



MOLINA
HEALTHCARE

Your Extended Family

Palmetto Partners

Provider updates & resources from Molina Healthcare of South Carolina

Spring 2021

Strong Connections

Thank you for investing your time in Palmetto Partners, Molina's e-newsletter for providers. We have seen a growing number of providers sign up since we launched in January 2017.

We think this format is a great way to share information with you as we join to provide quality health care to people on government assistance.

Please verify in your email settings that Palmetto Partners is a trusted sender so the newsletter will always make it to your inbox, and learn at the end of this newsletter how you can share Palmetto Partners with colleagues.

Resources

[Molina Internet Pages for our SC Providers](#)

[Preferred Drug List](#)

[Partners in Care Newsletters](#)

[Quarterly Fact Sheet](#)

[Service Area Map](#)

[Find Your Provider Rep](#)

Expanded Content With Partners in Care

The latest edition of Molina's in-depth newsletter for providers

Welcome!

In this newsletter, you'll find all kinds of great information and valuable resources. From what's going on with Molina Healthcare of South Carolina, to important provider communications, this newsletter will be an asset to you.

You are an essential part of quality care to our members. We value our partnership and appreciate the family-like relationship that you pass on to our members. As our partner, assisting you is one of our highest priorities. We welcome your feedback and look forward to supporting all your efforts to provide quality care. Thank you for your continued partnership.



From South Carolina's Plan President



As we round out an entire year of COVID-19 impact, I wanted to thank all of our front line network providers and staff for their

titled Partners in Care is available [online](#) on the provider newsletter page of our website, where you can also find past editions.

Provider Portal

Molina's [Provider Portal](#) has a variety of tools to simplify your transactions, whether you need to check eligibility or check claim status. For more information contact Provider Services at (855) 237-6178.

Molina Has Gone Green

Molina is saving paper and time by going green. All claims are encouraged to be submitted through an EDI Clearinghouse or via Molina's [Provider Portal](#). Contact our Provider Services team at (855) 237-6178 if you have any questions.

Provider Portal Helpful Tips

Did you know that you can now submit disputes on the Provider Portal? Save time from calling or emailing by putting your disputes directly on our Provider Portal. You can find it [here](#).

Find Your Provider Rep

Want to know your Provider Rep's contact information and location? Check out our map [here](#) for complete details.

Claim Updates

When you submit a corrected claim, the original claim number must be present in field 64 for a UB, and field 22 for a 1500. The claim will be rejected if this is not filled out correctly. Molina currently has a 30 day readmission policy.

Optum Pre-Pay Information

Molina is now performing additional pre-payment claim reviews. For more information on Optum Pre-pay, please click [here](#).

Authorization Code Look-Up Tool

Molina offers an electronic authorization code look-up tool for both our Medicaid and MMP lines of businesses. The authorization code look-up can

unyielding commitment to serving others. Molina employees have done their very best to avoid any business interruptions, though we have had some challenges with moving to remote operations. We've re-purposed much of our field based staff to telephonic projects and outreach, but we've also been in the community helping providers with COVID-19 testing and vaccination events when we could safely do so.

I'd like to share some additional updates. Medicaid re-determination for eligibility continues to be suspended. There is a Special Election Period (SEP) for people to enroll in Marketplace plans from February 15 to May 15, and there is an Open Enrollment Period (OEP) for Medicaid members of Wellcare Health Plans effective April 1 for 90 days. This OEP is due to their merger with Centene (known locally as Absolute Total Care), allowing Wellcare members who'd like to transfer to another MCO if they so choose.

Thank you again for helping us help members access quality healthcare. Molina continues to encourage our members to receive preventive services, needed vaccinations including the COVID-19 vaccine and all applicable screenings. Please let us know how we can help your offices as we hopefully approach the end of these very difficult times.

Molina in the Community

Molina Donates Vaccine Supplies to CCSD Schools



Molina helped meet the needs of the Charleston County School District (CCSD) Nursing Services by donating \$2500 to purchase the supplies needed to vaccinate kids in school. Pictured above, Molina's generous donation of transport coolers allows the vaccines to be transported to individual schools for administration.

This initiative to get CCSD kids vaccinated came together as a result of a Healthy Tri-County Initiative from the Adolescent Immunization Subcommittee. Molina has been a vital part of this Adolescent Immunization Subcommittee with our Quality Improvement Program Manager Jennie Butler serving as a co-chair and Molina's Chief Medical Officer and Pediatrician Dr.

be found [here](#) for Medicaid, [here](#) for MMP and on the provider web portal. It can also be found on our provider main page [here](#).

Shrouds also serving on the committee. Getting this vaccination to CCSD schools took almost a year to get all the certifications and everything in place. The hard work and diligence were worth it as the vaccinations to these children will make a huge difference in the community.

