

# Provider Bulletin

February 2026

## February is Heart Health Month

Heart disease is the leading cause of death in Michigan and the United States for both men and women. According to the American Heart Association (AHA), 23,000 children experience cardiac arrest each year. Life Essential 8 focuses on health behaviors and factors for everyone, including children, to improve cardiovascular health and decrease cardiac risk. For more information and resources regarding heart health, please visit [heart.org/en/american-heart-month](https://heart.org/en/american-heart-month) and [nhlbi.nih.gov/health/heart-healthy-living](https://nhlbi.nih.gov/health/heart-healthy-living).

## Have you used our convenient online PA Lookup tool?

Providers can use our Prior Authorization (PA) Lookup Tool to check PA requirements **for outpatient services** at [MolinaHealthcare.com/providers/mi/medicaid/palookup](https://MolinaHealthcare.com/providers/mi/medicaid/palookup).

All elective inpatient admissions to acute hospitals, skilled nursing facilities (SNF), rehabilitation facilities (AIR) or long-term acute care hospitals (LTACH) require PA except as excluded by law. Please refer to the provider handbook or plan materials for concurrent review process following emergent admission.

All Medicaid LTSS services require PA regardless of code.

## Council for Affordable Quality Healthcare (CAQH) update process reminders

Molina Healthcare, Inc. is aware of an increase in outreaches related to difficulties moving cases through credentialing in our provider network management tool due to CAQH not being updated. Please note that Molina uses CAQH ProView to credential and enroll providers in the State of Michigan.

When submitting providers through our provider network management tool, please ensure the provider's CAQH profile is fully updated with all current practice details—including group NPI/TIN information under the active locations section—and that all information is accurate and attested within 120 days of submission.

If the CAQH information is not current or the attestation is older than 120 days, your application may be delayed. If CAQH is updated after the provider has been submitted through our provider network management tool and you have received a notice indicating CAQH was not updated, the original submitter can log in and continue the enrollment process. This functionality allows the submitter to manually enter the data that would otherwise be pulled directly from the provider's CAQH profile.

If you or your team have any further questions or would like additional training on our provider network management tool, please feel free to reach out to your assigned Provider Relations manager.

### Molina is stepping into a new era with digital correspondence!

The Digital Correspondence Hub is a brand-new tool, crafted to streamline communication, allowing providers to receive, manage and track digital communications from Molina within the Availity Essentials workflow. This will reduce inefficiencies tied to traditional correspondence methods.

Experience the future of communication with our digital letters (initially rolling out with PA letters) along with paper letters! Digital PA letters will be sent in real time and tracked seamlessly.

Digital correspondence offers an easy way for providers to manage and track digital communications in one place, integrating with other applications in Availity Essentials.

For more information, please visit [MolinaHealthcare.com/providers/mi/medicaid/comm/YouMattertoMolina.aspx](https://MolinaHealthcare.com/providers/mi/medicaid/comm/YouMattertoMolina.aspx).

### Did you know: Listening with curiosity improves outcomes

Many patients already know what barriers affect their health—transportation, food access, stress, work demands or past negative encounters. A gentle, open question like “What matters most in your care today?” affirms respect and autonomy. When patients feel understood through a cultural lens, trust grows and disparities decrease. We appreciate the way you continue to center the patient voice, and we appreciate your partnership.

### We Treat Hep C: Hepatitis C (HCV) screening – 2026

The Centers for Disease Control and Prevention (CDC) reports that one out of three people infected with hepatitis C are unaware that they are infected. In Michigan, it is estimated that at least 200,000 people are living with hepatitis C. Between 75–85% of people infected have no symptoms associated with their hepatitis C infection, putting them at risk for complications related to hepatitis C and unknowingly transmitting the virus to others.

Unfortunately, there is no vaccine to prevent hepatitis C; however, it is important to know the screening recommendations and treatment guidelines to help prevent transmission.

