

PROVIDER BULLETIN

A bulletin for the Molina Healthcare of Ohio provider networks

New Populations Joining Molina Healthcare Information for providers in the Medicaid network

Effective Jan. 1, 2017, the Ohio Department of Medicaid (ODM) will transition the following populations from Fee-for-Service Medicaid into managed care: Children in custody (aka foster care), children in adoption, children enrolled with the Bureau for Children with Medical Handicaps, Breast and Cervical Cancer Project participants and individuals with developmental disabilities.

New members may continue to receive physician and specialist services from non-participating providers during the following transition of care (TOC) periods:

- Members 21 and older during the first month of enrollment
- Members under 21 during the first three months of enrollment

Molina Healthcare also will honor Prior Authorizations (PA) during TOC for services like:

- Durable medical equipment
- Surgeries
- Chemotherapy and radiation
- Transplant services

These populations were transitioned to managed care starting Aug. 1, 2016: adults with severe and persistent mental illness and Adult Extension Program (AEP) individuals who receive waiver services.

For more information or questions about new members, contact Provider Services at (855) 322-4079. For training, contact your Provider Services Representative or email <u>OHProviderRelations</u> @MolinaHealthcare.com.

Transportation Updates Effective Jan. 1, 2017

Information for providers in the Medicaid and MyCare Ohio networks

- All members must call **2 business days** in advance to schedule transportation; 48-hour notice will no longer be accepted.
- Secure Transportation will transport ambulatory members to and from nursing facilities.
- Molina Healthcare is developing a comprehensive list of all contracted transportation providers. The list will be available on our website in January and will include:
 - Type of services offered
 - Counties served
 - Hours of operation

Pharmacy Benefit Changes

Information for providers in the Medicaid and MyCare Ohio networks

The following medications will require PA effective Jan. 31, 2017. Fax PA requests to (800) 961-5160.

- Vimpat
- Lidocaine 5% ointment

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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

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Join Our Email Distribution List

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

Website Roundup

Recently updated at MolinaHealth care.com/OhioProviders

- <u>Medicaid and MyCare Ohio</u> Combined Provider Manual
- Marketplace Provider Manual
- Medicare Provider Manual
- Dental Provider Manual
- PA Code List
- Cultural Competency Training
- Episode Based Payment Model

New PA List Effective Feb. 1, 2017 Information for providers in all networks

Effective Feb. 1, Molina Healthcare will remove several PA requirements. The updated PA Code List reflecting these changes will be posted online by the end of the year at <u>MolinaHealthcare.com/OhioProviders</u> under the "Forms" tab.

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

To receive a \$50 incentive, complete a <u>Prenatal Risk Assessment</u> Form (PRAF) for each newly

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MOLINA HEALTHCARE OF OHIO

DECEMBER 2016

- Alora patches
- Trazodone 300mg

Dental Benefit Changes Effective Jan. 1, 2017

Information for providers in the Medicaid and MyCare Ohio networks

Several changes will be implemented to the dental benefits and the provider manual, effective Jan. 1, 2017.

Select codes will now require PA. For adult Medicaid members, cleanings will increase to two per year. The complete list will be updated in the Dental Provider Manual benefits grid and posted to the website by the end of the year.

Some of these changes include, but are not limited to:

- D0120 increased to one per six months per patient for all ages
- D1110 increased to one per six months per patient for all ages
- D4341 & D4342 decreased to one per 24 months per quadrant per patient all ages
- D0350, D0470, D7260, D7280, D8210, D8670 and D8680 will require PA
- D9610 will no longer require PA

There will be three new codes added:

- D1575 Distal shoe space maintainer
- D7283 Placement of device to facilitate eruption of an impacted tooth
- D7210- Surgical extraction

ODM Behavioral Health Redesign

Information for providers in the Medicaid and MyCare Ohio networks

Effective July 1, 2017, as part of the Behavioral Health Redesign, ODM will require rendering providers on claims for Medicaid community behavioral health services.

All provider organizations of this type must have all applicable rendering practitioners registered with Medicaid and linked to their organization through the Medicaid Information Technology System (MITS) portal before July 1. Visit <u>http://mha.ohio.gov</u> and select "MITS Claims Processing" under the "Funding" tab for updates.

Expedited Appeals Process Requirements Information for providers in all networks

An expedited appeal is an oral or written request by a member, practitioner/provider or member's authorized representative received by Molina Healthcare for urgent review of an action.

The criteria for an expedited appeal are based on <u>Ohio Administrative</u> <u>Code (OAC) 5160-26-08.4</u>, which states that Molina Healthcare must grant an expedited appeal when "...taking the time for a standard resolution could seriously jeopardize the member's life or health or ability to attain, maintain, or regain maximum function."

If your appeal request does not meet these criteria, it is a standard appeal and will be resolved in no later than 15 calendar days. If you have questions, call Provider Services at (855) 322-4079.

identified pregnant patient. For more information on how to qualify for the incentive, view the PRAF online at <u>MolinaHealthcare.com/OhioProviders</u> under the "Forms tab.

For questions, contact Kevin St. Clair at Kevin.StClair@MolinaHealthcare. com.

Flu Season Tips

Thank you for your help keeping your patients healthy this flu season with the covered flu shot for Molina Healthcare members.

To continue this effort:

- Educate patients on the importance of the vaccine.
- Provide a list of local pharmacies if you do not offer the vaccine.
- Turn on flu vaccine reminders and prompts for patient records.

Molina Healthcare uses the Advisory Committee on Immunization Practices recommendations, including annual flu shots for those 6 months and older. It is especially important for those who are, live with or care for persons with high-risk of serious flurelated complications.

For more, visit <u>www.cdc.gov/flu/</u> professionals/vaccination.

Clear Coverage[™]

Provides instant approval on most outpatient services. To learn more, join the next training session at http://molina.webex.com.

Wed., Jan. 25 from 9 to 10 a.m., Meeting Number: 806 729 889 Fri., Feb. 24 from 9 to 10 a.m., Meeting Number: 807 128 702

Request on-site training: <u>OHProvider</u> <u>Relations@MolinaHealthcare.com</u>.

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.