Provider Highlights and Important Information

COVID-19 Updates

Molina is monitoring COVID-19 developments on a daily basis. Our corporate chief medical officer (CMO) is working closely with our health plan CMOs across the country to ensure that we are prepared to assist our members and providers.

Services that require prior authorizations are unchanged. Visits for our members to our in network primary care provider offices or the ER do not require prior authorization. Inpatient admissions require notification to Molina within 1 business day from the date of the admission, including a member initially under observation that converts to inpatient.

All of our COVID-19 provider communications can be found on our website [here](#). We've also compiled a very helpful list of resources for our members that can be found [here](#).

For additional clinical information, we encourage you to monitor the CDC website at <https://www.cdc.gov/coronavirus/2019-ncov/index.html>. We will update you of any changes with this rapidly developing public health matter. For the most up-to-date information on everything COVID-19 including vaccines, locations and phases, please visit the SCDHEC site [here](#).

New Provider Portal Set to Launch

Molina is transitioning to a new provider portal platform called the Availity Provider Engagement Portal beginning April 17, 2021. Many of Molina's provider partners are already familiar with Availity and are currently using this platform with other payers. If that is the case, you're already set to start working with Molina in Availity. If not, registration is easy and free of charge.

To begin accessing Molina functions and features on the Availity Portal, visit <https://www.availity.com/provider-portal-registration>. After you register, you will receive a prompt that will guide you through onboarding into the new portal. The current Molina Provider Portal will still be available throughout the transition.

Training will include webinars and self-paced tutorials. Watch for additional details from both Molina and Availity on how to access these training tools. It's helpful to note that Molina's website and documents are best viewed in Google Chrome or Microsoft Edge.

We're here to help. For questions, contact your Provider Services representative or Molina Provider Services at (855) 237-6178, Monday - Friday, 8 a.m. to 5 p.m., local time. You may also contact us by e-mail at SCPProvider.Services@MolinaHealthcare.com.

Narcan Saves Lives!

On December 21, 2020, DHEC (SC Department of Health and Environmental Control) issued a health advisory alerting healthcare providers in South Carolina of the increase in fatal drug overdoses across the United States. Recommendations in that bulletin included expanding the provision and use of naloxone and overdose prevention education.

On July 23, 2020, the U.S. Food and Drug Administration (FDA) announced updated recommendations regarding the use and availability of naloxone for patients at high risk of opiate overdose. The FDA recommends that health care professionals consider prescribing naloxone to patients being prescribed opioid pain medicine who are at increased risk of opioid overdose. The recommendations suggest that health care professionals should discuss the availability of naloxone both when beginning and renewing treatment.

Patients considered HIGH RISK include those prescribed opioids who:

- Are receiving a dosage of 50 morphine milligram equivalents (MME) per day or greater
- Are receiving opioids with concurrent benzodiazepine (regardless of opioid dose)
- Have a history of overdose
- Have a history of substance use disorder

If your patients are considered HIGH RISK for opiate overdose, please consider submitting a prescription to the member's pharmacy for one of the following preferred naloxone products:

- NALOXONE SOLUTION PREFILLED SYRINGE FOR INJECTION 2MG/2ML
- NARCAN NASAL SPRAY 4MG

In an effort to increase access and remove barriers to our members receiving naloxone, we have waived any prescription copays for our preferred naloxone products.

Expectations for Utilization Management Decisions

Our organization wants to make it clear to all of our practitioners and providers who make Utilization Management decisions, that Molina adheres to the following:

- Utilization Management decision making is based only on appropriateness of care and service and existence of coverage.
- The organization does not specifically reward practitioners or other individuals for issuing denials of coverage.
- Financial incentives for Utilization Management decision makers do not encourage decisions that result in under utilization.

Case Management and Care Coordination

Molina's Case Management (CM) Program involves collaborative processes aimed at meeting an individual's health needs, promoting quality of life, and obtaining best possible care outcomes to meet the member's needs so they receive the right care, at the right time, and in the right setting.

The Molina Case Managers are licensed professionals and are educated, trained and experienced in the care coordination process to empower the member to understand and access quality, efficient and cost-effective health care.

Molina Case Managers use information from the assessment process to develop and implement Individualized Care Plans (ICP) with the member in a timely manner based on member's own identification of primary health concern and analysis of available data on the member's medical condition(s) and history. The Molina Case Managers stratify the individual members into appropriate risk and intervention levels. Based on the level of case management needed, outreach is made to the member to determine the best plan to achieve short and long-term goals.

