

Provider Bulletin

Molina Healthcare of California

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Medi-Cal Managed Care Plan Responsibilities For Indian Health Care Providers And American Indian Members APL 24-002

This is an advisory notification to Molina Healthcare of California (MHC) network providers applicable to the Medi-Cal line of business to summarize and clarify existing federal and state protections and alternative health coverage options for American Indian Members enrolled in Medi-Cal managed care plans (MCPs).

This notification is based on All-Plan Letter (APL) 24-002, which can be found in full on the Department of Health Care Services (DHCS) website at:

<https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL%202024/APL24-002.pdf>

BACKGROUND

DHCS policy pertaining to American Indians and Indian Health Care Providers (IHCP), is supported by federal and state law, official guidance from the federal Centers for Medicare & Medicaid Services (CMS), and the MHC Medi-Cal Contract.

Definitions

Federal law defines an individual as an “Indian” if the individual meets any of the following criteria:

- Is a member of a Federally recognized Indian tribe
- Resides in an urban center and meets one or more of the four following criteria:
 - Is a member of a tribe, band, or other organized group of Indians, including those tribes, bands, or groups terminated since 1940 and those recognized now or in the future by the State in which they reside, or who is a descendant, in the first or second degree of any such member;
 - Is an Eskimo or Aleut or other Alaska Native;
 - Is considered by the Secretary of the Interior to be an Indian for any purpose; or
 - Is determined to be an Indian under regulations issued by the Secretary of Health and Human Services.

Background CONT.

Definitions Cont.

- Is considered by the Secretary of the Interior to be an Indian for any purpose; or
- Is considered by the Secretary of Health and Human Services to be an Indian for purposes of eligibility for Indian health care services, including as a California Indian, Eskimo, Aleut, or other Alaska Native

Federal law defines an IHCP as a health care program operated by:

- The Indian Health Service (IHS), which means the agency of that name within the U.S. Department of Health and Human Services established by the Indian Health Care Improvement Act (IHCIA) Section 601, 25 USC Section 1661;
- An Indian Tribe, which has the meaning given in the IHCIA Section 4(14), 25 USC Section 1603(14);
- A Tribal Organization, which has the meaning given in the IHCIA Section 4(25), 25 USC Section 1603(26);
- An Urban Indian Organization (otherwise known as a UIO), which has the meaning given in the IHCIA Section 4(29), 25 USC Section 1603(29)



POLICY

I. American Indian Member Rights and Protections

American Indian Medi-Cal Members are not required to enroll with an MCP, except in the case of County Organized Health Systems (COHS) or Single Plan Model counties. American Indians who are voluntarily enrolled in an MCP, in non-COHS or non-Single Plan Model counties are permitted to disenroll from the MCP, without cause, even in instances where their aid code is subject to mandatory managed care enrollment. American Indians who disenroll from an MCP will receive services under the Fee-for-Service (FFS) delivery system.

An American Indian Member can request to receive services from an IHCP and can choose an IHCP within MHC's Network as a Primary Care Provider (PCP). An American Indian Member may receive services from an out-of-network IHCP even if there are in-network IHCPs available. American Indian Members are not subject to enrollment fees, premiums, deductibles, copayments, cost sharing, or other similar charges.

II. IHCP Rights and Protections

MHC will be proactive in developing processes designed to enhance collaboration with IHCPs and resolve IHCP inquiries within applicable authorization timeframes, including expedited authorizations. Existing rights and protections for IHCPs, on the topics of enrollment, contracting, credentialing and site review, and claims payment, are described below.

A. IHCP Enrollment

If an IHCP is providing Medi-Cal covered services, including transportation, to an American Indian Member, MHC will ensure that the IHCP is enrolled in the Medi-Cal program. Current policy allows Providers to enroll through either the state-level enrollment pathway or the MHC enrollment pathway.

B. Ordering, Referring, and Prescribing Provider Enrollment

MHC will ensure that individual practitioners who provide services at an IHCP facility are enrolled in Medi-Cal as an Ordering, Referring, and Prescribing (ORP) Provider.

C. IHCP Contracting

IHCPs do not have to contract with MHC as a Network Provider, nor do IHCPs have to contract with any MHC Subcontractor, in order to be reimbursed by either MHC or the Subcontractor for services provided to an American Indian Member.

D. IHCP Credentialing/Re-Credentialing and Site Reviews

The credentialing and re-credentialing processes verify that Network Providers are properly licensed and certified as required by state and federal law, which helps to ensure the quality of care delivered by Network Providers to American Indian Members.

E. IHCP Claims Payment

Claims Payment Timeliness: IHCPs are entitled to timely and expeditious payment of claims in accordance with federal and state law and APL 23-020. The IHCP does not need to have a contract with MHC in order to receive reimbursement for services provided to an American Indian Member.

Transportation Reimbursement: MHC will reimburse IHCPs for transporting an American Indian Member to an IHCP.

III. MHC Tribal Liaison

Effective January 1, 2024, MHC is required to have an identified tribal liaison dedicated to working with each contracted and non-contracted IHCP in its service area. The tribal liaison is responsible for coordinating referrals and payment for services provided to American Indian Members who are qualified to receive services from an IHCP.

What if you need assistance?

If you have any questions regarding the notification, please contact your Molina Provider Relations Representative below.

Service County Area	Provider Relations Representative	Contact Number	Email Address
California Hospital Systems (SNFs, LTSS, ICF/DD)	Teresa Suarez	562-549-3782	Teresa.Suarez2@molinahealthcare.com
	Laura Gonzalez	562-549-4887	Laura.Gonzalez3@molinahealthcare.com
Los Angeles County	Clemente Arias	562-517-1014	Clemente.Arias@molinahealthcare.com
	Christian Diaz	562-549-3550	Christian.Diaz@molinahealthcare.com
	Daniel Amirian	562-549-4809	Daniel.Amirian@molinahealthcare.com
	LaToya Watts	562-549-4069	Latoya.Watts@molinahealthcare.com
	Anita White	562-980-3947	Princess.White@molinahealthcare.com
Los Angeles / Orange County	Maria Guimoye	562-549-4390	Maria.Guimoye@molinahealthcare.com
Sacramento County	Johonna Eshalomi	279-895-9354	Johonna.Eshalomi@molinahealthcare.com
	Marina Higby	916-561-8550	Marina.Higby@molinahealthcare.com
San Bernardino County	Luana McIver	909-501-3314	Luana.Mciver@molinahealthcare.com
San Bernardino / Riverside County	Vanessa Lomeli	909-577-4355	Vanessa.Lomeli2@molinahealthcare.com
Riverside County	Mimi Howard	562-549-3532	Smimi.Howard@molinahealthcare.com
San Diego / Imperial County	Salvador Perez	562-549-3825	Salvador.Perez@molinahealthcare.com
	Dolores Ramos	562-549-4900	Dolores.Ramos@molinahealthcare.com
	Lincoln Watkins	858-300-7722	Lincoln.Watkins@molinahealthcare.com

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