Molina Healthcare of Michigan, Inc.

Provider Bulletin

March 2026

March is Colorectal Cancer Awareness Month

Colorectal cancer is the third leading cause of cancer-related deaths in both men and women in the United States. Regular colorectal cancer screening is one of the most powerful tools for preventing colorectal cancer.

The American Cancer Society recommends the following preventive measures for your patients:

- Start the screening process at age 45 or older.
- Engage in regular physical activity and maintain a healthy weight.
- Consume a diet rich in fruits, vegetables and whole grains.
- Limit alcohol consumption.
- Avoid smoking.

Here are some ways to improve colorectal cancer screening for your patients:

- Update patient history annually to document colorectal cancer screening, including the type of test and date completed.
- Encourage patients who are resistant to having a colonoscopy to complete a stool test at home.
- Communicate to members that FOBT/FIT has fewer dietary restrictions and requires fewer samples (see HEDIS® Tip Sheet Colorectal Cancer Screening [COL] 27).
- Utilize standing orders and empower office staff to distribute FOBT or FIT kits to patients who need colorectal cancer screening or to prepare referrals for colonoscopy.
- Document patients with ileostomies (implies colon removal) and patients with a history of colon cancer.
- When documenting a member-reported colonoscopy, flexible sigmoidoscopy, FIT-DNA test, CT colonography or FOBT, always include a date of service when available. The year alone is acceptable for compliance.

For more information on colorectal cancer prevention and treatment options, visit **Cancer.org/cancer/colon-rectal-cancer.html**.

2026 Model of Care provider training

In alignment with requirements from the Centers for Medicare & Medicaid Services (CMS), Molina requires primary care providers (PCPs) and key high-volume specialists, including cardiologists, hematologists/oncologists and neurologists, to complete training on Molina's Special Needs Plans (SNP) Model of Care (MOC).

The SNP MOC outlines Molina's 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 multiple insurers may ask you to complete separate training.

Molina's MOC Provider Training Quick Reference Guide and 2026 MOC provider training deck are available at **MolinaHealthcare.com/providers/common/medicare/medicare.aspx**.

Molina's 2026 MOC attestation form is available at **MolinaHealthcare.com/providers/common/MOC/2026/MI**.

The target completion date for this year's training is October 31.

Provider orientations

To join a live orientation session, please visit the "You Matter to Molina" section of our provider website at **MolinaHealthcare.com/providers/mi/medicaid/comm/YouMattertoMolina.aspx**. Below are dates and times for upcoming sessions.

- **March 26,** noon – 1 p.m.
- **April 30,** noon – 1 p.m.

Molina is stepping into a new era with digital correspondence!

The Digital Correspondence Hub is a new tool designed to streamline communication by allowing providers to receive, manage and track digital communications within the Availity Essentials workflow. This will help reduce inefficiencies associated with traditional correspondence methods.

Providers can receive digital letters alongside paper letters, initially rolling out with prior authorization (PA) letters. Digital PA letters will be sent in real-time and can be tracked seamlessly.

Digital correspondence offers an easy way to manage and track communications in one place while integrating with other applications in Availity Essentials. For more information, please visit **MolinaHealthcare.com/providers/mi/medicaid/comm/YouMattertoMolina.aspx**.

Prior authorization (PA) updates

Molina's Prior Authorization Guide and PA Code Matrix will be updated effective April 1, 2026. To access Molina's online PA tools, please visit **MolinaHealthcare.com/providers/mi/medicaid/PriorAuthorization/PA.aspx**.

The PA Code Lookup Tool makes it simple to identify services that require PA.

Small devices, big insights: Managing pediatric patients with continuous glucose monitors (CGMs)

As you continue to individualize care for children and adolescents with Type 1 diabetes, we encourage you to consider whether a continuous glucose monitor (CGM) might support your patients and their families.

CGMs offer real-time glucose insights, reduce the burden of frequent finger sticks and help identify trends that support safer glycemic management. When clinically appropriate, CGMs can also support shared decision making, increase caregiver confidence and are typically covered for children with Type 1 diabetes, helping reduce access barriers for families.

