

“It Matters to Molina” Corner

Information for all network providers

Thank you for the wonderful response to the “It Matters to Molina” January question! Our monthly winner is Lori Salisbury from Community Action Committee of Pike County.

The “It Matters to Molina” January question was: In a previous Molina Healthcare Provider Bulletin we discussed Molina’s partnership with the Council for Affordable Quality Healthcare (CAQH) to improve the accuracy of provider directory information. Excluding Provider Types 84/95, what are three ways a provider can update information?

- a. CAQH ProView®
- b. Sending a letter to Molina
- c. Filling out the Provider Information Update Form
- d. Selecting the “Report data change in the Provider Directory” on the Provider Portal

The correct answer was: a, c and d

January Question: In a previous Provider Bulletin Molina noted that the Molina member identification cards will have a new design for 2020. What are the two changes?

- a. ID cards will be now be plastic
- b. ID cards will be now be paper
- c. ID cards will be in color instead of black and white
- d. ID cards will have information only on one side of the ID card

Please email your answer and contact information by Feb. 14 to OHProviderBulletin@MolinaHealthcare.com to be entered into the February drawing. The correct answer and drawing winner will be announced in the March Provider Bulletin. In addition to participating in the monthly drawings, we want to hear from you. Please take time to share feedback with us about your experience working with Molina. Your feedback is important, and It Matters to Molina.

ODM DEA DATA 2000 Waiver Trainings

Information for all network providers

To help address the opioid crisis in the State of Ohio, the Ohio Department of Mental Health and Addiction Services (OhioMHAS) is offering free Drug Enforcement Administration (DEA) DATA 2000 waiver trainings through April 2020.

This is a free 1.5-day training open to all physicians, nurse practitioners and physician assistants who hold an Ohio license and a current DEA number. Physicians who attend the 1.5-day training, obtain their waiver and fulfill reimbursement criteria will receive \$1,300. Nurse practitioners and physician assistants who attend the 1.5-day training, complete an additional online component, obtain their waiver and fulfill reimbursement criteria will receive \$750. All attendees will also receive free Continuing Medical Education (CMEs).

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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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Provider Training Sessions

Information for all network providers

Monthly It Matters to Molina Provider Forum Topic: Long-Term Care (LTC) Molina is hosting a Question and Answer (Q&A) forum on long-term care to discuss recent and upcoming changes for providers and gather recommendations from providers on ways Molina can reduce administrative burden for LTC providers.

- Thurs., Feb. 27, 12:30 to 1:30 p.m.
meeting number 801 142 629

Monthly Provider Portal Training:

- Mon., Feb. 17, 11 a.m. to 12 p.m.
meeting number 804 265 409
- Wed., March 25, 9 to 10 a.m.
meeting number 803 952 702

Monthly Claim Submission Training:

- Day 1: American Society of Addiction Medicine (ASAM) provides waiver training
- Day 2: Focus on implementation of Medication-Assisted Treatment (MAT) into practice that includes a waived physician speaking on MAT implementation and answering questions, an OhioMHAS training officer providing information on Screening, Brief Intervention and Referral to Treatment (SBIRT) and motivational interviewing, and a local provider will present referral to treatment and available resources in the area

To register for available training dates visit www.asam.org and under “Education” select “Live & Online CME” then “[Ohio DEA DATA 2000 One-and-a-Half-Day Waiver Trainings](#)” and “[Option 1: Free One-and-a-Half-Day Live Trainings](#).”

2020 HEDIS® Data Collection

Information for all network providers

The Healthcare Effectiveness Data and Information Set (HEDIS®) from the National Committee for Quality Assurance (NCQA) is a tool used to report performance on quality of care and service. Molina will collect this data starting Feb. 3, 2020. We appreciate your prompt response to requests.

Molina is required to collect and provide medical record documentation from our providers to fulfill state and federal regulatory and accreditation requirements. Health Insurance Portability and Accountability (HIPAA) regulations permit a covered entity (physician practice) to disclose protected health information (PHI) to another covered entity (health plan) without enrollees’ consent for the purpose of facilitating health care operations.

Molina will reach out to providers via phone and fax with collection instructions and a corresponding member list. The following options are available for record submission:

- Fax, mail or secure email
- An onsite visit by Molina; based on the volume of records
- Providers may allow Molina Healthcare access to their Electronic Health Records (EHR) for quick access to records pertaining to the specific HEDIS® project.

For EHR setup email RegionB_EMRSupport@MolinaHealthCare.com.

Molina Quality Living Program Awardees

Information for all network providers

Molina is proud to announce the most recent quarter’s performance for nursing facilities in the Molina Quality Living Program.

Platinum Level	Gold Level	Silver Level
Bethany Village	Crowne Pointe Care Center	Friends Care Community
		Garden Manor Extended Care Facility
	Pinnacle Point Nursing Rehab	Judson Care Center
		Terrace View Garden

About the Molina Quality Living Program: This program recognizes and awards nursing facility partners that meet or exceed select Centers for Medicare and Medicaid Services (CMS) quality measures when providing care to Molina MyCare Ohio members in custodial care.

