

Making the Connection Provider Newsletter

1st Quarter 2019

2019 Quality Improvement Changes

Molina Healthcare of Wisconsin (MHWI) is excited to announce the newest member of our Quality team. Please join us in welcoming Julie Utter, Molina’s new director of Quality Improvement.

Utter brings to MHWI her experience working with both providers and payers to drive improvement across quality and operations. With a strong background in process improvement, Utter has been successful in developing improvement solutions that add value to providers and Molina members.

Committed to building stronger partnerships for Molina providers, Utter capitalizes on a collaborative approach that centers on clear and open communication channels.

“I recognize providers have a wealth of knowledge and experience on how care should be provided,” Utter said. “I also understand providers have a strong influence in the behaviors and care of our members. I look forward to working with the provider community to leverage their knowledge, and collaboratively build an environment where best practices result in improved outcomes for Molina members.”

What does this mean for our providers? New and improved provider incentive programs are on the way!

If you’d like to be involved in early development of future programs, contact your **Provider Services Representative** at WIProviderEngagement@MolinaHealthcare.com.

Table of Contents

2019 Quality Improvement Changes.....	1
New codes requiring Prior-Authorization effective April 1, 2019.....	2
Appeals no longer accepted through the mail!.....	2
Labcorp now a national provider for Molina Healthcare members	2
Provider Webinars.....	3
Molina Healthcare partnering with Inovalon to process completed patient assessments	4
Third Party Biller functionality now available.....	4
Reduce costly claim denials by verifying patient eligibility.....	4
Updated Provider Manuals	5
Provider Information Changes ...	5
Practitioner Credentialing Reminder	6
New Sepsis Guidelines.....	6
An Interdisciplinary Approach ...	7
Annual Notice of Member Rights and Responsibilities	8

All newsletters are also available at MolinaHealthcare.com.

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New codes requiring Prior-Authorization effective April 1, 2019

Effective April 1, 2019, a prior-authorization will be required for the codes below.

Stay in the know and review the codes below:

0509T, 0510T, 0511T, 0512T, 0513T, 0514T, 0515T, 0516T, 0517T, 0518T, 0519T, 0520T, 0521T, 0522T, 0523T, 0524T, 0525T, 0526T, 0527T, 0528T, 0529T, 0530T, 0531T, 0532T, 0533T, 0534T, 0535T, 0536T, 0537T, 0538T, 0539T, 0540T, 0541T, 0542T

Be on the lookout for the updated PA code matrix at MolinaHealthcare.com.

Appeals no longer accepted through the mail!

Molina Healthcare of Wisconsin no longer accepts, or processes appeals received through the U.S. Postal Service.

Appeals will only be accepted through the following:

Member Appeals

- Member Appeals fax number is: (844) 251-1445
- Member Appeal email: WIMemberAppeals@MolinaHealthcare.com

Provider Appeals

- Provider Appeal fax number is: (844) 251-1446
- Provider Appeal email: MWIAppeals@MolinaHealthcare.com
- Provider Portal: The Provider Portal can be found at Provider.MolinaHealthcare.com

Email questions to WIProviderEngagement@MolinaHealthcare.com.

Labcorp now a national provider for Molina Healthcare members

LabCorp is one of the largest clinical laboratory networks. Their network includes the Specialty Testing Groups; Dianon Pathology, Litholink, Integrated Oncology, Monogram BioSciences, Integrated Genetics, ViroMed, MedTox Laboratories, Colorado Coagulation, National Genetic Institute and Sequenom.

LabCorp offers the following services:

- Web-based electronic solutions
- Courier services for specimen collection in-office
- Advanced sub-specialty pathology
- Same day testing and much more

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Provider Webinars

Stay current on Molina procedures and general health insurance updates. Molina Healthcare of Wisconsin offers Provider Education Webinars that are open to all Molina Network Providers, as well as their medical and office staff. Webinars are hosted through WebEx, which allows participants to listen to the presentation by phone or view on the computer. All webinars include a live person, as well as a subject matter expert to answer your questions.

