PROVIDER NEWSLETTER

The Provider Newsletter is available to all network providers serving Molina Healthcare Members

Third Quarter 2020

Even as a crisis drives us apart, we heal by coming together.

THANK YOU

COVID-19 Provider Communication

Molina extends our heartfelt thanks to our provider community for caring for Molina 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.

We encourage you to monitor the CDC website https://www.cdc.gov/coronavirus/2019-ncov/ for additional clinical information.

For the most up-to-date information, please visit our website at https://www.molinahealthcare.com/members/mi/en-us/Pages/home.aspx

In this Issue

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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 COVID Screening Tool is a 5-question screening tool that allows primary care providers to assess for potential psychological and social determinants of health impacts as a result of COVID-19 stressors. It is recommended 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

For additional behavioral health resources and tools, please visit the Molina Behavioral Health Toolkit for Providers under the "Health Resources" tab at https://www.molinahealthcare.com/providers/mi/medicaid/resource/bh_toolkit.aspx.

2020 Molina Healthcare 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 Model of Care is the plan for delivering coordinated care and care management to special needs Members. 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 by different health plans.

Model of Care training materials and attestation forms are available on the Molinahealthcare.com website. The completion date for this year's training is **October 31, 2020.**
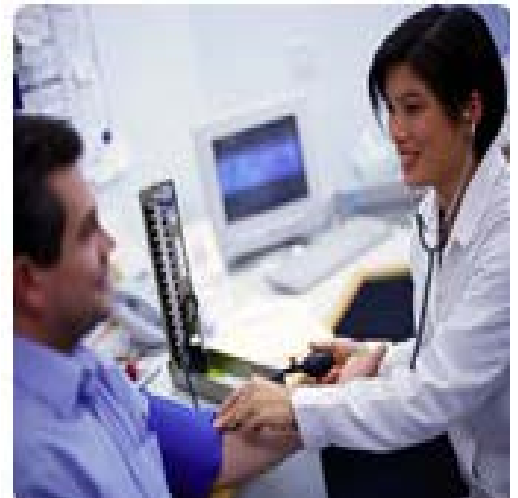
If you have any additional questions, please contact your local Molina Healthcare Provider Services Representative at 855.322.4077

Molina Recognizes Physicians for High Quality Results

Molina is pleased to recognize 48 primary care physician (PCP) groups for their outstanding 2019 Quality Performance. Each practice received a "Certificate of Excellence" and a box of cookies from a local vendor, Cookies by Design. The 48 providers below were selected because they performed outstanding in Molina's 2019 PCP Pay for Performance (P4P) program and represent the highest levels of performance in the State of Michigan. Molina thanks all our valued providers for the high-quality care to Molina members.

Provider Groups	
AIDA PONCE LLC	HACKLEY COMMUNITY CARE CENTER PC
AKPINAR CHILDREN'S CLINIC PC	HADDAD INTERNAL MEDICINE
ALI NASSER MD PC	HAMTRAMCK PEDIATRICS PC
ALLENWOOD FAMILY HEALTH CARE	HIGHLAND PARK MEDICAL CTR PLLC
BASEL KHATIB MD PC	IBTESAM M RAFEEA MD PC
BILLY R NORDYKE JR DO PC	J & I PEDIATRIC CARE CTR PLLC PC
BRENTWOOD PEDIATRICS PC	JOSEPH B LUNA MD
CARING PEDIATRICS	KIDS KARE PEDIATRICS PC
CARING PEDIATRICS 2	MEDICAL CENTER PEDIATRICS PLLC
CHC MEDICAL GROUP	METRO HEALTH HOSPITAL PC
CHILD AND ADULT MEDICINE	MT MORRIS MEDICAL GROUP PLLC
CHILDREN'S CARE MEDICAL CENTER	PARTNERS IN PEDIATRICS PLC
CHILDRENS MED GROUP OF SAGINAW BAY PLLC PC	PEDIATRIC AND ADOLESCENT CENTER PC
CRESCENT FAMILY PRACTICE	PEDIATRIC AND ADVANCE ADOLESCENT CARE LLC PC
DEARBORN HEIGHTS MEDICAL CENTER PC	PEDIATRIC ASSOCIATES OF BIG RAPIDS PC
DEARBORN PEDIATRICS & ADOLESCENT MEDICAL CENTER PC	PEDIATRIC CONSULTANTS OF TROY PC
DEVYANI KHAMBETE MD PC	PRIME PEDIATRICS AND ADOLESCENTS PC
DOWNRIVER FAMILY PHYSICIANS PC	RAAD H AL SARAF MD PC
DURDANA T REHMAN MD PC	ROBERTO BENEJAM MD PC
EAST DEARBORN MEDICAL CLINIC PC	SAMI ABUFARHA MD PC
GENESEE PEDIATRICS PC	SAMIRA ZEBARI MD
GHASSAN A ATTO MD PLLC	STOUT FAMILY MEDICINE PC
GOGUE PEDIATRICS PC	TOWN PEDIATRIC CLINIC PLLC
GREAT LAKES FAMILY MEDICAL CENTER PLLC	TWELVE OAKS PEDIATRICS PLLC

