PROVIDER BULLETIN

A bulletin for the Molina Healthcare of Ohio provider networks

Updated Provider Information Update Form
Information for all network providers

Molina Healthcare has made several changes to the Provider Information Update Form (PIF), including:
- no longer requiring signatures in Attachments A, B and D
- the addition of the Americans with Disabilities Act (ADA) Attestation Form
- separate sections for individual or group service location changes and additions

As a reminder, this form is used to notify Molina of demographic or informational changes. The form is available on our website under the "Forms" tab. Send the completed form to one of the following:
- Email: MHOProviderUpdates@MolinaHealthcare.com
- Fax: (866) 713-1893
- Mail: Molina Healthcare of Ohio
  ATTN: PIM
  P.O. Box 349020
  Columbus, Ohio 43234-9904

New Post-Acute Provider Intake Form
Information for all Post-Acute Care providers

The new Molina Post-Acute Care (PAC) Provider Intake Form is coming soon to our website! The PAC form should be used for all post-acute admission and continued stay requests. It can help you receive a faster response from Molina by increasing our efficiency in processing requests by having all required information available on one form.

Look for the PAC form in the "Forms" tab, under "Other Forms and Resources." For questions contact us at (855) 322-4079.

Remind Patients about Healthchek
Information for PCPs in the Medicaid and MyCare Ohio networks

Remind your patients, or their parents/guardians, when it's time to get important Healthchek Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services. These services are covered by Molina Healthcare at no cost to our members. Physicians and advanced practice nurses are eligible to provide Healthchek services.

For additional information visit the Ohio Department of Medicaid website at www.medicaid.ohio.gov, and under "For Ohioans," select "Programs," then "Young Adults," and "Healthchek/Early and Periodic Screening, Diagnostic and Treatment." Click on "More Information."

Tobacco Program: Cessation
Information for all network providers

The Ohio Department of Medicaid (ODM) has updated the Tobacco Fact Sheet and created a second Oral Health Tobacco Fact Sheet specific to oral health settings. The Fact Sheets are available on the Ohio Department of Health website at http://www.odh.ohio.gov, under "Our

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 OHProviderRelations@MolinaHealthcare.com

Visit our website at MolinaHealthcare.com/OhioProviders

Connect with Us
www.facebook.com/MolinaHealth
www.twitter.com/MolinaHealth

Join Our Email Distribution List
Get this bulletin via email. Sign up at MolinaHealthcare.com/ProviderEmail.

Did You Know?

Did you know Molina Medicaid members who are pregnant or have a newborn can get customized resources and tools through the Molina HealthInHand app?

The app's new Prenatal Care Card feature, available on iPhone to Medicaid members, offers personalized information about pregnancy and motherhood based on the member's estimated due date. This includes:
- Weekly health education during pregnancy
- To-do lists for prenatal and postpartum care

The Provider Bulletin is a monthly newsletter distributed to all network providers serving beneficiaries of Molina Healthcare of Ohio Medicaid, Medicare, MyCare Ohio and Health Insurance Marketplace health care plans.

Programs" select "Tobacco Use Cessation and Prevention Program" under the "A-Z Listing."

Nursing Facility Care Coordination Visit Guide
Information for Nursing Facility providers in the MyCare Ohio network

The "Nursing Facility Care Coordination Visit Guide" is available on the MyCare Ohio website under the "Manual" tab. This guide is intended as a tool to help Nursing Facility staff understand the types of visits Molina staff make to members and the purpose of each visit including compliance related, transition of care and acuity visits.

Molina Announces Partnership with Cleveland Cavaliers
Information for Medicaid providers in the Northeast region

Molina has teamed up with the Cleveland Cavaliers! This exciting new partnership will include:
• An incentive program for members in the Northeast region
• Health and wellness member events with Cavaliers presence
• A Cavaliers basketball camp for adolescent members
• Community basketball and health clinics across the state

Learn more at www.MolinaHealthcare.com/HoopsforHealth!

Rendering Provider NPI
Information for all network providers

On July 1, 2018, ODM started to require rendering practitioner National Provider Identifiers (NPI) on claims for:
• Behavioral Health (BH) dependently licensed and paraprofessionals
• Federally Qualified Health Center (FQHC)
• Rural Health Clinic (RHC)
• Occupational Health Facility (OHF)
• Accredited Health Care Clinic (AHCC) clinics
• Freestanding birth center staff

As a reminder, effective Jan. 1, 2018, ODM began requiring rendering practitioner NPI on claims for Independently licensed BH professionals.

Claims are required to include the NPI(s) of the professionals referenced above to be on the claim. In the event this information is not included, claims will be denied. Home health and waiver providers are not required to have an NPI on the claim and will continue to submit claims with the current process.

If Community Behavioral Health providers are concerned about their ability to complete the Medicaid registration process prior to claims submission, please use the Molina BH Provider Form located on our website under the "Forms" tab and send the completed roster to our contracting team at MHOProviderUpdates@MolinaHealthcare.com to ensure that we have your practitioners loaded in our claims system. All other providers should use the Molina Provider Information Form located on our website under the "Forms" tab.

Behavioral Health Carve-In for Primary Care Providers
Information for all primary care providers in the Medicaid network

As of July 1, 2018, Behavioral Health (BH) services accessed through community behavioral health centers and Substance Use Disorder (SUD) treatment agencies by Medicaid consumers enrolled in Managed Care

• Tracking tools to monitor pregnancy weight gain, baby's kicks and newborn feeding habits
• Pregnancy Rewards information

Notice of Changes to Prior Authorization (PA) Requirements

The Oct. 1, 2018, PA Code List is located on our website under the "Forms" tab. Molina updates the PA Code list quarterly. Always use the list available on our website, do not print the list.

