

## ODM Behavioral Health Redesign

### Information for providers in the Medicaid and MyCare Ohio networks

Effective July 1, 2017, the Ohio Department of Medicaid (ODM) is making changes to Medicaid Community Behavioral Health (BH) services. These changes will apply to provider types 84 (Community Mental Health Centers) and 95 (MHAS certified Substance Use Disorder Treatment Agencies) and some practitioners that are affiliated with 84s or 95s.

#### Registration:

Providers must have all applicable rendering practitioners registered with Medicaid and linked to their organization through the Medicaid Information Technology System (MITS) portal. Visit <http://mha.ohio.gov> and select "MITS Claims Processing" under the "Funding" tab.

Provider groups can give information on their rendering practitioners to Molina Healthcare via the BH Provider form, located at [MolinaHealthcare.com/OhioProviders](http://MolinaHealthcare.com/OhioProviders) under the "Forms" tab.

#### Training:

Training is available through:

- Molina WebEx series for provider training
  - Tue., June 6 from 10-11 a.m., Meeting Number 802 134 237
  - Thu., June 15 from 2-3 p.m., Meeting Number 806 960 645
  - Wed., June 21 from 4-5 p.m., Meeting Number 806 360 611
- Molina Healthcare Q&A Sessions for providers to call in and pose their questions will be available in July.

To join WebEx, call (855) 665-4629 and follow the instructions. To view training screens, log into [www.webex.com](http://www.webex.com), click on "Join" and follow the instructions. Meetings do not require a password.

Please email [BHProviderServices@MolinaHealthcare.com](mailto:BHProviderServices@MolinaHealthcare.com) if you will be attending a WebEx or if you have any questions about the BH Redesign.

Additional resources are located on the Behavioral Health Redesign website at <http://bh.medicaid.ohio.gov/manuals>.

## Submitting Electronic Data Interchange (EDI) Claims

### Information for providers in all networks

Molina Healthcare is going green! In order to streamline the exchange of claim and payment information, we are focused on ensuring our provider partners are taking advantage of electronic solutions.

Electronic Data Interchange (EDI) is the safest and easiest way to submit claims to us, receive payments and remittance advices.

Electronic claim submission can be done in one of two ways:

- Through your own clearinghouse or Molina Healthcare's contracted clearinghouse, Change Healthcare,
- Molina Healthcare's Provider Web Portal - <https://Provider.MolinaHealthcare.com>

Accepted claims for EDI transmission include 837P (Professional Claims)

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#### Questions?

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

#### Connect with Us

[OHProviderRelations@MolinaHealthcare.com](mailto:OHProviderRelations@MolinaHealthcare.com)  
[www.facebook.com/MolinaHealth](http://www.facebook.com/MolinaHealth)  
[www.twitter.com/MolinaHealth](http://www.twitter.com/MolinaHealth)

#### Join Our Email Distribution List

Get this bulletin via email. Sign up at [MolinaHealthcare.com/ProviderEmail](http://MolinaHealthcare.com/ProviderEmail).

#### Clear Coverage

**Provides instant approval on most outpatient services.** To learn more, join the next training session at <http://molina.webex.com>. Request on-site training: [OHProviderRelations@MolinaHealthcare.com](mailto:OHProviderRelations@MolinaHealthcare.com).

**Fri., June 23 from 9-10 a.m.,**  
Meeting Number: 803 310 904

#### New PA List Effective July 1, 2017

On June 1, 2017 the updated Prior Authorization Code list will be posted online at [MolinaHealthcare.com/OhioProviders](http://MolinaHealthcare.com/OhioProviders).

#### Molina Healthcare is Incorporating Milliman's MCG Tool

##### Information for providers in all networks

Beginning July 1, 2017 Molina Healthcare of Ohio will begin incorporating MCG (previously known as Milliman) criteria to support a medical necessity determination for

and 837I (Institutional Claims).

#### Electronic Claims Submission:

- Ensures HIPAA compliance
- Helps to reduce operational costs associated with paper claims (printing, postage, etc.)
- Increases accuracy of data and efficient information delivery
- Reduces claims delays since errors can be corrected and resubmitted electronically
- Eliminates mailing time and claims reach Molina Healthcare faster

Electronic Funds Transfer (EFT) and Electronic Remittance Advice (ERA) can save your staff from trips to the bank and faster payments than mail.

#### ERA/EFT offer:

- Faster payment
- Ability to search for a historical ERA (aka Explanation of Payment – EOP) by claim number, member name, etc.
- View, print, download and save a PDF version of the ERA for easy reference with no paperwork to store.
- Files can be routed to FTP and/or provider clearinghouse.

To Enroll in ERA/EFT and view registration instructions go to:

[MolinaHealthcare.com/OhioProviders](http://MolinaHealthcare.com/OhioProviders), click on the “EDI ERA/EFT” tab and select “Enrollment Information for ERA/EFT.”

