

8101 North High Street #180 Columbus, OH 43235

Part# 1657Rev0208

Nurse Advice Line

1-888-275-8750 (English) 1-866-648-3537 (Spanish)

The Nurse Advice Line is here to help. Bilingual Registered Nurses are available to serve your patients 24 hours a day, seven days a week. If your patients have any concerns about their health, our specially trained triage nurses are available to listen to their symptoms, provide nursing care advice and make referrals to an appropriate care setting. Encourage your patients to call our Nurse Advice Line for assistance.



Transportation Update

Are your patients having difficulty getting to their appointments?

In many instances, a member's failure to keep their appointments is a result of not having a way to get to the office. Transportation to and from covered medical services, WIC appointments and re-determination appointments at the local CDJFS office are offered to our members as part of their Molina benefits.

Trips can be scheduled by our members or by physician's offices, clinics and other healthcare providers. The toll-free number to all to arrange transportation is 1-866-642-9279. Additional details regarding the benefit can be found in the Molina Member Handbook located on our website, www.molinahealthcare.com.



Partners in Care

Molina Healthcare of Ohio • Spring 2008



Quality Improvement Program



Molina has a department dedicated to improving the quality of patients' medical care. This department is headed by our Chief Medical Officer (a board certified pediatrician) and our Quality Improvement Director (a registered nurse). Also on staff are a Clinical Review Nurse, a Credentialing Specialist, a Quality Coordinator and a Manager of Performance Data Analysis. Together, these professionals manage a comprehensive program of quality of care reporting and analysis, as well as implementation of quality improvement initiatives when opportunities are identified. Some of our initiatives in 2007 were:

- We credentialed 2,012 new health care providers;
- We conducted over 350 physician office site visits;
- We implemented a corporate-wide quality program to identify potential quality of care issues, investigate them and take corrective action to promote the highest quality of care for our members;
- We have a comprehensive health care data analysis program that focuses on identifying potential quality issues. This work leads to the implementation of quality-focused interventions in partnership with our providers.

In 2008, we will be implementing targeted Quality Improvement Plans, including healthy lifestyle initiatives and a Community Pharmacy Program. The Pharmacy program is designed to help those patients who take multiple prescriptions for chronic diseases, with the goal of better medication management. We will also be focusing on preparation for NCQA accreditation. NCQA is an independent, national organization that sets the benchmark for quality in the health care industry. Our dedication to achieving NCQA accreditation is driven by our corporate commitment to meet the highest standards of quality performance.

For a comprehensive description of our Quality Improvement Program, please refer to the Provider Manual, also available on this website.

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Features at www.molinahealthcare.com

- Clinical Practice and Preventive Guidelines
- Disease Management Programs for Asthma Diabetes and Pregnancy
- Quality Improvement Programs
- Member Rights & Responsibilities
- Privacy Notices
- Claims/Denials Decision Information
- Provider Manual
- Formulary
- UM Affirmative Statement (re: non-incentive for under-utilization)
- \bullet How to Obtain Copies of UM Criteria

Molina Healthcare of Ohio

Please contact Molina Provider Services for written copies of all information on the website or if you need more information please call Provider Services at 1-800-642-4168.

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Molina RightCare

We have all heard it. Our Emergency Rooms are overwhelmed with people seeking care who could be treated in the doctor's office or urgent care center. While ER care is good care, it is not a medical home or the best setting for continuity of care, often leaving the primary care provider out of the loop.

So what is to be done? Molina Healthcare of Ohio (MHO) is launching a new initiative. The Molina RightCare program will engage participating hospitals, urgent care centers, and providers in assisting members to make the best choice for the right care, at right place, at the right time.

What Molina RightCare is doing to help?

Initially, we will be working with members who have multiple (4 or more) visits to the ER in a six month period. Our goal is to connecting or reconnecting the member with their medical home, educating them on the appropriate settings for care, and assisting them in addressing their individual medical needs through case management.

Then, we will focus on educating those members who might be considering going to the ER for the first time or in follow up to an initial ER visit. Our goal is to give them tools they can use to make the best choice for where to seek care. Over the next few months we will be implement new activities in this area. Our second goal is keep the PCP in the loop by directing the member back to the PCP for the appropriate follow up care.

What can you, the provider, do?

