

Fall 2017 Provider Newsletter



Molina Healthcare's 2017 HEDIS® and CAHPS® Results

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is a survey that assesses Molina members' satisfaction with their health care. It allows us to better serve our members.

Molina Healthcare has received results of how our members scored our providers and our services.

Medicaid: In 2017, Molina Healthcare surveyed both Child and Adult in CAHPS. For the child survey, there were improvements in getting needed care, getting care quickly and the rating of specialists. For the adult survey, we need to improve on how well doctors communicate and customer service. We also need to focus on improving the rating of health plan and overall health care.

In This Issue

Molina Healthcare's 2017 HEDIS® and CAHPS® Results	1
Important: Please remind Molina Members about Preventive HEDIS Screenings	3
MEDICARE: Molina Healthcare's Special Investigation Unit Partnering With You to Prevent Fraud, Waste, and Abuse	4
2017 Flu Season	5
Updating Provider Information..	5
Leapfrog Hospital Safety Data	6
MEDICARE ONLY: Important Reminder about Member ID Cards.....	7

MolinaHealthcare.com

Medicare: In 2017, Molina Healthcare improved in most ratings and composites, with significant improvements in rating of health care, how well doctors are communicating and getting care quickly.

CHIP: In 2017, Molina Healthcare improved in getting members care they needed for tests, or treatment from their primary care, or specialists. Our rating for health care significantly increased. We still need to improve on our customer service composite.

Marketplace: In 2017, Molina Healthcare's personal doctors were rated well. We still need to improve on the rating of health care, rating of health plan and obtaining appointments quickly.

Another tool used to improve member care is the Healthcare Effectiveness Data Information Set or HEDIS®. HEDIS® scores allow Molina Healthcare to monitor how many members are receiving the services they need. Measures include immunizations, well-child exams, Pap tests and mammograms. There are also scores for diabetes care, and prenatal and after-delivery care.

Medicaid: In 2017, Molina Healthcare improved on the HEDIS® measures related to blood pressure management, prenatal appointment timeliness and postpartum care. We need to focus on ensuring our members receive diabetic care and breast cancer screenings.

Medicare: In 2017, Molina Healthcare improved on the HEDIS® measures related to diabetes care and managing the use of high risk medications in the elderly. We also improved our performance for spirometry testing and diagnosing patients with COPD. A focus in the coming year will be increasing breast cancer screenings and diabetic eye exams.

Marketplace: In 2017, Molina Healthcare improved on the HEDIS® measures related to diabetes HbA1c testing and BMI assessments. Measures that have opportunity for improvement include immunizations, breast cancer screenings, colorectal cancer screenings and controlling high blood pressure.

You can look at the progress related to the goals that Molina Healthcare has set for the annual CAHPS® survey results and the annual HEDIS® measures in more detail on the Molina Website. You can also view information about the QI Program and print a copy if you would like one. Please visit the provider page on Molina's website at www.MolinaHealthcare.com.

Important: Please remind Molina Members about Preventive HEDIS® Screenings

Mammograms: If a Member is between **50 and 74 years of age**, talk to the member about getting a mammogram every 2 years. If there is a history of breast cancer, other breast problems or a family history of breast cancer, let the member know that a mammogram may be needed before age 50, and more often.

Diabetes Screenings: If Members have Diabetes, and are between the ages of 18 and 75, talk to them about completing the screenings below and any complications that could arise if screenings are not completed regularly:

- **Retinal eye exam** each year completed by an Optometrist or Ophthalmologist
- **A1C Testing** every 3-6 months
- **Nephropathy Screening** each year

Controlling High Blood Pressure: Please be sure to track blood pressure of all patients and submit to Molina through the supplemental file process. This gives the opportunity to identify clinics in need of blood pressure refresher trainings to help manage high blood pressure. **Use the following CPT II codes that indicate results on the claims:**

- Systolic <130 mm Hg: 3074F
- Systolic 130-139 mm Hg: 3075F
- Systolic >140 mm Hg: 3077F
- Diastolic pressure <80 mm Hg: 3078F
- Diastolic Pressure 80-89 mm Hg: 3079F
- Diastolic Pressure >90 mm Hg: 3080F

Pregnancy Rewards: If a Member is pregnant, she can earn up to \$100 in rewards for completing timely prenatal care in the first trimester or within 42 days of enrollment and postpartum care for a pelvic exam or postpartum care with an OB/GYN practitioner or midwife, family practitioner or other PCP on or between 21 and 56 days after delivery. A Pap test within 21-56 days after delivery also counts. Remind pregnant Members it is important to complete early prenatal care to keep them and their baby healthy. Molina offers programs to help pregnant Members make healthy choices during and after pregnancy. Medicaid members can call (888) 483-0760 (TTY: 711) to enroll at no cost and hear about our rewards.

Well Child Visits Ages 3-6: Well Child Exam documenting health history, physical and mental developmental history, physical exam and health education/anticipatory is needed **annually** for children ages 3-6.

Providers and Medical Billing Coders are **highly** encouraged to use Category II codes when submitting their claims for payment. Please submit these codes in addition to the reimbursable CPT codes.

The Category II codes are performance and quality measurement indicators. By using the Category II codes (which are located in the CPT Professional Code Book), data can be more easily gathered about certain services and test results that will support nationally established performance measures that are directly linked to determining quality of patient care. Submitting these codes with claims will decrease the need **to submit electronic EMR supplemental HEDIS data files or medical** records requested by Molina as part of the abstraction and chart review process. This will reduce the administrative burden on providers, hospitals, and other health care professionals to provide documentation for health plans, like Molina, that require this information to measure the quality of patient care.