#### Hepatitis C testing guidelines:

The CDC recommends universal hepatitis C testing for:

- All adults 18 and older at least once in their lifetime
- All pregnant women in every pregnancy

The CDC recommends routine periodic testing for patients with ongoing risk factors:

- People who currently inject drugs and share needles or other drug preparation equipment
- People with selected medical conditions, including people who receive maintenance hemodialysis
- People who request testing

#### Recommended testing:

- HCV antibody test with reflexive nucleic acid test (NAT) for HCV RNA

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It is important to collect all samples needed to diagnose hepatitis C in a single visit. By ordering reflexive HCV RNA, the lab will automatically test the sample if positive for the antibody.

### Recommendation for positive HCV results:

- Medical evaluation by a primary care physician or specialist for treatment and monitoring of HCV infection
- Hepatitis A and B vaccinations
- Screening and brief intervention for alcohol consumption
- HIV risk assessment and testing

As a reminder, patients covered under Michigan Medicaid can receive HCV curative treatment with Mavyret **without** PA, evidence of sobriety, liver fibrosis score or specialist prescriber.

It is important to enroll all patients on Mavyret into the Mavyret Nurse Ambassador Program. Nurses are available through this program to help patients learn more about hepatitis C, discuss treatment goals, answer questions about treatment and discuss ways to make sure that patients complete treatment for the best outcome. To enroll a patient in the Mavyret Nurse Ambassador Program, go to [Mavyret.com/hcp/nurse-ambassador](https://Mavyret.com/hcp/nurse-ambassador).

For more information on prescribing Mavyret for your Medicaid patients and resources, visit [Michigan.gov/mdhhs/keep-mi-healthy/infectious-diseases/hepatitis/hep-c/we-treat-hep-c/providers](https://Michigan.gov/mdhhs/keep-mi-healthy/infectious-diseases/hepatitis/hep-c/we-treat-hep-c/providers).

### Hepatitis C in pregnancy

The CDC and the Society for Maternal Fetal Medicine recommend that all pregnant women be screened for hepatitis C in **every** pregnancy by testing for anti-hepatitis C viral antibodies.

- It is estimated that between 1–4% of pregnant patients are positive for hepatitis C, and this carries an approximately 5% risk of transmission from mother to infant during the pregnancy.
- Hepatitis C infection during pregnancy also increases the risk of adverse pregnancy outcomes, including fetal growth restriction, low birth weight infants and NICU admissions.
- There are no current antiviral therapies approved to treat HCV in pregnancy.
- It is important to diagnose HCV in pregnancy to decrease the risk of vertical transmission. For additional information, visit [Publications.smfm.org/publications/577-society-for-maternal-fetal-medicine-consult-series-56/](https://Publications.smfm.org/publications/577-society-for-maternal-fetal-medicine-consult-series-56/).

### Resources:

1. CDC Hepatitis Clinical Screening and Diagnosis for Hepatitis C website: [cdc.gov/hepatitis-c/hcp/diagnosis-testing/index.html](https://cdc.gov/hepatitis-c/hcp/diagnosis-testing/index.html)
2. MDHHS “We Treat Hep C” website: [Michigan.gov/mdhhs/keep-mi-healthy/infectious-diseases/hepatitis/hep-c/we-treat-hep-c/providers](https://Michigan.gov/mdhhs/keep-mi-healthy/infectious-diseases/hepatitis/hep-c/we-treat-hep-c/providers)
3. Society for Maternal Fetal Medicine Consult Series #56: Hepatitis C in Pregnancy (updated guidelines): Visit [Sciencedirect.com](https://Sciencedirect.com) and search for the article “Society for Maternal-Fetal Medicine Consult Series #56: Hepatitis C in pregnancy—updated guidelines: Replaces Consult Number 43, November 2017”

### New biologic treatment options now available on the Michigan Medicaid Preferred Drug List (PDL)

The Michigan Department of Health and Human Services (MDHHS) has recently added FDA-approved biosimilar alternatives to ustekinumab (Stelara®) to the Medicaid Preferred Drug List. Both the originator Stelara and the biosimilars are currently listed as non-preferred agents.

