

# Fall 2016 Provider Newsletter



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## Molina Healthcare's 2016 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 2016, Molina Healthcare showed improvement on the rating of the overall healthcare and getting our members the care they needed. We still need to improve on how well our doctors communicate with members as well as getting our members access to care quickly. The rating of personal doctors is another area that needs improvement.

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Your Extended Family.

**Medicare:** In 2016, Molina Healthcare improved in the rate of members receiving annual flu and pneumonia vaccines. The rating of specialist and getting needed prescriptions drugs are both areas needing improvement.

**Marketplace:** In 2016, Molina Healthcare showed much improvement in multiple measures, including rating of healthcare, advising smokers to quit, and discussion regarding cessation activities. We need to improve the discussion of aspirin risks and benefits between member and provider, as well as providing better access to information and rating of personal doctor.

**MMP:** In 2016, Molina Healthcare performed well with the rating of health plan, rating of drug plan, and the rating of specialist. The areas of improvement include customer service, getting needed prescription drugs, and the rate of members receiving the pneumonia vaccine.

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 2016, Molina Healthcare improved on the HEDIS® measures related to the diabetes care including nephropathy and eye exams, lead screening in children and adolescents' access to primary care physician. We need to improve on making sure our members receive childhood immunizations and well child checkups for the ages of 3-6 years.

**Medicare:** In 2016, Molina Healthcare improved on the following HEDIS® measures: diabetes eye exam, care for older adults (medication review and pain assessment), antidepressant medication management and follow-up after hospitalization for mental illness. We also improved in members getting screened for colorectal cancer but will need additional improvement to meet the goal. We need to improve in breast cancer screening and ensuring drug therapy for those with rheumatoid arthritis. The diabetes measure which addresses poor control of diabetes is another area that needs improvement.

**Marketplace:** In 2016, Molina Healthcare showed increased performance in controlling high blood pressure, eye exam for diabetic members, controlled HbA1c <8, and nephropathy screening for diabetic members. Opportunities for improvement include the assessment of body mass index, cervical cancer screening, and chlamydia screening.

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](http://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>.



[MolinaHealthcare.com](https://molinahealthcare.com)

# 2016 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 Updates:

- Do not use the Live Attenuated Influenza Vaccine (LAIV) during the 2016-2017 flu season.
- Remove the FluMist from the vaccines for the Children Program.
- Providers should consider observing all patients for 15 minutes after vaccination.
- Patients with a history of severe allergic reaction to egg should receive their vaccine in an inpatient or outpatient medical setting, under the supervision of a health care provider.

For a complete copy of the ACIP recommendations and updates or for information on the flu vaccine options for the 2016 flu season, please visit the Centers for Disease Control and Prevention at <http://www.cdc.gov/flu/professionals/vaccination/>.

## Provider Web Portal

Visit the Provider Web Portal today and avoid unnecessary calls to Member Services. You can obtain information related to claims, eligibility verification, benefits clarification, and much more.



## Telephonic Interpreter Services

A major goal of cultural competence is making sure our Members understand the health care and education you provide. Telephonic interpreter services are available to all Molina Members needing language assistance. Member health outcomes can improve by increasing the member's ability to fully understand his or her care. If you need to refer a Member to see a specialist, please locate a specialist who speaks the same language as the Member, when possible. During an office visit, a Member or provider can call Molina Member Services and request a telephonic interpreter. The Member Services number is on the back of the Member's ID card. The office should place the call on "speaker" so that the interpreter can hear and communicate with the Member and provider.



[MolinaHealthcare.com](http://MolinaHealthcare.com)

# Updating Provider Information

It is important for Molina Healthcare of Texas (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

Changes should be submitted on the Provider Change of Information Form located on the Molina Healthcare website at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com) under the Provider Forms section.

Send changes to:

Email: [MHT.PIM@MolinaHealthCare.com](mailto:MHT.PIM@MolinaHealthCare.com)

Fax (877) 319-6851

Mail: Molina Healthcare of Texas

5605 N. MacArthur Blvd., Suite 400

Irving, TX 75038

ATTN: Provider Services Department

Contact your Provider Services Representative at (855) 322-4080 or [MHTXProviderServices@MolinaHealthcare.com](mailto:MHTXProviderServices@MolinaHealthcare.com) if you have questions.

## MEDICARE ONLY: Important Reminder about Member ID Cards

Most Members have Molina Medicare in addition to Medicaid coverage. For this reason, it's important to always ask the Member to show you both ID Cards at the time of service.

### Advantages:

- Shows that the Member is dually eligible
- Identifies who to bill; primary and secondary insurance
- Avoids Member complaints about incorrect member billing which is prohibited by CMS/Medicare
- Tells you who to contact if prior authorization is required

[MolinaHealthcare.com](http://MolinaHealthcare.com)