

## **PROVIDER NEWSLETTER**

A newsletter for Molina Healthcare Provider Networks

#### **Fourth Quarter 2022**

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## "My Health Perks" Program is Live!

Molina Marketplace subscribers and dependents 18 years and older are eligible for Molina's health and wellness program: "My Health Perks." Besides providing access to a suite of interactive disease management programs and healthy lifestyle information, all eligible members will have the opportunity to earn a \$50 gift card by completing both of the following activities:

- Complete a preventive wellness examination with their primary care provider; and,
- Complete the designated Health Risk Assessment via the My Wellness tab on the My Molina portal.

Members who complete both incentivized activities will be eligible for either a physical or digital gift card of their choosing. Members can use the gift cards at retailers who accept them.

Please encourage members to learn more about the "My Health Perks" program online via the My Wellness tab on the My Molina portal. Members can also contact Customer Support for additional information.

### Get Automatic Approval for Advanced Imaging Prior Authorization Requests

Molina has partnered with MCG Health to offer Cite AutoAuth self-service for High Cost Advanced Imaging (AI) prior authorization (PA) requests.

#### What is Cite AutoAuth (CAA) and how does it work?

By attaching the relevant care guideline content to each PA request and sending it directly to Molina, providers receive an expedited, often immediate, response. Through a customized rules engine, Cite AutoAuth matches Molina's specific criteria to the clinical information and attached guideline content to potentially authorize the procedure automatically.

Self-services available in the Cite AutoAuth tool include, but are not limited to: MRIs, CTs, and PET scans. To see the full list of imaging codes which require PA, refer to the PA Code LookUp Tool at <a href="mailto:provider.MolinaHealthcare.com">provider.MolinaHealthcare.com</a>.

#### **How to Access and Learning More**

Cite AutoAuth can be accessed via the <u>Availity Essentials portal</u> in the Molina's Payer Spaces and in the Molina <u>Provider Portal</u>. It is available 24 hours per day/7 days per week.

This method of submission is strongly encouraged as your primary submission route; existing fax/phone/email processes are also available.

Watch <a href="https://provider.molinahealthcare.com/">https://provider.molinahealthcare.com/</a> for updates and additional information about Cite AutoAuth.

## New PsychHub Course Available, Offers CEUs

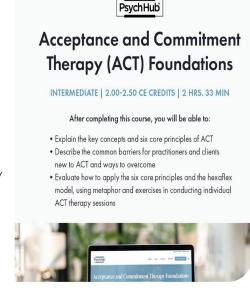
Our PsychHub partners have recently launched their newest online course, Acceptance and Commitment Therapy (ACT) Foundations.

The ACT Foundation's course explores the construct of psychological flexibility.

Learn the action-oriented, empirically-based approach to therapy that invites clients to process their feelings while empowering and educating mental health practitioners.

**Ready to get started?** Molina network providers can access this and other courses that offer CEUs on the PsychHub platform by clicking this link:

https://app.psychhub.com/signup/molina-mhp/



## Model of Care Training is Underway – Deadline 12/31/2022

Molina is actively reaching out to providers who are required to complete the 2022 Model of Care training. In accordance with Centers for Medicaid and Medicare Services (CMS) requirements, Molina PCPs and key high-volume specialists including cardiology, hematology, oncology and psychiatry must complete Molina's Model of Care training each year. This quick training will describe how Molina and providers work together to successfully deliver coordinated care and case management to members with both Medicare and Medicaid.

If not already completed, please take this training now, and return the Attestation Form to Molina no later than **12/31/2022**. The training is available at: <a href="https://www.MolinaHealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/common/medicare/model-of-care-Provider-Training.PDF">https://www.MolinaHealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/common/medicare/model-of-care-Provider-Training.PDF</a>.

If you have additional questions, please contact your local Molina Provider Services Representative at <a href="mailto:mhw.moc.attestations@Molinahealthcare.com">mhw.moc.attestations@Molinahealthcare.com</a>.

