



Provider Bulletin



A bulletin for the Molina Healthcare of Ohio Medicaid network • October 2013

Covering Ohio: Health Insurance Marketplace

As a result of the Affordable Care Act, the state of Ohio is establishing the Health Insurance Marketplace, a regulated marketplace that serves as a virtual store where people can buy health insurance with or without government subsidies. Enrollment begins Oct. 1, 2013 with coverage beginning as early as Jan. 1, 2014. Molina Healthcare has filed with the Ohio Department of Insurance to sell our products on the Marketplace in 17 Ohio counties: Ashtabula, Athens, Cuyahoga, Butler, Clark, Clermont, Fairfield, Franklin, Hamilton, Lake, Licking, Lorain, Lucas, Montgomery, Ross, Scioto, and Wood.

Our goal remains the same: to offer families and individuals with low annual incomes access to quality health care services. Through the Marketplace, Molina Healthcare will focus on individuals with income at or below 250 percent of the Federal Poverty Level (FPL). Like all Marketplace plans, Molina Healthcare will provide Essential Health Benefits, including emergency services, maternity and newborn care, prescription drugs, mental health and substance abuse treatment, preventive care and more. Visit our website at www.MolinaHealthcare.com and select the prompt for Health Insurance Marketplace to learn more.

New Provider Services Line and Standardized IVR System

Molina Healthcare of Ohio has launched a new provider services number at (855) 322-4079 in order to provide dedicated support to our provider network. In addition, Molina Healthcare has implemented an enhanced Interactive Voice Response (IVR) system, the automated system that members and providers use to route their calls to the appropriate department, to provide an improved customer experience.

Consistent Experience for Members and Providers

- Standard options provide a consistent experience across all Molina markets and lines of business.
- Consolidated, easy-to-follow call flows enable efficient and accurate change management to best meet customer needs.

Easy to Understand Menu Options

- Eliminate unnecessary menu options
- Menu options consistently in sequence
- Order of urgency considered (i.e. behavioral health crisis at the beginning of the menu)
- New menu options for prospective members

We are working to update our forms, Web Portal and other provider materials with the new Provider Services phone number. Please contact us if you have any questions at (855) 322-4079.

Improved Molina Healthcare Website Goes Live

We are excited to announce that Molina Healthcare's website www.MolinaHealthcare.com has a new look! Check it out and take advantage of some of the features designed to make life easier for our provider partners. When you visit the new www.MolinaHealthcare.com for the first time, the site will ask you to verify the state in which you're located. To access the providers' section of the site, click the "For Health Care Professionals" button at the top of the page. You will find familiar, useful tools like the Provider Manual, frequently used forms and a direct link to log into the Provider Self-Service Portal.

Claim Reconsideration Request Form (CRRF)

Molina Healthcare has changed the fax number for the CRRF to (800) 499-3406. Claim reconsiderations will now come to Molina Healthcare through the Right Fax system in a paperless format. This enables us to

track receipts and manage work more efficiently. The online CRRF is updated with this number. Begin using this form now, as the previous number will be disconnected at the end of October. As a reminder, please allow 30 days for your CCRF request to be processed.

Vaccinate Your Patients to Prevent the Flu

Flu season is here again and the Centers for Disease Control (CDC) continues to recommend that everyone 6 months and older receive an annual flu vaccine. Please continue to encourage your Molina Healthcare patients to receive their annual flu vaccine, especially those at high-risk for flu-related complications including children between 6 months and 5 years, pregnant patients, patients over 50 and those with chronic conditions. We know flu season creates a very busy time for you and your office staff. Remember, Molina Healthcare members who are 18 years and older can also receive their seasonal flu shot for **free** through retail pharmacies that offer a certified flu shot program and are a part of the Molina Healthcare network. Network pharmacies include CVS, Kroger, Giant Eagle and Target.

