

Partners in Care Newsletter

Fall 2014

Molina Healthcare HEDIS® and CAHPS®

The Healthcare Effectiveness Data Information Set or HEDIS® is a tool we use to improve member care. The HEDIS® scores allow Molina Healthcare of South Carolina to monitor how many members receive 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.

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



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2014 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. For a complete copy of the ACIP recommendations and updates or for information on the flu vaccine options for the 2014 flu season, please visit the Centers for Disease Control and Prevention at <http://www.cdc.gov/flu/professionals/vaccination/>.



Introducing 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 \$81 to \$270 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 created a Special Investigation Unit (SIU) that aims to safeguard Medicare and Medicaid funds.

You and the SIU

The SIU audits providers by using software that identifies questionable coding and/or billing patterns. As a result, providers may receive notices from the SIU if they have been identified as having coding and/or billing 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 Healthcare appreciates your support and understanding 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 Healthcare 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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Where to Find Answers to Drug Benefits

As a Molina provider, we encourage you to talk to your members about the medications they need. Information about the pharmacy benefits and formulary medications is on the provider page of the Molina website at www.MolinaHealthcare.com. On the website, you can find:

- A list of generic and brand name medications that we cover and do not cover (Preferred Drug List)
- Limits on covered medications
- Changes and updates to the Preferred Drug List made during the year
- The process to ask for prior authorization or exception requests for medications not on the list
- The process to change a drug to generic medication
- The process for using different medications that have the same effects, like a brand name or a generic medication
- Rules to try certain drugs first before we cover another medication for the same condition
- How you can ask us for approval of certain medications
- How you can ask for the amount of a medication the member may need
- Information needed by Molina Healthcare to get approval for medications



Featured at www.MolinaHealthcare.com

- Clinical Practice and Preventive Health Guidelines
- Disease Management Programs for Asthma, Diabetes, Hypertension, CAD, CHF & Pregnancy
- Complex Case Management Information
- Quality Improvement Programs
- Member Rights & Responsibilities
- Privacy Notices
- Claims/Denials Decision Information
- Provider Manual
- Current Preferred Drug List & Updates
- Pharmaceutical Management Procedures
- UM Affirmative Statement (re: non-incentive for under-utilization)
- How to Obtain Copies of UM Criteria
- How to Contact UM Staff & Medical Reviewer
- New Technology.

If you would like to receive any of the information posted on our website in hard copy, please call toll-free (855) 237-6178.

Molina Healthcare ICD-10 Conversion FAQ

On March 31, 2014, the senate voted to approve a bill to delay the implementation of ICD-10-CM/PCS by at least one year. President Obama signed the bill into law on April 1, 2014, officially shifting the deadline for ICD-10 compliance from October 1, 2014 to no earlier than October 1, 2015.

How is Molina handling the recently announced delay of ICD-10 to at least 10/1/15? Molina has completed a significant portion of our remediation activities. We will continue to move ahead with remediation of all our systems as planned. This includes remediation of all impacted systems, affected business processes, and policies. We will refocus our efforts in regard to external testing. Given the extra time, we will perform testing on a state by state basis instead of all states simultaneously.

Do we still need to reach out to Molina to be chosen as a test partner? If you are already a confirmed test partner, we will work with you directly to reschedule testing efforts. If you previously requested to be a Molina test partner, you are still on our list.

Any new requests or date specific questions for any state should be sent to the Molina ICD-10 Inbox (Molina.ICD-10@MolinaHealthcare.com).

Will Molina meet the compliance date and be capable of accepting transactions containing ICD-10-CM/ICD-10-PCS codes and/or ICD-10 based Diagnosis Related Groups (DRGs)? As of the transition date, Molina will accept transactions containing ICD-10 CM and PCS codes, as well as ICD-10 based DRGs.

What is Molina's approach to ICD-10 code conversion? Molina will use GEMs (General Equivalency Mappings), as well as other coding methodologies, as a guide to assist in understanding and translating ICD-9 codes to ICD-10. Molina will remediate all systems and processes impacted by ICD-10 natively (coding to documented business requirements) and does not intend to crosswalk ICD-9 codes to ICD-10 codes.

