

# Provider Bulletin

## Monthly topics for December 2023

### Improving behavioral health outcomes

Molina Healthcare of Michigan believes that mental health is important to overall health and well-being. It includes our **emotional, psychological** and **social** well-being.

Mental health is vital at every stage and aspect of life. Although the mind and body are often viewed as separate, mental and physical health are closely related. Share the below tips with your patients to help them take care of themselves physically, mentally and emotionally:

- **Get regular exercise.** Exercising is an important way to get physically fit but can also help improve mood. A daily 10-minute walk may increase mental alertness and energy and leave one in a good mood.
- **Eat a proper diet.** A diet high in fruits and vegetables and low in processed sugars or fats can make a person feel better physically and mentally. Suggest they work with a qualified nutritionist to help them create a diet plan customized according to their needs.
- **Avoid alcohol and drugs.** Although drinking and smoking may make someone feel better in the short term, it can negatively impact their physical, mental and emotional health.
- **Get enough sleep.** A good night's sleep is around seven to nine hours for adults. Suggest they take a 30-minute nap during the day to feel more alert.
- **Try relaxation techniques.** Meditation, deep breathing and focusing their thoughts can help when they feel stressed.
- **Develop good mental practices.** Focusing on positive emotions and events is better than negative ones.
- **Seek help from others.** Talking with friends or family members can help one feel less stressed. Getting others to help with difficult situations can also reduce any burdens.

You can reference our Behavioral Health Toolkit online at:

[MolinaHealthcare.com/Providers/MI/Medicaid/Resource/BH\\_Toolkit.aspx](https://MolinaHealthcare.com/Providers/MI/Medicaid/Resource/BH_Toolkit.aspx)

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### 2023 Model of Care Training notification – time-sensitive!

Molina is required to provide annual training regarding our Model of Care (MOC) program for SNP enrollees. To ensure Molina remains compliant with CMS regulatory requirements for MOC training, your completed attestation form must be returned to us upon completion of the training by **December 31, 2023**. For more information, please visit [MolinaHealthcare.com/-/Media/Molina/PublicWebsite/PDF/Providers/Common/Medicare/Model-of-care-Provider-Training-QRG.pdf](https://MolinaHealthcare.com/-/Media/Molina/PublicWebsite/PDF/Providers/Common/Medicare/Model-of-care-Provider-Training-QRG.pdf).

We'll need you to do the following:

- Take the MOC training
  - The MOC training materials can be found on the Molina website at [MolinaHealthcare.com/Providers/Common/Medicare/~media/Molina/PublicWebsite/PDF/Providers/common/medicare/model-of-care-Provider-Training](https://MolinaHealthcare.com/Providers/Common/Medicare/~media/Molina/PublicWebsite/PDF/Providers/common/medicare/model-of-care-Provider-Training)
- Complete and sign the MOC training attestation form at [Molinahealthcare.com/providers/common/MOC/MI](https://Molinahealthcare.com/providers/common/MOC/MI)
- Return your signed attestation form to [MHMProviderServicesMailbox@MolinaHealthcare.com](mailto:MHMProviderServicesMailbox@MolinaHealthcare.com)

### Molina's prior authorization updates

#### Medicaid

Molina's prior authorization (PA) Guide and PA code matrix are updated for an effective date of January 1, 2024. All provider authorization tools are available at [MolinaHealthcare.com/Providers/MI/Medicaid/PriorAuthorization/PA.aspx](https://MolinaHealthcare.com/Providers/MI/Medicaid/PriorAuthorization/PA.aspx).

Services that require PA are easily searchable within the PA code matrix.

Additionally, please note that an updated **Prior Authorization Request Form**, a **Behavioral Health Request Form** and an **Alternate Level of Care Request Form** are now available online at the above location.

#### Marketplace

Molina is updating its Marketplace PA code matrix for January 1, 2024. This is a notification only and does not determine if the member's plan covers the benefit. The updated matrix is posted online at [MolinaHealthcare.com/Providers/MI/Medicaid/PriorAuthorization/PA.aspx](https://MolinaHealthcare.com/Providers/MI/Medicaid/PriorAuthorization/PA.aspx).

