

Dear Provider,

As a non-contracted provider, it is important to understand Molina Healthcare's billing guidelines, and how the claims process works, to avoid delays in claims payment. Molina Healthcare knows efficient processes are important to our providers and we are committed to getting you the most current information.

Refer to the Non-Contracted Providers Billing Guidelines, which are enclosed and also available on our website at <u>www.MolinaHealthcare.com/OhioProviders</u> under the "Forms" tab. The Guidelines outline the following:

- Prior authorization
- Prescription drugs
- Emergency services
- Post-stabilization services
- Referrals
- Benefits and payment policy
- Claim submissions
- Overpayments

- Timely filing guidelines
- Federally Qualified Health Centers (FQHCs)/ Rural Health Clinics (RHCs)/Qualified Family Planning Providers (QFPPs)
- Member eligibility verification
- Sample member identification cards
- Contract requests
- Contact information

Following these guidelines will help ensure we receive all the information we need to process your requests as quickly as possible so you can focus on what's most important – providing excellent care to your patients.

Referring Patients to Participating Providers

When referring a member to another provider for services, be sure to refer to a Molina Healthcare participating provider. A complete list of Molina Healthcare's participating providers, including pharmacies, laboratories, radiology and behavioral health providers, is available in our Provider Online Directory at <u>www.MolinaHealthcare.com/ProviderSearch</u>. You can also contact Molina Healthcare Provider Services at (855) 322-4079.

Provider Portal

Get the most of your partnership with Molina Healthcare by registering a secure user ID and password at <u>http://Provider.MolinaHealthcare.com</u>. Register today for 24-hour access to:

- Check member eligibility
- Submit and check claim status
- Submit and check prior authorization request(s)

Questions?

If you have any questions, please call Provider Services at (855) 322-4079. Representatives are available to assist you from 8 a.m. to 5 p.m. Monday through Friday for Medicaid, and 8 a.m. to 6 p.m. Monday through Friday for MyCare Ohio.

Prior Authorization

All non-emergent services rendered by non-contracted providers require prior authorization (PA), unless specified otherwise.

Abortions, Hysterectomies and Sterilizations	PA is required for non-contracted providers. The appropriate Ohio Department of Medicaid (ODM) consent form must be signed by the member and submitted to Molina Healthcare in the timeframes specified. Find the consent form at <u>www.MolinaHealthcare.com/OhioProviders</u> under the " <u>Forms</u> " tab.
Ambulance	PA is <u>not</u> required for emergent situations.
Emergency Room	PA is <u>not</u> required for services billed in conjunction with emergency room visit.
Federally Qualified Health Center (FQHC)	Exempt from PA requirements
Rural Health Clinic (RHC)	Exempt from PA requirements
Qualified Family Planning Provider (QFPP)	Exempt from PA requirements
Urgent Care	PA is <u>not</u> required.
Urine Drug Screens	All urine drug screens, as defined by CPT 80101 for a single drug class, will be reimbursed for one unit per date of service, regardless of the number of billed units and drug classes tested.

Use the <u>Service Request Form and Instructions</u> to submit a PA request. The <u>Service Request Form</u> is posted at <u>www.MolinaHealthcare.com/OhioProviders</u> under the "<u>Forms</u>" tab.

Prescription Drugs

Molina Healthcare will pay for medically necessary prescription drugs and certain medical supplies dispensed by a pharmacy (diabetic supplies, inhaler spacers, peak flow meters, syringes, needles, alcohol wipes and condoms).

For Molina Medicaid members: Payment will only be made for drugs covered by Ohio Medicaid and obtained from pharmacies or medical equipment suppliers contracted with Molina Healthcare.

For Molina Dual Options MyCare Ohio members: Payment will only be made for drugs covered by Medicare or Ohio Medicaid and obtained from pharmacies and medical equipment suppliers contracted with Molina Healthcare.

Find a complete list of participating providers and pharmacies in the Molina Healthcare Provider Online Directory at <u>www.MolinaHealthcare.com/ProviderSearch</u>, or call Provider Services at (855) 322-4079.

For a list of covered Medicare codes, see the <u>Drug Formulary</u> posted to <u>www.MolinaHealthcare.com/</u> <u>OhioProviders.</u> Select "MyCare Ohio" from the drop down menu at the top of the page, then look under the "<u>Drug List</u>" tab. For codes not on the formulary, a provider must request PA or formulary exception.

For a list of covered Medicaid codes, see <u>Ohio Administrative Code (OAC) 5160-10-03</u> at <u>http://codes.ohio.</u> <u>gov/oac/5160-10-03</u>.