April		
Thursday, April 4, 2019	10 AM	2019 Marketplace Information
Thursday, April 11, 2019	10 AM	Provider Orientation
Thursday, April 18, 2019	10 AM	Claim Features
Thursday, April 25, 2019	10 AM	PCW Provider Orientation
May		
Thursday, May 2, 2019	10 AM	2019 Marketplace Information
Thursday, May 16, 2019	10 AM	Provider Orientation
Thursday, May 23, 2019	10 AM	Claim Features
Thursday, May 30, 2019	10 AM	PCW Provider Orientation
June		
Thursday, June 6, 2019	10 AM	2019 Marketplace Information
Thursday, June 13, 2019	10 AM	Provider Orientation
Thursday, June 20, 2019	10 AM	Claim Features

Great as a refresher and a “must-do” for new doctors and staff. Register today for these engaging educational opportunities.

Email WIProviderEngagement@MolinaHealthcare.com to be added to our email list and be the first to learn about new webinars.

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Molina Healthcare partnering with Inovalon to process completed patient assessments

Molina Healthcare has contracted with Inovalon – an independent company that provides secure clinical documentation services – to process your completed patient assessments. For your convenience, Molina encourages you to submit patient assessment data to us via ePASS®, Inovalon’s web-based tool, at <https://epass.inovalon.com>. In ePASS® there is an option to print Paper Subjective Objective Assessment Plan (SOAP), Notes in case you elect to not submit electronically. These Paper SOAP Notes can be submitted to Inovalon through their secure fax line at (866) 682-6680.

Molina Healthcare has identified members who require updated medical records. We will be outreaching to providers asking them to schedule assessments with patients to update the necessary information.

Contact Molina Healthcare with additional questions.

Third Party Biller functionality now available

Third Party Billers now have access to certain functions in the Provider Portal. Third Party Billers (3PB) may now log into the Provider Portal. The providers must give their 3rd party billers access to the portal. Once they are registered and granted access by a provider, they can access the following functionality:

- Member Eligibility Inquiry
- Member Roster
- Claims (Inquiry & Submission)

Contact your Provider Services Representative with questions or email WIProviderEngagement@MolinaHealthcare.com

Reduce costly claim denials by verifying patient eligibility

Providers are responsible for verifying Molina eligibility every time a member is seen in the office. PCPs should also verify that a Molina member is assigned to them. Remember: a member ID card is not adequate proof of Molina coverage.

Check eligibility by:

- Going to the Molina Healthcare [Provider Portal](#).
- [Checking the ForwardHealthPortal](#).
- Calling the Member and Provider Services Center: (855) 326-5059.

If you need assistance logging into the Provider Portal, contact your Provider Services Representative.

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Updated Provider Manuals

Molina Healthcare of Wisconsin recently updated the Provider manuals for all their lines of business. It is suggested providers review the updated 2019 Provider Manuals. The manual can be viewed by visiting MolinaHealthcare.com> I'm a Health care Professional> manual. If you have questions about this communication, contact Provider Services at WIProviderEngagement@MolinaHealthcare.com.

Provider Information Changes

Molina Healthcare requires providers to notify Molina of all changes to their data, 30 days before the change happens. Change data includes but is not limited to retirement date, departure/transfer from a location, phone number, practice hour/date changes, etc. Having this information allows Molina to provide the most up-to-date information about providers in the Molina Provider Network.

Changes can be submitted via the:

- Provider Information Update Form: Follow the instructions on the Molina Provider Information Change Form found at MolinaHealthcare.com
- **New** - Provider Online Directory: report data changes at Providersearch.MolinaHealthcare.com. To make changes, remember to first open the provider record in the area you are changing.

Utilize and follow the instructions on the Molina Provider Information Change Form found at MolinaHealthcare.com under frequently used forms. Directions are provided on the form.

Submit changes via email to MHWIProvider.Services@MolinaHealthcare.com.

Practitioner Credentialing Reminder

For practitioners participating with Counsel for Affordable Quality Healthcare (CAQH), Molina asks that you update your provider profile with the most current and accurate information through (CAQH) Pro View. This should be done prior to submitting a Molina Healthcare of WI Credentialing Checklist (CAQH) form.

Incorrect data will delay the primary source verification process, causing the turnaround time for correction of an incomplete application to run closer to the 60 calendar days of receipt. As a result, it is possible the application will be deemed incomplete and Molina will automatically discontinue processing of the application.