# Molina's Special Investigation Unit Partnering with You to Prevent Fraud, Waste and Abuse

The National Healthcare Anti-Fraud Association estimates that at least three percent of the nation's health care costs, amounting to tens of billions of dollars, is lost to fraud, waste and abuse per year. That's money that would otherwise cover legitimate care and services for the neediest in our communities. To address the issue, federal and state governments have passed several laws to improve overall program integrity, including required audits of medical records against billing practices. Molina Healthcare, like others in our industry, must comply with these laws and proactively ensure that government funds are used appropriately. Molina's Special Investigation Unit (SIU) aims to safeguard Medicare and Medicaid, along with Marketplace funds.

#### You and the SIU

The SIU utilizes state-of-the-art data analytics to proactively review claims to identify statistical outliers within peer (specialty) groups and services/coding categories. Our system employs approximately 1,300 algorithms to identify billing outliers and patterns, over- and underutilization, and other aberrant billing behavior trends. The system pulls information from multiple public data sources and historical databases that are known to identify and track fraud, waste and abuse. Our system allows us the ability to track provider compliance within correct coding, billing and their provider contractual agreement.

As a result, providers may receive a notice from the SIU if they have been identified as having outliers that require additional review, or by random selection. If your practice receives a notice from the SIU, please cooperate with the notice and any instructions, such as providing requested medical records and other supporting documentation. Should you have questions, please contact your Provider Services Representative.

"Molina Healthcare appreciates the partnership it has with providers in caring for the medical needs of our members," explains Scott Campbell, the Molina Associate Vice President who oversees the SIU operations. "Together, we share a responsibility to be prudent stewards of government funds. It's a responsibility that we all should take seriously because it plays an important role in protecting programs like Medicare and Medicaid from fraudulent activity."

Molina appreciates your support and understanding of the SIU's important work, and we hope to minimize any inconvenience the SIU audit might cause you and/or your practice.

To report potential fraud, waste and abuse, contact the Molina AlertLine toll-free at (866) 606-3889, 24 hours per day, 7 days per week. In addition, use the website to make a report at any time at: <a href="https://MolinaHealthcare.Alertline.com">https://MolinaHealthcare.Alertline.com</a>.

#### **Biosimilars - What To Watch**

Biological products are the fastest-growing class of therapeutic products in the United States. Similar to when a generic becomes available, biosimilar and interchangeable products can offer additional options with a potentially lower health care cost.

A biosimilar is a highly similar version of a brand name biological drug that meets strict controls for structural, pharmaceutical and clinical consistency. A biosimilar manufacturer must demonstrate that there are no meaningful clinical differences (i.e., safety and efficacy) between the biosimilar and the reference product. Clinical performance is demonstrated through human pharmacokinetic (exposure) and pharmacodynamic (response) studies, an assessment of clinical immunogenicity and, if needed, additional clinical studies. Biosimilars are not considered true generics because unlike traditional drugs, biologics are not synthetically derived but are derived from organic sources, so there are differences between the reference brand biologic and its biosimilars.

Several bodies of experts have published statements in support for the use of biosimilars and integration into clinical practice guidelines, such as the Crohn's and Colitis Foundation, American College of Rheumatology, and the American Society of Clinical Oncology.

As costs for biological specialty drugs continue to rise, the growing biosimilar market will benefit providers and patients by broadening biological treatment options and expanding access to these medications at lower costs.

An anticipated launch of the first biosimilars for popular drugs such as Humira and Stelara are just around the corner in the first half of 2023. However, it is important to note that while the competition generated by these new launches can help lower health care costs—depending on pricing—biosimilars may not necessarily be the lowest cost option in all therapeutic categories. Other considerations that may affect the savings potential from a biosimilar launch include the reliability of supply, experience of the manufacturer, and patient or prescriber adoption.

Molina continues to be committed to continually reevaluating preferred strategies and applying innovative cost-controls to ensure patients receive safe, effective and quality health care.

This commitment includes potentially creating a preference for biosimilars when value can be added without compromising member satisfaction and safety.

