PROVIDER BULLETIN

MOLINA HEALTHCARE

A bulletin for the Molina Healthcare of Ohio provider networks

Active FFS Prior Authorizations

Providers do not need to submit a new Prior Authorization (PA) request to Molina Healthcare if a member has an active Fee-for-Service (FFS) PA.

Molina Healthcare has received FFS PA information from the Ohio Department of Medicaid (ODM). A Molina Healthcare PA number will be assigned and the updated information will be faxed to providers. No action is required by the provider to update this information. If you have a question about an authorization or need assistance, the Utilization Management team can be reached at (855) 322-4079.

Upcoming Behavioral Health Sessions

Molina Healthcare is hosting Behavioral Health (BH) Provider WebEx Sessions. In addition to general questions, the Q&A sessions can also be utilized for billing, claims and testing questions.

Question and Answer WebEx Sessions:
- Tues., July 17, 8:30 to 9:30 a.m. meeting number 809 898 687
- Wed., July 25, 12 to 1 p.m. meeting number 802 583 187
- Tues., July 31, 3 to 4 p.m. meeting number 809 481 824

Provider Portal Claims Training WebEx Sessions:
- Wed., July 11, 11 a.m. to 12 p.m. meeting number 802 607 764
- Mon., July 23, 2 to 3 p.m. meeting number 803 931 383

To join WebEx, call (855) 665-4629 and follow the instructions. To view sessions, log into www.WebEx.com, click on "Join" and follow the instructions. Meetings do not require a password.

Upcoming Face to Face Orientations

Please join the Molina Healthcare BH Provider Services team for a face to face orientation in our Springdale, Independence and Columbus offices.

Springdale, Ohio Training Session:
- Tues., July 10, 10 a.m. to 12 p.m.
- Tues., July 10, 1 to 3 p.m.

Independence, Ohio Training Session:
- Wed., July 18, 10 a.m. to 12 p.m.
- Wed., July 18, 1 to 3 p.m.

Columbus, Ohio Training Session:
- Fri., July 13, 10 a.m. to 12 p.m.
- Fri., July 13, 1 to 3 p.m.
- Mon., July 23, 10 a.m. to 12 p.m.
- Mon., July 23, 1 to 3 p.m.

Each Springdale and Independence session has space for 12 attendees. Each Columbus session has space for 20 attendees. Please RSVP to BHProviderServices@MolinaHealthcare.com advising of the date and time you would like to attend. Molina Healthcare will confirm your participation with an email reply that will include the location address.

Questions?
Provider Services – (855) 322-4079
8 a.m. to 5 p.m., Monday to Friday
(MyCare Ohio available until 6 p.m.)

Email us at BHProviderServices@ MolinaHealthcare.com

Visit our website at MolinaHealthcare.com/OhioProviders

Visit http://bh.medicaid.ohio.gov/ manuals for updates and resources.

Connect with Us
www.facebook.com/MolinaHealth
www.twitter.com/MolinaHealth

Join Our Email Distribution List
Get this bulletin via email. Sign up at MolinaHealthcare.com/ProviderEmail.

Active Medicaid ID Number

In order to comply with federal rule 42 CFR 438.602 providers are required to be fully enrolled with the Ohio Department of Medicaid (ODM) with an active Medicaid ID to receive payment for submitting clean claims to Molina Healthcare.

Molina Healthcare may not pay a network provider on or after Jan. 1,

The Behavioral Health Special Provider Bulletin is a newsletter distributed by Molina Healthcare of Ohio.

Behavioral Health Carve In Information for All Providers

Effective July 1, 2018, BH services accessed through community behavioral health centers and Substance Use Disorder (SUD) treatment agencies are coordinated and billed through Medicaid Managed Care Plans instead of Fee-for-Service Medicaid. Members currently receiving treatment from non-participating providers will be able to continue those services through Dec. 31, 2018 in order to give the providers enough time to contract.

