

PROVIDER NEWSLETTER

A newsletter for Molina Healthcare Providers

Third Quarter 2021



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Molina Healthcare acquires Magellan Complete Care – New Specialty Plan Effective September 1, 2021

Effective January 1, 2021, Molina Healthcare of Florida (MFL) acquired Magellan Complete Care of Florida (MCC), a Medicaid specialty plan specializing in the care of those with Serious Mental Illness (SMI). *Effective September 1, 2021*, MCC of Florida's SMI members will transition to Molina as Specialty Plan members for continued management of their benefits.

For dates of service **prior to September 1, 2021**, MCC providers will continue to request authorizations and submit claims using the current MCC of FL processes. In addition, all authorizations and referrals made prior to September 1, 2021 will continue to be valid through the authorization period.

Molina will coordinate with Magellan Complete Care to transfer all pertinent authorizations required for continuity of care and claims payment to the Molina system. However, for new authorization requests for services rendered on 9/1/21 and forward, providers must follow Molina's Prior Authorization process. This includes an update to an existing open authorization for upcoming services 9/1/21 and forward.

For date of service 9/1/21 and forward, claims must be submitted to Molina Healthcare. Claims may be submitted in one of the following formats:

• Electronic claims submission (EDI) – Change Healthcare (formerly Emdeon)

- o Molina Payer ID: 51062
- Provider Portal https://provider.molinahealthcare.com/Provider/Login
- Availity Portal <u>www.availity.com/molinahealthcare</u>
- Paper All claims must be sent to:

Molina Healthcare of Florida PO Box 22812 Long Beach, CA 90801

Molina Healthcare and PsychHub Partner for Mental Health Resources

Because good behavioral health is vitally important for everyone, Molina Healthcare is committed to doing all we can to support mental wellbeing for providers and members. By joining PsychHub's coalition partnership, Molina can now offer providers and members access to the Mental Wellbeing Resource Hub. This free library of resources helps address mental health issues during the COVID-19 pandemic and beyond. Members and providers can search for resources by keyword, topic, and audience.

To access the Mental Wellbeing Resources Hub, go to: https://psychhub.com/initiatives/resource-hub/



Mental Health Ally Certification (MHAC) Program:

Through partnership with PsychHub, in-network primary care and specialty providers are offered free continuing education credits, Mental Health Ally Certifications, and additional learning opportunities. The MHAC Library offers micro-certification tracks focused on critical topics like mental health competency foundations, substance use awareness, safety planning, diversity, and motivational interviewing basics. The MHAC is made up of eight one-hour, self-paced modules that can be taken in any order, as well as supplemental videos, podcasts, and downloadable PDF file. This certification program is available to all providers/provider offices and recommended for those interested in strengthening their knowledge and competency of behavioral health issues and concepts like primary care, office management and nursing.

To access learning hub resources, go to https://lms.psychhub.com/ and create an account by clicking 'Log In.' Click the Dashboard button on the navigation toolbar and select 'Join Cohort with Code.' Use the following provider Cohort Code: **sGDcuXXmQXZEGsu**

Please reach out to your local Provider Services Representative at: MFLProviderNetworkManagement@Molinahealthcare.com for any additional questions!

New Provider Online Directory

Molina Healthcare is getting a new Provider Online Directory. Check out the new tool this summer!

Molina is committed to improving your online experience. The new Provider Online Directory enhances search functionality so information is available quickly and easily.

Key benefits include:

- User-friendly and intuitive navigation
- Provider profile cards for quick access to information
- Browsing by category, search bar and common searches
- Expanded search options and filtering for narrowing results
- Provider information you can save to use later

As always, please make sure your provider information is correct. This allows Molina to accurately generate provider directories, process claims and communicate with our network. Providers must notify Molina in writing at least 30 days in advance of changes. Changes should be submitted on the Provider Information Form or at www.MolinaHealthcare.com under the Frequently Used Forms section.

Naloxone Saves Lives!

