

PROVIDER NEWSLETTER

A newsletter for Molina Healthcare Provider Networks

First Quarter 2019



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Molina Healthcare's 2018 HEDIS[®] and CAHPS[®] Results

The Consumer Assessment of Healthcare Providers and Systems (CAHPS[®]) is a survey that assesses Molina members' satisfaction with their health care. It allows us to better serve our members.

Molina Healthcare has received results of how our members scored our providers and our services.

Medicaid: In 2018, Molina Healthcare showed improvement for members' rating of getting needed care, getting care quickly, customer service, and the rating of our health plan. Members also rated their personal doctor higher than the previous year. We need to improve on coordination of care.

Medicare: In 2018, Molina Healthcare showed improvements in the following areas: getting care quickly, care coordination, rating of health plan, getting needed prescription drugs, and rating of drug plan. We also improved on the rating of personal doctor and rating of specialist. Customer service and getting needed care are both areas for improvement.

Marketplace: In 2018, Molina Healthcare improved our number of members receiving the flu vaccine and advising our members who smoke to quit. We need to improve on our members' rating of the health plan, members' rating of getting care quickly, and members' rating of personal doctor.

Another tool used to improve member care is the Healthcare Effectiveness Data Information Set or HEDIS[®]. HEDIS[®] scores allow Molina Healthcare to monitor how many members are receiving the services they need. Measures include immunizations, well-child exams, Pap tests and mammograms. There are also scores for diabetes care, and prenatal and after-delivery care.

Medicaid: In 2018, Molina Healthcare improved on the HEDIS[®] measures related to weight assessment and counseling for nutrition and physical activity for children, breast cancer screening, cervical cancer screening, and testing and monitoring diabetic members for nephropathy. We need to

improve on antidepressant medication management and follow-up after hospitalization for mental illness. We also need to improve on helping our members with diabetes control their blood pressure.

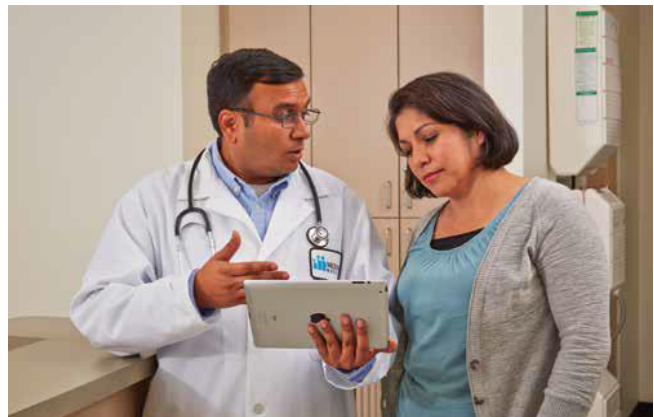
Medicare: In 2018, Molina Healthcare observed marked improvements in the HEDIS® rates for controlling high blood pressure and testing and monitoring diabetic members for nephropathy. Areas that show a need for improvement are antidepressant medication management, breast cancer screening, and comprehensive diabetic care including hemoglobin A1C control.

Marketplace: In 2018, Molina Healthcare improved HEDIS® rates for measures related to comprehensive diabetes care, including A1C monitoring and eye exams. We also improved rates for antidepressant medication management. An area that shows a need for improvement is adult BMI assessment, breast cancer screening, and cervical cancer screening.

You can look at the progress related to the goals that Molina Healthcare has set for the annual CAHPS® survey results and the annual HEDIS® measures in more detail on the Molina Website. You can also view information about the QI Program and print a copy if you would like one. Please visit the provider page on Molina's website at www.MolinaHealthcare.com.

Influenza Update

Xofluza™ (baloxavir marboxil) was approved by the Food and Drug Administration (FDA) to treat an acute influenza infection in people 12 years of age and older on October 24, 2018. In a phase 3 active- and placebo-controlled (parallel assignment) trial of 1,436 adult and adolescent subjects 12 to 64 years of age, there was no difference in the time to alleviation of symptoms between subjects who received Xofluza™ (54 hours) and those who received oseltamivir (54 hours) and for adolescent subjects (12 to 17 years of age), the median time to alleviation of symptoms for subjects who received Xofluza™ was 54 hours vs. 93 hours in the placebo arm. Based on the outcomes, Xofluza™ did result in statistically significantly shorter time to alleviation of symptoms when compared to placebo. Limitations to the clinical trials was the patient selection criteria; those patients with characteristics who met the CDC recommendation list for antiviral therapy were for the most part excluded from the clinical trials. The most common adverse reactions were diarrhea, bronchitis, nasopharyngitis, headache and nausea, occurring in less than 3% of the population. Xofluza™ does have drug interactions with polyvalent cation-containing laxatives, antacids, or oral supplements which are commonly used medications and food products.



