

Update: ODM Testing with MCPs to Prepare for PMF

Information for all Community Behavioral Health Center providers

The Ohio Department of Medicaid (ODM) and the Ohio Department of Mental Health and Addiction Services (OhioMHAS) has discontinued the Universal Roster and moved forward with using one system, Medicaid Information Technology System (MITS), as the primary source of provider enrollment and affiliation information.

For additional information visit the ODM Behavioral Health (BH) website and under “MITS Bits & Newsletters” select “[Universal Roster Discontinuation and Move to Provider Master File Only, Effective Immediately.](#)”

It is imperative that Community Behavioral Health Center (CBHC) providers update MITS with accurate information so that it is shared with all Managed Care Plans (MCPs) via the daily Provider Master File (PMF). There are several steps CBHC providers should take in order to achieve the single system goal, including:

- View the ODM training presentation and webinar recordings for step-by-step instructions on how rendering practitioners can enroll in MITS, become affiliated with their employing agency and make changes to licenses, provider specialties and names.
- Review the online CBHC Practitioner Enrollment File for correct provider type, specialty and affiliation, and make any updates in MITS.

Update for providers with Dual Specialties: Providers with dual specialties should enroll in MITS with the higher scope or license as their primary specialty. The provider can then add the dual specialty using the 699 specialty to indicate a second enrollment.

Prior to discontinuing the Universal Roster, ODM performed testing with each of the MCPs to ensure each plan was prepared to accept the PMF.

Active Medicaid ID Number

Information for all network providers

In order to comply with federal rule 42 CFR 438.602, providers are required to have enrolled or applied for enrollment with ODM at both the group practice and individual levels by Jan. 1, 2019. Providers without a Medicaid ID number will need to submit an application to ODM. Enrollment is available through the MITS portal or providers can start the process at <https://medicaid.ohio.gov>. Upon future notice by ODM, Molina will begin denying claims for providers that are not registered and known to the state.

ODM DEA DATA 2000 Waiver Trainings

Information for all network providers

To help address the opioid crisis in the State of Ohio, OhioMHAS is offering free Drug Enforcement Administration (DEA) Drug Addiction Treatment Act (DATA) 2000 waiver trainings through April 2020.

This is a free 1.5-day training open to all physicians, nurse practitioners and physician assistants who hold an Ohio license and a current DEA number. Physicians who attend the 1.5-day training, obtain their waiver and fulfill reimbursement criteria will receive \$1,300. Nurse practitioners and physician assistants who attend the 1.5-day training, complete an additional online

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Questions?

Provider Services – (855) 322-4079
8 a.m. to 5 p.m., Monday to Friday
(MyCare Ohio available until 6 p.m.)

Email us at BHProviderServices@MolinaHealthcare.com

Visit our website at MolinaHealthcare.com/OhioProviders

Visit the ODM BH website at <https://bh.medicicaid.ohio.gov/manuals>

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Behavioral Health Provider Manual

On Nov. 27, 2019, the [Behavioral Health \(BH\) Provider Manual](#) was updated by ODM and OhioMHAS. Visit the ODM BH website to view the updated manual.

Provider Training Sessions

Information for all network providers

Monthly It Matters to Molina Provider Forum Topic: General Question and Answer (Q&A)

Session: Molina is hosting an open forum. In addition to general questions, the Q&A session can be utilized for billing and claims questions.

- Tues., March 24, 1 to 2 p.m.
meeting number 807 511 626

Monthly Provider Portal Training:

- Wed., March 25, 9 to 10 a.m.
meeting number 803 952 702
- Fri., April 24, 1 to 2 p.m. meeting
number 804 780 866

component, obtain their waiver and fulfill reimbursement criteria will receive \$750. All attendees will also receive free Continuing Medical Education.

To register for available training dates visit www.asam.org and under "Education" select "Live & Online CME" then "[Ohio DEA DATA 2000 One-and-a-Half-Day Waiver Trainings](#)" and "[Option 1: Free One-and-a-Half-Day Live Trainings](#)."