The process for obtaining prior authorization **has not** changed. Please complete the Prior Authorization/Service Request form with all pertinent information and medical notes as applicable. The Service Request Form is available at

[MolinaMarketplace.com/Marketplace/MI/EN-US/Providers/Provider-Forms](https://MolinaMarketplace.com/Marketplace/MI/EN-US/Providers/Provider-Forms).

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### Payment integrity policies

Did you know Molina has information regarding coding, payment and reimbursement policies online? Visit [MolinaHealthcare.com/Providers/MI/Medicaid/Policies/Payment.aspx](https://MolinaHealthcare.com/Providers/MI/Medicaid/Policies/Payment.aspx) for more information.

### Supplemental data HEDIS® 2023

As 2023 is ending, a gentle reminder that the deadline to submit supplemental data is January 12, 2024, to count towards the 2023 HEDIS® measurement year. The deadline for claims and EMR/registry data exchange is February 29, 2024, to count towards the 2023 HEDIS® measurement year. Supplemental data may be submitted to Molina through the following two methods:

- Fax medical records to: **(888) 336-6131**
- Email medical records to: [HEDIS\\_SDS@MolinaHealthcare.com](mailto:HEDIS_SDS@MolinaHealthcare.com)

### Ownership and Control Form available online

Molina is required to maintain a current Ownership and Control Form from providers participating in Mi Health Link (MMP) line of business. The Ownership and Control Form on file with Molina must be signed and dated at least every 36 months during the re-credentialing process or sooner if updates need to be made to the previously submitted Ownership and Control Form.

Providers are required to disclose any changes in the Ownership and Control Form in accordance with the following:

- 42 CFR 455.104 Disclosure by Medicaid Providers and Fiscal Agents: Information on Ownership and Control
- 42 CFR 455.105 Disclosure by Providers: Information Related to Business Transactions.
- 42 CFR 438.230 Subcontractual Relationships and Delegation

Providers contracted through a group affiliation must fill out the form at the group level. If a provider is contracted as an individual or independent provider, the form should be filled out at the provider level.

For your convenience, an electronically fillable version is available online at [MolinaMarketplace.com/Marketplace/MI/EN-US/Providers/Provider-Forms](https://MolinaMarketplace.com/Marketplace/MI/EN-US/Providers/Provider-Forms).

Once completed, the Ownership and Control Form should be emailed to [MHMContractConfigDept@MolinaHealthcare.com](mailto:MHMContractConfigDept@MolinaHealthcare.com) with the subject heading **Ownership and Control Form Update**.

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### Availity Essentials – does your staff have access?

Availity Essentials is now the exclusive secure provider portal for Molina, offering support to your clinical, billing, credentialing, office, quality and referral staff.

If not registered, visit [availity.com/essentials-portal-registration](https://www.availity.com/essentials-portal-registration) to register. Save time and a phone call by using Availity Essentials for the following:

- Check eligibility and benefits inquiry.
- Authorization and referrals.
- Claim status and payments.
- Pulling member rosters.

Training sessions can be found by logging into Availity Essentials and proceeding to the **Help & Training** section located at the top right of the screen. Once there, select **Get Trained**. In the training catalog, go to the **Sessions** tab at the top of the page, where you will see the above training listed as **Availity Essentials Provider Portal Overview for Molina Providers – Live Webinar**. **Please note:** Michigan is the **only** state live for prior authorizations within Availity Essentials – **not** through Payor Spaces.

**Upcoming Availity Essential trainings:** Tuesday, January 2, at 3 p.m.; Friday, January 19, at 12 noon; and Tuesday, February 13, at 2 p.m.

You can also visit [MolinaHealthcare.com/Providers/MI/Medicaid/Comm/YouMattertoMolina.aspx](https://MolinaHealthcare.com/Providers/MI/Medicaid/Comm/YouMattertoMolina.aspx) and click on **Upcoming Trainings** to view a list of training sessions offered by Molina.

### Redetermination

Due to the conclusion of the COVID-19 public health emergency during which the eligibility redetermination process for Michigan Medicaid members was stopped, the Michigan Department of Health & Human Services (MDHHS) resumed the redetermination process in June. We're communicating with our members and provider partners to help ensure that Medicaid-eligible members retain their coverage.

Molina needs your help reminding your Medicaid patients to update their contact information and renew their benefits so they do not lose coverage. Visit [MolinaHealthcare.com/MedicaidRenewals](https://MolinaHealthcare.com/MedicaidRenewals) for the most current resources and information – including our online provider toolkit. As Molina receives information from MDHHS, We'll share specific lists of members due for redetermination with the office.

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### *You Matter to Molina*

Our *You Matter to Molina* program prioritizes connecting directly with our entire network of providers and supporting their efforts to deliver high-quality and efficient health care for Molina members. Through the program, we have a dedicated provider network team to intake and resolve your questions or issues and solicit input and feedback from our network providers and their administrative staff about improving our technology, tools and processes to minimize administrative hurdles and better support you. We analyze and apply provider feedback to design new solutions to simplify how you can engage with the health plan. We're committed to partnering with our network providers to solve problems quickly and efficiently. We want to hear from you – our provider partners. Your feedback is important because You Matter to Molina! Visit [MolinaHealthcare.com/Providers/MI/Medicaid/Comm/YouMattertoMolina.aspx](https://MolinaHealthcare.com/Providers/MI/Medicaid/Comm/YouMattertoMolina.aspx) today.

### New centralized mailboxes

Molina has created new centralized mailboxes to update your records and ensure seamless communication. Please feel free to reach out to us at [MHMProviderServicesMailbox@MolinaHealthcare.com](mailto:MHMProviderServicesMailbox@MolinaHealthcare.com) with any questions. Your Provider Relations representative will reach out to you through the new mailboxes.

To meet your more specific needs, please use the email addresses below:

- For ancillary contracting issues: [MHMAncillaryContracting@MolinaHealthcare.com](mailto:MHMAncillaryContracting@MolinaHealthcare.com)
- For behavioral health provider issues: [MHMBHPProviderServices@MolinaHealthcare.com](mailto:MHMBHPProviderServices@MolinaHealthcare.com)
- For hospital non-contracting related items:  
[MHMProviderServicesHospital@MolinaHealthcare.com](mailto:MHMProviderServicesHospital@MolinaHealthcare.com)
- For hospital contracting-related items:  
[MHMProviderContractingMailbox@MolinaHealthcare.com](mailto:MHMProviderContractingMailbox@MolinaHealthcare.com)

Thank you for your continuous support and understanding. We look forward to a continued successful partnership.

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### Reminder: NCQA provider newsletter Q3 edition has been posted

Molina publishes quarterly newsletters for Medicare, Marketplace, Medicaid and MMP/Duals products providers in our network. The newsletter communicates medical management policies and procedures to support providers in delivering quality health care services to Molina members. Please visit our website for the Q3 provider newsletter located online at [MolinaHealthcare.com/Providers/MI/Medicaid/Comm/Newsletter.aspx](https://MolinaHealthcare.com/Providers/MI/Medicaid/Comm/Newsletter.aspx).

If you have questions, contact your local Provider Relations representative at [MHMProviderServicesMailbox@MolinaHealthcare.com](mailto:MHMProviderServicesMailbox@MolinaHealthcare.com).

### Explanation of Payment refund and forwarding Balance Reporting enhancement

Molina would like to provide some details regarding a forthcoming enhancement to the reporting of forwarding balances and refunds received displayed on your Explanation of Payment and 835 files.

#### What is the change?

Previously, on your Explanation of Payment (EOP) and 835, refund amounts were combined into a bulk total for payment with a reference ID of the payment checkhistoryID (CHKHST...).

