

Provider Newsletter

A newsletter for Molina Healthcare Provider Networks

Third Quarter 2024

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SSI Claimsnet, LLC (SSI Group) is the New Clearinghouse

As of (date), SSI Group is Molina Healthcare, Inc.'s new clearinghouse.

Submitting claims electronically through clearinghouses or the Availity Essentials portal offers many advantages. These include:

- Improved HIPAA compliance
- Reduced operational costs associated with paper claims (printing, postage, etc.)
- Increased accuracy of data and efficient information delivery
- Fewer claim delays since errors can be corrected and resubmitted electronically
- Claims reach Molina faster with the elimination of mailing time

How to submit EDI claims:

A clearinghouse is the easiest way to submit EDI claims to Molina. You may submit EDI transactions through Molina's gateway clearinghouse, SSI Group, or use a clearinghouse of your choice. Molina offers additional options for electronic claims submissions if you do not have a clearinghouse. Log onto the Availity Essentials portal at provider.MolinaHealthcare.com for more information.

Update Provider Data Accuracy and Validation

Providers must ensure Molina has accurate practice and business information. Accurate information allows us to better support and serve our members and provider network.

Maintaining an accurate and current Provider Directory is a state and federal regulatory requirement and an NCQA requirement. Invalid information can negatively impact members' access to care, Member/primary care provider (PCP) assignments and referrals. Additionally, current information is critical for timely and accurate claims processing. Providers must validate their information on file with Molina at least once every ninety (90) days for correctness and completeness.

Failure to do so may result in your REMOVAL from the Molina Provider Directory.

Provider information that must be validated includes, but is not limited to:

- Provider or practice name
- Location(s)/address(es)
- Specialty(ies)
- Telephone and fax numbers and email
- Digital contact information
- Whether your practice is open to new patients (PCPs only)
- Tax ID and/or National Provider Identifier (NPI)

The information above must be provided as follows:

Delegated and other providers that typically submit rosters must submit a complete roster that includes the above information to Molina.

All other providers must log into their CAQH account to attest to the accuracy of the above information for each health care provider and/or facility in your practice contracted with Molina.

If the information is correct, please select the option to attest. If it is incorrect, providers can make updates through the CAQH portal. Providers unable to make updates through the CAQH portal should contact their Provider Services representative for assistance.

Additionally, in accordance with the terms specified in your Provider Agreement, providers must notify Molina of any changes, as soon as possible, but at a minimum thirty (30) calendar days in advance, of any changes in any provider information on file with Molina. Changes include, but are not limited to:

- Change in office location(s)/address, office hours, phone, fax or email.
- Addition or closure of office location(s).
- Addition of a provider (within an existing clinic/practice).
- Change in provider or practice name, Tax ID and/or National Provider Identifier (NPI).
- Opening or closing your practice to new patients (PCPs only).
- Change in specialty.
- Any other information that may impact member access to care.

Provider Communication Survey

At Molina, we constantly strive to enhance our services to meet your needs. Your input is invaluable in helping us achieve this goal. Please take a few minutes to participate in our survey, which aims to understand how we can improve our communication methods to suit your preferences better.

Your feedback will directly influence how we engage with you, ensuring a more seamless and efficient communication experience.

Click the link below to access the survey: MolinaHealthcare.surveymonkey.com/r/VS5RGTG

Thank you for your time and contribution in making Molina the best it can be for you and your patients.

Cultural Competency Resources for Providers and Office Staff

Let's partner to achieve health equity! refresher training on cultural competency is available to review communicating with diverse patient populations. These trainings allow you and your staff to better understand and address disparities to improve health care. As our partner, assisting you is one of our highest priorities. We look forward to supporting your efforts so all patients have the same opportunity to attain their highest level of health.

We are committed to improving health equity as a culturally competent organization. We support and adhere to the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care as established by the Office of Minority Health. We also maintain compliance with accreditation standards focused on health equity.

Cultural Competency Resources for Your Office and Staff

Molina's building culturally competent health care: Training for providers and staff

Cultural competency can positively impact a patient's health care experiences and outcomes. Five short cultural competency training videos are available to providers and office staff on the Culturally and Linguistically Appropriate Resources/Disability Resources page on the Health Care Professionals site under the Health Resources tab at MolinaHealthcare.com/.

Training topics:

- Video 1: Introduction to cultural competency
 - o The need for cultural competency
 - o How culture impacts health care
 - o Implicit bias
 - o Federal requirements related to cultural competency (Affordable Care Act, Americans with Disabilities Act)

• Video 2: Health disparities

- o Examples of racial health disparities and health disparities among persons with disabilities
- o Health equity
- o Social Determinants of Health
- Video 3: Specific population focus seniors and persons with disabilities
 - o Social model of disability and accepted protocol and language of the independent living/Disability Rights Movement

• Video 4: Specific population focus – LGBTQ+ and immigrants/refugees

- o Health disparities among LGBTQ+ population
- o Clear communication guidelines for health care providers interacting with LGBTQ+ patients
- o Disparities among immigrant and refugee communities
- o Clear communication guidelines for health care providers interacting with immigrant and refugee patients

• Video 5: Becoming culturally competent

- o Perspective-taking
- o Clear communication guidelines
- o Tips for effective listening
- o Assisting patients whose preferred language is not English
- o Tips for working with an interpreter
- o Teach-back method
- o Molina's language access services

Each training video ranges in length from five to ten minutes. Viewers may participate in all five training modules or just one, depending on topics of interest. Upon completing the training, please complete the provider attestation form available on the Culturally and Linguistically Appropriate Resources/Disability Resources page on the Health Care Professionals site under the Health Resources tab at MolinaHealthcare.com. Please contact your Provider Services Representative if you have any questions.

