

PROVIDER NEWSLETTER

A newsletter for Molina Healthcare of Arizona Providers

Fourth Quarter 2022



In this Issue

Get Automatic Approval for Advanced Imaging Prior Authorization Requests	1
New PsychHub Course Available, Offers CEUs	2
Model of Care Training is Underway	2
Molina Healthcare’s Special Investigation Unit Partnering with You to Prevent Fraud, Waste and Abuse?	3
Biosimilars- What to Watch.....	3
Balance Billing	4
Early Periodic Screening, Diagnostic and Treatment (EPSDT) Program	5
2022-2023 Flu Season	5
Clinical Policy Updates Highlights from Third Quarter 2022	6
Well-Woman Preventative Care Services Provider Requirements.....	7

Get Automatic Approval for Advanced Imaging Prior Authorization Requests

Molina Healthcare has partnered with MCG health to offer Cite AutoAuth self-service for advanced imaging prior authorization (PA) requests.

What is Cite AutoAuth and how does it work?

By attaching the relevant care guideline content to each PA request and sending it directly to Molina, healthcare providers receive an expedited, often immediate, response. Through a customized rules engine, Cite AutoAuth compares Molina’s specific criteria to the clinical information and attached guideline content to the procedure to determine potential for auto authorization.

Self-services available in the Cite AutoAuth tool include, but are not limited to: MRIs, CTs, PET scans. To see the full list of imaging codes that require PA, refer to the PA Code LookUp Tool at

MolinaHealthcare.com.

How to Access and Learning More

Cite AutoAuth can be accessed via the [Availity Essentials portal](#) in the Molina's Payer Spaces. It is available 24 hours per day/7 days per week.

This method of submission is strongly encouraged as your primary submission route, existing fax/phone/email processes will also be available.

Watch [MolinaHealthcare.com](#) for updates and additional information about Cite AutoAuth.

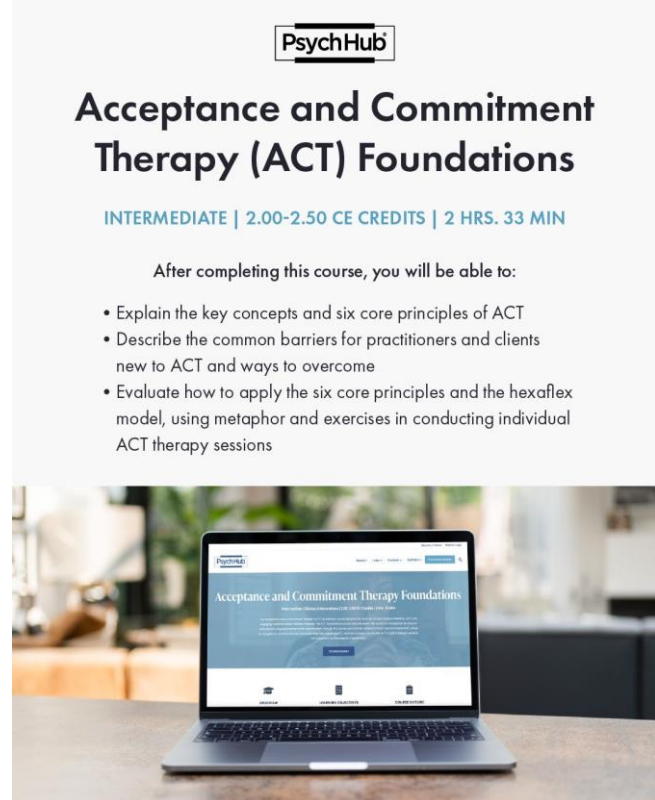
New PsychHub Course Available, Offers CEUs

Our PsychHub partners have recently launched their newest online course, Acceptance and Commitment Therapy (ACT) Foundations.

The ACT Foundation's course explores the construct of psychological flexibility.

Learn the action-oriented, empirically based approach to therapy that invites clients to process their feelings while empowering and educating [#mentalhealth](#) practitioners.

