

# Provider Bulletin

Molina Healthcare of New Mexico, Inc.

June 27, 2025

## Telehealth Spotlight: DentaQuest Teledentistry for Molina Turquoise Care Medicaid Members

DentaQuest Teledentistry is a convenient virtual care option that allows providers to connect with patients remotely through secure phone or video consultations. It enables timely guidance and support—without requiring an in-person visit. How it works:

- Providers refer patients for virtual consultations
- Patients connect with a licensed teledentist by phone or video
- The teledentist assesses symptoms, offers guidance, and determines if an in-person visit is needed
- Patients are referred back to their primary dentist for further care
- Dental emergencies are triaged virtually
- In-office benefits remain unaffected
- Members are connected with a licensed teledentist 24/7
- Fully covered benefit under **Molina Healthcare of New Mexico Turquoise Care Medicaid**

Members can initiate a visit 24/7 by calling 1-866-302-0905 or by visiting [Teledentistry.com/DentaQuest](https://Teledentistry.com/DentaQuest) or by using [bit.ly/NM-teledentistry](https://bit.ly/NM-teledentistry). After initiating a visit, members receive a secure video link to consult directly with a dentist online. Want to learn more or refer a patient? Reach out to your DentaQuest representative to explore how teledentistry can complement your care model and support your patients.

## Important Reminder: Changes to NCQA Credentialing Requirements Effective July 1, 2025

There is a change coming to NCQA Credentialing standards, and we wanted to make you aware of it. Effective July 1, 2025, Molina will be required to verify that your license to practice is renewed on or before the expiration date. After July 1, practitioners with an expired license may no longer participate in the Molina network. Please be sure to renew your license in a timely manner to prevent any unnecessary terminations from occurring. Our system auto-verifies all licenses daily, so there's no need to submit a copy of your renewed license.

## **Provider ECHO Corner: General Pediatric ECHO – The Maternal Child Health CHW ECHO**

The *Maternal Child Health CHW ECHO* is a virtual learning and mentorship program that strengthens perinatal care access in rural and underserved communities throughout New Mexico, Arizona, and west Texas. By equipping Community Health Workers (CHWs) with up-to-date clinical knowledge and culturally responsive approaches, the program supports maternal health equity in regions where care may be limited.

Developed in collaboration with maternal health experts, including midwives and professionals in community health, equity, and inclusion, the curriculum emphasizes respectful care grounded in cultural traditions, language, and local values.

Through the ECHO model, CHWs receive mentorship and case-based learning to:

- Improve access to perinatal care among high-need populations
- Support culturally relevant maternal health practices
- Address health disparities in maternal outcomes
- Strengthen their role as trusted professionals in their communities

Session Schedule:

- 2nd & 4th Wednesdays | 12–1 p.m. MT Time: 12:00–1:00 PM MT
- November & December sessions shift to 1st & 3rd Wednesdays

Featured Topics:

- Understanding the CHW role in perinatal care
- Hormonal changes during labor
- Postpartum recovery
- Breastfeeding education
- Navigating grief and loss
- Support strategies during labor and delivery

For more information visit the following site:

<https://iecho.org/public/program/PRGM1700512769236F5Z3FFHRVX>

## **Availity Essentials is Molina's Exclusive Provider Portal**

Not registered with Availity Essentials? Register and get started with Availity to securely submit claims, check eligibility, submit service authorization requests, appeals, and more at:

<https://www.availity.com/molinahealthcare> or by calling 1-800-AVAILITY (1-800-282-4548) for additional help.

Only the person who will become the organization's primary administrator needs to register. Before you get started, gather this information for your organization:

- Physical and billing address(s)
- Tax ID (EIN or SSN)
- NPI
- Primary specialty/taxonomy

To register as a billing service, dental provider, or an atypical provider, please visit [Availity's Getting Started Page](#) for additional registration information.

## Provider Training

Mandatory **Annual Medicaid Provider Training** is still available virtually and is offered in a two-part series. Register for Molina's virtual Provider Orientation course: *Welcome to Molina Healthcare of New Mexico: Onboarding Training*, and the specialty training that matches your organization type, ITU, Behavioral Health, or LTSS. Please note that physical health providers only need to take the onboarding session.

Molina and the other Turquoise Managed Care Organizations (MCOs) are partnering together to offer **in-person and virtual personal care services training** for **Agency-Based Community Benefit (ABCB)** providers. The training sessions will cover provider and attendant requirements for ABCB person care services, as outlined in Section 8 of the Managed Care Policy Manual.