If you have questions regarding these electronic solutions, please contact your Provider Services representative or call (855) 322-4079.

### 30 Day Readmission

#### **Information for providers in the Medicaid and My Care Ohio networks**

Molina Healthcare is revising our 30-day readmission policy to clarify the process for our providers. While this policy provides guidance regarding reimbursement, it is not intended to address every situation.

The purpose of this policy is to promote more clinically effective, cost efficient and improved health care through appropriate and safe hospital discharge of patients. This is based, in part, on Centers for Medicare and Medicaid Services (CMS) and the Ohio Department of Medicaid (ODM) guidelines. For a detailed description of our Readmission policy, please go to our website at [MolinaHealthcare.com/OhioProviders](http://MolinaHealthcare.com/OhioProviders) under “Manual” tab, under “Reference Guides.”

### Partners in Care Newsletter

#### **Information for providers in all networks**

View the Spring 2017 Partners in Care newsletter under the “Communications” tab at [MolinaHealthcare.com/OhioProviders](http://MolinaHealthcare.com/OhioProviders).

Articles in this edition include:

- Updating Provider Information
- Are You Culturally Competent?
- Practitioner Credentialing Rights: What You Need to Know
- Molina Healthcare’s Utilization Management
- Drug Formulary and Pharmaceutical Procedures
- Complex Case Management
- Website
- Translation Services

inpatient authorization requests and outpatient behavioral health. The MCG criteria for inpatient admissions will be phased from July 1, 2017 to Oct. 1, 2017. The use of MCG outpatient behavioral health criteria will begin on Aug. 7, 2017. Additional communications will be shared with impacted providers throughout this timeframe. This change is being made to align with industry-standard criteria widely used within the inpatient setting.

### EAPG Payment Methodology

#### **Information for providers in all networks**

Effective July 1, 2017, Molina Healthcare of Ohio/Ohio Department of Medicaid will adopt the Enhanced Ambulatory Patient Group (EAPG) payment methodology for outpatient hospital claims.

OAC Draft Rule/Final rules can be verified at <http://medicaid.ohio.gov> under the “Resources” tab, on the “Legal and Contract” line under “Rules.”

### Claim Adjudication and Payment

#### **Information for providers in dental networks**

To appeal a reimbursement decision (claim payment dispute), submit the appeal in writing along with any necessary documentation to: Molina Healthcare Appeals and Grievances Department.

Molina Healthcare Claims  
P.O. Box 2136 Milwaukee, WI 53201

### Refunds

#### **Information for providers in dental networks**

In the event the provider receives a check that is not theirs or finds an overpayment, please send the refund with a copy of the remittance advice and claim information to:

Molina Healthcare  
P.O. Box 541 Milwaukee, WI 53201

### Provider Appeals

#### **Information for providers in dental networks**

A designated Molina Healthcare and Scion Dental complaint coordinator is dedicated to the expedient, satisfactory resolution of provider complaints, grievances and appeals. Participating providers who disagree with authorization decisions (not claim disputes) made by Molina

- Patient Safety
- Hours of Operation
- Care for Older Adults
- Non Discrimination
- Member Rights and Responsibilities
- Health Management Programs Improve Member Health
- Preventative Health Guidelines
- Quality Improvement Program
- Standards for Medical Record Documentation
- Clinical Practice Guidelines
- Advance Directives
- Behavioral Health
- Care Coordination & Transitions

Also available on our website:

- Clinical and preventive guidelines
- Disease management programs
- Quality Improvement programs
- Member rights/responsibilities
- Privacy notices
- Provider manuals
- Utilization Management (UM) affirmative statement/how to obtain copies of UM criteria
- Drug formulary and pharmaceutical procedures

### Multi Pronged Approach to Fighting Opioid Drug Abuse

#### *Information for providers in all networks*

Molina Healthcare focuses on primary prevention of Opioid drug abuse through provider education; resource utilization for inpatient detoxification; supporting treatment and recovery through Medication Assisted Treatment (MAT) and identification of members for the Coordinated Services Program (CSP).

The opioid prescribing guidelines cover both emergency department and acute care facilities treating acute and chronic pain. They prevent “doctor shopping” for prescription pain medication; encourage non-opioid therapies; reduce overprescribing leading to leftover pain medication and simplify the use of the Ohio’s Automated Rx Reporting System (OARRS) data.

Details are available at [MolinaHealthcare.com/OhioProviders](http://MolinaHealthcare.com/OhioProviders) under the “Rx info” tab, in the “Molina Healthcare’s Multi-Pronged Approach to Fighting Opioid Drug Abuse” article.

### Comprehensive Perinatal Care

#### *Information for providers in all networks*

Molina Healthcare is committed to ensuring our members receive the best quality perinatal care possible and quality care starts with your office!

