![Molina Healthcare logo]

PROVIDER NEWSLETTER

A newsletter for Molina Healthcare Provider Networks

Winter 2019

In this Issue

Molina Healthcare's 2018 HEDIS® and CAHPS® Results

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

Molina Healthcare has received the CAHPS results of how our members rated our providers and our services.

Medi-Caid: In 2018, Molina Healthcare showed improvement in the Rating of Overall Health Care. We also improved in Ratings of Personal Doctor, Coordination of Care, Getting Needed Care, Getting Care Quickly, and Specialists Seen Most Often. All of these areas show improvements, however we still need to focus on our Customer Service Rating.

Medicare: In 2018, Molina Healthcare improved in the areas of Getting Needed Care, Getting Care Quickly, Customer Service, Care Coordination and Rating of Health Plan. Additional areas of improvement include Rating of Personal Doctor and Rating of Specialist. We need to focus on the areas of Doctors Communicating Well with their Patients and Getting Needed Prescription Drugs.

Marketplace: In 2018, Molina Healthcare improved in the Ratings of Getting Care Quickly and Getting Needed Care. We need to focus on our Rating of Personal Doctor, Care Coordination, Rating of All Health Care, and Specialist Seen Most Often.

MMP: In 2018, Molina Healthcare demonstrated improvement in the areas of Getting Care Quickly and Customer Service. Additional areas of improvement include Rating of Personal Doctor, Rating of Specialist, and Rating of Health Care. The greatest opportunity for improvement is the member's Rating of Getting Needed Care, followed by the Care Coordination, and member's Rating of Drug Plan.

Another tool used to improve member care is the Healthcare Effectiveness Data and 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 2018, Molina Healthcare improved on the HEDIS® measures related to Breast Cancer Screening, Controlling High Blood Pressure, and Comprehensive Diabetes Care: Hemoglobin A1C Testing and Monitoring for Nephropathy, and Vaccinating Female Adolescents for Human Papillomavirus (HPV). We need to focus on making sure our members receive timely Prenatal Care and Follow-up for Children Prescribed ADHD medication.

Medicare: In 2018, Molina Healthcare observed improvements in the following measures: Antidepressant Medication Management, Breast Cancer Screening and Follow-up after Hospitalization for Mental Illness. We also demonstrated that more members are in better control of their diabetes and HbA1c measures. Areas of focus include Controlling High Blood Pressure and Diabetes Eye Exams.
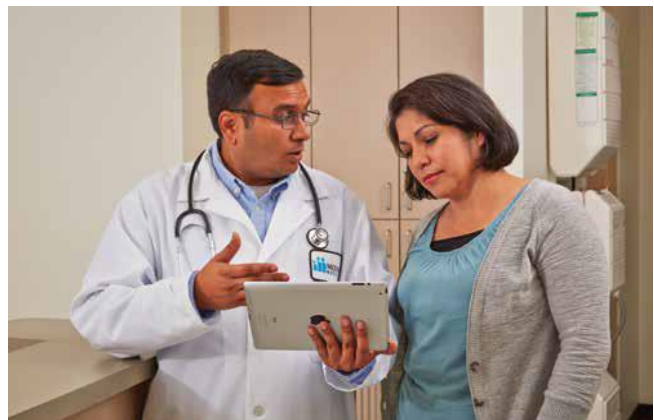
Marketplace: In 2018, Molina Healthcare observed improvements in Comprehensive Diabetes Care measures, including A1C Monitoring and Testing for Diabetic Members. Areas for focus include Controlling High Blood pressure, Breast Cancer Screening and Colorectal Cancer Screening.

MMP: In 2018, Molina Healthcare was able to attain a rating in the 75th percentile for NCQA for Medicare plans related to Pharmacotherapy Management of COPD Exacerbation measures. Focus areas for 2019 include Follow-up after Hospitalization for Mental Illness and Antidepressant Medication Management.

