one.

A member's PCP is listed on his or her ID card. A PCP can see a member with no impact to claims, even if the provider is not the assigned PCP. However, if the PCP on the ID card is incorrect, we ask you to encourage the member to have it updated.

Member Request for PCP Change: If a member wants to change PCPs, he/she may call Member Services at (800) 642-4168 or log on to MyMolina.com for self-services. PCP changes are permitted every 30 days. Most PCP changes are effective the first day of the month after the request. New ID cards are sent to members who change PCPs.

Automated PCP Change Process: Members who have an office visit with a PCP who is not their assigned PCP will fall into an automated enrollment process with that PCP if both the following are satisfied:
1. Member has two consecutive visits to PCP/practice in 12 months
2. PCP fulfills requirements to accept the member as a new patient

Schedule of PCP Reassignment: Automatic reassignment occurs on the second Tuesday of the second month of every quarter to be effective the first day of the third month of each quarter.

Billing MMP Enrollees for Medicare Cost Sharing Prohibited
Information for providers in the MyCare Ohio network

Molina Healthcare providers must not bill and/or collect any Medicare cost-sharing amounts from MyCare Ohio members, including deductibles, coinsurance and copayments that may be represented on the Explanation of Payment (EOP). They are not the member's responsibility. Known as "balance billing," this practice is prohibited by federal law and as stipulated under your Provider Services Agreement.

Patients with the following ID card are Molina Dual Options MyCare Ohio Medicare-Medicaid Plan (MMP) members:

In This Issue

Questions?
Provider Services – (855) 322-4079
8 a.m. to 5 p.m., Monday to Friday
(MyCare Ohio available until 6 p.m.)

Connect with Us
OHProviderRelations@ MolinaHealthcare.com
www.facebook.com/MolinaHealth
www.twitter.com/MolinaHealth

Join Our Email Distribution List
To learn how to receive this bulletin via email or view our bulletin archives, visit www.MolinaHealthcare.com/ Providers/OH and click "Provider Bulletin" in the "Communications" tab.

Website Roundup
Recently updated at www.Molina Healthcare.com/Providers/OH:
- Preferred Drug List Updates
- Dental Provider Manual

Clear Coverage™ Training
Start using Clear Coverage™ to reap the benefits of an authorization system that may provide an automatic decision.

To learn more, join the next training session, also available on mobile devices.

Fri., July 15 from 9 to 10 a.m., Meeting *Number*: 807 593 297
Fri., Aug. 19 from 9 to 10 a.m., Meeting *Number*: 803 503 811

1. Go to http://molina.webex.com.
2. Enter the meeting number.
3. If asked, enter name and email.
4. Give your number for a call back.
5. Follow the instructions.

Request an on-site training by emailing OHProviderRelations@ MolinaHealthcare.com.

The Provider Bulletin is a monthly newsletter distributed to all network providers serving beneficiaries of Molina Healthcare of Ohio Medicaid, Medicare, MyCare Ohio and Health Insurance Marketplace health care plans.

To learn more, refer to our Provider Manual at www.MolinaHealthcare.com/Providers/OH under the "Manual" tab.

Corrected Claims or EOBs from the Primary Insurance
Information for providers in all networks

Corrected claims and claims being resubmitted with coordination of benefits information that are submitted as reconsiderations will be returned. These requests must be submitted through the corrected claim process. Find the Corrected Claim Billing Guide at www.Molina Healthcare.com/Providers/OH under the "Forms" tab.

ODM Behavioral Health Redesign
Information for providers in the Medicaid and MyCare Ohio networks

Effective Jan. 1 2017, as part of the Behavioral Health Redesign, the Ohio Department of Medicaid (ODM) will require rendering providers on claims for Medicaid community behavioral health services. All provider organizations of this type must have all applicable rendering practitioners registered with Medicaid and linked to their organization through the Medicaid Information Technology System (MITS) portal before Jan. 1.

Visit http://mha.ohio.gov and select "MITS Claims Processing" under the "Funding" tab for updates.

Annual Mandatory SNP Model of Care Training
Information for providers in the Medicare network

The Centers for Medicare and Medicaid Services (CMS) requires all contracted medical providers complete a basic training about the Special Needs Plan (SNP) Model of Care by Dec. 31, 2016.

Face-to-Face Training: Your Provider Relations Representative can give the training to you and your staff in person and answer questions.

Online Training: Visit www.MolinaHealthcare.com/Providers/Common/Medicare. Under "Compliance Training," select "2016 Model of Care Provider Training."

After reviewing the training, open and sign the "2016 Model of Care Provider Training Attestation" or sign the form on the next page.

If one provider is willing to sign off for a group or clinic, you must attach an excel spreadsheet of all the providers in the clinic/group and include the provider name, clinic/practice, method sent, date sent, attestation received date, state and TIN. You must also list the meeting date on which the providers were trained.

Fax it to (866) 713-1894, ATTN: Latanya Powell or email it to OHProviderRelations@MolinaHealthcare.com.

Evaluation and Management Billing Guidelines
Information for the Medicaid and MyCare Ohio networks

Payment can be made for both a well visit and sick visit for the same member on the same date of service if the diagnosis codes billed support the need for both services. The well visit must be billed with modifier 25.

Health Care Coding Tips
Molina Healthcare has posted Health Care Coding Tips to www.Molina Healthcare.com/Providers/OH under the "Health Resources" tab.

The tips provide information on coding and documentation rules applied by the Centers for Medicare and Medicaid Services (CMS) to help providers identify codes and document patients' health statuses.

Fighting Fraud, Waste & Abuse
Do you have suspicions of member or provider fraud? The Molina Healthcare AlertLine is available 24 hours a day, 7 days a week, even on holidays at (866) 606-3889.

Reports are confidential, but you may choose to report anonymously.

MODEL OF CARE TRAINING CONFIRMATION CY 2016
Centers for Medicare and Medicaid Services (CMS) – mandatory requirement

Molina Healthcare is required to provide annual training to our care network regarding its Model of Care program. The Model of Care is the architecture for Molina Healthcare's care management policy, procedures and operational systems. Please sign this form as evidence of your training on the Molina Healthcare Model of Care.

Thank you for your immediate response and cooperation. This training requirement is mandated by CMS and must be performed annually.

Please fax this signed and dated form to (866) 713-1894, ATTN: Latanya Powell or email a signed copy to OHProviderRelations@MolinaHealthcare.com.

I have received and reviewed the written materials for the SNP Model of Care training.

Print Provider Name:

Print Clinic/Practice Name:

Group Tax Identification Number:

Signature:

Date:

State: