

Common Billing Errors that Cause Claims to Deny

No member enrollment for claim dates of service: It is the responsibility of the providers to check eligibility. To minimize claims payment issues, it is strongly recommended that eligibility be verified at every encounter prior to rendering the service by logging into <https://www.ohmits.com>.

Claims billed for Medicaid members: Claims for Medicaid Members should be submitted to the Ohio Department of Medicaid (ODM) Fee for Service (FFS) for dates of service through June 30, 2018.

Providers combining type 84 (MH) and type 95 (SUD) services under one NPI: Claims cannot be processed with an incorrect NPI number. Providers must use separate NPIs for Mental Health (MH) and Substance Use Disorder (SUD) services. An NPI can be obtained by visiting <https://nppes.cms.hhs.gov/NPPES/Welcome.do>.

Provider type 84 (MH) and 95 (SUD) using NPIs not registered or inactive in MITS: Providers must have NPIs registered as active in MITS.

Providers entering a NPI on claim for dependent practitioners: Services performed by a dependent practitioner should **NOT** bill with an NPI number. Box 31 and 24 J on the HCFA 1500 should be left blank and a practitioner modifier should be used on the service line.

Practitioner modifier or rendering practitioner NPI missing on claim: When a claim is submitted with the practitioner modifier or the rendering practitioner's NPI missing, a corrected claim can be submitted via the Molina Web Portal or through EDI. Please see the "MCO Resource Document for CBHC Providers" on the Molina website which includes a section on the claim corrections process.

Behavioral Health Redesign Claims Testing

MyCare Ohio's BH Redesign went live on Jan. 1, 2018. Community BH Providers will transition to billing Medicaid Managed Care plans for their services on July 1, 2018.

Molina Healthcare would like to invite MyCare Ohio and Medicaid providers to test our billing systems as we finalize our preparations for the BH Redesign and Carve-In. The EDI and Provider Portal are available for BH claims testing. Test claims can be submitted by:

- Completing the EDI registration process through Molina Healthcare's clearinghouse, Change Healthcare
 - Providers/clearinghouse without an existing Change Healthcare account can register at <http://providernet.adminisource.com>
 - This is a cost-free service offered through Change Healthcare for Molina Healthcare payer ID 20149
- Providers can submit an excel spreadsheet with test claims to Molina at BHProviderServices@MolinaHealthcare.com.

If a provider does not have Molina Healthcare members, the provider can contact Molina Healthcare for test member information. Providers may use

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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.)

Email us at BHProviderServices@MolinaHealthcare.com

Visit <http://bh.medicaid.ohio.gov/manuals> for updates and resources.

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Join Our Email Distribution List

Get this bulletin via email. Sign up at MolinaHealthcare.com/ProviderEmail.

Provider Support Available

Molina Healthcare has multiple channels to assist BH providers with Prior Authorization (PA), billing support and claims payment issues:

- **Utilization Management** – contact (855) 322-4079 for assistance with PA requests
- **Molina Healthcare Rapid Response Team** – providers can route issues to BHProviderServices@Molinahealthcare.com and the Molina Healthcare will monitor, route and track emails for quick resolution

Requesting Prior Authorization for New Services

Effective Jan. 1, 2018, Prior Authorization (PA) is required from Ohio Mental Health and Addiction Services (OMHAS) certified providers for the following services:

- Assertive Community Treatment (ACT)
- Intensive Home-Based Treatment (IHBT)

up to 10 test members repeated over an unlimited number of test claims. Test scenarios should:

- Incorporate the new codes and requirements
- Use 2018 Dates of Service (DOS)
 - Ex. On Jan. 5, 2018, only submit claims for Jan. 1-5, 2018
- Reflect the current scope of services being offered in your practice
- Align with current HIPAA billing guidance and standards

If a provider is interested in testing, fill out the Intake Form on the last page and once it is submitted, email the testing reference number to BHProviderServices@MolinaHealthcare.com. Our claims testing team will use this number to pull the test files from Change Healthcare for processing and will notify providers individually with the results.

For additional guidance on billing, please visit the Ohio Department of Medicaid website at <http://bh.medicicaid.ohio.gov/manuals>.

Providers may request to join the Molina Healthcare network by completing the “Non-Participating Provider Contract Request Form” at MolinaHealthcare.com/OhioProviders under the “Forms” tab.

Upcoming Behavioral Health Sessions

Molina Healthcare is hosting Behavioral Health Provider WebEx Sessions. In addition to general questions, the Q&A sessions can also be utilized for billing, claims and testing questions.

Question and Answer WebEx Sessions:

- Sat., Feb. 3, 9 to 10 a.m. meeting number 803 256 470
- Sat., Feb. 10, 10 to 11 a.m. meeting number 806 226 585
- Tues., Feb. 13, 1 to 2 p.m. meeting number 800 645 715
- Thurs., Feb. 15, 2 to 3 p.m. meeting number 800 295 397
- Sat., Feb. 17, 10:30 to 11:30 a.m. meeting number 800 576 612
- Sat., Feb. 24, 11:30 a.m. to 12:30 p.m. meeting number 804 170 729
- Mon., Feb. 26, 11 a.m. to 12 p.m. meeting number 809 016 896
- Thurs., March 1, 1 to 2 p.m. meeting number 805 886 933
- Thurs., March 8, 2 to 3 p.m. meeting number 806 905 953
- Wed., March 14, 1:30 to 2:30 p.m. meeting number 807 581 716
- Mon., March 26, 11:30 a.m. to 12:30 p.m. meeting number 803 333 248

Web Portal Claims Training WebEx Sessions:

- Tues., Feb. 6, 1 to 2 p.m. meeting number 808 312 948
- Wed., Feb. 14, 1 to 2 p.m. meeting number 807 158 535
- Thurs., Feb. 22, 2 to 3 p.m. meeting number 800 048 286
- Tues., Feb. 27, 1 to 2 p.m. meeting number 801 019 297
- Tues., March 20, 10:30 to 11:30 p.m. meeting number 803 724 628

To join WebEx, call (855) 665-4629 and follow the instructions. To view sessions, log into www.WebEx.com, click on “Join” and follow the instructions. Meetings do not require a password.

BH Provider Forums:

- Cleveland: Tues., Feb. 6, 9:30 to 11:30 a.m. or 1 to 3 p.m.
- Dayton: Fri., March 2, 9:30 a.m. to 12:30 p.m.
- Akron: Tues., March 6, 10:30 a.m. to 1:30 p.m.
- Toledo: Mon., March 12, 10:30 a.m. to 1:30 p.m.

Register for the forums at <http://www.eventbrite.com> and search “MCO BH Provider Forum.”

- Substance Abuse Disorder (SUD) Partial Hospitalization
- SUD Residential Services (when annual limit is reached)

Resources available at MolinaHealthcare.com/OhioProviders include:

- The standard PA form developed by the Ohio Association of Health Plans (OAHP) BH Collaborative for community behavioral health services
- A resource document developed collaboratively by Managed Care Plans containing information on the PA process, billing procedures, contracting/credentialing, and other topics requested by providers

For the complete list of services that require PA prior to the initiation of the service or after an annual limit is reached, see the Provider Manual on the Molina Healthcare website under the “Manual” tab.

The Molina Healthcare Utilization Management team can be reached for questions at (855) 322-4079.

BH Redesign Testing Guidance

Molina Healthcare has guidance on BH Redesign claims testing at MolinaHealthcare.com/OhioProviders under the “Health Resources” tab, under “Behavioral Health.”

Claims Features Training

The Provider Portal is secure and available 24/7. Online Claims Features include the ability to:

- Submit new claims
- Submit a corrected claim
- Submit claim reconsiderations
- Export claims
- Void a claim
- Check status of claims
- Build and submit batches of claims
- Create a claims template
- Add supporting documents to claims

Additional information is available at MolinaHealthcare.com/OhioProviders under the “Manual” tab, select “Provider Manual & Training” then under “Provider Orientation and Trainings” click on “Claims Features Training.”

Molina Healthcare Behavioral Health Request for Claims Testing Intake Form

Provider Information

Name: _____
 Tax ID: _____ Medicaid ID: _____
 Address: _____
 City, State & Zip: _____

Contact Information

Name: _____ Title: _____
 Phone: _____ Email: _____

What Testing Platform Does Provider Wish to Use (Please check)

EDI (Electronic Data Interchange) _____ Molina Provider Portal _____

EDI

If EDI, will provider be acting as their own Trading Partner or utilizing a third party _____

Change Healthcare

Molina utilizes Change Healthcare for EDI claims submission. Do you or third party have existing account set up with Change Healthcare? _____ Testing Ticket # _____

Molina’s Web Portal

Will provider or third party have existing account set up with Molina Web Portal? _____

Rendering Providers – Molina is requesting 5 rendering providers from each facility wishing to perform claims testing

1. Name: _____
 NPI: _____ Medicaid ID: _____
 Address: _____
2. Name: _____
 NPI: _____ Medicaid ID: _____
 Address: _____
3. Name: _____
 NPI: _____ Medicaid ID: _____
 Address: _____
4. Name: _____
 NPI: _____ Medicaid ID: _____
 Address: _____
5. Name: _____
 NPI: _____ Medicaid ID: _____
 Address: _____

***Note - In order to conduct testing via EDI, provider or third party must have account set up with Change Healthcare and have logged a ticket for testing.**

****Note - In order to conduct testing via Molina’s Web Portal, provider must have account set up with Molina.**

Please submit completed form to: BHProviderServices@MolinaHealthcare.com