On July 23, 2020, the U.S. Food and Drug Administration (FDA) issued a drug safety communication with updated recommendations regarding the use and availability of naloxone for patients at high risk of opiate overdose. The FDA recommends that health care professionals consider prescribing naloxone to patients being prescribed opioid pain medicine who are at increased risk of opioid overdose. The recommendations suggest that health care professionals should discuss the availability of naloxone both when beginning and renewing treatment.



Furthermore, healthcare professionals should consider prescribing naloxone for patients at increased risk of opioid overdose, even if a patient is not receiving a prescription for an opioid pain reliever or medicine to treat opioid use disorder (OUD)

Patients considered HIGH RISK include those prescribed opioids who:

- Are receiving a dosage of 50 morphine milligram equivalents (MME) per day or greater
- Are receiving opioids with concurrent benzodiazepine (regardless of opioid dose)
- Have a history of overdose

Have a history of substance use disorder

If your patients are considered HIGH RISK for opiate overdose, please consider submitting a prescription to the member's pharmacy for one of the following preferred naloxone products:

- NALOXONE SOLUTION PREFILLED SYRINGE FOR INJECTION 2MG/2ML
- NARCAN NASAL SPRAY 4MG

If your patient would like to purchase naloxone, they can simply ask a pharmacy team member at any CVS Pharmacy location.

Once a member gets naloxone, they should put it in an easily accessible place, tell their family and friends where it is, and learn how to use it.

Medication Assisted Treatment

While MAT drugs are already covered by Florida Medicaid, **effective September 15, 2021**, Molina will ensure the following edits are implemented to facilitate access and remove barriers (i.e., paper prior authorization) in obtaining MAT drugs:

- Automatic approval that allows MAT therapy if a Florida Medicaid recipient has a diagnosis of opioid use disorder in the Florida Medicaid pharmacy database.
- Molina call center capability of entering approval override via phone request if a prescriber calls and confirms their patient has an opioid use disorder diagnosis.

The Florida Medicaid fee-for-service delivery system has already implemented the above edits for recipients who are sixteen (16) years of age and older with an opioid use disorder diagnosis.

This MAT edit allows recipients to receive the oral preferred buprenorphine containing medications:

- Buprenorphine sublingual tablets
- Buprenorphine/naloxone tablets
- Suboxone film (buprenorphine/naloxone)
- Zubsolv sublingual tablets (buprenorphine/naloxone)

Is Your Authorization Request Urgent?



Molina renders decisions on prior authorization requests as quickly as a member's health requires. In accordance with CMS and state guidelines, providers may submit expedited or urgent requests when standard timelines could seriously jeopardize a member's life or health.

When submitting prior authorization requests, keep the following items in mind:

- An urgent/expedited service request designation should be used only when "applying
 the standard time for making a determination could seriously jeopardize the life or
 health of the enrollee or the enrollee's ability to regain maximum function." When
 submitting requests that don't fulfill this definition, please mark them elective/routine on
 the Molina Prior Authorization Request Form.
- By requesting an expedited/urgent authorization, providers are asking Molina to make a decision within mandated timeframes. Because these timeframes are measured in hours rather than days, the provider or provider's office staff must be available to answer any potential questions about the request in a timely manner.
- Submit all necessary information with the request. Failure to do so will require Molina
 to ask for additional information, which could delay the decision. If Molina requests
 more information, we urge providers to respond immediately to allow Molina to render
 a decision within the mandated expedited timeframe.
- Molina will provide member prior authorization notification and decisions in accordance with CMS and/or any state guidelines which may include verbal and written decisions.

Cultural Competency Resources for Providers and Office Staff



Molina Healthcare is committed to being a culturally competent organization. We support and adhere to the National Standards for Culturally and Linguistically Appropriate

Services (CLAS) in Health and Health Care as established by the Office of Minority Health. Additionally, we work to achieve NCQA's Multicultural Health Care Distinction in the markets we serve. Cultural and linguistic competency is the ability to provide respectful and responsive care to members with diverse values, beliefs and behaviors, including

tailoring health care delivery to meet members' social, cultural and linguistic needs.

