

Provider Bulletin

January 2026



Molina Healthcare of Michigan, Inc. welcomes new Vice President of Provider Network Management Maura Fulton

Molina Healthcare of Michigan, Inc. is pleased to welcome Maura Fulton to her new role as vice president of network management. Maura joined Molina Healthcare of Michigan as the director of population health in January 2024. In this role, she led development of innovative community partnership strategies to address health-related social needs, including launching the plan's first **In Lieu of Services*** network and strategy for nutrition services.

Maura brings more than a decade of leadership experience in population health and value-based care to the role. Prior to joining Molina, she served as a consultant with McKinsey & Company and senior director and then vice president at Signify Health (now part of CVS Health), where she guided national health care providers and payers in transforming clinical and operational models to succeed under risk-based arrangements. Maura has also held leadership and strategy roles at the University of Michigan Health System and Blue Cross Blue Shield of Michigan.

Passionate about reimagining health care delivery to improve outcomes for marginalized populations, Maura is committed to advancing equitable, person-centered care within the Medicaid landscape. She earned her Master's in Health Policy and Management from the Harvard T.H. Chan School of Public Health.

*More information on Molina's In Lieu of Services program is available in our **November Provider Bulletin** at MolinaHealthcare.com/providers/mi/medicaid/comm/provmailings.aspx.

"I'm excited and honored to partner with our Michigan providers and support the essential work you do every day," says Maura. "I look forward to working with you to strengthen operations, improve outcomes and support your success in delivering high-quality care for the communities we serve. I welcome your feedback on how we can improve collaboration to advance these goals."

Molina launches new Dual MI Community Health plan

As of January 1, 2026, the Molina Healthcare of Michigan Medicare-Medicaid Program (MMP) is transitioning to Molina Dual MI Coordinated Health, the brand name of Molina Healthcare of Michigan, Inc.'s Molina Dual MI Coordinated Health (HMO HIDE-SNP). The Dual Plan (HMO HIDE-SNP) was designed for members who are dual eligible: individuals who are eligible for both Medicare and full Medicaid in order to provide quality health care coverage and service with little out-of-pocket costs. Dual MI Coordinated Health (HMO HIDE-SNP) embraces Molina's longstanding mission to serve those who are the most in need and traditionally have faced barriers to quality health care.

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The current service area for our Dual MI Coordinated Health plan includes the following Michigan counties: **Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, Macomb, Van Buren and Wayne**.

Members transitioning to this new plan do not need to do anything to start receiving their new benefits. Members are given one team to work with, one number to call when they need help and one ID card. With a Molina integrated Medicare Advantage plan, they get access to all the benefits and health care services they need as well as the following:

- Pre-funded debit card with to use each month on health care costs and more
- Dental allowance for dental care
- Vision coverage for eye exams and eyewear
- Hearing coverage for exams and hearing aids

If you have any questions, please contact your Provider Relations manager or email us at MHMProviderServicesMailbox@MolinaHealthcare.com.

Cultural Competency Corner

Cultural competence strengthens clinical accuracy

As a reminder, cultural context — language, belief systems, community practices, lived experiences and history with the health care delivery system — directly shapes how symptoms are described, treatment is received, and whether follow-through occurs. Did you know? When care is culturally aligned, adherence, satisfaction and clinical outcomes improve across populations. We value partnering with you in ensuring every patient feels seen, heard and served. Cultural competency training modules and resources are available to providers and office staff. You can access the resources through Availity.com/MolinaHealthcare/.

Reminder - Molina Healthcare of Michigan Marketplace product changes

Molina is working to improve the affordability of our Marketplace program, particularly given the uncertainty surrounding market dynamics for 2026. To achieve this, we have discontinued our On-Exchange product offerings for the 2026 plan year, with the intention of re-entering the Marketplace On-Exchange, subject to market conditions, for the 2027 plan year.

Provider-focused considerations

Our provider agreements for Marketplace will remain the same; however, you will not see patient volume flowing through these agreements in 2026 as we work to adjust our provider network and service area for 2027. If our agreements cover other lines of business, they remain unchanged for those products.



Next steps

Marketplace re-entry planning

As we look toward 2027, we're preparing to offer an On-Exchange provider network and service area in Michigan for future years. This may involve some adjustments along the way, but we're committed to working collaboratively and communicating clearly throughout the process.

Member transition

For members with an ongoing course of treatment as of the end of 2025, we will work collaboratively with you to assist with their care needs as they transition to their new coverage.

Continued mission focus

Molina will continue to focus on serving Medicaid and Dually Eligible populations, improving health outcomes for those we serve. Additionally, if you have any questions about the 2026 plan year, please contact your Provider Relations manager.

Thank you for your continued partnership and dedication to the communities we support. We look forward to working together through this transition and appreciate your ongoing collaboration.

Useful chronic kidney disease resources available

Chronic kidney disease (CKD) is an under-recognized yet growing public health issue. Diabetes and hypertension are the leading causes of CKD, but there are several other factors that increase risk including obesity, patients with a history of heart disease or heart failure, a family history of CKD, a history of acute kidney injury, patients over the age of 60 or a combination of several risk factors. CKD disproportionately affects patients with social determinants of health (SDoH) needs and Black/African American and Hispanic Latino patients due to a variety of non-genetic factors.

It is estimated that about 90% of the estimated 37 million U.S adults with CKD are unaware of their condition. Because CKD is often asymptomatic, many patients are unaware they have the disease until it has progressed to later stages. Early identification of CKD in your at-risk patients creates the opportunity to slow or prevent the progression of this disease.

Understanding which of your patients are at risk for CKD allows you to provide education, develop treatment plans and goals or refer outside your practice as needed to help facilitate better outcomes for these patients.