To avoid additional issues with incomplete application processing, double-check to make sure the provider profile is current.

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Credentialing Forms can now be found at MolinaHealthcare.com:

- Go to **MolinaHealthcare.com**
- Select **Health Care Professional**
- Select the **Line of Business (Medicaid or Marketplace)**
- Select **Forms**
 - Select **Frequently Used Forms.**

Contact WisconsinCredentialing@MolinaHealthcare.com with any credentialing related questions.

New Sepsis Guidelines

Molina Healthcare of Wisconsin began using the revised sepsis guidelines issued by the Third International Consensus Definitions for Sepsis and Septic Shock (Sepsis-3) on March 1, 2019.

The new guidelines have consolidated three sepsis categories into two categories:

1. Sepsis and severe sepsis have been merged into one category, now called sepsis
2. Septic shock (or Sepsis 3) has not changed significantly

Molina contracted providers should note that patients who previously met the definition of sepsis may be excluded from the new sepsis category. For example, a patient with a urinary tract infection (UTI) may have met the previous definition of sepsis as evidenced by the systematic inflammatory response (elevated white cell count and an elevated temperature) and a site of infection.

However, under the new definition, unless the patient has an elevated heart rate, elevated respiratory rate, confusion and other signs of organ dysfunction, he/she will no longer fit the definition of sepsis.

About the Sepsis Definitions:

These definitions are:

1. Recognized by the health care industry and professional associations as aids to determine sepsis and septic shock
2. The most recent evidence-based definitions for determining sepsis and septic shock

The sepsis definition is used in clinical claims reviews to validate that sepsis was present and that related services were appropriately submitted. If clinical documentation reviewed by Molina does not support sepsis definitions, hospital payments will be adjusted appropriately.

Resources

For more information on the sepsis and sepsis-3 definitions, read The Third International Consensus Definitions for Sepsis and Septic Shock (Sepsis-3). Singer, M., Deutschman, C. S., et al. JAMA 2016; 315(8):801-810, <https://jamanetwork.com/journals/jama/fullarticle/2492881>

Questions

If you have questions related to sepsis and sepsis-3, call Provider Services at (855) 326-5059.

An Interdisciplinary Approach

What is an Interdisciplinary Care Team?

Interdisciplinary team work is a complex process in which various types of care providers work together to share expertise, knowledge and skills to impact patient care. Molina's interdisciplinary care teams (ICT) are a valuable part of a member's treatment plan, with all entities working together to educate, support, and advocate for a member's health and well-being. Molina focuses on integrating members with their case managers, community connectors, medical/behavioral health providers and support networks as a way to better coordinate a member's care. While all entities independently are able to provide beneficial assistance to the member, Molina has found that when the team comes together, communication and efficiency improve.

Do Interdisciplinary Care Teams work?

At Molina, we truly believe so. Over the years, ICTs continue to show an improvement in the coordination of a member's care.

Whether these ICTs are done with Molina's team of professionals, minus the presence of the member, or at the member's primary care physician's office with the member present, the goal is the same; improved member outcomes. It is not uncommon for members to be confused about their diagnoses, medication regime, plan of treatment, or how to improve their health care.

Unfortunately, too many times members are hesitant to reach out to their providers and ask for clarification. In such situations, the case manager will often act as the member's *voice* and advocate on the member's behalf. During such situations, it would be in the member's best interest for his/her case manager to organize an ICT with the member's treatment team.

If you are interested in learning more about this program or referring a patient to the ICT, complete and fax the Care Coordination Referral form to (877) 708-2117. Let's improve patient health and support stronger member quality health measures through a stronger, more collaborative approach.

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

Annual Notice of Member Rights and Responsibilities

What are Member Rights and Responsibilities?

These rights and responsibilities are on the Molina Healthcare website: MolinaHealthcare.com.