Food and Drug Administration. Biosimilar and Interchangeable Products. Retrieved from:

https://www.fda.gov/drugs/therapeutic-biologics-applications-bla/biosimilars

https://www.nccn.org/docs/default-source/clinical/nccn-pharmacy-directors-forum-white-paper-operationalizing-the-safe-and-efficient-use-of-biosimilars.pdf

https://www.rheumatology.org/portals/0/files/biosimilars-position-statement.pdf

https://www.crohnscolitisfoundation.org/sites/default/files/2019-06/biosimilars-statement-needs\_0.pdf

#### **Balance Billing**



Balance billing Molina members for covered services is prohibited other than the member's applicable copayment, coinsurance, and deductible amounts. The provider is responsible for verifying eligibility and obtaining approval for those services that require prior authorization. Providers agree that under no circumstance shall a Molina member be liable to the provider for any sums owed that are the legal obligation of Molina to the provider. Examples of balance billing include:

- Holding members who are dually eligible for Medicaid and Medicare liable for Medicare Part A and B cost sharing.
- 2. Requiring Molina members to pay the difference between the discounted and negotiated fees, and the provider's usual and customary fees.
- 3. Charging Molina members fees for covered services beyond copayments, deductibles or coinsurance.

#### Early Periodic Screening, Diagnostic and Treatment (EPSDT) Program

The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health and developmental and specialty services.

Molina is required to provide comprehensive services and furnish all appropriate and medically necessary services needed to correct and ameliorate health conditions, based on certain federal guidelines. EPSDT is made up of screening, diagnostic and treatment services; and all providers serving members eligible for EPSDT are required to:

- Inform all Medicaid-eligible individuals under age 21 that EPSDT services are available and of the need for age-appropriate immunizations.
- Provide or arrange for the provision of screening services for all children.
- Arrange (directly or through referral) for corrective treatment as determined by child health screenings.

As a provider, it is your responsibility to adhere to and understand EPSDT guidelines and requirements to ensure access to the right care at the right time in the right setting.

#### 2022-2023 Flu Season

The Advisory Committee on Immunization Practices (ACIP) continues to recommend annual influenza vaccinations for everyone who is at least six months of age and older and who does not have contraindications. It's especially important that certain people get vaccinated, either because they are at high risk of having serious flu-related complications or because they live with or care for people at high risk for developing flu-related complications. Additionally, flu vaccinations can reduce the prevalence of flu symptoms that might be confused with COVID-19.

A licensed, recommended, and age-appropriate vaccine should be used. Inactivated influenza vaccines (IIV4s), recombinant influenza vaccine (RIV4), and live attenuated influenza vaccine (LAIV4) are expected to be available for the 2022–23 season.

#### Important 2022-2023 Updates from the Advisory Committee on Immunization Practices:

- 1. The composition of the 2022–23 U.S. seasonal influenza vaccines includes updates to the influenza A(H3N2) and influenza B/Victoria components. For the 2022–23 season, U.S.-licensed influenza vaccines will contain hemagglutinin (HA) derived from an influenza A/Victoria/2570/2019 (H1N1)pdm09-like virus (for egg-based vaccines) or an influenza A/Wisconsin/588/2019 (H1N1)pdm09-like virus (for cell culture-based and recombinant vaccines); an influenza A/Darwin/9/2021 (H3N2)-like virus (for egg-based vaccines) or an influenza A/Darwin/6/2021 (H3N2)-like virus (for cell culture-based or recombinant vaccines); an influenza B/Austria/1359417/2021 (Victoria lineage)-like virus; and an influenza B/Phuket/3073/2013 (Yamagata lineage)-like virus.
- 2. The composition of the 2022–23 U.S. seasonal influenza vaccines includes updates to the influenza A(H3N2) and influenza B/Victoria components. For the 2022–23 season, U.S.-licensed influenza vaccines will contain hemagglutinin (HA) derived from an influenza A/Victoria/2570/2019 (H1N1)pdm09-like virus (for egg-based vaccines) or an influenza A/Wisconsin/588/2019 (H1N1)pdm09-like virus (for cell culture-based and recombinant vaccines); an influenza A/Darwin/9/2021 (H3N2)-like virus (for egg-based vaccines) or an influenza A/Darwin/6/2021 (H3N2)-like virus (for cell culture-based or recombinant vaccines); an influenza B/Austria/1359417/2021 (Victoria lineage)-like virus; and an influenza B/Phuket/3073/2013 (Yamagata lineage)-like virus.

For a complete copy of the ACIP recommendations and updates or for information on the flu vaccine options for the 2022-2023 flu season, please visit the Centers for Disease Control and Prevention at https://www.cdc.gov/mmwr/volumes/71/rr/rr7101a1.htm.