Please follow the guidelines for limits and PA requirements as outlined in:

• For Molina Medicaid members: The <u>Preferred Drug List (PDL)</u> posted to <u>www.MolinaHealthcare.com/OhioProviders</u> under the "<u>Rx info</u>" tab.

- For Molina Dual Options MyCare Ohio members: The <u>Drug Formulary</u> posted to <u>www.MolinaHealthcare.com/OhioProviders</u>. Select "MyCare Ohio" from the drop down menu at the top of the page, then look under the "Drug List" tab.
- OAC 5160-10-03 Appendix A, Ohio Medicaid Supply List
- OAC 5160-9-02 Appendix A, Supplies Billed by Ohio Medicaid Pharmacy Providers

Contract Requests

If interested in contracting with Molina Healthcare, complete the <u>Non-Participating Provider Contract Request</u> <u>Form</u> at <u>www.MolinaHealthcare.com/OhioProviders</u> under the "<u>Forms</u>" tab.

Emergency Services

For emergency services, submit a CMS-1500 or UB-04 claim. Review the <u>Provider Manual</u> for current information about claims billing and payment guidelines posted to <u>www.MolinaHealthcare.com/</u> <u>OhioProviders</u> under the "<u>Manual</u>" tab. You can also call Provider Services for assistance at (855) 322-4079.

Post-Stabilization Services

For post-stabilization services, submit a CMS-1500 or UB-04 claim. Review the <u>Provider Manual</u> for current information about claims billing and payment guidelines posted to <u>www.MolinaHealthcare.com/OhioProviders</u> under the "<u>Manual</u>" tab. You can also call Provider Services for assistance at (855) 322-4079.

Referrals

Molina Healthcare will not approve referrals to non-contracted providers. PA is not required for referrals to contracted providers. Find a complete list of participating providers in the Molina Healthcare Provider Online Directory at <u>www.MolinaHealthcare.com/ProviderSearch</u>, or call Provider Services at (855) 322-4079.

When requesting PA for a service that will be rendered by another provider, fill out the <u>Service Request Form</u> completely, including the name and address of the refer-to provider.

Benefits and Payment Policy

Molina Healthcare's benefits and payment policy adhere to the OAC. For more information, visit <u>http://emanuals.jfs.ohio.gov/index.stm</u>.

Claim Submissions (Medical and Behavioral Health Services)

Review the <u>Provider Manual</u> for current information about claims billing and payment guidelines posted to <u>www.MolinaHealthcare.com/OhioProviders</u> under the "<u>Manual</u>" tab. You can also call Provider Services for assistance at (855) 322-4079.

Submit electronic claims using EDI payer ID 20149.

Timely Filing Guidelines

Standard timely filing

Non-contracted providers have up to 365 days from the date of service to submit claims for reimbursement.

Coordination of Benefits

If a submitted claim has an explanation of benefits (EOB) from the member's primary carrier, providers have up to 180 days to submit claims from the date of the EOB.

Corrected Claims

Non-contracted providers have 180 days from the date of service to submit corrected claims.

Disputes

Non-contracted providers can dispute a claim payment and/or denial up to 180 days from the original remittance date by submitting a <u>Request for Claim Reconsideration From</u> posted at <u>www.MolinaHealthcare.com/OhioProviders</u> under the "<u>Forms</u>" tab.

Overpayments

Overpayments as a result of claims processing are automatically recouped from future claims for non-contracted providers in lieu of notification letters being sent. For dispute contact information and refund remittance address information, see page 6 for "Cost Recovery" under the "Contact Information" section.

Federally Qualified Health Centers (FQHCs)/Rural Health Clinic (RHC)

The following are Molina Healthcare's Medicaid ID numbers for use when submitting documents for wraparound payments for dates of service on and after July 1, 2013.