The single dose oral tablet option is made by Genentech, the same company that brought Tamflu™ (oseltamivir) to the market. Tamflu™ (oseltamivir) is now available as a generic product, making it a potentially more cost-effective option.

Drug	Manufacturer	Mechanism	Efficacy	Age	Dosing Regimen	Wholesale Acquisition Cost/course
Xofluza™ (baloxavir)	Genentech	Selective inhibitor of cap-dependent endonuclease	Reduces duration of symptoms from average of 80.2 hrs to ~53.7 hrs	≥ 12 yrs	40mg or 80mg x1 dose	\$150
Tamflu™ (oseltamivir)	Genentech	Neuraminidase inhibitor	Median times to alleviation of symptoms 97.5 versus 122.7 hours	≥1 yr	75mg q 12 hr x 5 days (Separate pediatric dosing)	\$77 (generic)

Currently there is no data available for the utilization of Xofluza™ in high risk patients for prophylaxis of influenza. While Xofluza does have a differing mechanism of action from oseltamivir, since 2009, ninety-nine percent of influenza virus isolates have been susceptible to neuraminidase inhibitors.

Molina Healthcare, Inc. National P&T has voted to not add this product to the standard formularies at this time, allowing it to be accessible via a medical exception request.

Electronic Funds Transfer (EFT)

Molina has partnered with our payment vendor, 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 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 Reminders:

- ProviderNet is only for providers who have registered for EFT.
- Providers should always login to their ProviderNet account and view their payment history before contacting Molina about a missing EFT payment.
- ProviderNet only facilitates the payments from Molina to the provider. Questions regarding claims payment should be directed to Provider Services/Call Center.
- If a provider receives a Molina payment that is not on their ProviderNet account (frequently Accounts Payable payments), providers should contact Provider Services/Call Center.
- Providers should be reminded to add all NPI's to their account that receive Molina payments.

Get started today! Provider that are not registered for EFT payments should contact: Electronic Funds Transfer at: (P) 1-866-409-2935, Email: EDI.Claims@Molinahealthcare.com

Wear Red Day Friday, Feb 1, 2019

It's true: Heart disease is the No. 1 killer in women. Yet, only 1 in 5 American women believe that heart disease is her greatest health threat.

Take Amy Heintl, for example, an avid marathon runner and fitness devotee. Heart disease was the furthest thing from her mind – until she collapsed during an early-morning workout. A diagnosis of heart disease followed, and it took her completely by surprise.

“I really couldn't believe this happened to me,” Amy says. “I thought of myself as a healthy person, and I was exercising when it happened. I truly believed I had pulled a muscle.” Which is why her friend called 9-1-1, not Amy.

The truth is, women are less likely to call 9-1-1 when experiencing symptoms of a heart attack themselves. It simply doesn't occur to them to do so. And why would it? The bulk of media attention on the disease is focused on men.

Here are more unsettling facts:

- Heart disease causes 1 in 3 women's deaths each year, killing approximately one woman every minute.
- 90 percent of women have one or more risk factors for developing heart disease.
- Since 1984, more women than men have died each year from heart disease and the gap between men and women's survival continues to widen.
- The symptoms of heart disease can be different in women vs. men, and are often misunderstood.
- While 1 in 31 American women dies from breast cancer each year, 1 in 3 dies of heart disease.

It's time to focus on finding, and becoming the solution. Here's what you need to know about the causes of heart disease and ways you can prevent it.

What causes heart disease?

Heart disease affects the blood vessels and cardiovascular system. Numerous problems can result from this, many of which are related to a process called atherosclerosis, a condition that develops when plaque builds up in the walls of the arteries. This buildup narrows the arteries, making it harder for blood to flow through. If a blood clot forms, it can stop the blood flow. This can cause a heart attack or stroke.

