Making the Connection Provider Newsletter • 3rd Quarter 2017

FREE Online Continuing Medical Education Training



Great News! Molina Healthcare of Wisconsin, Inc. (Molina) is excited to offer free online Continuing Medical Education (CME) for Primary Care Providers. Created in partnership with the University of California, Irvine, these courses will train you to properly document some of the nation's most significant health conditions. The first module will address Diabetes Mellitus Documentation Training.

Sign up now to:

- Ensure your patients receive evidence-based care
- Accurately report HEDIS[®] measures
- Become an expert in approved documentation codes
- Improve HEDIS[®] scores
- Receive CME Credit and Maintenance of Certification (MOC, for Internal Medicine board certification) upon course completion

If you are interested or have questions please call or email us at (855) 326-5059 <u>WIProviderEngagement@MolinaHealthcare.com</u> To get started, email your NPI number to <u>MedAffairsEdu@</u> <u>MolinaHealthcare.com</u>.

Molina Healthcare has Gone Green!

Molina Healthcare of Wisconsin, Inc. (Molina) has gone green in 2017. One of our main objectives are to reduce paper processing and the use of regular mail as form of communication with our providers.

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Molina offers a number of electronic tools to communicate with our Providers. These tools are intended to improve Provider access to information related to Molina members. Providers will have access to additional services, increase support resulting in faster turn-around-times and efficiencies.

We now require all contracted providers to utilize Electronic Solutions and Tools. Participating Providers are required to comply with Molina's electronic processes and initiatives no later than June 30, 2017.

The processes include the following initiatives:

- Electronic claims filing
- Electronic data interchange ("EDI")
- Electronic remittance advice
- Electronic fund transfers
- Registration and use of Molina's Interactive Provider Web Portal

If you have any questions regarding this notification or would like assistance with registering please contact your Molina Provider Services Representative at <u>WIProviderEngagement@MolinaHealthcare.com</u>.

Fast Payments and Convenience for You

Molina Healthcare of Wisconsin, Inc. (Molina) provides FREE paperless electronic payment and remittance advice services to our providers. Molina provides Change Healthcare to our Providers and we would like to highlight the benefits below;

- Faster payments (processing can take as little as 3 days from the day the claim was submitted)
- Providers can self- search for a historical Explanation of Payment- EOP (AKA Remittance Advice) by claim number and member name
- Providers can view, print, download and save a PDF version of the Explanation of Payment (EOP) for easy reference with no paperwork to store
- Files can be more efficiently routed to the File Transfer Protocol (FTP) or associated Clearinghouse of the Providers

Register today. Enrolling is as easy as 1, 2, 3!

1. Visit https://providernet.alegeus.com

- 2. Enter your account information
- Tax ID
- NPI
- Banking information

3. Begin viewing and receiving payments from Molina Healthcare electronically

For additional assistance, please contact your Provider Service Representative (855) 326-5059 or e-mail us at <u>WIProviderEngagement@Molinahealthcare.com</u>

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Our Goal is to Improve the Health of Members with Depression

One way we are measuring the quality and effectiveness of care for members with depression is through the Antidepressant Medication Management (AMM) quality measure. AMM measures the percentage of adults 18 years of age and older who were treated with antidepressant medication, had a diagnosis of major depression, and who remain on an antidepressant medication for at least 180 days (6 months).

How to Help Improve Medication Adherence in Patients with Depression:

- Educate patients on the following:
 - The importance of staying on antidepressant therapy for a minimum of 6 months
 - Most antidepressants take 4-6 weeks to work before the patient starts to feel better
 - Common side effects, how long the side effects may last and how to manage them
 - The connection between taking an antidepressant and signs and symptoms of improvement
 - Strategies for remembering to take the antidepressant on a daily basis
 - What to do if there are questions or concerns

If you have Molina Medicaid or Marketplace patients living in Milwaukee County who have challenges getting to a pharmacy to pick up their prescriptions, consider Hayat Pharmacy as an option. They provide a free home delivery service for prescription medications.

We appreciate your partnership in serving our members!

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Referring Members to In-network Providers

Molina Healthcare of Wisconsin, Inc. (Molina) maintains a network of in-network providers to care for Molina members. It is important that Providers use participating providers for our members. Molina referrals are not required for members to be seen by in-network specialists; however, prior authorization may be required depending on the service provided.

At times, a provider may request a service that is unavailable or not provided within our network. Providers must get approval ahead of time from Molina Healthcare to authorize this type of specialty referral. This process is called "prior authorization."

It is very important to get a prior-authorization for members who are being referred outside of the Molina Healthcare network to prevent the member from incurring balance billed amounts.