Medicaid BH services have expanded through the BH Redesign project allowing for many new services to be available for our members with Medicaid coverage, including:

- Intensive Community Based Services (ACT, IHBT)
- SUD treatment services at all levels of care (outpatient, intensive outpatient, partial hospitalization, residential)
- Opioid treatment programs (OTP - comprehensive Medication Assisted Treatment for Opioid Use Disorder)
- BH respite for youth at risk of out of home placement

Molina Healthcare offers care management services to members who need assistance with treatment coordination and linking to community resources. To refer any of your patients to Molina Healthcare's Care Management program, contact Provider Services.

As a reminder, Molina Healthcare members can use their 30 one way or 15 round trips non-emergent transportation benefit to get to behavioral health appointments for services that include:

- Mental Health visits (including BH Therapy, Psychiatrist, Psychologist, Counselor and Social Worker)
- SUD services provided by the Ohio Department of Mental Health and Addiction Services (OMHAS) certified facilities

For additional information on the modernization of community BH services and the transition of these services to managed care visit the Ohio Department of Medicaid (ODM) website at http://bh.medicaid.ohio.gov. For questions call (855) 322-4079.

Molina Healthcare is offering training for our Behavioral Health providers to support this transition.

Rendering Provider NPI

Effective July 1, 2018, the Ohio Department of Medicaid (ODM) requires rendering practitioner National Provider Identifiers (NPI) on claims for:

- Behavioral Health (BH) dependently licensed and paraprofessionals
- Federally Qualified Health Center (FQHC)
- Rural Health Clinic (RHC)
- Occupational Health Facility (OHF)
- Accredited Health Care Clinic (AHCC) clinics
- Freestanding birth center staff

As a reminder, effective Jan. 1, 2018, ODM began requiring rendering practitioner NPI on claims for:

- Independently licensed BH professionals

ODM fee-for-service is requiring the NPI of the professionals referenced above to be on the claim and will deny claims that do not include the rendering NPI. Home health and waiver providers are not required to

2019 if the provider has not begun the enrollment process with ODM.

BH Provider agencies without a Medicaid ID number will need to submit an application to ODM to continue as a contracted provider with Molina Healthcare and receive payment for submitted clean claims.

Enrollment is available through the Medicaid Information Technology System (MITS) portal or providers can start the process at http://medicaid.ohio.gov. Reach out to your Molina Healthcare Provider Services Representative with questions.

Provider Support Available

Molina Healthcare has multiple channels to assist BH providers with Prior Authorization (PA), billing support and claims payment issues:

- **Utilization Management** – contact (855) 322-4079 for assistance with PA requests
- **Molina Healthcare Rapid Response Team** – providers can route issues to BHProvider Services@Molinahealthcare.com and Molina Healthcare will monitor, route and track emails for quick resolution

Enrollment Updates for BH Agencies

Ohio community BH agencies (Medicaid provider types 84 and 95) must enroll all dependently licensed and paraprofessional BH practitioners in Ohio Medicaid and affiliate them with employing/contracting community behavioral health agencies in the MITS system.

For detailed information on how to complete this process, please see the ODM "01/31/2018 Enrollment of Dependently Licensed and BH Paraprofessional Practitioners in MITS" at http://mha.ohio.gov/.

Claims for services between Jan. 1 and June 30, 2018, should NOT include these practitioners' NPIs in the rendering field or claims will deny.

Identifying a Molina Healthcare Member

Molina Healthcare requires the Medicaid Management Information

have an NPI on the claim and will continue to submit claims with the current process.

If providers are concerned about their ability to complete the Medicaid registration process prior to claims submission, please use the Molina Healthcare "BH Provider Form" located on our website and send the completed roster to our contracting team at BHProviderServices @MolinaHealthcare.com to ensure we have your practitioners loaded in our claims system.

