

PROVIDER NEWSLETTER

Third Quarter 2020



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Submitting Electronic Data Interchange (EDI) Claims

Providers will enjoy many benefits when using EDI. Electronic Claims Submission:

- Ensures HIPAA compliance.
- Helps reduce operational costs associated with paper claims (printing, postage, etc.).
- Increases accuracy of data and efficient information delivery.
- Reduces claims delays, since errors can be corrected and resubmitted electronically!
- Eliminates mailing time so that claims reach Molina faster!

EDI Claims Submission

The easiest way to submit EDI claims to Molina Healthcare is through a clearinghouse. You may submit the EDI through your own clearinghouse or use Molina’s contracted clearinghouse, Change Healthcare. If you do not have a clearinghouse, Molina offers additional electronic claims submissions options. Log onto Molina’s Provider Portal provider.molinahealthcare.com for additional information and options.

FAQs

- **Can I submit COB claims electronically?**
 - Yes, Molina and our connected clearinghouses fully support electronic COB.
- **Do I need to submit a certain volume of claims to send EDI?**
 - No, any number of claims via EDI saves both time and money.
- **Which clearinghouses are currently available to submit EDI claims to Molina?**
 - Molina Healthcare uses Change Healthcare as our channel partner for EDI claims. You may use the clearinghouse of your choice. Change Healthcare partners with hundreds of other clearinghouses.

- **What claims transactions are currently accepted for EDI transmission?**
 - 837P (Professional claims) and 837I (Institutional claims).
- **What if I still have questions?**
 - More information is available at molinahealthcare.com under the EDI tab. You may also call or email us here:

Submitting Electronic Claims

Phone: (866) 409-2935

Email: EDI.Claims@MolinaHealthcare.com

Molina Healthcare of Illinois, Payer ID: 20934

Electronic Fund Transfer (EFT)

Molina has partnered with the payment vendor ProviderNet for Electronic Funds Transfer (EFT) and Electronic Remittance Advice. Access to the ProviderNet portal is **free** to our participating providers; we encourage you to register after receiving your first check from Molina.

<p>New ProviderNet User Registration:</p> <ol style="list-style-type: none"> 1. Go to https://providernet.adminisource.com 2. Click "Register" 3. Accept the Terms 4. Verify your information <ol style="list-style-type: none"> a. Select Molina Healthcare from Payers list b. Enter your primary NPI c. Enter your primary Tax ID d. Enter recent claim and/or check number associated with this Tax ID and Molina Healthcare 5. Enter your User Account Information <ol style="list-style-type: none"> a. Use your email address as user name b. Strong passwords are enforced (8 or more characters consisting of letters/numbers) 6. Verify: contact information; bank account information; payment address <ol style="list-style-type: none"> a. Note: Any changes to payment address may interrupt the EFT process. b. Add any additional payment addresses, accounts, and Tax IDs once you have logged in. 	<p>If you are associated with a Clearinghouse:</p> <ol style="list-style-type: none"> 1. Go to "Connectivity" and click the "Clearinghouses" tab 2. Select the Tax ID for which this clearinghouse applies 3. Select a Clearinghouse (if applicable, enter your Trading Partner ID) 4. Select the File Types you would like to send to this clearinghouse and click "Save" <p>If you are a registered ProviderNet user:</p> <ol style="list-style-type: none"> 1. Log in to ProviderNet and click "Provider Info" 2. Click "Add Payer" and select Molina Healthcare from the Payers list 3. Enter recent check number associated with your primary Tax ID and Molina Healthcare <p>BENEFITS</p> <ul style="list-style-type: none"> ▪ Administrative rights to sign-up/manage your own EFT Account ▪ Ability to associate new providers within your organization to receive EFT/835s ▪ View/print/save PDF versions of your Explanation of Payment (EOP) ▪ Historical EOP search by various methods (i.e. Claim Number, Member Name) ▪ Ability to route files to your ftp and/or associated Clearinghouse
<p>If a provider has questions regarding the actual registration process, they can contact ProviderNet at: (877) 389-1160 or email: wco.provider.registration@changehealthcare.com.</p>	

Note: Providers, please ensure that you are registered for EFT for all participating Molina Healthcare Lines of Business.