If you have questions or concerns about a prior authorization, you may call Molina Healthcare at (855) 326-5059.

Provider Orientation Webinars

Molina Healthcare of Wisconsin's Provider Education Webinars are open to all Network Providers, and their medical and office staff. Webinars are hosted through WebEx, which allows you to listen to the presentation by phone or by viewing it on your computer all webinars include a live person and subject matter expert to answer your questions.

July			August			September		
Thursday, July 27, 2017	10:00 AM	Provider Orientation	Tuesday, August 1, 2017	10:00 AM	Provider Orientation	Thursday, September 7, 2017	10:00 AM	Provider Orientation
			Thursday, August 10, 2017	10:00 AM	Provider Orientation	Tuesday, September 12, 2017	10:00 AM	Provider Orientation
			Tuesday, August 15, 2017	10:00 AM	Provider Orientation	Thursday, September 21, 2017	10:00 AM	Provider Orientation
			Thursday, August 24, 2017	10:00 AM	Provider Orientation	Tuesday, September 26, 2017	10:00 AM	Provider Orientation
			Tuesday, August 29, 2017	10:00 AM	Provider Orientation			

We encourage appropriate staff to register for these informative, educational opportunities.

Please e-mail <u>WIProviderEngagement@Molinahealthcare.com</u> to be added to our e-mail list and be the first to learn about new webinars.

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The Importance of Lead Testing

According to the Centers for Disease Control and Prevention (CDC), about 500,000 U.S. children ages 1 to 5 have lead levels greater than 5 micrograms per deciliter (ig/dL) of blood. Problems that can be attributed to even a small amount of lead in the blood include learning disabilities, attention deficit disorder, decreased muscle and bone growth, as well as behavioral problems.

To help raise awareness of the importance of lead screenings, Molina Healthcare is educating the parents and guardians of children ages 2 years and older for whom there is no record of a lead screening.

Lead screening recommendations

According to the United States Environmental Protection Agency (EPA), children's blood levels tend to increase from 6 to 12 months of age, and tend to peak at 18 to 24 months of age. The CDC has recently updated its recommendations on children's blood lead levels and recommends that health care providers try to prevent the occurrence of blood lead levels of 5 ig/dL and above instead of 10 ig/dL and above in children by:

- Screening children younger than age 6, preferably by ages 1 and 2, if they had not yet been tested
- Screening children and their family members who have been exposed to high levels of lead
- Screening children who should be tested under their state and local health screening plan

The new blood lead level value means that more children will likely be identified as having lead exposure — allowing parents, doctors, public health officials, and communities to take action earlier to reduce the child's future exposure to lead. The new recommendation does not change the guidance that chelation therapy be considered when a child has a blood lead test greater than or equal to 45 \g/dL.

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What your practice can do?

Physicians can try to prevent lead poisoning in children by:

- Discussing recommendations for lead screening with the parents/guardians of their pediatric patients; screening children starting at age 12 months and again at 24 months
- Discussing additional follow-up screening with parents and guardians; discussing lead safety and prevention with parents and guardians

Network Participation Status and Effective Date

A Provider is considered participating (PAR) in the Molina Healthcare network when:

- Contracts, addendums and attachments are signed and fully executed
- If required for the provider's specialty, all stages of credentialing are completed and approved by Molina Healthcare's credentialing committee.

If credentialing is necessary, a provider's PAR effective date is the date after the credentialing committee approves the provider.

If credentialing is not necessary a provider's PAR effective date is the date required attachments were fully executed by Molina Healthcare.

If the provider does not complete required attachments, the provider is not given PAR status, even if he/she has been fully credentialed.

Updating Provider Information

Molina Healthcare of Wisconsin, Inc. (Molina) requires Providers to notify us in writing, by fax or e-mail with any of the following changes:

- Changes in practice ownership, name, address, phone number or Federal Tax ID numbers
- When adding a new physician to the practice or if a physician is leaving the practice
- Upon loss or suspension of your license to practice
- In the event of bankruptcy or insolvency
- In the event of any suspension, exclusion, debarment, or other sanction from a State or federally funded healthcare program
- In the event of any indictment, arrest, conviction for a felony, or any criminal charge related to your practice
- If there are any material changes in cancellation or termination of liability insurance
- If or when you are closing your practice to new patients and vice versa
- At least 90 days before terminating affiliation with Molina Healthcare of Wisconsin or one of its provider networks (refer to your contract for specific termination terms)

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Please submit changes via mail, fax, or e-mail: Molina Health Care of Wisconsin 11200 West Parkland Avenue Milwaukee, WI 53224-3127 FAX: 414-214-2481 E-MAIL: <u>WIProviderEngagement@MolinaHealthCare.com</u>

New Prior-Authorization Code List

Molina Healthcare of Wisconsin, Inc. (Molina) has updated the Prior-Authorization codification list. Please take some time to review the 2017 Q3 PA Code Matrix. Molina has all updated documents on our website for your convince. If you need assistance locating Q3 PA Code Matrix or the Prior Authorization form please review the guides below.

