

Fall 2017 Provider Newsletter



Go Green!

Molina decided to “GO GREEN” as of July 1st. We encourage all claims to be submitted through an EDI Clearinghouse or via Molina’s Provider Portal. Please contact our Provider Services team if you have any questions.

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Expectations for Utilization Management Decisions

Our organization wants to make it clear to all of our members, practitioners and providers, as well as employees who make utilization management decisions, that Molina Healthcare of South Carolina adheres to the following:

- Utilization management decision making is based only on appropriateness of care and service and existence of coverage.
- The organization does not specifically reward practitioners or other individuals for issuing denials of coverage.
- Financial incentives for utilization management decision makers do not encourage decisions that result in underutilization.

Online Provider Appeals

The Molina enterprise online provider appeals option went live on the provider portal on September 7, 2017. The latest upgrade to our provider portal allows for providers to electronically submit provider appeals. Please remember to upload the pertinent medical records or required documents to support the appeals processing. Appeals submission is fast and easy! If you need additional information, or require assistance, please contact your Provider Services Rep. They will be happy to assist you.

Molina Healthcare's 2017 HEDIS® and CAHPS® Results

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is a survey that assesses Molina members' satisfaction with their health care. It allows us to better serve our members. Molina Healthcare has received results of how our members scored our providers and our services.

Medicaid: In 2017, Molina Healthcare showed improvement in rating of overall health care and ratings of personal doctors. Other areas of improvement include getting needed care, getting care quickly, customer service and rating of health plan. We need to improve on how well doctors communicate and coordinate care. MMP: In 2017, Molina Healthcare performed well in customer service. Areas of improvement include overall rating of health care quality.

Another tool used to improve member care is the Healthcare Effectiveness Data Information Set or HEDIS®. HEDIS® scores allow Molina Healthcare to monitor how many members are receiving the services they need. Measures include immunizations, well-child exams, Pap tests and mammograms. There are also scores for diabetes care, and prenatal and after-delivery care.

Medicaid: In 2017, Molina Healthcare improved on the HEDIS® measures: comprehensive diabetes care including eye exams, timeliness of prenatal care, and well child exams in the first 15 months of life. We need to improve on controlling high blood pressure and ensuring our diabetic members have an HbA1c less than 8. MMP: Molina Healthcare met the 3 Stars benchmark for comprehensive diabetes retinal eye exam, nephropathy screening, and adult BMI assessment in 2017. We need to improve on the colorectal cancer screening, and annual monitoring for patients on ACE inhibitors/ARBs, Digoxin, and Diuretics.

You can look at the progress related to the goals that Molina Healthcare has set for the annual CAHPS® survey results and the annual HEDIS® measures in more detail on the Molina Website. You can also view information about the QI Program and print a copy if you would like one. Please visit the provider page on Molina's website at www.MolinaHealthcare.com.

Molina Healthcare's Special Investigation Unit Partnering With You to Prevent Fraud, Waste, and Abuse



The National Healthcare Anti-Fraud Association estimates between three and ten percent of the nation's health care costs, or \$96 to \$320 billion, is lost to fraud, waste, and abuse. That's money that would otherwise cover legitimate care and services for the neediest in our communities. To address the issue, federal and state governments have recently passed a number of laws, including required audits of medical records against billing practices. Molina Healthcare, like others in our industry, must comply with these laws and proactively ensure that government funds are used appropriately. Molina's Special Investigation Unit (SIU) aims to safeguard Medicare and Medicaid, along with Marketplace funds.

You and the SIU

The SIU analyzes providers by using software that identifies questionable coding and/or billing patterns, along with issues involving medical necessity. As a result, providers may receive a notice from the SIU if they have been identified as having outliers that require additional review. If your practice receives a notice from the SIU, please cooperate with the notice and any instructions provided. Should you have questions, please contact your Provider Services Representative.

"Molina Healthcare appreciates the partnership it has with providers in caring for the medical needs of our members," explains Mary Alice Garcia, the Molina Associate Vice President who heads up the SIU. "Together, we share a responsibility to be prudent stewards of government funds. It's a responsibility that we all should take seriously because it plays an important role in protecting programs like Medicare and Medicaid from fraudulent activity."

Molina appreciates your support and understanding of the SIU's important work, and we hope to minimize any inconvenience the SIU audit might cause you and/or your practice.

To report potential fraud, waste, and abuse, you may contact the Molina AlertLine toll-free at (866) 606-3889. In addition, you may use the service's website to make a report at any time at <https://MolinaHealthcare.AlertLine.com>.

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2017 Flu Season

The Advisory Committee on Immunization Practices (ACIP) continues to recommend annual influenza vaccinations for everyone who is at least 6 months of age and older. It's especially important that certain people get vaccinated, either because they are at high risk of having serious flu-related complications or because they live with or care for people at high risk for developing flu-related complications.

Important Update:

- Do not use the live attenuated influenza vaccine (LAIV) during the 2017-2018 flu season.
- Remove the FluMist from the vaccines for the Children Program.

For a complete copy of the ACIP recommendations and updates or for information on the flu vaccine options for the 2017 flu season, please visit the Centers for Disease Control and Prevention at <http://www.cdc.gov/flu/professionals/vaccination/>.

Updating Provider Information

It is important for Molina Healthcare of South Carolina (Molina Healthcare) to keep our provider network information up to date. Up to date provider information allows Molina Healthcare to accurately generate provider directories, process claims and communicate with our network of providers. Providers must notify Molina Healthcare in writing at least 30 days in advance when possible of changes, such as:

- Change in practice ownership or Federal Tax ID number
- Practice name change
- A change in practice address, phone or fax numbers
- Change in practice office hours
- New office site location
- Primary Care Providers Only: If your practice is open or closed to new patients
- When a provider joins or leaves the practice

Send changes to:

Email: SCNetworkAdministration@MolinaHealthcare.com

Fax: (843)740-1783

Mail: Molina Healthcare of South Carolina
4105 Faber Place Drive, Suite 120
North Charleston, SC 29405
ATTN: Provider Services Department

Contact your Provider Services Representative at (855) 237-6178 if you have questions.



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