



Diagnosis Codes for CMHC Services

Information for community BH providers in the Medicaid network

As part of the Behavioral Health (BH) Redesign project, the Ohio Department of Medicaid (ODM) defined the diagnosis codes that can be the focus of Community Behavioral Health Center treatment services.

ODM posted the list of allowable diagnosis codes that must be on claims for the services in the BH Redesign program. Please visit the "Billing and IT Resources" section on the ODM BH website at https://bh.medicaid.ohio.gov/manuals, select "2019 ICD-10 DX Code Groups BH Redesign."

As a reminder, if a claim is received by Molina for services without an allowable diagnosis code on the list, the claim will deny. Please make sure your billing department and clinicians are aware of these allowable diagnoses to avoid any delays in payment.

Changing a Service Location Address

Information for all network providers

Service locations are key to claim processing, so it is important that any changes to a service location address are submitted timely to Molina to avoid claim denials.

When updating a service location address the provider should complete the <u>Provider Information Update Form</u> available on the Molina website, under the "Forms" tab. Submission should include any appropriate attachments for specialists or primary care providers. The completed form can be emailed, mailed or faxed to Molina for processing.

Claim Reconsideration

Information for all network providers

BH providers are required to follow the claim reconsideration process for disputing how a claim was processed. Submit a claim reconsideration form only when disputing a payment denial, payment amount or code edit.

A <u>Claim Reconsideration Request Form</u> must be submitted for any dispute that is related to a claim denial that is not due to an authorization. An <u>Authorization Reconsideration Form</u> must be attached to any request involving an authorization denial or update.

The appropriate form will be required to process the reconsideration. These forms are available on our website under the "Forms" tab. Please be sure you are accessing the current version of the form on our website or your request will be returned unworked.

Behavioral Health Cash Advance Repayments

Information for community BH providers in the Medicaid network

As a reminder, providers who suspended their payments should have resumed their agreed-upon repayment schedules and monthly payment amounts as of July 1, 2020.

For additional questions, or if your agency is experiencing an extreme hardship, please email Deanna.Putman@MolinaHealthcare.com and your

In This Issue - July 2020

- → <u>Diagnosis Codes for CMHC</u> Services
- → Changing a Service Location Address
- → Claim Reconsideration
- → BH Cash Advance Repayments
- → Changing a Remittance Address
- → Provider Enrollment in MITS
- → COVID-19 Updates
- → CPSEs on Provider Website
- → BH Provider Manual Updates
- → Provider Trainings
- → Claim Processing Requirements

Questions?

Provider Services – (855) 322-4079 8 a.m. to 5 p.m., Monday to Friday (MyCare Ohio available until 6 p.m.)

Email us at <u>BHProviderServices@</u>
MolinaHealthcare.com

Visit our website at MolinaHealthcare.com/OhioProviders

Visit the ODM BH website at https://bh.medicaid.ohio.gov/manuals

How to Join WebEx

To join WebEx, call (404) 397-1516 and follow the instructions. To view sessions, log into WebEx.com, click on "Join" and follow the instructions. Meetings passwords are case sensitive. For trouble connecting to a Molina training, email Molina at OHProviderRelations@MolinaHealth care.com and we'll assist you with getting connected immediately.

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Behavioral Health Provider Manual

On July 17, 2020, the <u>Behavioral</u> <u>Health (BH) Provider Manual</u> was updated by ODM and OhioMHAS. Visit the ODM BH website to view the updated manual.

Molina Provider Services Representative at BHProviderServices@MolinaHealthcare.com to discuss next steps.

Changing a Remittance Address

Information for all network providers

It is important for providers to update any changes to their remittance (Explanation of Payment [EOP]) address in order to avoid delays or misrouted payments. The remittance address is where all payments, letters and important notifications are sent.

When updating a remittance address the provider should complete the <u>Provider Information Update Form</u> available on the Molina website, under the "Forms" tab. Submission should include an updated W-9. The completed form can be emailed, mailed or faxed to Molina for processing.

Provider Enrollment in MITS

Information for all Community BH Center providers

As a reminder, the Ohio Department of Medicaid (ODM) and the Ohio Department of Mental Health and Addiction Services (OhioMHAS) have discontinued the Universal Roster and moved forward with using one system, Medicaid Information Technology System (MITS), as the primary source of provider enrollment and affiliation information.

For additional information visit the ODM Behavioral Health (BH) website and under "MITS Bits & Newsletters" select "<u>Universal Roster</u> <u>Discontinuation and Move to Provider Master File Only, Effective</u> Immediately."

It is imperative that Community Behavioral Health Center (CBHC) providers update MITS with accurate information so that it is shared with all Managed Care Plans (MCPs) via the daily Provider Master File (PMF). There are several steps CBHC providers should take in order to achieve the single system goal, including:

- View the ODM training presentation and webinar recordings for stepby-step instructions on how rendering practitioners can enroll in MITS, become affiliated with their employing agency and make changes to licenses, provider specialties and names.
- Review the online CBHC Practitioner Enrollment File for correct provider type, specialty and affiliation, and make any updates in MITS.

COVID-19 Updates

Information for providers in all networks

For COVID-19 information, visit our provider website and review the COVID-19 (Coronavirus) page located under the "Communications" tab.

Molina CPSEs on the Provider Website

Information for providers in all networks

Molina of Ohio has added a Claims Payment Systemic Errors (CPSE) page to the Molina Website, under the "Communications" tab. Molina now posts our CPSE reports each month for provider communication.

Provider Training Sessions

Information for all network providers

Monthly It Matters to Molina
Provider Forum Topic: Federally
Qualified Health Center (FQHC) 101:
Molina is hosting a forum for FQHCs to
provide guidance on challenges faced
in your office and to assist with
questions.

 Wed., July 29, 2 to 3 p.m. meeting number 133 802 5123, password uMdVpA69yn4

Monthly Provider Portal Training:

- Thurs., July 23, 9 to 10 a.m. meeting number 286 739 320, password W947k32AJQi
- Thurs., Aug. 20, 2 to 3 p.m. meeting number 288 537 344, password 3agMH379FRM

Monthly Claim Submission Training:

 Mon., Aug. 10, 2 to 3 p.m. meeting number 285 060 282, password YXh7Emw3TH7

Quarterly Provider Orientation:

 Tues., Aug. 25, 2 to 3 p.m. meeting number 281 096 189, password 4RNmASdBr56

To join WebEx, follow the instructions under "How to Join WebEx."

Reminder: Claim Processing Requirements

Information for all network providers

For accurate claims processing providers must bill with the correct code and modifier to align to education level, including modifiers, such as:

- HM High school or associate's level degree
- HN Bachelor's level degree
- HO Master's level degree

For additional information visit https://medicaid.ohio.gov and under "Resources" select "Publications" and "ODM Guidance" then in "Modifiers recognized by ODM" refer to approved modifier section titled "ODMHAS-Certified Community Mental Health and Substance Use Disorder Agency Services, OAC Chapter 5160-27."