Emailing Protected Health Information (PHI) Securely

All emails that contain PHI (individually identifiable health information) must be sent “securely.” Review recipient’s information before sending to ensure the email is sent to the appropriate individual(s). Do not use PHI in the subject line of an internal or external email. Only the body of the email can be sent securely. Do not send PHI or confidential information to a personal email account. Do not forget to select “**Mark Secure**” or the corresponding icon on your email account before sending emails that contain PHI.

Free Treatment Supplies from the Ohio Amblyope Registry

Amblyopia, the loss of one eye's ability to see details, is the most common cause of vision problems in children. Treatment of amblyopia is patching the strong eye, forcing the brain to recognize the image from the amblyopic eye and correct itself. The Ohio Amblyope Registry (OAR) provides free treatment supplies (eye patches), educational information and support to any children under the age of 18 diagnosed with amblyopia and their families. Upon registration with OAR, the child receives 53 adhesive eye patches and educational information for the caregiver. The caregiver can request additional patches from OAR. Every child can receive up to 1,100 free patches. Visit www.ohioamblyoperegistry.com or call (877) 808-2422 for additional information.

Accessing Care for Members with Disabilities

The Americans with Disabilities Act (ADA) prohibits discrimination on the basis of disability. The ADA requires Molina Healthcare and its providers to make reasonable accommodations for patients with disabilities. Molina Healthcare will begin visiting targeted primary care provider (PCP) and specialty provider office locations in November 2013 to verify ADA compliance for the Integrated Care Delivery System for Medicaid-Medicare dual eligibles, which will go live March 2014. The survey will take approximately one hour to complete. For additional information, please visit: http://www.ada.gov/ada_req_ta.htm

Fall 2013 Preschool Vision Screening Training

Prevent Blindness Ohio offers primary care practices with the training and equipment needed to conduct preschool vision screenings. Join one of the training sessions to learn how to integrate preschool vision screening into the medical office setting. Registration can be completed online at WiseAboutEyes.org. The Preschool Vision Screening Certification Program provides:

- Instruction on how to perform stereopsis and distance visual acuity screening
- Detailed information on childhood eye diseases and disorders
- Preschool Vision Screening Guide for Healthcare Professionals
- Preschool Vision Screening Guidelines published by the Ohio Department of Health
- Sample referral and follow-up resources and access to no-cost eye exams and eyeglasses for qualifying families

After training, you are eligible to receive **free** vision screening equipment (\$300 value) that includes:

- Lea Symbols Chart for screening for visual acuity
- Model A Good-Lite Visual Acuity Cabinet
- Random Dot E stereopsis test
- Assorted children's vision care resources and brochures

The Importance of Body Mass Index (BMI) Assessments

Providing a BMI assessment at all well care visits can help identify high-risk patients and allow for proactive disease management. Please continue to provide anticipatory guidance to encourage patients to become active participants in their health care by supporting a healthy diet and promoting physical activity.

Medical Record Documentation Tips – Patients 18 to 74 years of age:

Documentation in the medical record must indicate the weight and BMI value dated during the year or the year prior. For members 18 to 19 years on the date of service, the following documentation of BMI percentile also meets criteria:

- BMI percentile documented as a value (e.g., 85th percentile).
- BMI percentile plotted on an age-growth chart.

Medical Record Documentation Tips – Patients 3 to 17 years of age:

BMI Percentile Documentation* – Documentation must include height, weight and BMI percentile during the year. For members younger than 16 years of age on the date of service, only evidence of the BMI percentile or BMI percentile plotted on an age-growth chart meets criteria. A BMI value is not acceptable for this age range.