HACKLEY COMMUNITY CARE CENTER PC
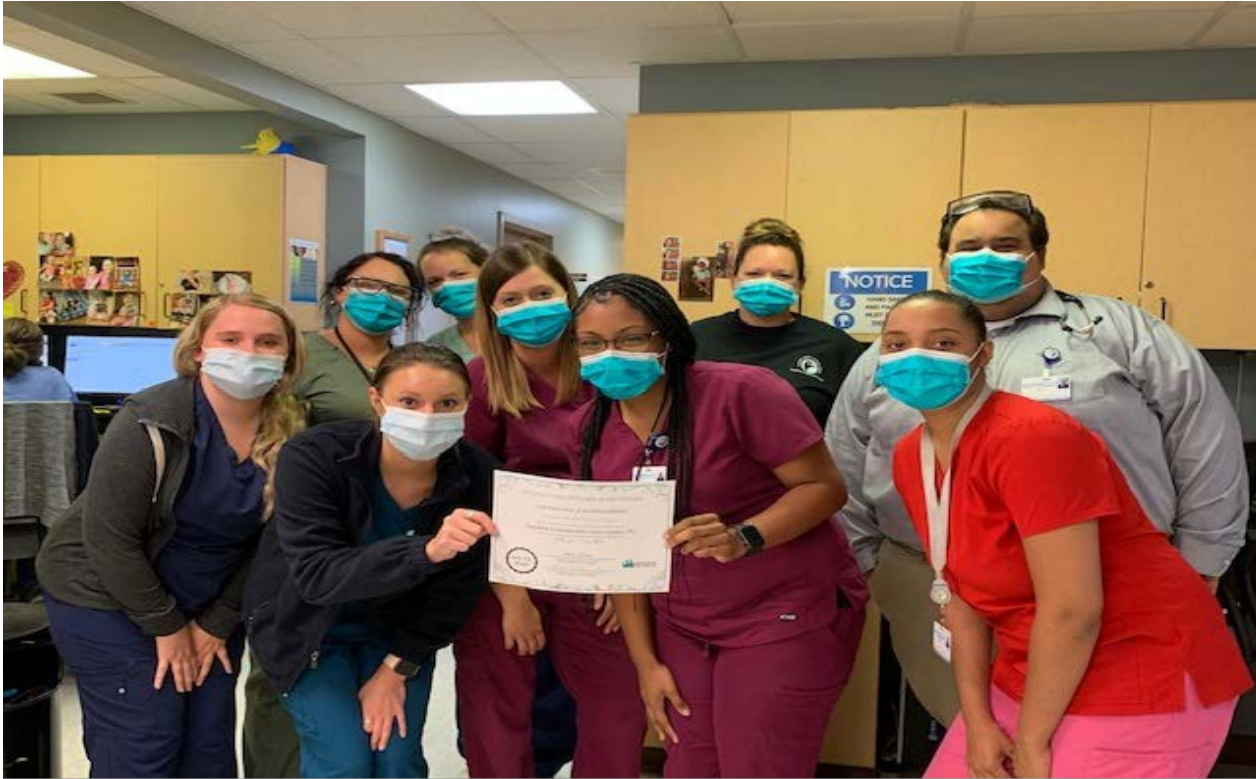
ALI NASSER MD PC

Single Preferred Drug List (PDL)

On October 1, 2020, Molina and all Michigan Medicaid Health Plans will align coverage with FFS for drugs that are included on the Michigan Department of Health and Human Services' (MDHHS) Single Preferred Drug List (PDL).

On August 7, 2020 Molina Healthcare announced the removal of authorization requirements on certain medications. Molina Healthcare is expanding the modification requirements for **additional** medications in effort to assist providers and members with the transition.