#### **Pregnancy Notification & Risk Assessment**

It is essential that Molina Healthcare is notified of each member’s pregnancy as early as possible. Complete the Prenatal Risk Assessment Form (PRAF) at [MolinaHealthcare.com/OhioProviders](http://MolinaHealthcare.com/OhioProviders) under the “Forms” tab within the 1st Trimester or within 42 days of the member enrolling with Molina Healthcare and you can earn a **\$50 provider incentive** when you return the completed, compliant form and bill the H1000 HCPCS code at

Healthcare and Scion Dental reviewers or dental consultants may submit a written appeal within 90 days of the original authorization denial date. Submit appeals to:  
Molina Healthcare Appeals Department  
P.O. Box 349020  
Columbus, OH 43234-9020

### Reimbursement for LARC Devices

#### *Information for providers in all networks*

Effective July 6, 2017, the Long-Acting Reversible Contraceptive (LARC) devices may be billed separately when provided during an inpatient hospitalization. They may include intrauterine devices (IUD) and subdermal contraceptive implants. The corresponding inpatient obstetrical delivery claim will be paid in accordance with Ohio Administrative Code rule 5160-2-65.

### ODA Provider Certification: Shared Living

#### *Information for providers in the Medicaid & MyCare Ohio networks*

Effective July 1, 2017, the Ohio Department of Aging (ODA) and Medicaid is offering shared living to individuals enrolled in the PASSPORT program. ODA Rule 173-39-02.25 will provide live-in caregivers for PASSPORT recipients needing assistance with self-management and the presence of another person (occasional or continuous) in order to assure their health and safety.

This program requires the ODA-certified agency provider does not own or rent the home and there cannot be more than two individuals living in the home receiving shared living paid by the PASSPORT program.

### Intensive Behavioral Services for Children with Autism (CIBS)

#### *Information for providers in the Medicaid & MyCare Ohio networks*

Molina Healthcare is excited to partner with the Ohio Department of Medicaid to offer intensive behavioral services to children on the autism spectrum starting on Aug. 1, 2017. These services are behavioral interventions based on evidence-based practices (such as Applied Behavioral Analysis), and include

the time of service.

### Pregnancy Rewards Program

Molina Healthcare offers members an incentive program to help emphasize the importance of getting all needed perinatal services. Promote this program to all pregnant Molina Healthcare members and stress the importance of routine perinatal care with all pregnant patients. Our Pregnancy Rewards includes the following member incentives:

- **\$50 Gift Card:** 1st prenatal visit within the 1st Trimester or within 42 days of joining Molina Healthcare for newly enrolled members.
- **\$25 Gift Card:** Complete 1 prenatal visit during the 2nd Trimester (13-24 weeks pregnant).
- **\$50 Gift Card:** Complete a postpartum visit within 21-56 days after delivery (does not include visit to remove staples from a C-section).

### Postpartum Visits

Molina Healthcare wants to ensure the continuation of care for new mothers. A postpartum visit is important to help new mothers know what to expect during the postpartum period. It is imperative that postpartum visits be conducted **21 to 56 days after delivery**. We suggest scheduling the postpartum visit before the patient is discharged from the hospital.

### Global Billing

When billing Global OB codes for pregnancy related care, we request that you also submit CPT II Code 0503F to indicate the date of the postpartum visit. Without this code we will not know the service took place and will not be able to provide members with their Pregnancy Rewards incentive for completing this visit.

If, for any reason, your office billed Global OB codes for pregnancy related care but was unable to complete a postpartum visit, please send a corrected claim to reflect the change in services rendered.

For more information concerning our perinatal programs please visit: [MolinaHealthcare.com/OhioProviders](http://MolinaHealthcare.com/OhioProviders) and select the "Pregnancy Rewards Toolkit" under the "Health Resources" tab, or contact your Provider Services Representative.

instruction to parents or guardians, aide(s), and other supportive caregivers. The following practitioners are able to render CIBS interventions within their scope of practice and consistent with their education, training and experience:

- Licensed professional clinical counselor (LPCC)
- Licensed independent social worker (LISW)
- Licensed independent marriage and family therapist (LIMFT)
- A certified Ohio behavioral analyst (COBA) certified by the Ohio Board of Psychology

Molina Healthcare is now contracting with CIBS providers who are interested in caring for our members on the autism spectrum. Please contact us at [MHONonParContractRequests@MolinaHealthcare.com](mailto:MHONonParContractRequests@MolinaHealthcare.com) and we will follow up with you to begin the contracting process.

### Fighting Fraud, Waste & Abuse

Do you have suspicions of member or provider fraud? The Molina Healthcare AlertLine is available 24 hours a day, 7 days a week, even on holidays at (866) 606-3889. Reports are confidential, but you may choose to report anonymously.