Counseling for Nutrition – Documentation of counseling for nutrition or referral for nutrition education during the year, which must include a note indicating the date and at least one of the following:

- Discussion of current nutrition behaviors (eating habits, dieting behaviors)
- Checklist indicating nutrition was addressed
- Counseling or referral for nutrition education
- Member received educational materials on nutrition during a face-to-face visit
- Anticipatory guidance for nutrition
- Weight or obesity counseling

Counseling for Physical Activity - Documentation of counseling for physical activity or referral for physical activity during the year, which must include a note indicating the date and at least one of the following:

- Discussion of current physical activity behaviors (exercise routine, participation in sports activities)
- Checklist indicating physical activity was addressed
- Counseling or referral for physical activity
- Member received educational materials on physical activity during a face-to-face visit
- Anticipatory guidance for physical activity
- Weight or obesity counseling

Inpatient Policy Changes Effective Oct. 1, 2013

Molina Healthcare will implement inpatient utilization review policy changes effective Oct. 1, 2013. Our goal is to ensure members receive medically necessary services in the appropriate and most efficient and cost effective setting. All inpatient admissions require prior authorization. Similar to Ohio Administrative Code (OAC) 5101:3-2, Molina Healthcare will review and evaluate covered medical services to ensure procedures are medically necessary and provided in the most appropriate setting.

- If inpatient admission InterQual[®] criteria are not met and observation InterQual[®] criteria are met, Molina Healthcare will authorize an observation stay. For stays of one day or less, when InterQual[®] is met for inpatient and observation, we will review and consider these for observation level of care. If you disagree with the decision and believe inpatient admission is necessary, a Molina Healthcare Medical Director will review the case and make a determination.
 - **Important Note: Hospitals participating in Molina Healthcare's network are not required to seek authorization for observation days.**
- If both observation and inpatient criteria are met, Molina Healthcare will initially authorize an observation stay for the following conditions:

- Acute Abdomen
- Acute Appendicitis (adult)
- Acute Bronchitis
- Acute Coronary Syndrome/Chest Pain
- Acute Kidney failure
- Acute Pancreatitis
- Anemia
- Asthma
- Bronchiolitis
- Cardiac Dysrhythmia
- Cellulitis or Abscess
- Cholelithiasis
- Chronic Ischemic Heart Disease
- Chronic Obstructive Pulmonary Disease (COPD)
- Congestive Heart Failure (CHF)
- Deep Vein Thrombosis (DVT)
- Dehydration
- Diabetes/DKA
- Disorders of Fluid, Electrolyte, and Acid base balance (Nausea, Vomiting)
- Gastroenteritis/Esophagitis
- General Symptoms
- Hypotension
- Pneumonia, Organism Unspecified or simple
- Poisoning/Toxic Ingestions
- Seizures
- Septicemia
- Syncope or Decreased Responsiveness
- Unstable Angina

These conditions are often evaluated and treated within one day or less and rapid improvement of the member's condition is anticipated. If the member remains hospitalized past one day and continues to meet InterQual® criteria, Molina Healthcare will approve the inpatient admission authorization request. If inpatient admission InterQual® are met, Molina Healthcare will approve an inpatient admission based upon clinical criteria at the time of admission, excluding the above listed conditions. For instructions on submitting a prior authorization request, visit www.MolinaHealthcare.com.

Commitment to Healthy Members and Quality Services

Appropriate Treatment for Children with Upper Respiratory Infection (URI)

Molina Healthcare annually monitors the percentage of children 3 months to 18 years of age who received a sole diagnosis of upper respiratory infection (URI) and were not dispensed an antibiotic prescription.

HEDIS® Measure	2011 Rate	2012 Rate	Goal*
Appropriate Treatment for Children with Upper Respiratory Infection (URI)	79.50%	81.59%	89.96%

*National NCQA 75th percentile for Medicaid HMO plans.

Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)

Molina Healthcare annually monitors the percentage of members 40 years of age and older with a new diagnosis of COPD or newly active COPD who received the appropriate spirometry testing to confirm the diagnosis.

HEDIS® Measure	2011 Rate	2012 Rate	Goal*
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	32.23%	27.72%	38.38%

*National NCQA 75th percentile for Medicaid HMO plans.