#### Molina will cover the following flu vaccines during the 2022 - 2023 flu season:

- Injectable Seasonal Influenza Vaccine (Quadrivalent) Available from August-April or per state requirements
- Intranasal Seasonal Influenza Vaccine (FluMist) Available from August-April or per state requirements
- Intradermal Influenza Vaccine Quadrivalent (Short Needle) and Flublok Available from August-April or per state requirements
- Injectable Seasonal Influenza Vaccine High-Dose Available from August-April or per state requirements.

## Clinical Policy Updates Highlights from Third Quarter 2022

Molina Clinical Policies (MCPs) are located at <a href="www.molinaclinicalpolicy.com">www.molinaclinicalpolicy.com</a>. The policies are used by providers as well as medical directors and internal reviewers to make medical necessity determinations. MCPs are reviewed annually and approved bimonthly by the Molina Clinical Policy Committee (MCPC). The third quarter 2022 updates are noted below.

The following policies were revised:

- Epidural Steroid Injections for Back and Neck Pain (previously *Epidural Steroid Injections for Chronic Back Pain*)
- Radioembolization for Primary and Metastatic Tumors of the Liver
- Spinraza (nusinersen)

The following policies have been retired and are no longer available on the website:

- Abecma (idecabtagene vicleucel)
- Breyanzi (lisocabtagene maraleucel)
- Carvykti (ciltacabtagene autoleucel)
- Intensity Modulated Radiation Therapy (IMRT)
- Kymriah (tisagenlecleucel)
- Lutathera (lutetium Lu 177 dotatate)
- Proton Beam Radiation Therapy
- Proton Beam Therapy for Prostate Cancer
- Provenge (sipuleucel-T)
- Tecartus (brexucabtagene autoleucel)
- Yescarta (axicabtagene ciloleucel)



#### NEW! Benefit Available for Molina Members: Pyx Health

Molina recognizes the huge impact human connection can have on a person's life and health outcomes. That's why we've partnered with Pyx Health to offer to all adult (18+) Molina Medicaid members access to Pyx Health's patient support program. This program is an app-based platform that assesses and addresses member loneliness through its chat bot, digital platform and telephonic connection with Pyx's Compassionate Support Center. With the Pyx Health program, your Molina patients can:

- Access resources, screening and Social Determinants of Health (SDOH) Needs
   Through Pyx Health, your Molina patients have quick and easy access to health plan and community resources. The Pyx Health program also regularly screens for loneliness, depression, anxiety, and SDOH needs such as housing, food, transportation, childcare and more.
- Chat with Pyxir, the friendly chatbot
   Pyxir provides 24/7 encouragement, humor and self-management strategies based on a patient's daily mood and wellness selections.
- Get human support

Pyx's Compassionate Support Center is there to assist Molina patients over the phone, making them feel heard, seen, and cared for in times of need, with a referral to their Molina health plan or community-based organizations when needed.

Signing up is easy! Molina patients can search "Pyx Health" in the Apple App Store or Google Play store or go to <a href="https://hipyx.com">https://hipyx.com</a>. Our support team is available to help at (855) 499-4777.

## **Updated Guidance for Billing Evidence Based Practices (EBPs)**

Molina is excited to announce a new Provider FAQ that answers your most frequently asked questions about providing and billing for Evidence Based Practices in Washington. The FAQ can be found here: <a href="Evidence-Based Practices for Children and Youth Mental Health Services Provider FAQs">Evidence-Based Practices for Children and Youth Mental Health Services Provider FAQs</a> (Medicaid) (molinahealthcare.com)

As a reminder, all clinicians providing evidence based practices (EBPs) to children and youth under 18 in Washington should report these services on claims as outlined in the Evidence Based Practices Reporting Guide: <a href="https://www.hca.wa.gov/assets/program/ebp-reporting-guides.pdf">https://www.hca.wa.gov/assets/program/ebp-reporting-guides.pdf</a>.

If you have any further questions about providing or billing for EBPs, or require technical assistance, please reach out to Audrey Silliman, Behavioral Health Program Manager with Molina (audrey.silliman@MolinaHealthcare.com).

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