Are You Culturally Competent?

Cultural and linguistic competency is the ability to provide respectful and responsive care to members with diverse values, beliefs, and behaviors, including tailoring health care delivery to meet members’ social, cultural, and linguistic needs. The National CLAS Standards, developed by the Health and Human Services Office of Minority Health, aspire to improve health care quality and to advance health equity by establishing a collective set of mandates and guidelines that inform, guide, and facilitate culturally and linguistically appropriate services to all patients.



Clear communication is the foundation of culturally and linguistically competent care.

Guiding the conversation

- Initial greetings can set the tone for an interaction. If the patient's preference is not clear, ask how they would like to be addressed (i.e., Mr. Jones, Michael, Ms. Gonzalez, etc.).
- Ask open-ended questions whenever possible.
- Some individuals can tell you more about themselves through storytelling than by answering direct questions.
- Inquire about preferred language and preferred method of communication (i.e., written, spoken, graphics, sign language, assistive technology, etc.).
- Consider treatment plans with respect to the patient's culture-based beliefs about health.
- Ask about any complementary or alternative medicine possibly used by the patient.

Assisting patients whose first language is not English

- Speak slowly and try not to raise your voice.
- Speak clearly and articulate each word.
- Use simple words and avoid jargon.
- Do not use acronyms or idioms and avoid technical language (i.e., shot rather than injection).
- Give information in small chunks and short sentences.
- Repeat important information, and have the patient repeat it back to you.
- Inform the interpreter of any specific patient needs.
- Hold a brief introductory discussion.
- Reassure the patient about confidentiality.
- Allow enough time for the interpreted sessions.
- Avoid interrupting during interpretation.
- Speak in the first person.
- Talk to the patient directly, rather than addressing the interpreter.

Important Note: It is never permissible to ask a minor, family member, or friend to interpret.

Molina's Language Access Services

Molina strives to ensure good communication with members by providing language access services. Language access services is a legal requirement for health care systems that are recipients of federal funds; a member cannot be refused services due to language barriers. Language access services ensure mutual understanding of illness and treatment, increase patient satisfaction, and improve the quality of health care for patients with limited English proficiency.

Molina provides the following services to members at no cost when needed:

- Written material in other formats (i.e., large print, audio, accessible electronic formats, Braille).
- Written material translated into languages other than English.
- Oral and Sign Language Interpreter Services.
- Relay Service (711).
- 24-Hour Nurse Advice Line.
- Bilingual/Bicultural Staff.

Also, Molina’s materials are always written simply, in plain language, and at required reading levels. For more about Molina’s language access services or cultural competency resources, contact Provider Services or visit MolinaHealthcare.com.

Training for Providers

A series of short Cultural Competency Training videos are available on Molina’s website under [Health Resources](#). Topics include:

- How Culture Impacts Health Care
- Health Disparities
- Social Determinants of Health
- Seniors and Persons with Disabilities
- LGBTQ Population
- Immigrant and Refugee Populations
- Perspective-taking and Molina’s Language Access Services.

Sources:

U.S. Department of Health & Human Services: Office of Minority Health. Health Research & Educational Trust, 2013. Industry Collaboration Effort, Better Communication, Better Care: Provider Tools to Care for Diverse Populations. Industry Collaboration Effort, Cultural and Linguistic Services, 2017.

Molina’s New Site of Care Program



In order to provide high-quality treatment services while controlling costs, Molina Healthcare is promoting a new way of thinking: “Site of Care (SOC) optimization.” SOC optimization is a program that seeks to offer certain infused or injected drugs, including expensive specialty drugs and biologics, at clinically appropriate, convenient, and lower-cost care settings.

The SOC program is designed to encourage the consideration of treatment services through community offices, Ambulatory Infusion Suites (AIS), or home-based settings, such as home infusion services.

Home infusion offers the convenience of care in the home without the hassle of traveling to a care center and remaining there throughout treatment; this may be particularly useful during the COVID-19 pandemic. At Molina, we continually monitor developments and are focused on making sure our members have uninterrupted and appropriate access to the medications they need. The SOC program is an opportunity to help keep our members safe and at home.

These medications, when covered under the medical benefit, may require an SOC clinical review and/or a clinical prior authorization. This list is not a guarantee of benefits, may not be all inclusive, and should be used for reference purposes only.