Service Codes Billable to Medicare and Third Party Liability

Visit http://bh.medicaid.ohio.gov/manuals and select "Final Services Billable to Medicare and Commercial Insurance" under "Billing and IT Resources" to view a list of services billable to Medicare and Commercial Insurance. This document also provides a list of codes that can bypass Medicare/Third Party Liability (TPL) since they are only covered in the Medicaid benefit.

Member Eligibility

Since July 1, 2018, Behavioral Health (BH) services are carved in to the Ohio Medicaid Managed Care Plans.

Providers should use the EDI 270/271 Eligibility transaction from the Ohio Department of Medicaid (ODM) to identify Managed Care Plan enrollment for members who are enrolled in the Ohio Medicaid program.

If you are not currently authorized to send the EDI 270/271 transaction and have an interest in adding this transaction please contact the EDI Support team by calling 1-844-324-7089 or by email at OhioMCD-EDI-Support@dxc.com for assistance in sending your first test file.

ERA and EFT for Providers

Molina Healthcare offers Electronic Remittance Advice (ERA) and Electronic Funds Transfer (EFT) with our contracted vendor solution ProviderNet. This is a free service for providers and benefits include:

- Faster payments
- Ability to search for historical Explanation of Payment (EOP) by claim number, member name, etc.
- Ability to view, print, download and save a PDF version of the EOP
- Ability to have files routed to associated clearinghouse

To sign up visit the Molina Healthcare website and follow the "Change Healthcare ProviderNet Registration Instructions" under the "EDI ERA/EFT" tab.

Common Billing Errors that Cause Claims to Deny

No member enrollment for claim dates of service: It is the responsibility of the providers to check eligibility at every encounter prior to rendering the service by logging into https://www.ohmits.com.

Providers combining type 84 (MH) and type 95 (SUD) services under one NPI: Claims cannot be processed with an incorrect NPI number. Providers must use separate NPIs for Mental Health (MH) and Substance Use Disorder (SUD) services. An NPI can be obtained by visiting https://nppes.cms.hhs.gov/NPPES/Welcome.do.

System (MMIS) Identification (ID) number for all Medicaid only members and MyCare Program members who have only Medicaid coverage with us. If the member has both Medicare and Medicaid coverage with Molina Healthcare in the MyCare Ohio Program we require the Medicare ID for Coordination of Benefits (COB) purposes.

Behavioral Health   Frequently Asked Questions

Our "Behavioral Health Frequently Asked Questions (FAQ)" is available to help answer questions about the Provider Portal, contracting, claims, prior authorizations, Behavioral Health (BH) Testing and more! Look for it on our website under the "Health Resources" tab.

Rendering Providers in Provider Portal

The Molina Healthcare Provider Portal now has the ability to allow multiple rendering providers per claim.

Example: Jane Smith, RN (NPI 9876543210) and John Jones, RN (NPI 9876543211) each provide two, 15-minute nursing services (H2019) to Betty Brown. The correct way to bill these services is by submitting two detail lines on a single claim.
1. Claim detail one would be: Jane Smith, RN, NPI in rendering provider field: 9876543210, with two units of H2019.
2. Second claim detail would be: John Jones, RN, NPI in rendering provider field: 9876543211, with two units of H2019.

Providers who are not required to individually enroll in Medicaid must leave the rendering provider field blank and detail at the same date of service, same supervisor NPI, same place of service, same provider and other modifiers.

BH Redesign Testing Guidance

Molina Healthcare has guidance on BH Redesign claims testing on our website under the "Health Resources" tab, under "Behavioral Health" select "BH Redesign Testing Guidance."

New Opioid Education Resources

Opioid Safety Provider Education Resources are now available on our

Provider type 84 (MH) and 95 (SUD) using NPIs not registered or inactive in MITS: Providers must have NPIs registered as active in MITS.

Rendering practitioner NPI missing on claim:
When a claim is submitted with the rendering practitioner's NPI missing, a corrected claim can be submitted via the Provider Portal or through EDI. Please see the "MCO Resource Document for CBHC Providers" on our website for additional details.

