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**PATIENTS' MEDICAID RENEWAL DEADLINE  
MAY BE SOON**

It may be time for your Medicaid and MyCare Ohio patients to renew their Medicaid eligibility. For your patients to keep their Medicaid and MyCare Ohio health benefits, they have to report their income to the County Department of Job and Family Services (CDJFS/JFS) every 12 months.

The Ohio Department of Medicaid (ODM) mailed letters to 350,000 Ohio Medicaid recipients informing them that if they do not verify their household income, therefore redetermining their eligibility for Medicaid, their Medicaid benefits will be terminated. *Tens of thousands* of Ohioans could lose their health care benefits if they do not report their income.

Last year, the renewal process was suspended in order to focus on Medicaid expansion and the launch of [benefits.ohio.gov](http://benefits.ohio.gov). As a result, many of your Medicaid or MyCare Ohio patients are likely unfamiliar with the renewal process, and Molina Healthcare is increasing outreach efforts to inform these members. Please remind your Medicaid and MyCare Ohio patients of the importance of reporting their income to their local county JFS office. Your patients who have already redetermined their Medicaid eligibility in the past 12 months do not have to go back to their county JFS office. To find contact information for JFS offices listed by county, visit [www.jfs.ohio.gov](http://www.jfs.ohio.gov) and click on "County Directory."

If you or your patients have any questions about Medicaid redetermination, call your county JFS office.

**CLEAR COVERAGE™ CORNER****Automatic Approval**

That's right; Clear Coverage™ will automatically approve many services, as long as the appropriate criteria are met. Start using Clear Coverage™ today to get automatic approval for these services:

- Outpatient hospital/ambulatory surgery center (ASC) procedures
- Imaging: CT, MRI, MRA, PET, SPECT, cardiac nuclear studies, CT angiograms, intimal media thickness
- Genetic Counseling and testing not related to pregnancy
- Durable medical equipment, orthotics and prosthetics

**Questions?**

Call Provider Services  
(855) 322-4079 – 8 a.m. to 6 p.m.  
Monday through Friday

**Connect with Us**

[ItMatters@MolinaHealthcare.com](mailto:ItMatters@MolinaHealthcare.com)  
[www.facebook.com/MolinaHealth](http://www.facebook.com/MolinaHealth)  
[www.twitter.com/MolinaHealth](http://www.twitter.com/MolinaHealth)

**Join Our Email Distribution List**

To receive this bulletin via email, contact [ProviderServices@MolinaHealthcare.com](mailto:ProviderServices@MolinaHealthcare.com) to send us your:



- group name
- TIN
- service location address
- contact name
- contact phone number
- email

**Website Roundup**

The following [Medicaid Provider Manual](#) sections have been updated for 2015:

- [Credentialing](#)
- [Health Care Services](#)
- [Quality Improvement](#)

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

- Clinical and preventive guidelines
- Disease management programs
- Quality Improvement programs
- Member rights and responsibilities
- Privacy notices
- Claims/denials decision information
- Provider manuals
- Utilization management affirmative statement and how to obtain copies of utilization management criteria

**Provider Spotlight**

Congrats to **Family Healthcare of Northwest Ohio** and **UC Physicians CO LLC**, winners of Molina Healthcare gift baskets in the monthly Clear Coverage™ and Web Portal drawings!

**Telemedicine**

New for 2015, telemedicine will be reimbursable by Molina Healthcare for evaluation and management (E&M) services as well as psychiatric services.

- Physical, occupational and speech therapy
- Office-based surgical procedures for podiatry
- Wound therapy including wound vacs
- Sleep studies, outpatient setting
- Outpatient psychiatry services (ABA, ECT, individual and group outpatient sessions)
- Behavioral health: neuropsychological testing
- Pain management procedures

Clear Coverage™ is available on the Molina Healthcare [Provider Web Portal](http://www.MolinaHealthcare.com) at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com). Contact your Provider Relations representative for training.

## DEPRESSION IN PRIMARY CARE

**Major Depressive Disorder** is the most common psychiatric illness with a lifetime prevalence of **16.6 percent** in the U.S. Patients are more likely to seek care from their primary care provider than a mental health professional, so it is important to recognize and provide appropriate treatment for this serious illness. This disorder remains undertreated, leading to poorer behavioral and medical outcomes, including higher cardiovascular risk.

The Patient Health Questionnaire (PHQ-9) is a simple, reliable instrument used to screen for and diagnose depression. It is also helpful for monitoring depression severity over the course of treatment. For this and other tools, visit [http://www.cqaimh.org/stable\\_toolkit.html](http://www.cqaimh.org/stable_toolkit.html).

Treatment involves a combination of counseling and antidepressant medication. Please ensure adequate dose and duration of treatment. Your patients should remain on the antidepressant for at least 12 weeks in acute-phase treatment and for six months for continuation-phase treatment.

We can provide Care Management services to assist with chronic behavioral health and medical conditions. To refer a member to this free service, call **(855) 322-4079**.

**MyCareOhio**  
*Connecting Medicare + Medicaid*

## WEB PORTAL UPDATE

Molina Healthcare's Provider Web Portal has recently been upgraded. Now, providers will have the ability to submit a corrected or voided claim directly through the Web Portal. Also, to allow faster claim submissions, providers can now add more than six claim lines, create and save claim templates, and submit all claims in a single batch.

Providers can continue to use the Web Portal to verify member eligibility, check claims status, run a claims report, view HEDIS® scores and PCP roster, and submit and check

Providers eligible for reimbursement are physicians (MD/DO), licensed psychologists, physician offices, Rural Health Clinics, Federally Qualified Health Centers, and outpatient hospitals. Home, inpatient hospital, nursing facility, and inpatient psychiatric hospitals place of service are restricted for an originating site payment, and home is also not acceptable for a distant site.

All current place of service restrictions for E&M and psychiatric codes apply. For complete billing instructions, see OAC 5160-1-18.

## ICD-10 Implementation Update

The new ICD-10 compliance date is Oct. 1, 2015, requiring HIPAA-covered entities to continue use of the ICD-9 code set through Sept. 30, 2015.

While Ohio Medicaid will not be accepting the ICD-10 code set until the new effective date of Oct. 1, 2015, it will continue preparation for ICD-10 by:

- Modifying systems for new date
- Continuing remediation and testing activities as originally planned, including external testing for entities participating starting June 2014
- Updating the Ohio Administrative Code (OAC)
- Revising external outreach and internal training plans

The third ICD-10 Transition Information for Providers and Staff (TIPS) has been posted to the Ohio Department of Medicaid (ODM) ICD-10 Web Page. It is located under the section on the web page called "ICD-10 TIPS (Billing Guidance)". The third ICD-10 TIPS focuses diagnosis codes on dental claims for dental providers.

Monitor updates at

<http://medicaid.ohio.gov/providers/billing/icd10>.

## 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, and even on holidays at (866) 606-3889. Reports are confidential, but you may choose to report anonymously.

status of prior authorizations.