Line of Business - Statewide	Molina Medicaid ID Number
Molina Dual Options MyCare Ohio Medicare-Medicaid Plan (MMP) (opt-in and opt-out)	0082414
Molina Medicaid – Aged, Blind or Disabled (ABD)	0077182
Molina Medicaid – Covered Families and Children (CFC)	0077186

Member Eligibility Verification

Molina Healthcare Provider Portal http://Provider.MolinaHealthcare.com

Molina Healthcare Provider Services (855) 322-4079 Medicaid: 8 a.m. to 5 p.m., Monday through Friday MyCare Ohio: 8 a.m. to 6 p.m., Monday through Friday

Ohio Medicaid Information System (MITS) (800) 686-1516

Sample Member Identification Cards

Molina Dual Options MyCare Ohio Medicare-Medicaid Plan (MMP/opt-in)

Connecting Medicare+Medicaid Molina Dua) Options MyCare Ohio (Medicare-Medica		appropriate setting.	all 9-1-1 or go to the nearest emergency room (ER) or other If you are not sure if you need to go to the ER, call your r Nurse Advice line.
Member Name: JOHN SMITH Member ID: Health Plan: 80840	MedicareR Proving Day ConvegeX RxBIN: 004336 RxPCN: PCN1 RxGRP: RxGroup1 RxID:	Member Service: Eligibility Verification: Behavioral Health Crisis: Pharmacy Help Desk: Care Management: 24-Hour Nurse Advice:	(866) 693-4620 (855) 665-4623 (888) 275-8750 TTY/TDD (866) 735-2929 711
MMIS Number: 00000001 PCP Name: Janc Doc PCP Phone: (001) 001-0001 If520-001		Website: Send Claims To:	www.Mdimhealthare.com/duals P.O. Box 22712, Long Beach, CA 90801 EDI Submission Payer ID 20149

	Molina Dual Options	MyCare Ohio Medicaid
Member Name: JOHN SMITH Member ID: 00000001	Health Plan ID: 80840	Medicaid ID: 0000001
PCP Name: JAN PCP Phone: (00		
RxBIN: BIN1 RxPCN: PCN: RxGRP: RxGr		

In Case of an Emergency: Call 911 or go to the nearest emergency room or other appropriate setting. If you are not sure whether you need to go to the emergency room, call your Primary Care Provider (PCP); You may also contact our 24-Hour Nurse Advice Line at (889) 275-8750 TTY 711. Member Services: (855) 687-8862 TTY 711 Monday - Friday 8 A.M.– 8 P.M. 24-Hour Behavioral Health Crisis: (889) 275-8750 TTY 711 24-Hour Care Management: 8600 S4-6331 PRACTITIONERS/PROVIDERS/HOSPITALS: For prior authorization, eligibility, claims or benefits, visit the Molina Veb Portal at www.MolinaHealthcare.com call (855) 322-4079 455 32-4079

Molina Medicaid



Contact Information

Provider Services

Phone: (855) 322-4079 Medicaid: 8 a.m. to 5 p.m., Monday through Friday MyCare Ohio: 8 a.m. to 6 p.m., Monday through Friday Fax: (888) 296-7851

Follow prompts for the following departments and services:

Behavioral Health

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- Contracting/Creder
- Care Management
- Claims/Claims Inquiry
- Contracting/Credentialing
- Eligibility
 - Pharmacy

- Prior Authorizations
- Utilization Management
- Provider Portal Help Desk

Frequently Used Phone Numbers

Department	Phone Number
24-Hour Nurse Advice Line (Medicaid)	English: (888) 275-8750 Spanish: (866) 648-3537 TTY: 711
24-Hour Nurse Advice Line (MyCare Ohio)	English & Spanish: (855) 895-9986 TTY: 711
Fraud, Waste & Abuse Tip Line	(866) 606-3889
Ohio Medicaid Eligibility	(800) 686-1516

Frequently Used Fax Numbers

Department	Fax Number		
Behavioral Health	(866) 553-9262		
Claims Reconsideration	(800) 499-3406		
Pharmacy (Medicaid)	(800) 961-5160		
Pharmacy (MyCare Ohio)	(866) 290-1309		
Prior Authorizations: Medicare/MyCare Ohio Opt-In	Inpatient (877) 708-2116;		
	Outpatient (844) 251-1450		
Prior Authorizations: Medicaid/MyCare Ohio Opt-Out	(866) 449-6843		

Cost Recovery

Phone: (866) 642-8999, select the option for Ohio 10 a.m. to 7 p.m., Monday through Friday

Please make checks payable to Molina Healthcare of Ohio and send the check along with corresponding documentation to: Molina Healthcare of Ohio, Dept. 781661 P.O. Box 78000 Detroit, MI 48278-1661

If returning a Molina Healthcare check, please send to: Molina Healthcare of Ohio, Inc. P.O. Box 349020 Columbus, OH 43234-9020

Use the <u>Return of Overpayment Form</u> to submit unsolicited refunds or check returns. The form is posted to <u>www.MolinaHealthcare.com/OhioProviders</u> under the "<u>Forms</u>" tab.