Member Rights

They have the right to:

- Be treated with respect and recognition of their dignity by everyone who works with Molina.
- Get information about Molina, our providers, our doctors, our services and Member rights and responsibilities.
- Choose their “main” doctor from Molina’s list of Participating Providers. This doctor is called their Primary Care Doctor or Personal Doctor.
- Be informed about their health. If they have an illness, they have the right to be told about all treatment options, regardless of cost or benefit coverage. They have the right to have all their questions about their health answered.
- Help make decisions about their health care. They have the right to refuse medical treatment.
- Right to Privacy. We keep their medical records private.
- See their medical record. They also have the right to get a copy of and correct their medical record where legally allowed.*
- Complain about Molina or their care. They can call, fax, email or write to Molina’s Customer Support Center.
- Appeal Molina’s decisions. They have the right to have someone speak for them during their grievance.
- Disenroll from Molina (leave the Molina Healthcare product).
- Ask for a second opinion about their health condition.
- Ask for someone outside Molina to look into therapies that are experimental or investigational.
- Decide in advance how they want to be cared for in case they have a life-threatening illness or injury.
- Get interpreter services on a 24-hour basis, at no cost, to help them talk with their doctor or us if they prefer to speak a language other than English.
- Get information about Molina, their providers, or their health in the language they prefer.
- Ask for and get materials in other formats, such as larger size print, audio and braille upon request and in a timely fashion appropriate for the format being requested and in accordance with state laws.
- Receive instructions on how they can view online, or request a copy of, Molina’s non-proprietary clinical and administrative policies and procedures.
- Get a copy of Molina’s list of approved drugs (Drug Formulary) on request.
- Submit a grievance if they do not get Medically Necessary medications after an Emergency visit at one of Molina’s contracted hospitals.
- Not to be treated poorly by Molina or their doctors for acting on any of these rights.
- Make recommendations regarding Molina’s Member rights and responsibilities policies.
- Be free from controls or isolation used to pressure, punish or seek revenge.
- File a grievance or complaint if they believe their linguistic needs were not met by Molina. *Subject to State and Federal laws.

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Member Responsibilities

They have the responsibility to:

- Learn and ask questions about their health benefits. If they have a question about their benefits, call toll-free at (888) 560-2043. If they are deaf or hard of hearing, they may contact us by dialing TTY: 711 for the National Relay Service.
- Give information to their doctor, provider, or Molina that is needed to care for them.
- Be active in decisions about their health care.
- Follow the care plans for them that they have agreed on with their doctor(s).
- Build and keep a strong patient-doctor relationship. Cooperate with their doctor and staff. Keep appointments and be on time. If they are going to be late or cannot keep their appointment, they must call their doctor's office.
- Give their Molina Healthcare card when getting medical care. Do not give their card to others. Let Molina know about any fraud or wrong doing.
- Understand their health problems and participate in developing mutually agreed-upon treatment goals as they are able.

Be active in their health care

Plan Ahead

- Schedule their appointments at a good time for them.
- Ask for their appointment at a time when the office is least busy if they are worried about waiting too long.
- Keep a list of questions they want to ask their doctor.
- Refill their prescription before they run out of medicine.

Make the most of doctor visits

- Ask their doctor questions.
- Ask about possible side effects of any medication prescribed.
- Tell their doctor if they are drinking any teas or taking herbs. Also tell their doctor about any vitamins or over-the-counter medications they are using.

Visiting their doctor when they are sick

- Try to give their doctor as much information as they can.
- Are they getting worse or are their symptoms staying about the same?
- Have they taken anything?

If they would like more information, call Molina's Customer Support Center toll-free at (888) 560-2043, Monday through Friday, between 8 a.m. and 5 p.m. If they are deaf or hard of hearing, they may contact us by dialing TTY: 711 for the National Relay Service.

Second Opinions

If a member does not agree with their provider's plan of care, they have the right to request a second opinion from another provider. Members should call Member Services at (888) 999-2404, TTY: 711, to find out how to get a second opinion. Second opinions may require Prior-Authorization.

Join the Molina email distribution list to receive this newsletter via email. Send an email to WIProviderEngagement@MolinaHealthcare.com

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Provider Services
PO Box 242480
Milwaukee, WI 53224-9931



Looking Ahead:

Molina's Provider Web Portal is an easy-to-use, online tool designed to meet your needs! All Molina Providers have access to our portal.

Register for our Provider Web Portal Today.

Visit our website at MolinaHealthcare.com

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Your Extended Family.