The American Diabetes Association and the National Kidney Foundation recommend annual screening for patients with diabetes using both the estimated Glomerular Filtration Rate (eGFR) and the urine Albumin Creatinine Ratio (uACR) lab tests. Together the two tests, also known as the Kidney Profile, provide key information about kidney health, including determining CKD stage and risk of progression.

The National Kidney Foundation also recommends annual screening for other populations at high risk of CKD including patients with hypertension, cardiovascular disease and a family history of kidney disease or a personal history of acute kidney injury.

The National Kidney Foundation distributes a CKD Management Algorithm that is helpful when reviewing patient test results and next steps: nkfm.org/wp-content/uploads/2023/07/How-to-Manage-your-CKD-Patients-Algorithm.pdf.

Another helpful tool for management of patients with chronic kidney disease is the “Kidney Disease: Improving Global Outcomes” (KDIGO) heat map: Kidney.org/sites/default/files/01-10-7027_ABG_HeatMap_Card_3_0.pdf.

Molina offers incentives to support provider performance in the Kidney Health Evaluation for Patients with Diabetes HEDIS® measure. The incentive is between \$25-\$50 per eligible member (depending on contract and performance) for annual completion of the Kidney Profile (eGFR and uACR).

For more information and resources regarding CKD, please visit the National Kidney Foundation of Michigan website: nkfm.org/healthcare-professionals/.

Some helpful patient information from the National Kidney Foundation for patients with CKD:

Kidney.org/sites/default/files/7_ways_to_help_manage_ckd.pdf

nkfm.org/wp-content/uploads/2023/07/NKDEP-How-well-are-your-kidneys-working-English.pdf

The **Molina Clinical Practice Guidelines** are available at MolinaHealthcare.com/providers/mi/medicaid/resource/guide_clinical.aspx and include Molina's CKD guidelines.

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Updated MDHHS perinatal screening recommendations

Given the recent increases in early syphilis among heterosexual females and congenital syphilis cases, the Michigan Department of Health and Human Services (MDHHS) has strengthened its syphilis recommendations to include screening at delivery.

Michigan Law, [per section 333.5123 of Michigan's Public Health Code, Act No. 368](#) (available online at Legislature.mi.gov/Laws/MCL?objectName=mcl-333-5123) of the Public Acts of 1978 (amended 12/2018) requires prenatal HIV, hepatitis B virus (HBV) and syphilis screening for all women during the first trimester AND rescreening during the third trimester. MDHHS recommends third trimester screening to be done between 28 and 32 weeks. Medical facilities are encouraged to have written policies and procedures, as well as standing orders in place to ensure that testing for HIV, hepatitis B and syphilis are done. While 333.5123 does not require hepatitis C (HCV) screening at this time, it is recommended by MDHHS, based on American College of Obstetrics and Gynecology (ACOG) and CDC recommendations.

While 333.5123 does not require additional screening at delivery, MDHHS has updated its recommendations to screen for syphilis at delivery for all women. This update was informed by recent increases in Michigan congenital syphilis epidemiologic data. Screening at delivery provides an opportunity for the mother and baby to receive proper treatment before being discharged. This is especially important to identify late pregnancy infections in people who previously tested negative or were reinfected during pregnancy.

Additional resources for all health care providers

- Work with MDHHS disease intervention specialists who can help patients overcome additional barriers to syphilis testing and treatment during pregnancy. Visit Michigan.gov/mdhhs/keep-mi-healthy/chronicdiseases/hivsti/Disease-Intervention-Specialists-are-Here-to-Help for more information on this resource.
- Please call MDHHS HIV/STI Surveillance Unit at (313) 400-2007 for a comprehensive syphilis testing and treatment record.
- For questions about MDHHS screening and treatment recommendations, please contact Aleigha Phillips, congenital syphilis coordinator, at **(313) 316-4680** or PhillipsA3@michigan.gov.
- Physical copies of the resources below will be available to order via the MDHHS STI/HIV Operations and Resource System (SHOARS) in early 2026. Visit Michigan.gov/mdhhs/keep-mi-healthy/chronicdiseases/hivsti/shoars for more information.
- Michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Keeping-Michigan-Healthy/HIVSTI/Perinatal-HIV-STIs/Guidelines_for_Perinatal_Testing_and_Report.pdf
- Michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Keeping-Michigan-Healthy/HIVSTI/Perinatal-HIV-STIs/Perinatal_Infant_Infection_Screening.pdf
- Michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Keeping-Michigan-Healthy/HIVSTI/Provider-Resources/Preventing-Congenital-Syphilis.pdf

Visit the MDHHS perinatal HIV & STI page at Michigan.gov/mdhhs/keep-mi-healthy/chronicdiseases/hivsti/perinatal-hiv-and-stis for the most up-to-date resources.



Join a live Molina provider orientation session!

Molina hosts a series of monthly provider orientation sessions for all in-network providers. These sessions provide an overview of our resources and materials designed to support you and your patients – our members. These resources include provider services, the provider portal, health care services, billing and more. The next session will be held on Thursday, January 29, from noon to 1 p.m. To join, select the orientation training link at MolinaHealthcare.com/providers/mi/medicaid/comm/YouMattertoMolina.aspx at the beginning of the session you would like to attend.

Surveys—Your opinion matters!

Molina is committed to our provider community and is interested in what you want to see in our Provider Bulletin. To share your thoughts, please visit MolinaHealthcare.surveymonkey.com/r/VFLCVPQ.

We are also interested in your recent interaction with our provider network team. To comment on this, please visit MolinaHealthcare.surveymonkey.com/r/C6HSPVK or use the link at the bottom of your Provider Relations manager's signature.