The new MDHHS Single PDL requires many brand-named drugs in lieu of generic version.

Providers can contact MDHHSPharmacyServices@michigan.gov or MDHHSCommonFormulary@michigan.gov with questions or concerns.

Molina is communicating with members, providers, and pharmacies about changes to specific prescriptions.

Molina will allow certain medications that are listed on the Single PDL to be filled at the pharmacy without the need for prior authorization **effective immediately**. These medications include:

ADVAIR HFA INHALER	All Strengths	**SYMBICORT**	All Strengths-Generic Covered
BEVESPI AEROSPHERE	Inhaler	**XARELTO**	All Strengths
DULERA INHALER	All Strengths	**BYDUREON**	All Strengths
ELIQUIS	All Strengths	**BYETTA**	All Strengths
ENTRESTO	All Strengths	**COPAXONE**	20 mg/ml Generic Covered
FLOVENT HFA INHALER	All Strengths	**COSENTYX**	All Strengths
HUMALOG	Vial, Cartridge, Kwikpen	**ENBREL**	All Strengths
HUMALOG JR.	Kwikpen	**GILENYA**	All Strengths
HUMALOG MIX 75/25 AND 50/50	Vial, Kwikpen	**HUMIRA**	All Strengths
HUMULIN 70/30	Vial	**JANUVIA**	All Strengths
LANTUS	Vial, Pen	**TECFIDERA**	All Strengths
PRADAXA	All Strengths	**TRADJENTA**	All Strengths
PROVENTIL HFA	Inhaler-Generic Covered	**VICTOZA**	All Strengths
SPIRIVA	18mcg capsule HandiHaler		

The change will enable providers to begin the required transition to new medications now instead of waiting to make the change on October 1, 2020 effective date.

If you have additional questions, please contact your Provider Service Representative at 248.729.0905 or email MHMProviderServicesMailbox@MolinaHealthcare.com

Submitting Electronic Data Interchange (EDI) Claims

Look at all the benefits to using EDI:
- Electronic Claims Submission ensure HIPAA compliance
- Electronic Claims Submission helps to reduce operational costs associated with paper claims (printing, postage, etc.)
- Electronic Claims Submission increases accuracy of data and efficient information delivery
- Electronic Claims Submission reduces claims delays since errors can be corrected and resubmitted electronically!
- Electronic Claims Submission eliminates mailing time and 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. If you do not have a clearinghouse, Molina offers additional electronic claims submissions options. Log onto Molina's Provider Services Web Portal https://provider.molinahealthcare.com for additional information about the claim's submission options, available to you.

FAQ'S
- Can I submit COB claims electronically?
  - Yes, Molina and our connected clearinghouses fully support electronic Explanation of Payments (EOP).
- 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), 837I (Institutional claims).
- What if I still have questions?
  - More information is available at www.molinahealthcare.com under the EDI tab. You may also call or email us using the contact information below.

Submitting Electronic Claims
1-866-409-2935
EDI.Claims@MolinaHealthcare.com
Molina Healthcare of Michigan Payer ID: 38334

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.

Electronic Funds Transfer (EFT)

Molina has partnered with ProviderNet for Electronic Funds Transfer and Electronic Remittance Advice. Below are additional benefits and reminders:

Benefits:
- Providers get faster payment and eliminates mailing time (processing can take as little as three (3) days from submission)
- Providers can search for a historical Explanation of Payment (EOP) by claim number, member number, etc.
- Providers can view, print, download and save a PDF version of the EOP for easy reference with no paperwork to store
- Transfer Protocol (FTP) and their associated Clearinghouse
- Electronic Funds Transfers ensure HIPAA compliance
- It's a free service for you!
- ProviderNet only facilitates the payments from Molina to the provider. Questions regarding claims payment should be directed to Provider Services/Call Center.
- Providers should remember to add all NPI's to their account that receive Molina payments.

Get started today! Providers not registered for EFT payments should contact: Electronic Funds Transfer at: 866.409.2935 or Email: EDI.Claims@Molinahealthcare.com

CHAMPS Enrollment/Requirement for Prescribers

In accordance to Michigan Department of Health and Human Services (MDHHS) Bulletin (MSA 17-48), any individual medical provider or entity that provides services, or orders and prescribes services for individuals with Michigan Medicaid coverage must enroll in the Community Health Automated Medicaid Processing System (CHAMPS).