Members with the following conditions may qualify for CM and can be referred to the Molina CM Program for evaluation:

- High-risk pregnancy, including members with a history of a previous preterm delivery
- Catastrophic medical conditions (e.g. neoplasm, organ/tissue transplants)
- Chronic illness (e.g. asthma, diabetes, End Stage Renal Disease)
- Preterm births
- High-technology home care requiring more than two weeks of treatment
- Member accessing ER services inappropriately
- Children with special health care needs
- Sick Cell
- BH Concerns
- Opioid Use Disorder (OUD)
- End-Stage Renal Disease (ESRD)

Prior Authorization Forms Update

Please make sure that you are using the most up-to-date Prior Authorization Forms for your requests. This will help make your requests more efficient and will ensure more timely processing. Please click on your needed line of business below for links to our Prior Authorization Forms.

- [Medicaid](#)
- [Medicare and Duals](#)
- [Marketplace](#)

Marketplace Roster

As a Primary Care Provider by designation, you can always access the roster of Molina Marketplace members assigned to your practice via your provider portal. However, you do not need to be designated as a member's PCP to provide services to Molina members. Eligibility and benefit terms apply.

Why is CAHPS Important?

The Consumer Assessment of Health Care Providers and Systems (CAHPS) is an annual Member Satisfaction/Experience survey conducted by a third-party vendor who mails the questionnaire to a select number of randomly chosen Molina Medicaid, Medicare, MMP/Duals, and Marketplace members asking how they feel about their doctor, their overall health, and their health plan. CAHPS surveys will be sent out to selected members from February to June. The survey focus is on aspects of quality that patients are best qualified to assess, such as the communication skills of physicians and practitioners, and the ease of access to healthcare services. Physicians drive performance on CAHPS® quality measures.

Molina's commitment to quality includes health plans achieving or maintaining accreditation by the National Committee for Quality Assurance (NCQA), as well as achieving 5-star ratings in Medicaid, Marketplace and Medicare. The CAHPS survey results help us plan quality improvement activities and are used by external agencies and members to judge the quality of our services. State partners may also use the survey when selecting health plans, rating health plans for consumers and awarding bonus incentives to contracted health plans. Thank you for supporting our efforts to continuously improve care for our members and your patients.

Gap In Care Reports

Let us help you close gaps in care! Request your gaps in care report to identify who needs a well visit, immunizations, screening and test. Call the Provider Engagement Team Manager for your latest report or email SCProvider.Services@MolinaHealthcare.com.

Electronic Payments & Remittance Advice

Molina has partnered with our payment vendor, FIS ProviderNet, for Electronic Funds Transfer (EFT) and Electronic Remittance Advice (ERA). Access to ProviderNet is free to our providers. We encourage you to register after receiving your first check from Molina. Here's how:

- Register for ProviderNet online [here](#).
- Select Molina from the payers list and enter your primary NPI, primary Tax ID, and recent claim and/or check number.
- Use your email address as the username.
- Verify payment information

If you have any questions about the registration process, contact ProviderNet at (877) 389-1160 or email at Provider.Services@fisglobal.com.

Take Advantage of Our Benefits

Molina will pay for well visits and sick visits on the same day of service for adults and children. We encourage you to take advantage of this benefit and help us close these gaps to improve HEDIS scores. When billing a sick and well visit on the same day, please append the 25 modifier to the claim. Molina covers adult well visits for members over the age of 21 once every year.

Access to virtual doctor visits by phone, video or mobile app will be available through Teladoc effective July 1, 2020.

Access To Care Standards

Molina is committed to providing timely access to care for all members in a safe and healthy environment. Molina will ensure providers offer hours of operation no less than offered to commercial members. Access standards have been developed to ensure that all health care services are provided in a timely manner.

The PCP or designee must be available 24 hours a day, seven days a week to members for emergency services. This access may be by telephone. Appointment and waiting time standards are shown below. Any member assigned to a PCP is considered his or her patient. Molina may also assist with scheduling preventative health care appointments for our members. All specialty referrals should be coordinated by the primary care provider. Check out the full grid [here](#).

Continuity & Coordination of Provider Communication

Molina stresses the importance of timely communication between providers involved in a member's care. This is especially critical between specialists, including behavioral health providers, and the member's PCP. Information should be shared in such a manner as to facilitate communication of urgent needs or significant findings.

Stay Connected

Join Our Email List

Sign up for Molina's provider email list [here](#). Be the first to receive our provider newsletters, news and updates about Molina services, delivered automatically to your inbox. We will not spam your inbox, but just send important information and updates.

For other questions or inquiries regarding this newsletter, please email us at: PalmettoPartners@MolinaHealthcare.com

Verify Your Fax Number

Molina sends out other important communications to providers by fax. We'd like to ensure that we have your most up-to-date fax numbers and information.

Please email us at PalmettoPartners@MolinaHealthcare.com to verify or update your information.

The Molina Communications team produced this e newsletter, which is designed for South Carolina health care providers. We welcome your feedback, news and ideas for content. Contact us at PalmettoPartners@MolinaHealthcare.com

Molina Healthcare of South Carolina

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Reach Out To Us



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