A new enhancement updates these sections on the EOP and 835 to utilize a reference ID of the claim itself, allowing for clearer reporting of these transactions. The setup for utilizing WO/72 code types will remain.

The updates are:

- Reference ID on the EOP adjustment section will reflect the claimID for the transactions related to each refund posting and no longer use the checkhistoryID.
- Changes to the PLB segment on the 835.
  - Items labeled as Provider Return/Refund credit will be reflected on your 835 as adjustment code type 72 with a reference ID of the claimID for each refund.
  - Items labeled as Overpayment Recovery will be reflected on your 835 as adjustment code type WO with a reference ID of the claimID for each refund.
  - This is our method of recording refunds received and will result in a net total of \$0.00 on your payment.

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### What do providers need to do?

Please review your EOP and 835s for payments issued on or after **11/28/23** to ensure these new PLB segment adjustment types are processed accurately within you or your clearinghouse systems.

Molina is here to support you as well. If you have questions about this transition, please contact us at [MHMProviderServicesMailbox@MolinaHealthcare.com](mailto:MHMProviderServicesMailbox@MolinaHealthcare.com).

### Vaccines for Children: Opportunities to enroll

Molina focuses on supporting access to preventive health care, including participation in programs like Vaccines for Children (VFC). VFC supplies free vaccines to enrolled physicians. Every Medicaid-eligible child 19 years or younger may receive vaccines supplied by the VFC program. To participate, providers must enroll in VFC, even if already enrolled with Medicaid or the Child Health and Disability Prevention (CHDP) program. Physician participation guidelines are simple – to learn more, visit [MolinaHealthcare.com/Providers/MI/Medicaid/Comm/YouMattertoMolina.aspx](https://MolinaHealthcare.com/Providers/MI/Medicaid/Comm/YouMattertoMolina.aspx).

### 2024 Medicare Advantage and MMP updates

#### Enrollee notification requirements

CMS revised the requirements for enrollee notification of network changes by establishing specific requirements for no-cause and for-cause provider contract terminations. They also added specific and more stringent requirements when primary care and behavioral health provider contract terminations occur.

CMS' updates require Medicare Advantage plans to provide written notice and make one telephonic attempt to notify enrollees assigned to a primary care or behavioral health provider within the past three years and requesting a contract termination.

#### Covered behavioral health services

Molina is pleased to share that beginning January 1, 2024, CMS will expand behavioral health covered services to include Marriage and Family Therapists (MFT) and Mental Health Counselors (MHC). **Please note:** These provider types must be enrolled as Medicare providers or suppliers. You can visit [cms.gov/medicare/enrollment-renewal/providers-suppliers](https://cms.gov/medicare/enrollment-renewal/providers-suppliers) to learn more.

Interested providers can email [MHMProviderContractingMailbox@MolinaHealthcare.com](mailto:MHMProviderContractingMailbox@MolinaHealthcare.com).

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### The Health Risk Assessment (HRA) incentive is being retired on January 1, 2024

The Healthy Michigan Plan's (HMP) Health Risk Assessment (HRA) incentive is being retired. Beginning January 1, 2024, HRA completion will no longer be incentivized for our HMP members.

This will only affect our HMP members. HRA completion for D-SNP members is still required.

### Why is this incentive being retired?

The Michigan Department of Health & Human Services (MDHHS) no longer requires providers to complete an HRA for their patients.

### Can I still complete and submit an HRA?

We encourage you to continue to complete and submit HRAs for your patients. The data we receive informs how we coordinate services available to our members and helps identify barriers to care, including food insecurity and lack of housing.

### Will I still receive an incentive payment for HRAs completed in 2023?

Yes, incentive payments will be made for HRAs completed through **December 31, 2023**.

All **Just the Fax** publications are available at [MolinaHealthcare.com/Providers/MI/Medicaid/Comm/Pages/Provmailings.aspx](https://MolinaHealthcare.com/Providers/MI/Medicaid/Comm/Pages/Provmailings.aspx).