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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. To review the materials, please visit Molina's Culturally and Linguistically Appropriate Resources/Disability Resources page on the Health Care Professionals site under the Health Resources tab at MolinaHealthcare.com.

Resources consist of the following educational materials:

• American with Disabilities Act (ADA)

o Introduction to the ADA and questions and answers for health care providers (i.e., which healthcare providers are covered under the ADA; how does one remove structural communication barriers; funds available to assist with ADA compliance costs).

• Members who are blind or have low vision

- o How to get information in alternate formats such as Braille, large font, audio or other formats that members can use.
- Service animals
 - o Examples of tasks performed by a service animal; tasks that do not meet the definition of a service animal; inquiries you can make regarding service animals and exclusions, charges or other specific rules.

Tips for communicating with people with disabilities and seniors

o Communicating with Individuals who Are blind or visually impaired, deaf or hard of hearing; communicating with individuals with mobility and/or speech impairments and communicating with Seniors

Please contact your Provider Services Representative if you have any questions.

Molina's language access services

Language access services ensure mutual understanding of illness and treatment, increase patient satisfaction and improve health care quality for patients with limited English proficiency. Molina ensures good communication with members by providing language access services. Providing language access services is a legal requirement for health care systems that receive federal funds; a member cannot be refused services due to language barriers. Molina provides the following services directly 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

In many cases, Molina will also cover the cost of a language or sign language interpreter for our members' medical appointments. Molina members and providers are instructed to call Member and Provider Services to schedule interpreter services or to connect to a telephonic interpreter.

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 MolinaHealthcare.com.

Helping Members in their Language

Our health plan members speak many different languages. As of late 2023, for Medicaid members, the majority of language translation requests were for Spanish, accounting for 84% of the total. This was followed by 5% for Arabic, 2% for Russian, 1% each for Mandarin, Vietnamese, Dari, Ukrainian, Haitian Creole, and Bengali, and 0.4% for Swahili. Among Marketplace members, 75% of the language translation requests were for Spanish, followed by 8% for Vietnamese, 5% for Arabic, 4% for Mandarin, 2% for French, 1% each for Bengali, Korean, Haitian Creole, and Chinese Mandarin, and 0.5% for Russian.

Please contact Molina if you need assistance addressing the language needs of your patients. We also provide resources for providers.

Clinical Policy

Molina's clinical policies (MCPs) are located at MolinaClinicalPolicy.com. Providers, medical directors and internal reviewers use these policies to determine medical necessity. The Molina Clinical Policy Committee (MCPC) reviews MCPs annually and approves them bimonthly.

IMPORTANT INFORMATION FOR MOLINA MEDICAID PROVIDERS

Information generally required to support authorization decision making includes:

- Current (up to 6 months), adequate patient history related to the requested services.
- Relevant physical examination that addresses the problem.
- Relevant lab or radiology results to support the request (including previous MRI, CT, Lab, or X-ray report/results).
- Relevant specialty consultation notes.
- Any other information or data specific to the request.

The 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 their ability to regain maximum function. Requests outside of this definition will be handled as routine / non-urgent.

• If a request for services is denied, the requesting provider and the member will receive a letter explaining the reason for the denial and additional information regarding the

grievance and appeals process. Denials also are communicated to the provider by telephone, fax or electronic notification. Verbal, fax, or electronic denials are given within one business day of making the denial decision or sooner if required by the member's condition.

• Providers and members can request a copy of the criteria used to review requests for medical services.

IMPORTANT MOLINA HEALTHCARE MEDICAID CONTACT INFORMATION

(Service hours 8 a.m5 p.m. local M-F, unless otherwise specified)		
Prior Authorizations including Behavioral Health Authorizations: Phone: (844) 826-4335 Inpatient Requests Fax: (844) 207-1622 All Non-Inpatient Fax: (844) 207-1620	24 Hour Behavioral Health Crisis (7 days/week): Phone: (844) 794-3638/TTY:711	
Physician Administered Drugs (PADs): Phone: (844) 826-4335 Option 2 Fax: (844) 312-6371	Dental: Phone: (262) 421-4536	
Radiology Authorizations: Phone: (855) 714-2415 Fax: (877) 731-7218	Phone: (262) 421-4536	
Provider Customer Service: Phone: (844) 809-8438 Fax: (844) 303-5188	Member Customer Service, Benefits/Eligibility: Phone: (844) 809-8438/ TTY/TDD 711	
Transportation: Phone: (888) 597-1203 Fax: (866) 813-0138	Transplant Authorizations: Phone: (855) 714-2415 Fax: (877) 813-1206	
Progeny NICU Authorization: Phone: (888) 832-2006 Fax: (833) 734-1509	24 Hour Nurse Advice Line (7 days/week) Phone: (888) 275-8750/TTY: 711 Members who speak Spanish can press 1 at the IVR prompt. The nurse will arrange for an interpreter, as needed, for non-English/ Spanish speaking members. <i>No referral or prior</i> <i>authorization is needed</i> .	
Pharmacy Prior Authorization:		

Gainwell Technologies Phone: (833) 660-2402 Fax: (866) 644-6147

Providers may utilize Molina Healthcare's Website at:

provider.molinahealthcare.com/Provider/Login

Available features include:

- Authorization submission and status
- Member Eligibility
- Provider Directory

- Claims submission and status
- Download Frequently used forms
- Nurse Advice Line Report



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