The following ustekinumab products are now included on the PDL:

- **Stelara® (ustekinumab)** – Indicated for moderate-to-severe plaque psoriasis, psoriatic arthritis, Crohn’s disease and ulcerative colitis
- **Steqeyma® (ustekinumab-stba)** – Biosimilar to Stelara®; indicated for moderate-to-severe plaque psoriasis, psoriatic arthritis, Crohn’s disease and ulcerative colitis
- **Yesintek® (ustekinumab-kfce)** – Biosimilar to Stelara®; indicated for moderate-to-severe plaque psoriasis, psoriatic arthritis, Crohn’s disease and ulcerative colitis

As a reminder, biosimilars are biologic medications approved by the FDA that have been demonstrated to be highly similar to their reference product with no clinically meaningful differences in terms of safety, purity, and potency.

The addition of these biosimilar products provides prescribers with expanded treatment options for patients who may benefit from targeted biologic therapy. Providers should continue to follow standard prior authorization requirements and consult the most recent Michigan PDL for coverage details.

For the most up-to-date information, please refer to the Michigan Medicaid PDL at [Michigan.gov/mdhhs/assistance-programs/medicaid/portalhome/beneficiaries/resources/medicaid-health-plan-pharmacy-benefit](https://Michigan.gov/mdhhs/assistance-programs/medicaid/portalhome/beneficiaries/resources/medicaid-health-plan-pharmacy-benefit).

#### References

- Michigan Department of Health and Human Services. State of Michigan Medicaid Managed Care Common Formulary. Updated July 2025. Available at: [Michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Assistance-Programs/Medicaid-BPHASA/Other-Prov-Specific-Page-Docs/State-of-Michigan-Medicaid-Managed-Care-Common-Formulary.pdf](https://Michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Assistance-Programs/Medicaid-BPHASA/Other-Prov-Specific-Page-Docs/State-of-Michigan-Medicaid-Managed-Care-Common-Formulary.pdf)
- Prime Therapeutics. Michigan Medicaid Clinical Criteria and PDL Resources. Available at: [Mi.primetherapeutics.com/provider/external/medicaid/mi/doc/en-us/MIRx\\_clinical\\_criteria.pdf](https://Mi.primetherapeutics.com/provider/external/medicaid/mi/doc/en-us/MIRx_clinical_criteria.pdf)
- U.S. Food & Drug Administration. Biosimilar and Interchangeable Biologics: More Treatment Choices. Available at: <https://www.fda.gov/consumers/consumer-updates/biosimilar-and-interchangeable-biologics-more-treatment-choices>
- U.S. Food & Drug Administration. 9 Things to Know About Biosimilars and Interchangeable Biosimilars. Available at: <https://www.fda.gov/drugs/things-know-about/9-things-know-about-biosimilars-and-interchangeable-biosimilars>



## 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. Below is a list of upcoming sessions. To join, select the orientation training link at [MolinaHealthcare.com/providers/mi/medicaid/comm/YouMattertoMolina.aspx](https://MolinaHealthcare.com/providers/mi/medicaid/comm/YouMattertoMolina.aspx) at the beginning of the session you would like to attend.

- Thursday, February 26, noon–1 p.m.
- Thursday, March 26, noon–1 p.m.
- Thursday, April 30, noon–1 p.m.
- Thursday, May 28, noon–1 p.m.

## Provider Manual updates

Molina Healthcare of Michigan updates the Provider Manuals for all lines of business/products at least annually. Our 2026 Provider Manuals are now available online at:

- Medicaid – [MolinaHealthcare.com/providers/mi/medicaid/home.aspx](https://MolinaHealthcare.com/providers/mi/medicaid/home.aspx)
- Medicare – [MolinaHealthcare.com/providers/common/medicare/medicare.aspx](https://MolinaHealthcare.com/providers/common/medicare/medicare.aspx)
- MI Coordinated Health (MICH) – [MolinaHealthcare.com/providers/mi/duals/manual/provd.aspx](https://MolinaHealthcare.com/providers/mi/duals/manual/provd.aspx)