To locate 2017 Q3 PA Code Matrix follow the steps below:

- 1. Go to MolinaHealthcare.com/providers/WI
- 2. Select the form tab and a drop down menu will appear, click on Frequently Used Forms



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3. Under the Prior Authorization section select and click on Q3 Codification List 2017



To locate the Prior-Authorization form follow the steps below:

- 1. Go to MolinaHealthcare.com/providers/WI
- 2. Select the form tab and a drop down menu will appear, click on Frequently Used Forms



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3. Under the Prior Authorization section select and click on Prior Auth/Pre-Service Review Form



Process for Requesting Personal Care Worker (PCW) Services

Molina Healthcare of Wisconsin, Inc. (Molina) will not be changing our current process due to the changes occurring at the Department of Health Services (DHS). DHS is implementing a new independent assessment and prior authorization process for personal care services provided on a fee-for-service basis. Molina will continue to accept the PCST allocation methodology.

Please continue to submit the paper form available on ForwardHealth when requesting an authorization for PCW services.

Improve the Health of Our Members with Diabetes

In order to better monitor A1c control throughout the year, Molina Healthcare of Wisconsin, Inc. (Molina) is encouraging our providers to use CPT Category II codes to identify levels of A1c results.

30)44F	HbA1c Level <7%
30)45F	HbA1c Level between 7% and 9%
30)46F	HbA1c Level >9%

When providers submit CPT Category II codes, in addition to other codes used for billing, it decreases our need for medical record abstraction and chart review. This minimizes the administrative burden for HEDIS and other quality-based initiatives. Molina is hoping this will promote an efficient method for data collection from providers while improving the quality of care for our members.

We appreciate your partnership in serving our members!

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Network Updates

Molina Healthcare of Wisconsin, Inc. (Molina) would like to remind our Medicaid providers and billers about the following topics to help facilitate timely payments or to avoid costly recoupments.

Fluoride-Topical Applications

Medical providers outside of Milwaukee, Racine, Kenosha, Waukesha, Washington and Ozaukee Counties who provide dental services should not bill 'D' or dental codes e.g., D1208 for Fluoride. Instead, providers should use CPT 99188 per ForwardHealth Topic #501, as provided on the link below.

https://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Print.aspx?ia=1&p=1&sa=50&s=2&c=102&nt=Flu oride+-+Topical+Applications

Billable Revenue Codes

Please remember to include only billable revenue codes, per Forward Health, for all claim submissions.

- Forward Health Topic #1418 https://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Print. aspx?ia=1&p=1&sa=32&s=2&c=10&nt=Revenue+Codes
- Forward Health Topic #1364 https://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Print.aspx?ia=1&p=1&sa=43&s=2& c=10&nt=Revenue+Codes

Billing Therapy Services

As a reminder, all DME, physical therapy, occupational therapy and speech therapy services are required to be billed on a CMS-1500 claim form. All services billing on a UB-04 will be denied.

Reimbursable Professional Charges

ForwardHealth only reimburses a professional charge submitted on a CMS-1500 for services provided in an off-campus provider-based outpatient clinic. For more information please visit the link below.

ForwardHealth update 2016-02

https://www.forwardhealth.wi.gov/kw/pdf/2016-02.pdf

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DME Providers

Rental services (RR modifier) submitted must have a date span indicating multiple rental dates by the "from" and "to" dates of service. **Rental items must be ranged within the same calendar month on claims.** Each month for rental submissions must have its own claim detail line. The number of days indicated <u>must equal</u> the number of days within the range. Please reference Key to DME Index for the state's policy along with the individual DME indexes found at;

https://www.forwardhealth.wi.gov/WIPortal/content/provider/medicaid/MedicalEquipmentVendor/resources_25. htm.spage

Rendering and Billing Providers

The State requires that all rendering and billing providers be Medicaid certified to receive reimbursement from Molina.

Effective immediately

Field box 21 of the 1500 form type will require an indicator of "0." This indicator is for the purposes of the ICD-10 implementation. Entering a "0" will indicate the provider intends to submit ICD-10 codes. As a reminder, claims submitted without the appropriate indicator, missing and/or incomplete will result in a rejection by our Support Services Department.

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To receive this newsletter via e-mail, send an e-mail to <u>WIProviderEngagement@MolinaHealthcare.com</u>

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