**NOTE:** The **September 4<sup>th</sup> training courses have been canceled**. If you did not attend the May 8<sup>th</sup> training, please plan to attend the next session.

- Wednesday, July 30 (Las Cruces): 9:00 AM to 12 PM
  - Attend live at: [1320 South Solano Drive](#) (main conference room)
  - [Register to attend online](#)

You **do not** need to register in advance for the **in-person** training. Your attendance will be recorded upon your arrival.

For a complete list of training and resources, please visit [Training Resources, Availity Essentials Portal \(molinahealthcare.com\)](#) or [New Mexico Providers Home \(molinahealthcare.com\)](#).

## Quality Corner: Ensuring Accurate Reporting for Diabetes Care

Proper billing and coding are essential for achieving HEDIS compliance and improving patient outcomes, particularly for individuals with diabetes requiring Eye Exams for Patients with Diabetes (EED). Accurate use of CPT II codes not only ensures timely reimbursement but also reflects the quality of care provided.

Eye exams are critical for detecting diabetic retinopathy and preventing vision loss in patients with diabetes. Reporting these visits accurately with CPT II codes contributes to HEDIS measures and supports better care coordination. Missteps in coding can lead to underreporting and hinder performance evaluations of care delivery. To ensure accuracy, providers can follow these simple steps:

- Know the correct CPT II codes: Always use the appropriate CPT II codes that correspond to retinal or dilated eye exams for diabetes care. Common codes include 2022F (dilated retinal eye exam interpreted by an ophthalmologist or optometrist) and 3072F (negative retinal or dilated eye exam in the prior year).
- Document thoroughly: Ensure the patient's medical record includes detailed notes about the eye exam, including the date and findings. Accurate documentation supports proper code selection.
- Train your staff: Educate billing and administrative staff on the importance of CPT II codes for diabetic eye exams. Provide updates on any changes to coding guidelines.
- Confirm payer requirements: Verify payer-specific coding and reporting requirements to avoid denials or discrepancies.
- Leverage technology: Use electronic health records (EHR) systems to automate reminders for coding and ensure compliance with HEDIS guidelines.

Accurate billing of diabetic eye exams not only aids in performance measures but also ensures patients receive timely and essential care. As a healthcare provider, your diligence in coding helps improve outcomes and fosters an initiative-taking approach to diabetes management.

Thank you for your commitment to maintaining high standards in patient care and data reporting. Together, we can make a significant impact in the fight against diabetes-related vision loss.

Our dedicated Provider Engagement Team is here to assist with any questions or to provide additional resources, such as HEDIS tip sheets. You can reach us at

[MHNM.ProviderEngagement@Molinahealthcare.com](mailto:MHNM.ProviderEngagement@Molinahealthcare.com).

### **Provider Online Directory: Has your information changed?**

Our members rely on accurate provider information to find care. We must know about any changes to your practice, such as new addresses or phone numbers, as soon as possible. We need to be informed of demographic changes to ensure the accuracy of our provider directory and systems and the mailing of checks and correspondence to the correct location. Take the following steps to notify Molina and the NPI Registry of any changes:

- Update your demographic information using Molina's [Provider Change Form](#).
- Update the [National Provider Identifier Registry](#) if you have an NPI.
- Update your information through the [National Plan & Provider Enumeration System website](#), or
- Download and mail in the Centers for Medicaid & Medicare Services' [NPI update form](#). Instructions are provided online in the [NPPES FAQs](#). See the [CMS website](#) for more on NPIs.

Federal law requires that directory information be verified every 90 days even if it hasn't changed. Additionally, members must be notified of any address change before an appointment. For changes like PCP termination, provider affiliation and reassignment to a new PCP, CMS requires that we send a written notice or call the member at least 30 calendar days before the effective date of the change. So, if you move to a new location, contract with a new medical group or retire, you must give us proper written notice so we can make the necessary changes and have time to notify affected members. This will help us ensure payment is not disrupted. It also prevents you from having to go through the recredentialing process.

In addition, Molina has implemented a new process change for initial credentialing submissions. The submission will be denied if an email address is not included on the provider information forms. Before submitting, please ensure an email address is provided on the initial credentialing request.

### **Helpful Resources**

Molina provider websites:

- [Marketplace](#)
- [Medicaid](#)
- [Medicare](#)

Please email your general inquiries to [MHNM.ProviderServices@MolinaHealthcare.com](mailto:MHNM.ProviderServices@MolinaHealthcare.com), and it will be routed to the appropriate individual. Thank you for your commitment to serving Molina Healthcare of New Mexico members and the community.