



Molina Healthcare Gives Free Haircuts To Local Families For National Make A Difference Day

DETROIT, Michigan— October 25, 2011 – Saturday was National Make a Difference Day, a day established to encourage people to make an impact in the community. Molina Healthcare gave free haircuts to the community at Iron Street Hair Lounge. People of all ages came out to receive free haircuts and health education from Molina Healthcare and the company’s mascot, Dr. Cleo the cat.

“Molina Healthcare’s mission is to serve the underserved,” said Craig Bass, President of Molina Healthcare of Michigan. “Make a Difference Day is a perfect opportunity to give back to our community.”

Molina Healthcare partnered with Iron Street Hair Lounge to give free haircuts to anyone in the community who wanted to come. Molina Healthcare’s community outreach team also distributed health education materials to kids and talked to families about the importance of eating healthy. Dr. Cleo the cat, Molina’s mascot, greeted guests and even got his own ears trimmed!

Molina Healthcare is continuously seeking ways to partner with our providers and community agencies for events. If you have any upcoming events please notify our Promotions Coordinator at 866-449-6828 ext 155822!



Dr. Cleo getting his ears clipped!



Aniya Jones - Getting her hair done for the first time!



Johnny and Jonathan Tolbert enjoy a Father & Son haircut!

In This Issue

| | |
|---|------|
| Michigan Care Improvement Registry (MCIR) | pg 1 |
| National Make A Difference Day | pg 2 |
| Provider Change Notification Requirements | pg 2 |
| What's New with Web Portal | pg 3 |
| Tobacco Control | pg 3 |
| Molina Healthcare's Care Transition Program | pg 4 |
| Vaccines for Children Program (VFC) | pg 5 |

Claims Submission Requirements

Please mail all initial Medicaid claims to:

Molina Healthcare, Inc.
PO Box 22668
Long Beach, CA 90801

Please mail all initial Medicare claims to:

Molina Healthcare Options Claims
PO Box 22811
Long Beach, CA 90801

Please do not submit initial claims to the Troy address as this will delay the processing of your claims, and your claim may be returned. Please contact the Claims Department with any questions or concerns at 1-888-898-7969.

Michigan Care Improvement Registry (MCIR)

MCIR is a nationally-recognized electronic statewide immunization registry that is accessible to both private and public providers.

Public Act 91 of 2006 expanded MCIR to extend immunization records into adulthood. Providers are highly encouraged to report adult immunizations to MCIR. Providers are still required to report childhood immunizations to MCIR within 72 hours of administration

MCIR saves time, money, and eliminates missed vaccination opportunities. Features include:

- Secure access via the web
- Provides immediate patient immunization history and what's due
- Recommends future dose dates
- Sends reminder and recall notices for due or overdue immunizations
- Provides quick and easy-to-print official immunization records for childcare and school requirements

Busy practices have found that MCIR can:

- Simplify the ever-changing and complex immunization requirements and schedules involving different vaccine manufacturers and combination vaccines
- Help practices manage vaccine supply
- Accept electronic immunization information

- Generate a Profile Report to determine if it's necessary to increase immunization levels

Public Health-related benefits to MCIR include:

- The all-hazard tracking system for emergency preparedness
- Links to other existing child health databases such as lead screening
- The Influenza Vaccine Exchange Network (IVEN)

For more information, please contact your MCIR Regional Office or visit the website at: www.mcir.org

Provider Change Notification Requirements

Providers must notify Molina Healthcare in writing at least 60 days in advance when possible of changes in physician staffing, after hours and/or vacation coverage, practice location changes, billing address and tax ID changes. Changes should be submitted on the "Molina Healthcare Provider Change Form". The form is located at www.molinahealthcare.com in the Provider Forms section. Please submit completed forms and supporting documentation by mail, fax or email to:

Molina Healthcare of Michigan, Systems Configuration
100 W Big Beaver Rd Ste 600
Troy, MI 48084
Fax (248) 925 – 1757
MHMProviderChangeForm@molinahealthcare.com

For Questions, please call the Provider Call Center at (888)898-7969, Option 1.

What's New with Web Portal

We are excited about recent and upcoming changes to the Molina Healthcare Web Portal. Visit us at www.molinahealthcare.com to check out the changes. If you are not registered, call your Provider Services Representative today.

- 5010 Compliance
- Real Time Eligibility
- Service Request/Authorization redesign
- Newly redesigned Provider Online Directory
- Newly redesigned PCP Roster
- New Custom Rosters for non-PCP providers
- Improved security and registration
- Secure Inbox for all users
- Claims and service request/authorization status inquiries for Medicare



Tobacco Control

Molina Healthcare partners with the Michigan Tobacco Quitline, funded by the Michigan Department of Community Health's Tobacco Control Program. The Michigan Tobacco Quitline is operated by National Jewish Health a premier medical and research institution focusing on respiratory disease in the United States.

The Michigan Quality Improvement Consortium (MQIC) Guideline for Tobacco Control recommends identification of tobacco use and exposure status at each visit for patients 12 years of age and older. The Michigan Tobacco Quitline team is available to provide your Molina Healthcare patients who are ready to quit using tobacco with coaching and resources to increase their chance for success.

The program includes an intake/assessment call and 4 proactive phone calls over a 2 month period in addition to evaluation follow up at 3, 6, and 12 months.



Program Timelines

- ▶ Intake: Intake and Assessment (5-15 minutes)
 - Call One: Immediately after Intake or within 7 days (20-30 minutes)
 - Call Two: 1 week after Call One
 - Call Three: 1 week after Call Two
 - Call Four: 2 weeks after Call Three
- ▶ Evaluation follow up is done at 3, 6 and 12 months.