But it doesn't end there. Heart disease can take many other forms as well:

- Heart failure or congestive heart failure, which means that the heart is still working, but it isn't pumping blood as well as it should, or getting enough oxygen.



- Arrhythmia or an abnormal rhythm of the heart, which means the heart is either beating too fast, too slow or irregularly. This can affect how well the heart is functioning and whether or not the heart is able to pump enough blood to meet the body's needs.
- Heart valve problems can lead to the heart not opening enough to allow proper blood flow. Sometimes the heart valves don't close and blood leaks through, or the valve leaflets bulge or prolapse into the upper chamber, causing blood to flow backward through them.

How can I prevent it?

Many things can put you at risk for these problems – one's you can control, and others that you can't. But the key takeaway is that with the right information, education and care, heart disease in women can be treated, prevented and even ended.

Studies show that healthy choices have resulted in 330 fewer women dying from heart disease per day. Here are a few lifestyle changes you should make:

- Don't smoke
- Manage your blood sugar
- Get your blood pressure under control
- Lower your cholesterol
- Know your family history
- Stay active
- Lose weight
- Eat healthy

It's time to Go Red!

There's much more work to be done before heart disease becomes a thing of the past. But together, we can do it. Women who Go Red are helping us uncover the truth about heart disease and have made incredible improvements in their heart health. Are you ready to join us?

Source: https://www.goredforwomen.org/about-heart-disease/facts_about_heart_disease_in_women-sub-category/causes-prevention/

2019 Provider Manuals

The 2019 Provider Manuals will be available on MolinaHealthcare.com in January 1, 2019. The provider manual is intended to provide Molina contracted Providers with guidance in understanding Molina Healthcare's programs, processes and policies. Manuals may be revised as Molina Healthcare's policies, programs or regulatory requirements change. All changes and revisions will be updated and posted to the Molina Healthcare website located at www.molinahealthcare.com.

Provider Portal Corner



Effective 10/11/18, Third Party Billers (3PB) have access to certain functions in the Provider Portal.

Molina contracted Providers may now grant access to their contracted third party billers who will be able to log into the Provider Portal. Once they are registered and granted access by a provider they can utilize the following functionality:

- Member Eligibility Inquiry
- Member Roster
- Claims (Inquiry & Submission)

To register a 3PB, the Provider Portal Account administrator for the Provider's office must invite the 3PB via the "Manage Users" function. Once the new 3PB user is selected to Invite, the administrator will:

- Select "Biller" as the user role
- Attest to the Third Party Biller contract and BAA status
- Once the invitation is submitted, the 3PB will receive an invitation via the email address provided.

The screenshot displays the "Manage User Screen" interface. At the top, it shows "User Details" with a "User Id" field containing "AdminAccount121". Below this is the "Functionality Access" section, which includes a table with two columns: "Provider" and "Role". The table lists two providers: "MOLINA HEALTH - 123456789 - xxx5555" and "MOLINA HEALTH PC - 123456789 - xxx6556". Both roles are set to "Biller". A red box highlights the "Role" column, and a red arrow points to the "Role" dropdown menu for the second provider. Below the table, there are three radio button options: "Yes" (selected), "No", and "Click here if this invitation is for a Third Party Biller outside of your organization". There are also two checkboxes: "Click here if you attest that the Third Party Billing firm has an active contract with your organization" (checked) and "Click here if you attest that the Third Party Billing firm has a current business associate agreement with your organization" (unchecked). At the bottom right, there are "Save" and "Go Back" buttons. A note at the bottom of the screen states: "If a role type is not selected, it is defaulted to 'Basic'".

Provider	Role
MOLINA HEALTH - 123456789 - xxx5555	Biller
MOLINA HEALTH PC - 123456789 - xxx6556	Biller

Yes No Click here if this invitation is for a Third Party Biller outside of your organization

Click here if you attest that the Third Party Billing firm has an active contract with your organization

Click here if you attest that the Third Party Billing firm has a current business associate agreement with your organization

Save Go Back

If a role type is not selected, it is defaulted to "Basic"

Please note the following: The 3PB have the ability to toggle between multiple Pay-To groups from the same state with one user ID, similar to the non-3PB Biller role. If they need access to another state's Pay-To group, they will need to create a separate User ID with a different email address.