Adults' Access to Preventive/Ambulatory Health Services (AAP)

Molina Healthcare annually monitors the percentage of members 20 years of age and older who had an ambulatory or preventive care visit during the calendar year.

HEDIS® Measure	2011 Rate	2012 Rate	Goal*
Adults' Access to Preventive/Ambulatory Health Services (AAP)	84.69%	84.29%	86.67%

*National NCQA 75th percentile for Medicaid HMO plans.

Improvement Strategies

- ✓ Note all diagnoses of COPD and ensure spirometry testing is complete.
- ✓ Include all primary and secondary ICD-9 diagnosis codes when submitting member claims to ensure that antibiotic treatment is supported.
- ✓ Use flow sheets to promote better adherence to guidelines when assessing and treating an URI.
- ✓ Explain safe home remedies and appropriate over-the-counter medications for symptom relief.
- ✓ Provide patient reminders and materials to assist in upcoming care visits.

Tools Available

- ✓ Preventive Health Guidelines, Clinical Preventive Guidelines and HEDIS Coding Help Sheets for Adults and Children are available at www.MolinaHealthcare.com.
- ✓ National Heart, Lung, & Blood Institute: <http://www.nhlbi.nih.gov/health/public/lung/copd/>
- ✓ COPD Foundation: <http://www.copdfoundation.org/>

- ✓ American Academy of Family Physicians: <http://www.aafp.org/afp/2005/1215/p2483.html>

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

Clear Coverage Monthly Online Training Sessions

Molina Healthcare offers monthly online training sessions for our provider network that will cover both the Web Portal and Clear Coverage™. No registration is required for these 1.5 hour long training sessions. Simply join using the appropriate month’s log on information. You will find November’s information below.

November 2013 – Online Training Session

Date: Friday, Nov. 15, 2013 Time: 9 a.m. to 10:30 a.m.

- Go to: www.webex.com
- Click “Attend Meeting”
- Enter Meeting Number: 805 487 154
- Provide your number when you join the meeting to receive a call back. Or, you can call (855) 665-4629 toll-free to be connected.
- Follow the instructions that you hear on the phone.

Members’ Satisfaction with Personal Doctor and Specialist

The annual Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey measures members’ satisfaction with their health care and their health plan. One area of satisfaction that is measured relates to health care received by the member’s personal doctor.

- ✓ *Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?*

CAHPS® Measure – Rating of Personal Doctor	2011 Result	2012 Result	2013 Result	Goal*
Adult - Combined	2.40	2.40	2.44	2.51
Child	2.58	2.58	2.53	2.65

Another area of satisfaction relates to the specialist the member has visited most frequently.

- ✓ *We want to know your rating of the specialist you saw most often in the last six months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate your specialist?*

CAHPS® Measure – Rating of Specialist Seen Most Often	2011 Result	2012 Result	2013 Result	Goal*
Adult - Combined	2.43	2.43	2.47	2.51
Child	N/A**	NA**	2.57	2.62

Our goal is to achieve at least the 75th percentile national score. To date, we remain below that level. We appreciate all you do to create a positive patient experience, including providing your patient with timely service, appropriate diagnoses, friendly customer service, and proper education on their health.

* National NCQA 75th percentile for Medicaid HMO plans. **Insufficient number of responses to question. CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

Fighting Fraud, Waste and Abuse

Proper member identification is vital to reduce fraud, waste and abuse (FWA) in government health care programs. The best way to verify a member’s identity is to obtain a copy of the member’s ID card and a form of picture ID. Do you have suspicions of member or provider fraud? The Molina Healthcare AlertLine is available to you 24 hours a day, seven days a week, even on holidays at (866) 606-3889. Reports are confidential, but you may choose to report anonymously.

Questions?

If you have any questions, please call Molina Healthcare’s Provider Services at (855) 322-4079. Representatives are available to assist you from 8 a.m. to 5 p.m. Monday through Friday.