Opioid Treatment Program Now a Medicare Part B Benefit

Information for MyCare Ohio and Medicare network providers

As of Jan. 1, 2020, Opioid Use Disorder (OUD) treatment services provided by Opioid Treatment Programs (OTPs) are covered as a Medicare Part B benefit (Medical Insurance). Centers for Medicare & Medicaid Services (CMS) and Molina Medicare will pay registered OTPs through bundled payments for OUD treatment. For Molina MyCare Ohio members who get OUD services through Medicaid benefits, Molina's Medicare portion of member benefits will be the primary payer for OUD services when rendered by CMS OTP registered providers. In order to bill and receive payment for Medicare covered opioid use disorder treatment services at an OTP facility, the OTP provider must be:

1. Certified and accredited by Substance Abuse and Mental Health Services Administration (SAMHSA) and,
2. Enrolled in the Medicare program as a Medicare OTP provider

Molina encourages all potentially eligible providers to learn more about this program and consider their participation options:

- CMS Opioid Treatment Programs (OTP) <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/Opioid-Treatment-Program/index>
- CMS OTP Enrollment Information <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/Opioid-Treatment-Program/Enrollment>

Service Codes Billable to Medicare and Third Party Liability

Information for all network providers

Visit the ODM BH website and select "[Final Services Billable to Medicare and Commercial Insurance](#)" under "Billing and IT Resources" to view a list of services billable to Medicare and Commercial Insurance. This document also provides a list of codes that can bypass Medicare/Third Party Liability (TPL) since they are only covered in the Medicaid benefit.

Behavioral Health Timely Claim Submission

Information for CBHC providers

On July 1, 2019, CBHC providers passed the initial 365 days of claims being submitted to the MCP. Timely filing requirements may impact claims going forward. For additional information, please visit the ODM BH website and under "Provider," select "Overview" and "MITS Bits" and read "[Reminder About Timely Claim Submission](#)."

Behavioral Health FAQ

Information for all network providers

Our [Behavioral Health Frequently Asked Questions \(FAQ\)](#) is available to help answer questions about the Provider Portal, contracting, claims, prior authorizations and more! Look for it on our website under the "Health Resources" tab.

Monthly Claim Submission Training:

- Tues., March 17, 3 to 4 p.m. meeting number 807 497 168
- Mon., April 13, 10 to 11 a.m. meeting number 800 719 190

Quarterly Provider Orientation:

- Tues., May 26, 2 to 3 p.m. meeting number 802 334 861

To join WebEx, call (866) 499-0396 and follow the instructions. To view sessions, log into WebEx.com, click on "Join" and follow the instructions. Meetings do not require a password.

Behavioral Health Recoupment Process

Information for CBHC providers

Outstanding AR Advances

Recoupment Process: In Feb. 2019, Molina made advance payments to CBHC, provider types 84 and 95, who were identified as having outstanding AR for denied claims submitted with July 2018 dates of service. On Nov. 1, 2019 Molina began first dollar claim recoupment of these advances until funds are recovered. Visit the ODM BH website for additional information, under "MITS BITS & Newsletters" select 2019 and "[Medicaid Advance Payment Agreements and the Initiation of Repayment](#)."

Contingency Funds Recoupment

Process: In June 2018 advance payments were made available through the ODM and MCPs to CBHCs (provider types 84 and 95) that needed assistance to transition to managed care billing during the BH Redesign and Integration. Visit the ODM BH website for additional information, under "MITS BITS & Newsletters" select 2018 and "[Contingency Plan for Behavioral Health Providers – Medicaid Managed Care Advance Payment Agreements](#)."

ODM has been working with MCPs regarding the BH Redesign progress and claims payments, and with providers to develop individualized repayment plans. Recoupment will begin when agreement is reached with ODM and a date to begin recoupment is established.