- Allow time in the schedule for members who need to be seen for follow-up care after an ER visit. If you are unable to accommodate the member and they are not in need of emergency room services, refer them to the nearest Urgent Care center. You can call MHO at 1-800-642-4168 or 1-800-750-0750 or 711 (TTY) for the location of the Urgent Care center nearest the member's home.
- For your members with chronic conditions or special medical or behavioral health care needs, give the specific guidelines for when to seek care in the office or the ER and refer them to Molina's UM Department for case management at 1-866-408-9501 or 1-800-750-0750 or 711 (TTY).
- For healthy members, go over what conditions you think are best treated in your office, an urgent care, or an emergency room.
- Refer the member to the Molina's Nurse Advice Line 1-888-275-8750, 1-866-648-3537 (Espanol) or 1-866-735-2922 or 711 (TTY), 24 hours a day, 7 days a week.
- Encourage your Molina members to go over the information sent to them, like the Member Newsletter, their new member packet, and other correspondence.

Molina Healthcare's Utilization Management

One of the goals of Molina Healthcare Utilization Management (UM) department is to render appropriate UM decisions that are consistent with objective clinical evidence. To achieve that goal, Molina Healthcare maintains the following guidelines:

- UM decision making is based only on appropriateness of care and service and existence of coverage.
- Molina Healthcare does not specifically reward practitioners or other individuals for issuing denials of coverage or care.
- UM decision makers do not receive incentives to encourage decisions that result in underutilization.

- Molina Healthcare ensures that all criteria used for UM decision-making are available to practitioners upon request. To obtain a copy of the UM criteria used in the decision-making process, call our UM department 1-800-642-4168.
- As the requesting practitioner, you will receive written notification of all UM denial decisions. The notification will include the name and telephone number of the Molina Healthcare physician that made the decision. Please feel free to call him or her to discuss the case. If you need assistance contacting a medical reviewer about a case please call the UM Department at 1-800-642-4168.

Molina Healthcare Website Update

Are you registered for our Provider ePortal, yet? Registration on the Provider ePortal is easy, and affords you the following benefits, according to your specific contract relationship:

- Submit authorizations electronically (for those that submit directly to Molina Healthcare, not via IPAs)
- Check on authorization status
- Check on claims payment status
- Check on patient eligibility status
- Receive eligibility lists
- Report your NPI
- Receive timely electronic news and updates

If you are not yet registered or have encountered challenges to registration, please contact 1-866-449-6848 for assistance. Featured at www.molinahealthcare.com:

- Clinical Practice and Preventive Guidelines
- Disease Management Programs for Asthma, Diabetes and Pregnancy
- Quality Improvement Programs
- Member Rights & Responsibilities
- Privacy Notices
- Claims/Denials Decision Information
- Provider Manual
- Formulary
- UM Affirmative Statement (re: non-incentive for under-utilization)
- How to Obtain Copies of UM Criteria

Pharmacy Update 3/5/2008

Non-sedating Antihistamine (NSA) Drug Class Review

The Pharmacy and Therapeutics Committee recently reviewed the NSA drug class and approved the following recommendations.

- 1. Zyrtec will be removed from prior authorization. All Zyrtec products are now available as OTC items which will be covered by Molina Ohio.
- 2. Xyzal (levocetirizine) was reviewed. This product, an isomer of cetirizine, did not offer any significant efficacy or safety benefits over existing NSA. This product was not added to the Molina formulary. Loratidine (Claritin), fexofenidine (Allegra) and OTC (cetirizine) are all covered NSA available on the Molina formulary.

Drug Utilization Review (DUR) Head Lice

Providers have cited drug resistance to Rid and Nix used to treat head lice. For that reason they would like to be able to access Ovide (malathion) which currently requires prior authorization.

The pharmacy department examined 2800 individual members for whom a head lice product was prescribed.

The purpose of this DUR was to determine through pharmacy claims data if there was a significant failure rate to standard products. Failure was defined as the member having to try three or more doses of a particular medication. Failure could be the result of non-compliance, re-infection or drug resistance. Pharmacy examined utilization for the months of September, October and November 2007 in the Molina service area.

Results of the study showed that 72% of members utilized only a single application of medication. Eighteen percent required 2 doses, usually administered within 7 to 10 days and 7.5% required 3 or more doses. Nix was the most commonly used product. Ovide was used in 1.6% of cases. It was also noted that treatment failures were more likely to occur in families with more than one infected member.

Despite limits of this claims study (e.g. body lice included, regional differences missed), the existence of drug resistance appeared to be low.

The Pharmacy and Therapeutics Committee decided to maintain current PA on Ovide at this time and emphasized the need to supplement the drug with the use of a nit comb and wash clothing, stuffed toys and bedding to avoid re-infection.

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