

# PROVIDER NEWSLETTER

A newsletter for Molina Healthcare Provider Networks



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## Consumer Assessment of Healthcare Providers and Systems (CAHPS®)

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is an industry standard survey tool used to evaluate patient satisfaction. Improving patient satisfaction has many benefits. It not only helps to increase patient retention but can also help increase compliance with physician recommendations and improve patient outcomes.

Focusing together on a positive patient experience will have many important benefits to your practice:

- Increase patient retention
- Increase compliance with physician clinical recommendations
- Improve patient's overall wellness and health outcomes
- Ensure preventive care needs are addressed more timely
- Reduce no show rates

Please encourage your patients who have received the CAHPS® survey to participate. Listed below are a few topics addressed in the survey regarding patient care:

- Getting Needed Care
- Getting Care Quickly
- How Well the Doctors Communicate

## Molina Healthcare's 2019 Quality Improvement Results

Molina Healthcare conducts an annual program evaluation to assess how well we meet the performance goals and objectives for improving the quality and safety of clinical care and services specified within the Quality Improvement Program Description and annual Work Plan. Below are highlights from the annual evaluation.

## CAHPS®

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 2019, Molina Healthcare showed improvement on the rating of specialist, customer service and rating of personal doctor. There are opportunities to improvement for coordination of care and how well doctors communicate.

**Medicare:** In 2019, Molina Healthcare's top performing measures were related to members receiving annual flu and pneumonia vaccines, rating of drug plan and rating of health plan. There are opportunities for improvement for getting members needed care and getting members needed prescription drugs.

**Marketplace:** In 2019, Molina Healthcare's top performing measures were rating of health plan, rating of all health care and access to information. Opportunities for improvement include care coordination, getting members needed care and rating of personal doctor.

**MMP:** In 2019, Molina Healthcare showed improvement for rating of drug plan, rating of health plan and care coordination. There is opportunity to improve the percentage of members who receive the flu and pneumonia vaccines.

### Behavioral Health Satisfaction

Molina Healthcare also assesses members' satisfaction with their behavioral health services. In 2019, Molina Healthcare improved in the following measures: rating of health plan and getting treatment quickly. Areas for improvement include how well clinicians communicate, members feeling informed about their treatment options, member's perceived improvement, and getting treatment and information.

## HEDIS®

Another tool used to improve member care is the Healthcare Effectiveness Data and 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 2019, Molina Healthcare improved on the HEDIS® measures related to the diabetes care including blood pressure control and hemoglobin A1c control for diabetic members, as well as blood pressure control for members with hypertension. We need to improve on adult BMI assessment, cervical cancer screening, adolescent well-care visits, and use of first-line psychosocial care for children and adolescents on antipsychotics.

**Medicare:** In 2019, Molina Healthcare improved on the following HEDIS® measures: plan all-cause readmission and medication reconciliation post-discharge. We also improved hemoglobin A1c control and blood sugar control among diabetic members. We need to improve our care for older adult measures including medication review, pain assessment and functional status assessment.

**Marketplace:** In 2019, Molina Healthcare showed increased performance in weight assessment and counseling for nutrition and physical activity for children and adolescents. Opportunities for improvement include breast cancer screening and follow-up after hospitalization for mental illness.

**MMP:** In 2019, Molina Healthcare showed increased performance in medication reconciliation post-discharge, controlling high blood pressure and colorectal cancer screening. Opportunities for improvement include care for older adults by conducting pain assessments, functional status assessments and medication reviews.

### **Culturally and Linguistically Appropriate Services**

Molina Healthcare also assesses the cultural, ethnic, racial and linguistic needs and preferences of members on an ongoing basis. Information gathered during regular monitoring and annual network assessment is used to identify and eliminate cultural and/or linguistic barriers to care through the implementation of programs and interventions. In 2019, the large majority (90%) of Molina Medicaid members identified English as their preferred language, followed by Spanish (9%) and Vietnamese (0.18%). Spanish was the most requested language for Molina's interpreter services, followed by Vietnamese and Arabic. The percentage of requests for Vietnamese interpreters increased slightly between 2018 and 2019. Overall, Molina found that the current Culturally and Linguistically Appropriate Services program resources, structure, and practitioner and community participation are sufficient based on member needs. Additionally, Molina has a new series of short, Cultural Competency training videos available at [www.MolinaHealthcare.com](http://www.MolinaHealthcare.com) on the Culturally and Linguistically Appropriate Resources page listed under Health Resources.

### **Provider Satisfaction**

Additionally, Molina Healthcare performs an annual analysis of how well providers' expectations and needs are being met. Areas of success for all lines of business are overall satisfaction and call center service satisfaction. Areas for improvement exist around satisfaction with provider relations, utilization and quality management, and availability and quality of specialists and behavioral health providers.