Provider Training Sessions
Information for all network providers

Molina is offering monthly training sessions!

Provider Portal Training:
• Thurs., Oct. 25, 2 to 3 p.m. meeting number 803 201 694
• Wed., Nov. 21, 2 to 3 p.m. meeting number 807 808 195

Claim Submission Training:
• Tues., Oct. 23, 1 to 2 p.m. meeting number 805 700 653
• Tues., Nov. 27, 1 to 2 p.m. meeting number 807 743 754

Click "Join" at WebEx.com or call (855) 655-4629 and follow the instructions. Meetings do not require a password.

Updated In-Office Laboratory Tests
Information for all network providers

On Sept.1, 2018, the following test was approved for payment in the physician office setting:
• Glucose testing, Clinical Laboratory Improvement Amendments (CLIA) waived methodology: CPT Code 82962

Look for our updated In-Office Laboratory Testing list under the "Forms" tab on our website.

Corrected Claims
Information for all network providers

Corrected claims must be received by Molina by the filing limitation stated in the provider contract.

Submission of Corrected Claims:
Corrected claims must be submitted with the Molina claim ID number from the original claim being corrected, and with the appropriate corrected claim indicator based on claim form type.

Plans need to be coordinated and billed through Medicaid Managed Health Plans instead of Fee-for-Service Medicaid. Members currently receiving treatment from non-par providers will be able to continue those services through Dec. 31, 2018 to give the providers enough time to contract. For additional information visit the Ohio Department of Medicaid (ODM) website at http://bh.medicaid.ohio.gov or check out our July Behavioral Health Provider Bulletin under the "Communications" tab on our website. For questions call (855) 322-4079.

ODM Behavioral Health (BH) Redesign

Information for all Community Behavioral Health providers

Ohio's BH Redesign went into effect on Jan. 1, 2018, impacting community behavioral health providers. As of July 1, 2018, claims for these services need to be submitted to the Medicaid Managed Care Plans for members enrolled in managed care. To prevent a delay in service, ensure you have information about claims billing with Molina. For questions, contact BHProviderServices@MolinaHealth care.com. Visit http://bh.medicaid.ohio.gov/manuals for updates and resources.

Question and Answer Sessions:
- Tues., Oct. 9, 2 to 3 p.m. meeting number 802 396 090
- Fri., Nov. 16, 9 to 10 a.m. meeting number 806 159 746

Provider Portal Claims Training sessions:
- Wed., Oct. 24, 11 a.m. to 12 p.m. meeting number 805 565 414
- Tues., Nov. 6, 2:30 to 3:30 p.m. meeting number 808 911 776

Click "Join" at WebEx.com or call (855) 655-4629 and follow the instructions. Meetings do not require a password.

Sterilization, Hysterectomy and Abortion Consent Forms

Information for providers in all networks

On Sept. 1, 2018, Molina updated the policy for submitting a Signed Consent Form (SCF) for Sterilization, Hysterectomy and Abortion. The forms are available on our website under the "Forms" tab and must be submitted with the claim when these services are billed:
- **Consent to Sterilization Form:** Required except in unique circumstances of an unscheduled clinical event that requires sterilization because of a life-threatening emergency
  - **Codes that require an operative report and a SCF if sterilization occurred**
    - 58661, 58700, 58720, 58940
- **ODM Abortion Certification Form:** Not covered, except when medically necessary to save the life of the woman or in instances of reported rape or incest
- **Consent to Hysterectomy Form:** Required

If the form is missing or incomplete, the claim will be denied. The Claim Reconsideration Request Form must be used when submitting a claim reconsideration and include the complete SCF. Additional information is available in the Molina Provider Manual on our website, under the "manual" tab.

Based on the above amended policy, the below email address for the submission of operative reports was closed on Sept. 1, 2018.
- MHOOB@MolinaHealthcare.Com

Corrected claims received without this information will not be accepted and will receive the following denial information on the Molina remittance:
- Category Code A3
- Status Code 748
- Entity Code 41
- Error Description "Missing incomplete/invalid payer claim control number"

Submission of Final Claims after Interim Billing: Inpatient facility claims billed on a UB claim form, bill type 0117 are no longer accepted as the final original claim. Facilities which have submitted interim claims should submit a final claim upon patient discharge using the 0111 bill type.

Please Remember: Corrected claims are used to change or add information to a previously submitted claim. Corrected claims should be sent through the original claim submission process with a corrected claim indicator and Molina claim ID number as outlined in the Corrected Claim Billing Guide, located on our website. Corrected claims are not adjustments. Find additional information in our Provider Manual under the "Claims and Encounter Data" under "Claim Corrections."

Outpatient Therapy Caps
Information for providers in the Medicare network

In accordance with the Bipartisan Budget Act (BBA) of 2018, Medicare claims are no longer subject to the therapy caps:
- one cap for occupational therapy services
- one cap for physical therapy and speech-language pathology combined

For Molina Medicare Plans, claims for therapy services above a certain amount of incurred expenses, which is the same amount as the previous therapy caps ($2,010 in 2018), continue to require prior authorization.

Fighting Fraud, Waste & Abuse
Do you have suspicions of member or provider fraud? The Molina Healthcare AlertLine is available 24 hours a day, 7 days a week, even on holidays at (866) 606-3889. Reports are confidential, but you may choose to report anonymously.