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 Healthcare Website. You can also view information about the QI Program. Please visit the provider page on Molina Healthcare's website at **www.MolinaHealthcare.com.**

Influenza Update

Xofluza™ (baloxavir marboxil) was approved by the Food and Drug Administration (FDA) to treat an acute influenza infection in people 12 years of age and older on October 24, 2018. In a phase 3 active- and placebo-controlled (parallel assignment) trial of 1,436 adult and adolescent subjects 12 to 64 years of age, there was no difference in the time to alleviation of symptoms between subjects who received Xofluza™ (54 hours) and those who received oseltamivir (54 hours) and for adolescent subjects (12 to 17 years of age), the median time to alleviation of symptoms for subjects who received Xofluza™ was 54 hours vs. 93 hours in the placebo arm. Based on the outcomes, Xofluza™ did result in statistical significantly shorter time to alleviation of symptoms when compared to placebo. Limitations to the clinical trials was the patient selection criteria; those patients with characteristics who met the CDC recommendation list for

antiviral therapy were for the most part excluded from the clinical trials. The most common adverse reactions were diarrhea, bronchitis, nasopharyngitis, headache and nausea, occurring in less than 3% of the population. Xofluza™ does have drug interactions with polyvalent cation-containing laxatives, antacids, or oral supplements which are commonly used medications and food products.

The single dose oral tablet option is made by Genentech, the same company that brought Tamiflu™ (oseltamivir) to the market. Tamiflu™ (oseltamivir) is now available as a generic product, making it a potentially more cost-effective option.

Drug	Manufacturer	Mechanism	Efficacy	Age	Dosing Regimen	Wholesale Acquisition Cost/course
Xofluza™ (baloxavir)	Genentech	Selective inhibitor of cap-dependent endonuclease	Reduces duration of symptoms from average of 80.2 hrs to ~53.7 hrs	$\geq$ 12 yrs	40mg or 80mg	$150
Tamflu™ (oseltamivir)	Genentech	Neuraminidase inhibitor	Median times to alleviation of symptoms 97.5 versus 122.7 hours	$\geq$1 yr	75mg q 12 hr x 5 days (Separate pediatric dosing)	$77 (generic)

Currently there is no data available for the utilization of Xofluza™ in high risk patients for prophylaxis of influenza. While Xofluza does have a differing mechanism of action from oseltamivir, since 2009, ninety-nine percent of influenza virus isolates have been susceptible to neuraminidase inhibitors.

Molina Healthcare, Inc. National P&T has voted to not add this product to the standard formularies at this time, allowing it to be accessible via a medical exception request.

Electronic Funds Transfer (EFT)

Molina has partnered with our payment vendor, ProviderNet, for Electronic Funds Transfer and Electronic Remittance Advice. Below are additional benefits and reminders:

Benefits:
- Providers get faster payment and eliminates mailing time (processing can take as little as 3 days from submission)
- Providers can search for a historical Explanation of Payment (EOP) by claim number, member number, etc.
- Providers can view, print, download and save a PDF version of the EOP for easy reference with no paperwork to store
- Transfer Protocol (FTP) and their associated Clearinghouse
- Electronic Funds Transfers ensure HIPAA compliance
- It's a free service for you!

ProviderNet Reminders:
- ProviderNet is only for providers who have registered for EFT.
- Providers should always login to their ProviderNet account and view their payment history before contacting Molina about a missing EFT payment.

- ProviderNet only facilitates the payments from Molina to the provider. Questions regarding claims payment should be directed to Provider Services/Call Center.
- If a provider receives a Molina payment that is not on their ProviderNet account (frequently Accounts Payable payments), providers should contact Provider Services/Call Center.
- Providers should be reminded to add all NPI's to their account that receive Molina payments.

Get started today! Provider that are not registered for EFT payments should contact: Electronic Funds Transfer at: (P) 1-866-409-2935, Email: EDI.Claims@Molinahealthcare.com

Do Your Patients Have New Year's Resolutions?

Do your patients have New Year's resolutions such as quitting smoking or weight loss? Molina Healthcare's Health Management programs and educational resources provide support to physicians as well as members. Health Management staff such as Registered Dietitians and/or Health Educators are available telephonically to share information about Molina Programs. They will assist Members with preventative education and management of conditions.

If you have a Molina Healthcare patient you think will benefit from receiving health education on quitting tobacco or weight management, please refer to our programs. Don't forget, we have a large collection of member health education materials on these topics that you can print on demand to give out to Molina members. For more information, call the Health Management Department at (866) 891-2320.