Resources for Your Office and Staff

Molina's Building Culturally Competent Health Care: Training for Providers and Staff Cultural Competency can positively impact a patient's health care experience and outcomes. As part of Molina's ongoing commitment to cultural competency, a series of five short Cultural Competency Training videos are available to providers and office staff on the Culturally and Linguistically Appropriate Resources/Disability Resources link under the Health Resources tab at www.MolinaHealthcare.com.

Training topics:

- Video 1: Introduction to Cultural Competency
 - The Need for Cultural Competency
 - How Culture Impacts Health Care
 - o Implicit Bias

- Federal Requirements Related to Cultural Competency (Affordable Care Act, Americans with Disabilities Act)
- Video 2: Health Disparities
 - Examples of Racial Health Disparities and Health Disparities Among Persons with Disabilities
 - Health Equity
 - Social Determinants of Health
- Video 3: Specific Population Focus Seniors and Persons with Disabilities
 - Social Model of Disability and Accepted Protocol and Language of the Independent Living/Disability Rights Movement
- Video 4: Specific Population Focus LGBTQ and Immigrants / Refugees
 - Health Disparities Among LGBTQ Population
 - Clear Communication Guidelines for Healthcare Providers Interacting with LGBTQ Patients
 - Disparities Among Immigrant and Refugee Communities
 - Clear Communication Guidelines for Healthcare Providers Interacting with Immigrant and Refugee Patients
- Video 5: Becoming Culturally Competent
 - Perspective-taking
 - o Clear Communication Guidelines
 - Tips for Effective Listening
 - Assisting Patients whose Preferred Language is Not English
 - o Tips for Working with an Interpreter
 - Teach Back Method
 - Molina's Language Access Services

Training videos range from five to ten minutes each. Viewers may participate in all five training modules, or just one, depending on topics of interest. Please contact your Provider Services Representative at: MFLProviderNetworkManagement@Molinahealthcare.com if you have any questions.

Americans with Disabilities Act (ADA) Resources: Provider Education Series:

A series of provider education materials related to disabilities is now available to providers and office staff on Molina's website. Please visit Molina's Culturally and Linguistically Appropriate Resources/Disability Resources link under the Health Resources tab at www.MolinaHealthcare.com to view the materials.

Molina Healthcare's Provider Education Series – Disability Resources consists of the following educational materials:

- American with Disabilities Act (ADA)
 - o Introduction to the ADA and questions and answers for healthcare providers (i.e. which healthcare providers are covered under the ADA; how does one remove communication barriers that are structural in nature; is there money available to assist with ADA compliance costs?).
- Members who are Blind or have Low Vision
 - How to get information in alternate formats such as Braille, large font, audio, or other formats.

- Service Animals
 - Examples of tasks performed by a service animal; tasks that do not meet the definition of service animal; inquiries you can make regarding service animals; and exclusions, charges, or other specific rules.
- Tips for Communicating with People with Disabilities & Seniors
 - Communicating with Individuals who Are Blind or Visually Impaired; Deaf or Hard of Hearing; Communicating with Individuals with Mobility Impairments; Speech Impairments; and Communicating with Seniors.

Please contact your Provider Services Representative at: MFLProviderNetworkManagement@Molinahealthcare.com if you have any questions.

Molina's Language Access Services

Accurate communication strengthens mutual understanding of illness and treatment, increases patient satisfaction, and improves the quality of health care. Providing language access services is a legal requirement for health care systems that receive federal funds; a member cannot be refused services due to language barriers. When needed, Molina provides the following services directly to members at no cost:

- Written material in other formats (i.e. large print, audio, accessible electronic formats, Braille)
- Written material translated into languages other than English
- Oral and Sign Language Interpreter Services
- Relay Service (711)
- 24-Hour Nurse Advice Line
- Bilingual/Bicultural Staff

In many cases, Molina will also cover the cost for a language or sign language interpreter for our members' medical appointments. Molina members and providers are instructed to call the Member and Provider Contact Center at (866) 472-4585 to schedule interpreter services or to connect to a telephonic interpreter.

Also, Molina's materials are always written simply in plain language and at required reading levels. For additional information on Molina's language access services or cultural competency resources, contact Provider Services or visit www.MolinaHealthcare.com.

