



Claim Reconsideration Requests Update

Information for providers in all networks

Molina Healthcare's <u>Request for Claim Reconsideration</u> form was changed to reflect the following:

- Submit claim disputes only when disputing a denial, payment amount or clinical code edit.
- Primary insurance Explanation of Benefits (EOB) and corrected claims are **not** accepted via claim reconsideration.
 - Follow the standard claim process within timely filing requirements outlined in the <u>Provider Manual</u> at www.MolinaHealthcare.com/Providers/OH under "Manual."
- Effective **Nov. 1**, the form must be filled out entirely or it will be returned with request for additional information.
 - Find the form at <u>www.MolinaHealthcare.com/Providers/OH</u> under "Forms."
- Fax the form and supporting documents to (800) 499-3406.
- We're going green! Mail submission is **not** accepted and will be returned.
 - Exception: Submit large files by mailing a disc to:

Molina Healthcare of Ohio Attn: Claim Disputes P.O. Box 349020

Columbus, OH 43234-9020

Transplant and NICU Fax Number Changes

Information for providers in all networks

Effective Oct. 1, Molina Healthcare has changed the following toll-free fax numbers:

Transplant prior authorization (PA)	(877) 731-7220
Neonatal Intensive Care Unit (NICU) inpatient notification/continued stay PA	(877) 813-1206

The processes and forms used to request PA have not changed.

Home Health CPT Code Retired G0154

Information for home health providers in the Medicaid and MyCare Ohio networks

Effective Sept. 30, procedure code G0154 for home health nursing was retired by the Ohio Department of Medicaid (ODM). Use the following codes instead:

Service	Effective Sept. 30	Retired
Registered nurse (RN) visit for home health nursing	G0299 (billed to ODM)	G0154 with modifier TD
Licensed practical nurse (LPN) visit for home health nursing	G0300	G0154 with modifier TE

The changes only apply to home health nursing services and do not

In This Issue

- → Claim Reconsideration Update
- → Transplant /NICU Fax Changes
- → Home Health Code Retired
- → VFC Billing Update
- → Earn \$50 for Prenatal Care
- → Clear CoverageTM
- → Healthchek Reminder
- → Kids in Custody and Adoption
- → Health Care Coding Tips

Questions?

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

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Join Our Email Distribution List

To receive this bulletin via email, submit the form at www.MolinaHealthcare.com/ProviderEmail.

Website Roundup

Recently updated at www.Molina Healthcare.com/Providers/OH:

- Provider Manual
- Consent to Sterilization Form
- Claim Reconsideration Request
- Prior Authorization Code List

Clear Coverage™

Provides instant approval on most outpatient services To learn more,
join the next training session, also
available on mobile devices.

Fri., Oct. 21 from 9 to 10 a.m., Meeting *Number*: 808 286 688 Fri., Nov. 18 from 9 to 10 a.m., Meeting *Number*: 807 641 914

- 1. Go to http://molina.webex.com.
- 2. Enter the meeting number.
- 3. If asked, enter name and email.
- 4. Give your number for a call back.
- 5. Follow the instructions.

Request on-site training from your Provider Services Representative or by email OHProviderRelations@ MolinaHealthcare.com.

impact the TD or TE modifiers used to denote private duty nursing services (T1000) provided by an RN or LPN. Refer to Ohio Administrative Code (OAC) 5160-12-05 Appendix A for new codes.

Vaccines for Children Billing and Reimbursement Update Information for providers in the Medicaid and MyCare networks

Effective Jan. 1, Molina Healthcare updated reimbursement procedure for vaccines billed with administration CPT code 90460 under the Vaccines for Children (VFC) program as follows:

- 90460 is reimbursed the ODM fee schedule allowed amount.
- Both 90460 and the VFC toxoid must be billed to qualify for reimbursement. No payment will be made on toxoids under VFC.
- 90461 is not recognized or billable with ODM.
- Do not use 90471 to 90474 for administration vaccines under VFC.
- Separate payment for either the office or well child visit is allowed with supporting documentation showing a separate visit performed in addition to the administration of vaccines. Bill with modifier 25.

Facility claims will continue to be reimbursed on toxoids and not the administration codes billed in conjunction with those vaccines.

Remind Patients About Healthchek

Information for PCPs in the Medicaid and MyCare Ohio networks

Remind your patients or their parents/guardians when it's time to get important Healthchek (EPSDT) services. These services are covered by Molina Healthcare at no cost to our members. Physicians and advanced practice nurses are eligible to provide Healthchek services.

Refer to OAC 5160-14 for more about Healthchek. Visit www.Molina.html Healthcare.com/Providers/OH for preventive care guidelines and screening forms under the "Health Resources" tab.

Children in Custody and Adoption Joining Molina Healthcare Information for primary care and home health providers in the Medicaid network

ODM will transition children in custody and adoption to managed care statewide effective Jan. 1.

New members will have a 90-day transition of care (TOC) period and Molina Healthcare will honor prior authorizations for services like:

- Durable medical equipment
- Surgeries
- Home health services
- Prescription medications
- Chemotherapy and radiation
- Transplant services

Molina Healthcare will collaborate with parents, foster families and caseworkers from Public Children Services Agencies (PCSAs) to reduce gaps in care and duplicative services. We will also help members and their caregivers navigate plan benefits and access community resources.

To ensure a successful transition, ODM is conducting a pilot program starting Nov. 1. Clark, Fairfield, Franklin, Lorain, Medina, Richland and Summit counties will be participating in the pilot.

Earn \$50 for Timely Prenatal Care Information for OBGYN providers in the Medicaid network

To receive a \$50 incentive, complete a Prenatal Risk Assessment
Form (PRAF) for each newly identified pregnant patient and meet the following:

- Bill with HCPCS code H1000 at the time of service (1)
- Complete the service within the first trimester or 42 days of the member's enrollment with Molina Healthcare
- Fax to (866) 504-7256. Find the PRAF at www.MolinaHealth.care.com/Providers/OH under the "Forms" tab.

Molina Healthcare will send monthly consolidated incentive checks for each PRAF completed and appropriately submitted via claim, with a limit of one per member. Expect incentive payments four to six weeks after delivery of a live birth.

For questions, contact Kevin St. Clair at:

Kevin StClair@molinahealthcare.com

Kevin.StClair@molinahealthcare.com or (614) 212-2385.

(1)Regardless of compliance, the H1000 Code will be paid at your contracted ODM fee schedule. Additional H1000 claims may be submitted if significant risk factors that were not noted on the original PRAF are identified during the course of the pregnancy. The \$50 incentive is only paid once per pregnancy.

Health Care Coding Tips

Molina Healthcare has posted <u>Health</u> <u>Care Coding Tips</u> to <u>www.Molina</u> <u>Healthcare.com/Providers/OH</u> under the "Health Resources" tab.

The tips provide information on coding and documentation rules applied by the Centers for Medicare and Medicaid Services (CMS) to help providers identify codes and document patients' health statuses.

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.