Enrollment in CHAMPS is solely used for screening providers participating in Medicaid and does not enroll providers in Fee-For-Service Medicaid. Medicaid rules prohibit payment to providers not appropriately screened and enrolled.

Effective October 1, 2019, providers who prescribe drugs to Medicaid beneficiaries must also be actively enrolled in CHAMPS.

MDHHS will prohibit payment for prescription drug claims written by a prescriber who is not enrolled in CHAMPS this is in accordance with MDHHS Bulletin (MSA 19-20). Claims for drugs prescribed by a provider who is not enrolled in CHAMPS will be denied.

This applies to all providers who prescribe drugs, including medical residents. Prescriptions for MI Medicaid members will **reject at point-of-sale.**

The reject code/message displayed to the pharmacy will read: *"889: Prescriber Not Enrolled in State Medicaid Program."*

To avoid interruptions in beneficiary drug therapy, prescribers are encouraged to enroll in CHAMPS as soon as possible. For information about the provider enrollment process and how to get started, visit www.michigan.gov/MedicaidProviders This link provides information for healthcare providers who provide services to Medicaid beneficiaries or would like to enroll as a Medicaid provider.

It provides links to CHAMPS, billing and reimbursement resources, training, policy documents.

Providers who have questions about the enrollment process or require assistance may contact MDHHS Provider Support at 800.292.2550.

> **Provider General Information**: www.michigan.gov/medicaidproviders
> **CHAMPS Provider Enrollment**: https://milogintp.michigan.gov

If you have questions regarding your Molina enrollment due to CHAMPS participation, please call Provider Services at 248.729.0905 or email at MHMProviderServicesMailbox@Molinahealthcare.com.

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, aim to improve health care quality and advance health equity by establishing a collective set of mandates and guidelines that inform, guide and facilitate culturally and linguistically appropriate services.

Communicating Across Cultures
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).
- Ask open-ended questions whenever possible.
- Some individuals can tell you more about themselves through story telling than by answering direct questions.
- Inquire about preferred language and preferred method of communication (i.e. written, spoken, graphics, sign language, assistive listening devices, etc.).

- Consider treatment plans with respect to the patient's culture-based beliefs about health.
- Ask about any complimentary 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.
- Use simple words and avoid jargon.
- Do not use acronyms, idioms and avoid technical language if possible. (i.e. shot vs. injection).
- Please articulate words.
- Give information in small chunks and short sentences.
- Repeat important information and have the patient repeat information 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.

Please remember that 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. Providing 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 Limited English proficiency patients.

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 additional information on Molina's language access services or cultural competency resources, contact Provider Services or visit www.MolinaHealthcare.com.

Training for Providers

A series of short Cultural Competency Training videos are available on Molina's website on the Culturally and Linguistically Appropriate Resources page listed under the Health Resources tab https://www.molinahealthcare.com/providers/mi/medicaid/resource/cme.aspx.

Topics covered 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.

Americans with Disabilities Act (ADA)

The Americans with Disabilities Act (ADA) Section 504 of the Rehabilitation Act of 1973, prohibits discrimination against persons with disabilities in the area of employment, public accommodations, state and local government services, and telecommunications. Both public and private hospitals and health care facilities must provide their services to people with disabilities in a non-discriminatory manner. To do so, they may have to modify their policies and procedures, provide auxiliary aids and services for effective communication, remove barriers from existing facilities, and follow ADA accessibility standards for new construction and alteration projects.

Compliance ensures the provision of linguistic access and disability-related access to all Members, including those with Limited English Proficiency and Members who are deaf, hard of hearing, non-verbal, have a speech impairment, or have an intellectual disability.

Policies and procedures address how individuals and systems within the organization will effectively provide services to people of all cultures, races, ethnic backgrounds and religions as well as those with disabilities in a manner that recognizes values, affirms and respects the worth of the individuals and protects and preserves the dignity of each.

The U.S. Department of Justice provides information about the Americans with Disabilities Act (ADA) through a toll-free ADA Information Line.

This service permits businesses, State and local governments, or others to call and ask questions about general or specific ADA requirements including questions about the ADA Standards for Accessible Design.

ADA specialists are available Monday through Friday from 9:30 AM until 5:30 PM (Eastern Time), except on Thursday when the hours are 12:30 PM until 5:30 PM. Spanish language service is also available.

For general ADA information, answers to specific technical questions, free ADA materials, or information about filing a complaint, call: 800.514.0301 (Voice) 800.514.0383 (TTY).