Submitting Electronic Data Interchange (EDI) Claims

Submitting claims electronically through methods like clearinghouses or though Molina's Provider Portal offer many advantages. These include:

- Improved HIPAA compliance
- Reduced operational costs associated with paper claims (printing, postage, etc.)
- Increased accuracy of data and efficient information delivery
- Fewer claim delays since errors can be corrected and resubmitted electronically!
- Claims reach Molina faster!

How to submit EDI claims:

A clearinghouse is the easiest way to submit EDI claims to Molina Healthcare. You may submit EDI transactions through Molina's contracted clearinghouse, Emdeon, or use a clearinghouse of your choice. If you do not have a clearinghouse, Molina offers additional

options for electronic claims submissions. Log onto Molina's Provider Portal at <u>provider.Molinahealthcare.com</u> for more information.

Frequently Asked Questions:

- Can I submit COB claims electronically?
 - Yes, Molina and our connected clearinghouses fully support electronic COB.
- Do I need to submit a certain volume of claims to send EDI?
 - No, any number of claims via EDI saves both time and money.
- Which clearinghouses are currently available to submit EDI claims to Molina?
 - Molina Healthcare uses Emdeon as our channel partner for EDI claims. You
 may use the clearinghouse of your choice. Emdeon partners with hundreds of
 other clearinghouses.
- What claims transactions are currently accepted for EDI transmission?
 - 837P (Professional claims) and 837I (Institutional claims).
 - 270/271 (Health Care Eligibility Benefit Inquiry and Response)
 - 278 (Health Care Services Review Request for Review and Response)
 - 276/277 (Health Care Claim Status Request and Response)
 - 835 (Health Care Claim Payment/Advice)
- What is Molina's Payer ID?
 - Molina Healthcare of Florida's Payer ID is 51062
- What if I still have questions?
 - o More information is available at www.Molinahealthcare.com under the EDI tab.

Electronic Fund Transfer (EFT)

Molina has partnered with our payment vendor, ProviderNet, for Electronic Funds Transfer and Electronic Remittance Advice. Access to the ProviderNet portal is FREE to providers and we encourage you to register after receiving your first check from Molina.

New ProviderNet User Registration:

- 1. Go to https://providernet.adminisource.com
- 2. Click "Register"
- 3. Accept the Terms
- 4. Verify your information
 - a. Select Molina Healthcare from Payers list
 - b. Enter your primary NPI
 - c. Enter your primary Tax ID
 - Enter recent claim and/or check number associated with this Tax ID and Molina Healthcare
- 5. Enter your User Account Information
 - a. Use your email address as user name
 - Strong passwords are enforced (8 or more characters consisting of letters/numbers)
- 6. Verify: contact information; bank account information; payment address
 - Note: Any changes to payment address may interrupt the EFT process.
 - Add any additional payment addresses, accounts, and Tax IDs once you have logged in.

If you are associated with a Clearinghouse:

- 1. Go to "Connectivity" and click the "Clearinghouses" tab
- 2. Select the Tax ID for which this clearinghouse applies
- 3. Select a Clearinghouse (if applicable, enter your Trading Partner ID)
- Select the File Types you would like to send to this clearinghouse and click "Save"

If you are a registered ProviderNet user:

- Log in to ProviderNet and click "Provider Info"
- 2. Click "Add Payer" and select Molina Healthcare from the Payers list
- Enter recent check number associated with your primary Tax ID and Molina Healthcare

BENEFITS

- Administrative rights to sign-up/manage your own EFT Account
 - Ability to associate new providers within your organization to receive EFT/835s
- View/print/save PDF versions of your Explanation of Payment (EOP)
- Historical EOP search by various methods (i.e. Claim Number, Member Name)
- Ability to route files to your ftp and/or associated Clearinghouse

If a provider has questions regarding the actual registration process, they can contact ProviderNet at: (877) 389-1160 or email: wco.provider.registration@changehealthcare.com.

Note: Providers, please ensure you are registered for EFT for all participating Molina Healthcare Lines of Business.