Weight Management Program
Molina's Weight Management program is for adults and is comprised of one-on-one telephonic education and coaching by a case manager to support the weight management needs of the Member. Health Education staff work closely with the Member, providing education on nutrition, assessing the Member's readiness to lose weight, and supporting the Member throughout their participation in the program. We also work closely with the Member's Provider to implement appropriate intervention(s). The program consists of multi-departmental coordination of services and uses various approved health education and information resources. These resources are intended to provide both general telephonic health education and targeted information based on the needs of the individual.

Tobacco Cessation Program
MHC members are eligible for Provider tobacco cessation counseling, medications as prescribed, referrals to group counseling or classes, and telephonic counseling. We refer to the California Smoker's Helpline for telephonic counseling. They have specialized services for teens, pregnant smokers and tobacco chewers. Providers may refer directly to the California Smoker's Helpline by using their online referral system.
PCPs can prescribe nicotine replacement therapy as appropriate. A Prior Authorization (PA) Request Form may be needed for some NRTs. The PA form and prescription should be faxed to (866) 508-6445. For a list of group counseling, support groups, or cessation classes in all counties of operation for referral by providers, please visit Molina's provider website at:
http://www.molinahealthcare.com/medicaid/providers/ca/forms/Pages/fuf.aspx

Member Health Education Materials

Molina offers a variety of low literacy health education materials in English and Spanish at no cost to Providers or members. All health education materials are available online for providers to download and print on demand under the following categories:

Appropriate Use of Healthcare Services
- Use of Managed Healthcare Services
- Screenings and Immunizations

Risk-Reduction and Healthy Lifestyles
- Nutrition
- Behavioral Health Management
- Fitness
- Dental
- Flu Prevention
- Sexually Transmitted Infections

Self-Care and Management of Health Conditions
- Diabetes
- Cancer
- Pregnancy
- Postpartum
- Cardiovascular Disease
- Renal Disease
- Asthma and COPD
- Caring for Your New Baby
- Senior Health

These materials can be accessed online at:
http://www.molinahealthcare.com/providers/ca/medicaid/comm/Pages/Health-Education-Materials.aspx

2019 Provider Manuals

The 2019 Provider Manuals will be available on MolinaHealthcare.com in January 2019. The provider manual is intended to provide Molina contracted Providers with guidance in understanding Molina Healthcare's programs, processes and policies. Manuals may be revised as Molina Healthcare's policies, programs or regulatory requirements change. All changes and revisions will be updated and posted to the Molina Healthcare website located at www.molinahealthcare.com.

Provider Portal Corner

Effective 10/11/18, Third Party Billers (3PB) have access to certain functions in the Provider Portal.

Molina contracted Providers may now grant access to their contracted third party billers who will be able to log into the Provider Portal. Once they are registered and granted access by a provider they can utilize the following functionality:

- Member Eligibility Inquiry
- Member Roster
- Claims (Inquiry & Submission)

To register a 3PB, the Provider Portal Account administrator for the Provider's office must invite the 3PB via the "Manage Users" function. Once the new 3PB user is selected to Invite, the administrator will:

- Select "Biller" as the user role
- Attest to the Third Party Biller contract and BAA status
- Once the invitation is submitted, the 3PB will receive an invitation via the email address provided.

Manage User Screen

User Details
User Id: AdminAccount121

Functionality Access   **Role Details**

Provider	Role
MOLINA HEALTH - 123456789 - xxx5555	Biller ▼
MOLINA HEALTH PC - 123456789 - xxx6556	Biller ▼

◉ Yes ○ No Click here if this invitation is for a Third Party Biller outside of your organization

☑ Click here if you attest that the Third Party Billing firm has an active contract with your organization
☐ Click here if you attest that the Third Party Billing firm has a current business associate agreement with your organization

Save   Go Back

If a role type is not selected, it is defaulted to "Basic"

Please note the following: The 3PB have the ability to toggle between multiple Pay-To groups from the same state with one user ID, similar to the non-3PB Biller role. If they need access to another state's Pay-To group, they will need to create a separate User ID with a different email address.