*NOTE: View the "Top Claim Denials" document that includes:
- Claim Edits with Remittance Advice codes
- Denial Reason
- Correction Process

Behavioral Health Redesign Claims Testing

MyCare Ohio's BH Redesign went live on Jan.1, 2018. Community BH Providers transitioned to billing Medicaid Managed Care Plans for their services on July 1, 2018.

The EDI and Provider Portal are available for BH claims testing as needed by providers. Test claims can be submitted by:
- Completing the EDI registration process through Molina Healthcare's clearinghouse, Change Healthcare. Providers/clearinghouses without an existing Change Healthcare account can register for the cost-free service at http://providernet.adminisource.com with our payer ID 20149
- Providers can submit an excel spreadsheet with test claims to Molina Healthcare at BHProviderServices@MolinaHealthcare.com. Molina Healthcare staff will enter this information into our Provider Portal for processing

Providers need to use active Molina Healthcare members whenever possible. Providers without Molina Healthcare members should leave the name field blank and contact Molina Healthcare when submitting a file. Molina Healthcare will populate test member information in these files.

Providers may repeat 10 test members over an unlimited number of test claims. Test scenarios should:
- Incorporate the new codes and requirements.
- Use 2018 Dates of Service. For example, on July 5, 2018, only submit claims for July 1-5, 2018
- Reflect the current scope of services being offered in your practice
- Align with current HIPAA billing guidance and standards
- Providers submitted on test file must match the providers submitted on the testing intake form

If a provider is interested in testing, email Molina Healthcare at BHProviderServices@MolinaHealthcare.com for the intake form. Once it is submitted, email the testing reference number to Molina Healthcare. Our claims testing team will use this number to pull the test files from Change Healthcare for processing and will notify providers individually with the results.

For guidance on billing codes, please visit the ODM website at http://bh.medicaid.ohio.gov/manuals. Providers may request to join the Molina Healthcare network by completing the "Non-Participating Provider Contract Request Form" on our website.

website under the "Health Resources" tab for the Medicaid, MyCare Ohio and Marketplace lines of business. Information includes fact sheets, links to articles and to external trainings.

These resources:
- strengthen our commitment to opioid safety for our members
- support our providers to aid their clinical decision making

Molina Healthcare is committed to doing our part to help improve the safety of members who suffer from opioid use disorders, and to helping prevent problems related to opioid use. If you have any questions, please email our BH Provider Representative.

Requesting Prior Authorization for New Services

Effective Jan. 1, 2018, PA is required from Ohio Mental Health and Addiction Services (OMHAS) certified providers for the following services:
- Assertive Community Treatment (ACT)
- Intensive Home-Based Treatment (IHBT)
- Substance Abuse Disorder (SUD) Partial Hospitalization
- SUD Residential Services (when annual limit is reached)

Resources include:
- The Standard PA Form developed by the Ohio Association of Health Plans (OAHP) BH Collaborative for community behavioral health services. Please fax the standard PA form along with clinical information that demonstrates medical necessity for the service to our Utilization Management (UM) team at (866) 449-6843
- A Managed Care Plan Resource Document developed collaboratively by Managed Care Plans containing information on the PA process, billing procedures, contracting/credentialing, and other topics requested by providers

For a list of services that require PA prior to the initiation of the service or after an annual limit is reached, see the Provider Manual on the Molina Healthcare website. The Molina Healthcare UM team can be reached for questions at (855) 322-4079.

Claims Features Training

The Provider Portal is secure and available 24/7. Register for the Provider Portal on our website or at http://Provider.MolinaHealthcare.com. Online Claims Features include the ability to:

- Submit new claims
- Submit a corrected claim
- Submit claim reconsiderations
- Export claims
- Void a claim
- Check status of claims
- Build and submit batches of claims
- Create a claims template
- Add supporting documents

Additional information is available on our website in the "Claims Features Training."