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 Quality Improvement 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).

## **Rybelsus**

Rybelsus (oral semaglutide), a glucagon-like peptide-1 (GLP-1) receptor agonist, was recently approved in September 2019 by the Food and Drug Administration (FDA) for the treatment of type 2 diabetes in adults. This is the first oral formulation of a GLP-1 receptor agonist to be approved in the US. A once weekly injectable form of semaglutide has been on the US market since 2017.

In a series of ten PIONEER phase 3 trials conducted by Novo Nordisk, oral semaglutide performed favorably against other



injectable GLP-1 receptor agonists and other currently available antidiabetic medications. It has a list price of \$772 for 30 tablets.

A recent study conducted by the Institute for Clinical and Economic Review (ICER) compared oral semaglutide to liraglutide, empagliflozin, sitagliptin, and ongoing background antihyperglycemic treatment (metformin, sulfonylureas, insulin). In summary, the report found:

- Oral semaglutide reduced HbA1c more than placebo, empagliflozin, sitagliptin, and liraglutide at 52 weeks.
- Oral semaglutide reduced body weight more than placebo, liraglutide, and sitagliptin. Reductions in body weight were similar with oral semaglutide and empagliflozin.
- Oral semaglutide did not have a statistically significant reduction in major adverse cardiovascular events (MACE) compared to placebo. Injectable semaglutide, liraglutide, and empagliflozin did reduce MACE compared to placebo.
- Gastrointestinal effects including nausea, vomiting, and diarrhea were the most common adverse reactions reported with oral semaglutide (up to 20% of trial participants), which led to increased rates of therapy discontinuation.

**Table 1: Oral Semaglutide and Comparators**

Treatment	Add-On Drug Cost	Complication Cost	Total Cost	MACE	CHF	ESRD	LYs	QALYs
Oral Semaglutide + background treatment	\$46,000	\$208,000	\$295,000	59.9%	29.4%	13.0%	8.18	4.03
Sitagliptin (Januvia®) + background treatment	\$5,000	\$209,000	\$254,000	65.8%	27.6%	14.8%	7.66	3.73
Empagliflozin (Jardiance®) + background treatment	\$16,000	\$204,000	\$263,000	63.4%	22.8%	12.4%	8.07	3.97
Liraglutide (Victoza®) + background treatment	\$60,000	\$203,000	\$305,000	62.2%	23.5%	12.4%	8.06	3.72
Background treatment alone	--	\$208,000	\$250,000	67.2%	27.7%	14.6%	7.55	3.63

Table 1 shows estimated lifetime costs, medical complication costs, major adverse events, life years added, and quality-adjust life years added of oral semaglutide and comparators. MACE: major adverse cardiovascular event, CHF: congestive heart failure, ESRD: end stage renal disease, QALY: quality-adjusted life years

When considering price, effectiveness, and adherence, ICER found oral semaglutide to be cost-saving compared to liraglutide, sitagliptin, and background treatment alone, but not compared to empagliflozin.

Molina has chosen not to add Rybelsus to the formulary at this time, but Ozempic, Victoza, and Trulicity are the preferred agents for Molina One, and Ozempic and Victoza are the preferred agents for MKP formulary for 2020.

### References:

1. Rind D, Guzauskas G, Fazioli K, Hansen R, Kumar V, Chapman R, Borrelli E, Bradt P, Pearson S. Oral Semaglutide for Type 2 Diabetes: Effectiveness and Value. Institute for Clinical and Economic Review, November 1, 2019. <http://icer-review.org/material/diabetes-evidence-report/>

## Electronic Funds Transfer (EFT)

Molina has partnered with our payment vendor, ProviderNet, for Electronic Funds Transfer and Electronic Remittance Advice. Below are additional benefits and reminders:

### Benefits:

- Providers get faster payment and eliminates mailing time (processing can take as little as 3 days from submission)
- Providers can search for a historical Explanation of Payment (EOP) by claim number, member number, etc.
- Providers can view, print, download and save a PDF version of the EOP for easy reference with no paperwork to store
- Transfer Protocol (FTP) and their associated Clearinghouse
- Electronic Funds Transfers ensure HIPAA compliance
- It's a free service for you!

### ProviderNet Reminders:

- ProviderNet is only for providers who have registered for EFT.
- Providers should always login to their ProviderNet account and view their payment history before contacting Molina about a missing EFT payment.
- ProviderNet only facilitates the payments from Molina to the provider. Questions regarding claims payment should be directed to Provider Services/Call Center.
- If a provider receives a Molina payment that is not on their ProviderNet account (frequently Accounts Payable payments), providers should contact Provider Services/Call Center.
- Providers should be reminded to add all NPI's to their account that receive Molina payments.

