

## ODM Testing with MCPs to Prepare for Provider Master File

### Information for all Community Behavioral Health Center providers

The Ohio Department of Medicaid (ODM) and the Ohio Department of Mental Health and Addiction Services (OhioMHAS) will be discontinuing the Universal Roster soon and moving forward with using one system, Medicaid Information Technology System (MITS), as the primary source of provider enrollment and affiliation information.

Prior to discontinuing the Universal Roster, ODM will be performing testing with each of the Managed Care Plans (MCP) to ensure each plan is prepared to accept the Provider Master File (PMF). ODM will communicate when the Universal Roster is officially discontinued and will provide additional guidance on next steps.

As it is imperative that Community Behavioral Health Center (CBHC) providers update MITS with accurate information so that it is shared with all MCPs via the daily PMF. There are several steps providers should take in order to achieve the single system goal, including:

- CBHCs should view the ODM training presentation and webinar recordings for step-by-step instructions on how rendering practitioners can enroll in MITS, become affiliated with their employing agency and make changes to licenses, provider specialties and names.
- CBHCs should review the online CBHC Practitioner Enrollment File for correct provider type, specialty and affiliation, and make any updates in MITS.

For additional information visit the ODM Behavioral Health (BH) website and under “MITS BITS & Newsletters” select “[Testing with Managed Care Organizations to Prepare for PMF Only](#).”

## Behavioral Health Recoupment Process

### Information for all Community Behavioral Health Center providers

**Outstanding AR Advances Recoupment Process:** In Feb. 2019, Molina made advance payments to CBHC, provider types 84 and 95, who were identified as having outstanding AR for denied claims submitted with July 2018 dates of service. On Nov. 1, 2019 Molina began first dollar claim recoupment of these advances until funds are recovered.

**Contingency Funds Recoupment Process:** In June 2018 advance payments were made available through the ODM and MCPs to CBHCs (provider types 84 and 95) that needed assistance to transition to managed care billing during the BH Redesign and Integration.

ODM has been working with MCPs regarding the BH Redesign progress and claims payments. Based on this progress, ODM has continued working with providers and MCPs to finalize repayment plans for the remaining advance payments. ODM will continue to work with providers to develop individualized repayment plans. Recoupment will begin when agreement is reached with ODM and a date to begin recoupment is established.

For additional information visit the ODM BH website and under “MITS BITS & Newsletters” select “[Medicaid Advance Payment Agreements and the Initiation of Repayment](#).” For additional details on the advance payment in

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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](mailto:BHProviderServices@MolinaHealthcare.com)

Visit our website at  
[MolinaHealthcare.com/OhioProviders](https://MolinaHealthcare.com/OhioProviders)

Visit the ODM BH website at  
<https://bh.medicaid.ohio.gov/manuals>

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### Provider Training Sessions

#### Information for all network providers

**Monthly It Matters to Molina Provider Forum Topic: Claim Reconsideration Process Session:**  
Learn how to use the Provider Portal to request a claim reconsideration when disputing a payment denial, payment amount or code edit and more.

- Wed., Jan. 22, 1:30 to 2:30 p.m.  
meeting number 283 642 470

#### Monthly Provider Portal Training:

- Thurs., Jan. 23, 11 a.m. to 12 p.m.  
meeting number 801 483 555
- Mon., Feb. 17, 11 a.m. to 12 p.m.  
meeting number 804 265 409

#### Monthly Claim Submission Training:

- Tues., Jan. 14, 3 to 4 p.m. meeting number 803 035 156
- Wed., Feb. 12, 10 to 11 a.m.  
meeting number 801 897 563

#### Quarterly Provider Orientation:

June 2018, select "[Contingency Plan for Behavioral Health Providers – Medicaid Managed Care Advance Payment Agreements.](#)"

### Behavioral Health Timely Claim Submission

#### Information for all Community Behavioral Health Center providers

On July 1, 2019, CBHC providers passed the initial 365 days of claims being submitted to the MCP. Timely filing requirements may impact claims going forward. For additional information, please visit the ODM BH website and under "Provider," select "Overview" and "MITS Bits." Read "[Reminder About Timely Claim Submission](#)" to learn about:

- Claims Submitted to Medicaid Managed Care Plans
- "Fee-for-Service" Claims Submitted to MITS

### Billing in the Provider Portal

#### Information for all network providers

The Molina [Provider Portal](#) is secure and available 24/7. Register on our website or at <https://Provider.MolinaHealthcare.com>. Additional information is available in the [Claims Features Training](#) and the [Provider Web Portal Quick Reference Guide](#) located on our website.

Online Claims Features include the ability to:

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

Fri., Feb. 28, 11 a.m. to 12 p.m.  
meeting number 809 645 718

To join WebEx, call (866) 499-0396 and follow the instructions. To view sessions, log into [WebEx.com](#), click on "Join" and follow the instructions. Meetings do not require a password.

### Behavioral Health Provider Manual

On Nov. 27, 2019, the [Behavioral Health \(BH\) Provider Manual](#) was updated by ODM and OhioMHAS. Visit the ODM BH website to view the updated manual.

### Active Medicaid ID Number

In order to comply with federal rule 42 CFR 438.602, providers are required to have enrolled or applied for enrollment with ODM at both the group practice and individual levels by Jan. 1, 2019.

Providers without a Medicaid ID number will need to submit an application to ODM. Enrollment is available through the MITS portal or providers can start the process at <https://medicaid.ohio.gov>. Upon future notice by ODM, Molina will begin denying claims for providers that are not registered and known to the state.

### Service Codes Billable to Medicare and Third Party Liability

Visit the ODM BH website and select [Final Services Billable to Medicare and Commercial Insurance](#) under "Billing and IT Resources" to view a list of services billable to Medicare and Commercial Insurance. This document also provides a list of codes that can bypass Medicare/Third Party Liability (TPL) since they are only covered in the Medicaid benefit

### Behavioral Health FAQ

Our [Behavioral Health Frequently Asked Questions \(FAQ\)](#) is available to help answer questions about the Provider Portal, contracting, claims, prior authorizations and more! Look for it on our website under the "Health Resources" tab.