Participants in the program receive:

- ▶ Breathe Easy: A Guide to help you Quit Tobacco
- ▶ Additional materials will be provided based on the callers' needs. These may include Spanish language materials, spit tobacco materials, cessation for pregnant women, teen cessation, facts on secondhand smoke and materials written for a Native American audience.

Participation in the program and all program materials are free. Molina Healthcare also sends additional materials and letters of encouragement to your Molina Healthcare patients to help increase their chance for success. The toll free phone number to enroll in the Michigan Tobacco Quitline Program is 1-800-QUIT-NOW (784-8669). Remember to refer your patients that are looking to QUIT to the Quitline!

For more information please visit the MQIC website at <http://www.mqic.org/guidelines.htm>



Molina Healthcare's Care Transition Program

The purpose of the Care Transitions Program at Molina Healthcare is to:

- Provide a process for Molina Healthcare members to effectively transition from one setting to another.
- Molina Healthcare clinical staff assists members through transitions and coordinate needed services with appropriate providers.
- Promoting member self-management while encouraging empowerment. The philosophy embraces the concept of “consumer direction” as members are encouraged to direct their care through personal choice and responsibility.
- Every effort is made to directly engage members so they may retain an active voice in planning treatment and finding satisfaction in the process as it develops.

Care Transition features:

Four critical elements/factors/components of service that are the foundation to prepare members through their transition:

1. Medication Management – it is important that the member is knowledgeable about their medication and develops a medication management system that is consistent and reliable. Molina Healthcare staff will assist with coordination of any needed authorization.
2. Personal Health Record – a transportable document with the member's medical history helps to ensure continuity of a care plan across providers and settings.
3. Primary Care Provider (PCP) and Specialist Follow-Up – Making and keeping follow-up appointments

are essential for keeping plans of care current. Molina Healthcare staff will facilitate appointment scheduling and transportation.

4. Knowledge of Red Flags – knowledge and awareness of signs of worsening conditions and how to respond appropriately. The focus is to educate the member and help them to identify their care needs, and to proactively seek timely appropriate treatment to avoid costly complications.

The process includes:

- Visits to the member in the hospital prior to discharge;
- A home visit as appropriate post discharge; and
- Three phone calls within 30 days of discharge to follow up with the member's post discharge needs.

Facility responsibilities:

- Inform Molina Healthcare of member hospital admission within one business day of admission;
- Allow Molina Healthcare access to member's medical records (e.g., medication, treatment plan, etc.);
- Coordinate post discharge home health care visit(s);
- Notify Molina Healthcare of potential discharge.

QUESTIONS?

Please contact Molina Healthcare's Utilization Management Department for any questions or concerns you may have. (866) 449-6828

Vaccines for Children Program (VFC)

Molina Healthcare encourages you to become a VFC provider. Being a VFC provider is a sound investment in your practice and in your patients. It reduces your up-front costs because you will not have to pay to purchase vaccines for VFC-eligible children. Also, you can charge an administrative fee to offset your costs of doing business. Your patients benefit because they won't have to go somewhere else to get the vaccines they need, and there is no charge to you, the provider.

Children and adolescents are eligible if it is before their 19th birthdays and they meet one or more of the following criteria:

- ▶ Medicaid-eligible
- ▶ Uninsured
- ▶ American Indian or Alaska Native
- ▶ Underinsured (Underinsured children are only eligible for VFC Vaccines through FQHC/RHC.)

What do you mean by “underinsured?”

Underinsured means your patient has health insurance, but it won't cover the vaccine(s) because:

- ▶ It doesn't cover any vaccines.
- ▶ It doesn't cover certain vaccines.
- ▶ It covers vaccines, but it has a fixed dollar limit or cap for vaccines. Once that fixed dollar amount has been reached, your patient is eligible.

What are the benefits of VFC?

The VFC program provides routine vaccines to all states, the District of Columbia, and territories for participating healthcare providers. All vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) and approved by CDC and HHS are covered under the VFC Program at no cost to the participating healthcare provider. You don't have to be a Medicaid provider to participate in VFC. Any healthcare provider authorized to prescribe vaccines under your state law can be a VFC provider.

How can you become a VFC provider?

- ▶ Contact your State/Territory VFC coordinator. You can find him or her at <http://www.cdc.gov/vaccines/programs/vfc/contacts-state.htm>. All you need to do is ask for a Provider Enrollment Package to be mailed to you.
- ▶ Complete the State Provider Enrollment forms and return them as soon as possible.
- ▶ Prepare your office and staff for a site visit to go over the administrative requirements of the program and to ensure proper storage and handling of vaccines when you receive them.
- ▶ Once you're enrolled, tell parents you are now a VFC provider.

The VFC Program will:

- ▶ Keep your patients in their medical home.
- ▶ Reduce your up-front costs.
- ▶ Help provide quality care to vulnerable children and adolescents.

For more information about the VFC program, go to www.cdc.gov/vaccines/programs/vfc/. Get an answer to your specific question by e-mailing cdcinfo@cdc.gov or calling 800-CDC-INFO(232-4636) anytime.





100 West Big Beaver Road, Suite 600
Troy, MI 48084

6649MI1111



Questions about your health? Call Our Nurse Advice Line!

1-888-275-8750 English

1-866-648-3537 Spanish

OPEN 24 HOURS!

Your family's health is our priority!
For the hearing impaired please call

TTY/866-735-2929 English

TTY/866-833-4703 Spanish

Editor: **Brenda Lever**

Co-editor: **Leann Conway**