

Provider Memorandum

Revision to PA Frequency Accumulator for Waiver Billing

Molina Healthcare of Illinois (Molina) announces that we will remove the **weekly** billing requirement for Waiver providers **effective February 15, 2023**. It was previously announced that on January 1, 2023, Molina would launch a Prior Authorization weekly frequency accumulator for claims received January 1, 2023, and later.

Molina will pull an extract of claims previously denied for exceeding the weekly frequency and will adjust for payment up to the approved monthly frequency amounts. **Important**: providers will **not** be required to rebill or submit disputes on previous weekly frequency denials and are encouraged to allow additional time for the adjustments to complete.

Revisions Coming to Waiver Billing

Effective **July 1, 2023**, Molina will implement a **monthly** (in place of weekly) frequency accumulator for claims **processed** on or after July 1, 2023. Providers can continue billing the entire month on one claim line and are **not** required to separate service lines by weekly or daily usage. Providers also have the option to bill daily (one DOS per line) or bill weekly with each DOS on a separate line. Molina will, however, deny all charges that **exceed** the **monthly** authorized units.

Molina will update all authorizations to reflect the **monthly** approved units. Providers should **not** recalculate authorized units, as Molina will provide the converted units applicable to the member's approved waiver service(s).

Correct Claim Example: Authorization is approved starting June 1, 2023, through June 30, 2024, with a monthly frequency of 100 units. Claims can be billed listing the daily units per line, billed per week, or billed per month, all not to exceed 100 total units each month. Claims should be submitted in date frequency and **not** to exceed more than one month of service.

Incorrect Claim Example: Authorization is approved starting June 1, 2023, through June 30, 2024, with a monthly frequency of 100 units. Claim is billed to Molina on July 1, 2023, using daily, weekly, or monthly service lines for DOS June 1, 2023, through June 30, 2023, with 105 units. This claim will pay the authorized monthly units of 100 and **deny** the additional five (5) units for exceeding monthly frequency limit.

During COC Period

For the Continuity of Care (COC) period, providers should bill based on the member's Prior Authorization whether from the Illinois Department on Aging (IDOA), the Division of Rehabilitation Services (DRS), or the previous MCO. Once a Molina authorization is received, providers are **required** to adhere to the frequency as outlined.

To request an authorization after the COC period ends, providers can contact Care Management at LTSSETI@MolinaHealthcare.com. A response should be rendered within three business days of the request.

Note: HCBS Billing provider webinars will be hosted monthly throughout 2023. Please visit Molina's Provider Education Series webpage to register.

Questions?

We're here to help. Contact your dedicated Provider Network Manager or email the Provider Network Management team at MHILProviderNetworkManagement@MolinaHealthcare.com. For help identifying your dedicated Provider Network Manager, visit Molina's Service Area page at MolinaHealthcare.com.

Provider Portal Alert

We are sunsetting the Molina Legacy Provider Portal on March 28, 2023. Ensure that you and your staff have access to streamlined claims management, authorizations, eligibility/benefit verification, and more. Get started with Availity Essentials Provider Portal today! <u>Click here</u>.

Get Critical Updates

Receive news and updates about Molina services and plan requirements delivered straight to your inbox! Click here to receive Molina's provider updates.

Note: Molina's website and documents are best viewed in Google Chrome or Microsoft Edge.