Additional information is available at www.molinahealthcare.com, from your local Provider Services Representative, or by calling Molina Provider Services at 855.322.4077.

Provider Dental Information

The Michigan Medicaid program provides good dental care through several established programs with many of the programs administered directly by Molina Healthcare of Michigan. Molina is working with members to educate and encourage members to utilize their benefits to improve their dental and related physical health, including programs to reduce emergency room usage for non-traumatic dental problems.

Please remind your Molina Medicaid and MI Health Link (MMP) patients of their dental benefits.

For Molina programs, members use their Medicaid ID card to obtain benefits. Molina administers these dental benefits and programs:

- **Healthy MI and MI Health Link**
  Members in the Healthy MI Plan and MI Health Link have comprehensive dental benefits through Molina Healthcare, including preventive cleanings and x-rays, fillings, extractions, and dentures.

- **Medicaid Pregnant Members**
  Molina Healthcare provides dental services to pregnant women, ages 19 to 64. Pregnant Medicaid members will be able to use their Molina Healthcare Medicaid ID card to obtain dental services. Molina Dental Services under Medicaid are provided to members at no cost. Molina's dental benefit includes cleaning, fillings and other preventive services. Services are available during the pregnancy traditionally dental coverage will last for three months after the expected due date. As a result of Covid-19 restricting the ability of members to access dental services, the dental benefit is extended for pregnant women. This extension will apply to women who are post-partum delivered or still pregnant in March, April, May, June and July 2020. These members will have the dental benefit extended until December 31, 2020, or until they are three months post-partum, whichever comes later.

- **Medicaid Children Fluoride Treatments**
  Molina PCPs may provide fluoride treatments to children 0-3 years and submit claims directly to Molina.

Molina offers Dental Services through its own network of dentists for Healthy Michigan, MI Health Link and Medicaid members who are pregnant. Scion Dental, Inc. processes claims and manages the authorization process for select services. If you have any questions regarding dental services, oral health or care management, please contact your Provider Services Representative or Provider Services at 248.729.0905.

Molina Healthcare Medicare Members have dental coverage through Delta Dental with the following benefits:

- $0 co-pay to see a participating Delta Dental Dentist for covered preventive services
- $2,500 annual maximum allowance for all covered comprehensive dental services, including dentures

To find a Delta Dental provider, members may visit https://www.molinahealthcare.com/members/mi/en-us/Pages/home.aspx then find a Doctor or Pharmacy to view the Delta Dental providers available.

If you have questions regarding Molina Healthcare Medicare dental services, please contact Member Services at 800.665.3072.

In accordance with CMS rules, effective Jan. 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 and consider their participation options visit the following CMS resources:

- CMS Opioid Treatment Programs (OTP) https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/Opioid-Treatment-Program/index
- CMS OTP Enrollment Information https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/Opioid-Treatment-Program/Enrollment

Colorectal Campaign

To support our Medicare members and providers during this COVID-19 period, Molina Healthcare will be starting a campaign to improve the colorectal cancer screening rates for its Medicare population starting September 14 thru December 31, 2020. The campaign will include the following information mailed to each Medicare member that is due for a colorectal cancer screening:

1. Introduction explaining the campaign
2. A FIT Kit
3. FIT KIT instructions - how to use the FIT Kit
4. Postage paid mail for sending the FIT KIT to Quest Labs for processing

Upon completion of processing each FIT Kit, a letter with the results will be sent to each member and his/her primary care provider.

Prostate Cancer Awareness Month

September is Prostate Cancer Awareness Month
Remember to remind members about the importance of screening for prostate cancer.
Encourage early screening to detect prostate cancer early, when it is easier to treat. Have a shared and informed discussion regarding screening.

Change in Laboratory Network

Joint Venture Hospital Laboratories (JVHL) will no longer be a preferred laboratory for Molina Healthcare of Michigan (Molina) effective October 1, 2020.

Providers will continue to have the option of utilizing Quest Diagnostics, LabCorp and several hospital outpatient hospital laboratories.

In addition, providers may also continue to perform the lab procedures listed on the in-office lab list posted on our website.

If you have additional questions please contact your Provider Service Representative directly or you can contact the Provider Services Department at 248.729.0905 or email MHMProviderServicesMailbox@MolinaHealthcare.com

Provider Portal Corner

We improved the way you can report a data change to us. The new feature allows a Provider or Member to submit demographic corrections directly to Molina.

Online Correction Locations:

POD – Search Details page

Provider Portal