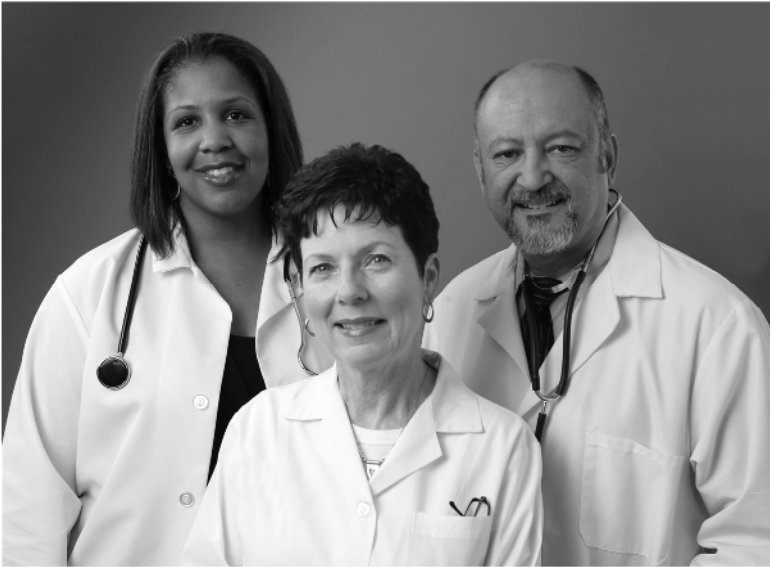


Provider Bulletin — May 2018

A bulletin for the Molina Healthcare of New York, Inc. Network



Questions?

Call Provider Services

(877) 872-4716- 8 a.m. – 6 p.m.

Monday through Friday

MHNYProviderServices@MolinaHealthcare.com

Connect with Us

Provider Web Portal

<https://provider.molinhealthcare.com>

Hospital Readmissions

Pursuant to the Centers for Medicare and Medicaid Services (CMS), a hospital readmission is defined as a clinically related subsequent admission to an acute, general, short term hospital less than 31 calendar days from the date of discharge from the same or related acute, general, short term hospital.

According to an audit performed by The New York State Office of the Comptroller of Medicaid Hospital Readmissions, it was determined that New York State's Medicaid program is at high risk for overpaying millions of dollars when there is a DRG billing for an initial inpatient hospital stay as well as for a subsequent readmission for the same patient.

Hospital readmissions occurring less than 31 calendar days from the date of discharge have been found to constitute a quality of care problem. Readmission Review is an integral part of Molina Healthcare of New York, Inc.'s ("Molina") Quality Improvement Program which ensures Molina members are receiving hospital care that is compliant with nationally recognized standards and guidelines as well as all applicable federal and state regulations.

Effective June 4, 2018, Readmission Reviews will be conducted in accordance with CMS policy which states: "Perform case review on both stays. Analyze the cases specifically to determine whether the patient was prematurely discharged from the first confinement, thus causing readmission. Perform an analysis of the stay at the first hospital to determine the cause(s) and extent of any problem(s) (e.g., incomplete or substandard treatment). Consider the information available to the attending physician who discharged the patient from the first confinement. Do not base a determination of a premature discharge on information that the physician or provider could not have known or events that could not have been anticipated at the time of discharge."

Upon conclusion of the review if it was determined that the readmission may have been avoidable or preventable, the initial and subsequent admissions will be combined and reimbursed as one DRG payment.

For additional information including exception and exclusion criteria please visit:

www.cms.gov

If you have any questions or concerns, please contact Molina Healthcare of New York, Inc. Provider Services at (877) 872-4716.



Your Extended Family.