Actemra® (tocilizumab)	Givlaari® (givosiran)	Radicava® (edaravone)
Adakveo® (crizanlizumab)	Ilaris® (canakinumab)	Reblozyl® (luspaterecept-aamt)
Aldurazyme® (laronidase)	Ilumya™ (tildrakizumab-asmn)	Remicade® (infliximab)
Aralast® NP (A1-PI)	Inflectra® (infliximab-dyyb)	Renflexis® (infliximab-abda)
Benlysta® (belimumab)	Kanuma® (sebelipase alfa)	Revcovi® (elapegamase-lvlr)
Cerezyme® (imiglucerase)	Lemtrada® (alemtuzumab)	
Cinqair® (reslizumab)		

Cinryze® (C1 Esterase inhibitor)	Lumizyme® (alglucosidase alfa)	Simponi Aria® (golimumab)
Crysvita® (burosumab)	Mepsevii™ (vestronidase alfavjkb)	Soliris® (eculizumab)
Elaprase® (idursulfase)	Naglazyme® (galsulfase)	Trogarzo® (ibalizumab)
Elelyso® (taliglucerase)	Nucala® (mepolizumab)	Tysabri® (natalizumab)
Entyvio® (vedolizumab)	Ocrevus® (ocrelizumab)	Ultomiris® (ravulizumab-cwvz)
Exondys 51® (eteplirsen)	Onpatro® (patisiran)	Vimizim® (elosulfase alfa)
Fabrazyme® (agalsidase beta)	Orencia® (abatacept)	VPRIV® (velaglucerase)
Fasenra® (benralizumab)	Prolastin®-C™ (A1-PI)	Vyondys 53® (golodirsen)
Glassia® (A1-PI)		Zemaira® (A1-PI)

2020 Molina Model of Care Provider Training

In alignment with requirements from the Centers for Medicaid and Medicare Services (CMS), Molina requires PCPs and key high-volume specialists to receive basic training about the Special Needs Plans (SNPs) Model of Care (MOC). The SNPs MOC is the plan for delivering coordinated care and care management to members with special needs.

Per CMS requirements, Managed Care Organizations (MCOs) are responsible for conducting their own MOC training, which means you may be asked to complete multiple trainings with different health plans.

MOC training materials and attestation forms are available at [Molinahealthcare.com](https://www.molinahealthcare.com).

The completion date for this year's training is **November 30, 2020**.

If you have questions, please contact your Provider Services Representative at (855) 866-5462.



CMS Coverage of the Opioid Treatment Programs

In accordance with CMS rules, effective January 1, 2020, Molina Healthcare began covering Opioid Treatment Services (OTP) for members enrolled in our Medicare Advantage and MMP plans. Opioid Use Disorder (OUD) services are covered under the Medicare Part B benefit (Medical Insurance). Covered services include:

- FDA-approved opioid agonist and antagonist treatment medications, and the dispensing and administration of such medications, if applicable.
- Substance use counseling.
- Individual and group therapy.
- Toxicology testing.

OTPs wishing to render services to Molina members **must** be certified by CMS as an OTP. Molina encourages all potential eligible providers to learn more about this program. Follow these links to CMS resources that will help as you consider your participation options:

- [CMS Opioid Treatment Programs \(OTP\)](#).
- [CMS OTP Enrollment Information](#).

How to Manage Stress During COVID-19

As many individuals experience psychological and emotional impacts of stressors related to COVID-19, Molina has developed supplemental tools to support primary care providers in identifying and providing appropriate intervention to members at risk.

The [Molina Behavioral Health C.O.V.I.D. Screening Tool](#) is a simple, five-question screener that allows primary care providers to assess for potential psychological and social health impacts as a result of COVID-19 stressors. It is recommended that providers consider one or more positive responses to the questionnaire as a positive screen and to reach out to the local Molina Case Management Team for assistance with care coordination.

In addition to the screening tool, Molina has developed supplemental one-page documents to provide additional information on the following topics:

- [The Psychological Impact of COVID-19.](#)
- [Emotional Aspects of Medical Conditions.](#)
- [Trauma Informed Care.](#)

The [Molina Behavioral Health C.O.V.I.D Screening Tool](#) and the supplemental documents can be found under “Behavioral Health” on the COVID-19 webpage for providers at [MolinaHealthcare.com](#).