MolinaHealthcare.com

MEDICARE: Molina Healthcare's Special Investigation Unit Partnering With You to Prevent Fraud, Waste, and Abuse

The National Healthcare Anti-Fraud Association estimates between three and ten percent of the nation's health care costs, or \$96 to \$320 billion, is lost to fraud, waste, and abuse. 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 recently passed a number of laws, 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 analyzes providers by using software that identifies questionable coding and/or billing patterns, along with issues involving medical necessity. As a result, providers may receive a notice from the SIU if they have been identified as having outliers that require additional review. If your practice receives a notice from the SIU, please cooperate with the notice and any instructions provided. 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 Mary Alice Garcia, the Molina Associate Vice President who heads up the SIU. "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, you may contact the Molina AlertLine toll-free at (866) 606-3889. In addition, you may use the service's website to make a report at any time at <https://MolinaHealthcare.AlertLine.com>.



MolinaHealthcare.com

2017 Flu Season

The Advisory Committee on Immunization Practices (ACIP) continues to recommend annual influenza vaccinations for everyone who is at least 6 months of age and older. 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.

Important Update:

- Do not use the live attenuated influenza vaccine (LAIV) during the 2017-2018 flu season.
- Remove the FluMist from the vaccines for the Children Program.

For a complete copy of the ACIP recommendations and updates or for information on the flu vaccine options for the 2017 flu season, please visit the Centers for Disease Control and Prevention at

<http://www.cdc.gov/flu/professionals/vaccination/>.

Updating Provider Information

It is important for Molina Healthcare of Utah (Molina Healthcare) to keep our provider network information up to date. Up to date provider information allows Molina Healthcare to accurately generate provider directories, process claims and communicate with our network of providers. Providers must notify Molina Healthcare in writing at least 30 days in advance when possible of changes, such as:

- Change in practice ownership or Federal Tax ID number
- Practice name change
- A change in practice address, phone or fax numbers
- Change in practice office hours
- New office site location
- Primary Care Providers Only: If your practice is open or closed to new patients
- When a provider joins or leaves the practice

Changes should be submitted on the Provider Form located on the Molina Healthcare website at <http://www.molinahealthcare.com/providers/ut/> under the Provider Forms section.

Send changes to:

Email: MHUProviderServicesRequests@MolinaHealthCare.Com

Fax: (855) 849-1103

Mail: Molina Healthcare of Utah

7050 Union Park Blvd, Suite 200

Midvale, UT 84047

ATTN: Provider Services Department

Contact your Provider Services Representative at (888) 483-0760 if you have questions.

MolinaHealthcare.com

Leapfrog Hospital Safety Data

A patient safety program helps to reduce accidental injury or medical errors to patients while in the hospital. Leapfrog is the name of a patient safety program. All network hospitals are part of the Leapfrog program. The Leapfrog process gives hospitals one to four stars. One star is for submitting data. Two stars are for making progress toward meeting patient safety standards. Three stars are for making the most progress meeting patient safety standards. Four stars are for meeting all patient safety standards.

Hospital	Steps to Avoid Harm	Management of Never Events	Appropriate Antibiotic Use in Hospitals	Specially Trained Doctors Care for ICU Patients
Alta View	DTR	DTR	DTR	DTR
American Fork Hospital	4	4	4	1
Ashley Regional Medical Center	4	1	1	4
Bear River Valley Hospital	DTR	DTR	DTR	DTR
Beaver Valley Hospital	DTR	DTR	DTR	DTR
Brigham City Community Hospital	4	4	4	N/A
Cache Valley	4	4	1	N/A
Castleview	4	4	4	1
Cedar City	DTR	DTR	DTR	DTR
Davis	4	4	4	4
Dixie Regional	DTR	DTR	DTR	DTR
Garfield	DTR	DTR	DTR	DTR
IMC	DTR	DTR	DTR	DTR
Jordan Valley	4	4	4	1
Jordan Valley West Valley Campus	4	4	4	4
Lakeview	4	4	4	4
LDSH	DTR	DTR	DTR	DTR
Logan Regional	DTR	DTR	DTR	DTR
Lone Peak	3	4	4	N/A
McKay-Dee	DTR	DTR	DTR	DTR
Mountain Point	4	4	4	1

Hospital	Steps to Avoid Harm	Management of Never Events	Appropriate Antibiotic Use in Hospitals	Specially Trained Doctors Care for ICU Patients
Mountain West	DTR	DTR	DTR	DTR
Ogden Regional	4	4	4	3
Orem Community	DTR	DTR	DTR	DTR
Park City	DTR	DTR	DTR	DTR
Primary Children's	DTR	DTR	DTR	DTR
Riverton	DTR	DTR	DTR	DTR
Salt Lake Regional	4	4	4	4
Severe Valley	DTR	DTR	DTR	DTR
St. Mark's	4	4	4	4
Timpanogos	4	4	4	3
Uintah Basin	DTR	DTR	DTR	DTR
University of Utah Hospital	DTR	DTR	DTR	DTR
Utah Valley	4	4	4	4

*DTR = Declined to Report

For more information on Medication Safety, Maternity Care and Infections and Injuries, see <http://www.leapfroggroup.org/cp>.

MEDICARE ONLY: Important Reminder about Member ID Cards

Most Members have Molina Medicare in addition to Medicaid coverage. For this reason, it's important to always ask the Member to show you both ID Cards at the time of service.

Advantages:

- Shows that the Member is dually eligible
- Identifies who to bill; primary and secondary insurance
- Avoids Member complaints about incorrect member billing, which is prohibited by CMS/Medicare
- Tells you who to contact if prior authorization is required

MolinaHealthcare.com