Will Molina support dual processing of ICD-9 and ICD-10 codes? Molina will continue to accept ICD-9 coded claims with dates of service or discharge dates prior to the compliance cutoff date. We will only accept ICD-10 coded claims for any dates of service on or after the ICD-10 effective date.

Will Molina require claims to be coded to ICD-10 even if a supplier is not covered under the HIPAA mandate? Yes.

Does Molina plan to conduct any testing with providers? What is the expected date that testing will begin? Molina plans to conduct testing with providers and clearinghouses but will be unable to test with every provider. We will make every effort to accommodate as many provider test requests as possible. Our primary method of external testing will request providers send us claims re-coded to ICD-10 for a set of claims that we originally processed as coded to ICD-9. Test data will need to be submitted in 837 transaction format and be transmitted through Emdeon or Molina's clearinghouse.

Molina has Health Plans in multiple states and our testing windows will vary by state. As a result of the recent ICD-10 delay, we will be adjusting our schedule for external testing. We encourage providers who want to test with us to contact us at Molina.ICD-10@MolinaHealthcare.com. Once we are ready to test in a particular state, we will schedule planning calls with our selected test partners.

Will Molina renegotiate the contract with providers to replace ICD-9 codes with ICD-10 codes? If so when will renegotiation process occur? Molina will review each contract individually and formulate a strategy that meets

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the specific needs of that contractual relationship. Contracts containing specific ICD-9 codes and in some instances contracts that have descriptions of diagnoses and procedures will be re-negotiated. If you have questions about your provider contract, please contact your Provider Service Representative.

All provider contracts will be amended to add verbiage regarding compliance with the CMS mandate and standard HIPAA file format transactions. Where applicable, those changes will be housed in the Molina Provider Manual and, as such, become incorporated into your contractual agreement with Molina.

Does Molina expect delays in payment during the transition from ICD-9 to ICD-10? Although Molina strives for minimal disruption in operations, we acknowledge that with any change as broad as ICD-10 there is a potential for an increase in processing time and a higher volume of inquiries during the transition. Molina will leverage proven techniques to effectively manage increased workload in any area requiring it.

What will the appeal process be for resubmission of ICD-9-based claims with ICD-10 codes during the transition period? Molina will follow the date of service of the claim; if it was originally filed with ICD-9 coding and the date of service was prior to the ICD-10 compliance deadline, we will continue to accept that claim through the appeal process with ICD-9 coding.

Will Molina be changing its medical policies for ICD-10? No, we do not currently intend to change our overall internal medical policies due to ICD-10. We will continue to utilize industry standard guidelines for evaluating medical necessity

Will Molina's pre-authorization policy and guidelines for requesting pre-authorizations change with the implementation of ICD-10? We do not anticipate changing our pre-authorization policies. We will continue to use third-party systems to validate that services are necessary and appropriate for a given diagnosis.

What is the earliest date (prior to the mandated transition date) that your health plan will accept pre-authorization requests with ICD-10 codes/descriptions? We will begin to accept pre-authorization requests coded to ICD-10 one month in advance of the mandated compliance date for services that are anticipated to be performed after the mandated ICD-10 compliance deadline.

Will providers have to request new authorizations coded to ICD-10 where the service dates of the current authorization cross the mandated compliance deadline? At this time, we do not believe so. The authorization process will be thoroughly tested in advance of the implementation date.

How do you keep your providers informed of your ICD-10 changes? Do you have an ICD-10 communication forum that we can participate in? Molina anticipates providing information via existing communication vehicles such as provider manuals and newsletters, Molina's website, as well as provider service representatives' on site visits, and will communicate as frequently as necessary to keep open channels of communication. We will publish key updates on our website:

<http://www.molinahealthcare.com/providers/common/medicaid/hipaa/Pages/codesets.aspx>

Where can I find more information on ICD-10? Please refer to these industry resources to help guide you with your ICD-10 planning and preparation:

- [Centers for Medicare & Medicaid Services \(CMS\)](#)
- [Workgroup for Electronic Data Interchange \(WEDI\)](#)
- [National Center for Health Statistics \(NCHS\)](#)

Contact Us

For ICD-10 questions, please send us an email to: Molina.ICD-10@MolinaHealthcare.com