- Wed., Feb. 12, 10 to 11 a.m. meeting number 801 897 563
- Tues., March 17, 3 to 4 p.m. meeting number 807 497 168

Quarterly Provider Orientation:

- Fri., Feb. 28, 11 a.m. to 12 p.m. meeting number 809 645 718

To join WebEx, call (866) 499-0396 and follow the instructions. To view sessions, log into WebEx.com, click on “Join” and follow the instructions. Meetings do not require a password.

Notice of Changes to Prior Authorization (PA) Requirements

Molina posts new comprehensive PA Code Lists to our website quarterly. However; changes can be made to the lists between quarterly comprehensive updates. Always use the lists posted to our website under the “Forms” tab instead of printing hard copies. This practice ensures you are accessing the most up-to-date versions of Molina’s PA requirements.

Notice of Changes to the Provider Manual

Molina posts a new comprehensive Provider Manual to our website semi-annually. However; changes can be made to the manual between comprehensive updates. Always refer to the manual posted on our website under the “Manual” tab instead of printing hard copies. This practice ensures you are accessing the most up-to-date versions of Molina’s Provider Manual.

Did You Know?

Information for all Medicaid and MyCare Ohio providers

Did you know on Jan. 1, 2020, Molina posted a new “Prior Authorization Request Form and Instructions” on our provider website? Changes include:

- The new Molina Medicare D-SNP line of business
- The addition of eviCore for select outpatient utilization management services

The “Prior Authorization Request Form” contains a list of services that require prior authorization. Providers can find a more detailed list of required codes in the Molina PA Code

Chimeric Antigen Receptor (CAR) T-Cell Therapy

Information for all Medicare network providers

On Sept. 6, 2019, the Centers for Medicare and Medicaid Services (CMS) announced that Chimeric Antigen Receptor (CAR) T-cell transfer immunotherapy for selected patients with relapsed or refractory cancers are covered under Original Medicare Fee-for-Service. Medicare Advantage beneficiaries that meet the criteria will also be covered by Original Medicare through Dec. 31, 2020. Medicare Advantage plans will begin to cover the benefits starting on Jan. 1, 2021.

Hospitals may submit claims to Original Medicare for payment as indicated under the CMS Medicare Learning Network (MLN) Reference Number: SE19024. For additional information visit www.cms.gov and under "Outreach & Education" select "Medicare," under "Look up topics" and "Medicare Learning Network® (MLN) Homepage" followed by "MLN Matters Articles" and "2019" to read "[SE19024 Billing Instructions for Beneficiaries Enrolled in Medicare Advantage \(MA\) Plans for Services Covered by Decisions Memo CAG-00451N.](#)"

Unified Preferred Drug List

Information for all Medicaid network providers

As of Jan. 1, 2020, all Ohio Medicaid managed care plans (MCPs), in partnership with ODM, prefer the same medications and use the same prior authorization (PA) criteria for all drug categories on the Unified Preferred Drug List (UPDL). Throughout the course of 2020, prescribers may need to transition certain patients from their current medication(s) or complete a PA for the patient to stay on his/her current medication(s).

Molina's Over-The-Counter (OTC) and Durable Medical Equipment (DME) list of products are covered for Medicaid members under the pharmacy benefit.

On Jan. 1, 2020, Molina began to prefer the following insulin syringes and pen needles. All brands not listed below will reject as not covered.

- Arkray – TechLITE insulin syringes and pen needles
- Trividia – TRUEplus insulin syringe and 5-Bevel pen needles

New Prior Authorization Requirements through eviCore

Information for all network providers

On Jan. 1, 2020, eviCore began to manage PA requests for the following specialized clinical services, effective for dates of service (DOS) on or after Jan. 1, 2020:

- Imaging and Special Tests
 - Advanced Imaging (MRI, CT, PET, non-OB Ultrasounds)
 - Cardiac Imaging
- Radiation Therapy
- Sleep Covered Services and Related Equipment
- Molecular and Genomic Testing

Molina has created an eviCore Frequently Asked Questions (FAQ) to assist providers with questions concerning the eviCore process. Look for the FAQ soon on the Molina website, under the "Manual" tab, under "Quick Reference Guides & FAQs."

For additional information, visit the Provider Bulletin archive on our website, located under the "Communication" tab and "Provider Bulletin."

List, available on our website, under the "Forms" tab.

Claim Hold on EAPG Payment System

Information for Medicaid and MyCare Ohio Ambulatory Surgical Center providers

Based on the new EAPG payment system being updated from version 3.9 to 3.14 by ODM, Molina will continue to hold all ambulatory surgical center claims for dates of service Jan. 1, 2020 to current. These claims will remain on hold until the updates have been implemented.

Claim Hold on Marketplace Prospective Payment System

Information for Marketplace providers

Based on scheduled updates for the End-Stage Renal Disease Prospective Payment System (ESRD PPS), Molina will be implementing a Prospective Payment System (PPS) hold for impacted claims. These claims will remain on hold until the updates are deployed on Feb. 7, 2020.

Reconsideration Request Form Requirements

Information for all network providers

As a reminder, as of Aug. 1, 2019, claim disputes or authorization reconsiderations submitted on an incorrect form, or submitted on a form that is not filled out completely, will be returned unworked. For additional information visit the Provider Bulletin archive on our website, located under the "Communication" tab.

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.