Get started today! Provider that are not registered for EFT payments should contact: Electronic Funds Transfer at: (P) 1-866-409-2935, Email: [EDI.Claims@Molinahealthcare.com](mailto:EDI.Claims@Molinahealthcare.com)

## Opioid Use Disorder



### The Problem:

Your community, town, or practice is likely no stranger to the Nation's opioid crisis. According to the National Institute of Drug Abuse (NIDA), "Every day, more than 130 people in the United States die after overdosing on opioids" (NIDA 2019) and every 15 minutes a baby is born that will suffer from opioid withdrawal (<https://www.drugabuse.gov/related-topics/trends-statistics/infographics/dramatic-increases-in-maternal-opioid-use-neonatal-abstinence-syndrome>). The economic burden of prescription opioid misuse in the United States is estimated to be \$78.5 billion a year. This would include health care costs, lost productivity, addiction treatment and criminal justice involvement with more than a third of these costs being attributable to increased health care and substance abuse treatment costs.

### Molina's Solution:

Molina has developed an Opioid Use Disorder (OUD) Model of Care (MOC) to help support the work that our providers are doing everyday by ensuring our internal processes work to remove barriers to care and that our clinicians are equipped with the skills to coordinate care for this vulnerable population. Molina's approach includes assigning a Substance Use Disorder (SUD) Navigator who

has completed additional SUD trainings to improve efficiency of care coordination, member engagement and empower members to successfully self-manage post program completion. Molina Healthcare's OUD MOC has identified opportunities to improve knowledge and processes that impact Molina's effectiveness in caring for members affected by opioid use. The OUD MOC is designed to improve factors related to access, education, appropriateness of treatment, collaboration, engagement, and internal awareness. The model includes:

- Health Plan Internal Awareness Gap Analysis
- Member (At-risk) Identification
- Enhanced Care Coordination
- Proprietary Screening Tools
- Comprehensive Staff Competency Trainings
- Data Dashboards and Reports
- Feedback and Monitoring

### **How Can I Help:**

Minimize opioid overdose misuse, overdose and addiction by incorporating the following into your practice:

- Familiarize yourself with the latest HEDIS measures and associated tip sheets which include:
  - Risk of Continued Opioid Use
  - Use of Opioids at High Dosage
  - Use of Opioids from Multiple Providers
  - Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence
- Refer members who you identify as possible candidates for care coordination through our OUD MOC to our care management department. You may contact us at “Health plan CM phone queue # “and/or “Health plan general CM mailbox, if applicable”
- Consider becoming a Medication Assisted Treatment (MAT) Provider by applying for the DEA X Waiver (resources below) to help close the access to care issues many patients face when attempting to seek help for their opioid addiction

### **Provider Resources:**

- Visit our website ([www.molinahealthcare.com](http://www.molinahealthcare.com)) for our Opioid Safety Provider Education Resource Kit which includes free CMEs on Opioid Safety. These resources are located under our Health Resources tab
- Access our latest HEDIS Tip Sheets on the above measures mentioned by talking with your local Provider Services team at “ “ and will soon be available via the Provider Portal

### **Sources:**

National Institute of Drug Abuse. Opioid Overdose Crisis, January 2019.

National Institute of Drug Abuse. Neonatal Abstinence Syndrome.<https://www.drugabuse.gov/related-topics/trends-statistics/infographics/dramatic-increases-in-maternal-opioid-use-neonatal-abstinence-syndrome>

National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, Atlanta. GA. The Economic Burden of Prescription Opioid Overdose, Abuse, and Dependence in the United States, 2013.

2020 Provider Manuals

The 2020 Provider Manuals will be made available on MolinaHealthcare.com website. The Provider Manual is customarily updated annually but may be updated more frequently as policies or regulatory requirements change. The provider manual is intended to provide Molina’s contracted Providers with guidance in understanding Molina Healthcare’s programs, processes and policies. Providers can access the most current Provider Manual at www.MolinaHealthcare.com

Provider Portal Corner



We improved the way you can report a data change to us. The new feature allows a Provider or Member to submit demographic corrections directly to Molina.

Online Correction Locations:

**Provider Details**

[Back](#)

<b>Name:</b>	<b>Title:</b>	<b>Ge</b>
DOE, JOHN	DO	Male

  

<b>NPI:</b>	<b>License ID:</b>	<b>License Type:</b>
1234567890	Not Available	SPECIALIST

**Report data change in the Provider Directory**  
 If you are a Molina Member: [Submit Here](#)  
 If you are a Molina Provider: [Submit Here](#)

Medical Doctors are Licensed and Regulated by State Medical board.

POD – Search Details page

City: Houston  
 Zip: 77080

Mobile Number:

Report an update or inaccuracy in the Provider Directory:  
[Submit Here](#)

[Edit](#)

Provider Portal