For additional behavioral health resources and tools, please visit the [Molina Behavioral Health Toolkit for Providers](#) under the “Health Resources” tab at [MolinaHealthcare.com](#).

Is Your Authorization Request Urgent?

CMS defines expedited/urgent authorization requests as “applying the standard time for making a determination could seriously jeopardize the life or health of the enrollee or the enrollee’s ability to regain maximum function.”

When submitting urgent/expedited prior authorization requests, keep the following items in mind to ensure the request is processed without delay:

- Urgent/expedited service request designation should only be used if the treatment is required to prevent serious deterioration in the member’s health or could jeopardize the enrollee’s ability to regain maximum function. Requests outside of this definition will be handled as routine/non-urgent.
- Please remember to include all the supporting clinical/documents.

VaxCare Joins Molina’s Valued Network Providers

VaxCare is a workflow-optimized, buy-and-bill vaccine management system that delivers a connected solution to provide vaccines at no cost, remove extraneous work, and pay admin fees on every administration for primary care practices.

Its network of providers, manufacturers, EHRs, payers, clearinghouses, registries, and medical directors empower clinics to be smart and efficient at a scale they could not accomplish on their own.

Our partnership with VaxCare represents risk-free vaccine administration for Molina members and better access for your patients, enabling you to focus on patient care.

COVID adds a new level of complexity to the ongoing task of adequately immunizing patients amidst safety concerns and shifting patient preferences. VaxCare has been innovating and developing tools to drive patient relationships, communication, and safety in the changing immunization environment. The result of this practice-driven approach is a suite of plug-and-play tools that help with primary care and preventive care:

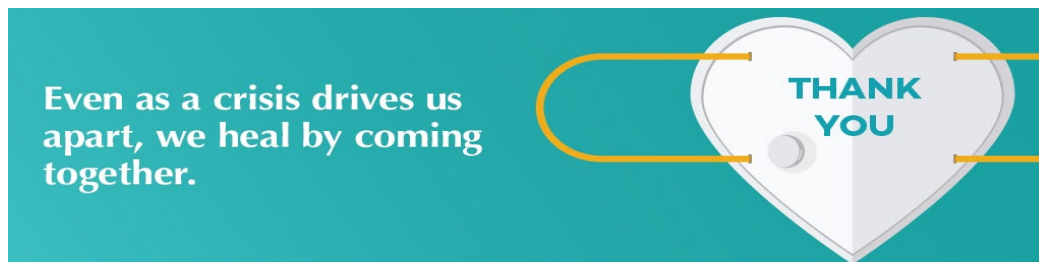
- **Predictive and automated flu ordering**—Anticipating stock demands and a streamlined ordering process.
- **Curbside vaccine clinic technology**—Physicians' office curbside workflow and tool kit with HIPAA-compliant LTE mobile access to easily identify, track, and bill for appropriate vaccines.
- **Family flu protection**—Integrated pediatric workflow and tools to swiftly administer and bill for parent/guardian immunization.

If you are an existing VaxCare Partner, please allow VaxCare to bill for vaccines rendered to Molina members per your Terms of Service Agreement with VaxCare. This excludes the Vaccines for Children (VFC) program, which buys vaccines at a discount and distributes them to grantees (i.e., state health departments and certain local and territorial public health agencies) which, in turn, distribute them at no charge to private physicians' offices and public health clinics registered as VFC providers.

Become a VaxCare Partner, learn more about how to simplify your vaccine management workflow, and gain access to the innovative physician practice tools. Contact Buffy Tinkes at (407) 917-8994 or hello@vaxcare.com.

Provider inquiries about VaxCare can be directed to the Provider Services Representative.

COVID-19 Provider Communications



Molina extends heartfelt thanks to our provider community as they care for our members throughout the ongoing COVID-19 emergency. We are monitoring COVID-19 developments daily and have created a COVID-19 provider communications page on our website to share resources and updates with you—our provider partners. Please access COVID-19 news and updates at:

<https://www.molinahealthcare.com/providers/il/medicaid/comm/COVID-19.aspx>