Clinical coverage criteria for Michigan Medicaid

Coverage criteria include the following:

1. The patient is insulin dependent.
2. The patient or caregiver is capable of and willing to use the CGM and interpret data.
3. Documentation shows one or more of the following:
    - Hypoglycemia unawareness or recurrent episodes of hypoglycemia
    - Wide fluctuations in blood glucose despite adherence to therapy
    - Need for tighter glucose control to avoid severe hyperglycemia or hypoglycemia
4. Initial PA is required for most devices; renewal requires demonstration of continued use and benefit.

Covered devices include Dexcom and FreeStyle Libre. Other FDA-approved CGMs may be added per Michigan Common Formulary updates.

Members may receive a CGM through their pharmacy or from a DME provider, whichever is most convenient. Additional coverage information can be found in the Medicaid Provider Manual, available at **MolinaHealthcare.com/providers/mi/medicaid/manual/provmanual.aspx**.

Provider enrollment portal training

Molina Healthcare of Michigan invites providers to attend training on our Pre-Enrollment and Authenticated portals.

The session includes an overview and walkthrough of enrollment for groups and facilities requesting to contract with Molina Healthcare of Michigan.

This training will be a recurring series, happening the second Wednesday of every month.

We look forward to having you attend the training. To register, please visit the "You Matter to Molina" section of our provider website at **MolinaHealthcare.com/providers/mi/medicaid/comm/YouMattertoMolina.aspx** and select the "Upcoming Trainings" menu.

Americans with Disabilities Act (ADA) resources: Provider education series

A series of provider education materials related to disabilities is now available to providers and office staff on Molina's website. Visit the Culturally and Linguistically Appropriate Resources and Disability Resources sections in the Availity Essentials portal.

Molina Healthcare's Provider Education Series – Disability resources include materials on the following topics:

- **Americans with Disabilities Act (ADA)**
  - An introduction to the ADA, including questions and answers for health care providers (e.g., Which health care providers are covered under the ADA? How does one remove structural communication barriers? Is there money available to assist with ADA compliance costs?)
- **Members who are blind or have low vision**
  - Information on obtaining materials in alternate formats, including Braille, large print, audio and other accessible formats
- **Service animals**
  - Examples of tasks performed by service animals; tasks that do not meet the definition of a service animal; appropriate inquiries regarding service animals and exclusions, charges and other specific rules

- **Tips for communicating with seniors and people with disabilities**
  - Guidance on communicating with individuals who are blind or visually impaired, deaf or hard of hearing, have mobility challenges or speech impairments, as well as best practices for communicating with seniors

Please contact your Provider Relations manager if you have any questions.

Molina's language access services

Providing language access services is a legal requirement for health care systems that receive federal funds. Accurate communication strengthens mutual understanding of illness and treatment, increases patient satisfaction and improves health care quality. Members cannot be refused services due to language barriers.

When needed, Molina provides the following services directly to members at no cost:

- Written materials in alternate formats such as large print, audio, accessible electronic formats and Braille
- Written materials translated into languages other than English
- Oral and sign language interpreter services
- Relay Service (711)
- 24-hour Nurse Advice Line
- Bilingual/bicultural staff

In many cases, Molina also covers the cost of language or sign language interpreters for members' medical appointments. Members and providers should call the Member and Provider Contact Center to schedule interpreter services or to connect to a telephonic interpreter.

All Molina materials are written in plain language and at the required reading levels. For additional information on Molina's language access services or cultural competency resources, contact Provider Services or visit **MolinaHealthcare.com**.

Availity Essentials resources

Molina continues to add and update resources to help providers use the Availity Essentials portal efficiently and effectively. Recently added resources in the "You Matter to Molina" section of our provider website include the following:

- Third-party biller guide
- Provider facility authorization guide

To view these and other Availity Essentials resources, visit **MolinaHealthcare.com/providers/mi/medicaid/comm/YouMattertoMolina.aspx**.