Ready to get started? Molina Healthcare network providers can access this and other courses that offer CEUs on the PsychHub platform by clicking this link:
<https://app.psychhub.com/signup/molina-mhp/>



The image shows a laptop displaying the PsychHub website. The page features the PsychHub logo at the top, followed by the course title 'Acceptance and Commitment Therapy (ACT) Foundations'. Below the title, it indicates the course level as 'INTERMEDIATE' and provides '2.00-2.50 CE CREDITS | 2 HRS. 33 MIN'. A list of learning objectives is presented, including explaining key concepts, describing barriers, and applying core principles. The background of the laptop screen shows a blurred office setting.

Model of Care Training is Underway

Molina Healthcare is actively reaching out to providers who are required to complete the 2022 Model of Care training. In accordance with Centers for Medicaid and Medicare Services (CMS) requirements, Molina PCPs and key high-volume specialists including Oncology, Cardiology and Gastroenterology must complete Molina's Model of Care training each year. This quick training will describe how Molina and providers work together to successfully deliver coordinated care and case management to members with both Medicare and Medicaid.

If not already completed, please take this training now, and return the Attestation Form to Molina no later than December 31, 2022. The training is available at: <https://www.molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/common/medicare/model-of-care-Provider-Training.PDF>.

If you have additional questions, please contact your local Molina Provider Services Representative at MCCAZ-PROVIDER@molinahealthcare.com.

Molina Healthcare's Special Investigation Unit Partnering with You to Prevent Fraud, Waste and Abuse

The National Healthcare Anti-Fraud Association estimates that least three percent of the nation's health care costs, amounting to tens of billions of dollars, is lost to fraud, waste, and abuse. That's money that would otherwise cover legitimate care and services for the neediest in our communities. To address the issue, federal and state governments have passed a number of laws to improve overall program integrity, including required audits of medical records against billing practices. Molina Healthcare, like others in our industry, must comply with these laws and proactively ensure that government funds are used appropriately. Molina's Special Investigation Unit (SIU) aims to safeguard Medicare and Medicaid, along with Marketplace funds.

You and the SIU

The SIU utilizes state-of-the-art data analytics to proactively review claims to identify statistical outliers within peer (specialty) groups and services/coding categories. Our system employs approximately 1,300 algorithms to identify billing outliers and patterns, over- and underutilization, and other aberrant billing behavior trends. The system pulls information from multiple public data sources and historical databases that are known to identify and track fraud, waste, and abuse. Our system allows us the ability to track provider compliance within correct coding, billing, and their provider contractual agreement.

As a result, providers may receive a notice from the SIU if they have been identified as having outliers that require additional review or by random selection. If your practice receives a notice from the SIU, please cooperate with the notice and any instructions, such as providing requested medical records and other supporting documentation. Should you have questions, please contact your Provider Services Representative.

"Molina Healthcare appreciates the partnership it has with providers in caring for the medical needs of our members," explains Scott Campbell, the Molina Associate Vice President who oversees the SIU operations. "Together, we share a responsibility to be prudent stewards of government funds. It's a responsibility that we all should take seriously because it plays an important role in protecting programs like Medicare and Medicaid from fraudulent activity."

Molina appreciates your support and understanding of the SIU's important work, and we hope to minimize any inconvenience the SIU audit might cause you and/or your practice.

To report potential fraud, waste, and abuse, contact the Molina AlertLine toll-free at (866) 606-3889 twenty-four hours per day, seven days per week. In addition, use the website to make a report at any time at: <https://MolinaHealthcare.Alertline.com>.

Biosimilars- What To Watch

Biological products are the fastest-growing class of therapeutic products in the United States. Similar to when a generic becomes available, biosimilar and interchangeable products can offer additional options with a potentially lower healthcare cost.

A biosimilar is a highly similar version of a brand name biological drug that meets strict controls for structural, pharmaceutical, and clinical consistency. A biosimilar manufacturer must demonstrate that there are no meaningful clinical differences (i.e., safety and efficacy) between the biosimilar and the

reference product. Clinical performance is demonstrated through human pharmacokinetic (exposure) and pharmacodynamic (response) studies, an assessment of clinical immunogenicity, and, if needed, additional clinical studies. Biosimilars are not considered true generics because unlike traditional drugs, biologics are not synthetically derived but are derived from organic sources, so there are differences between the reference brand biologic and its biosimilars.

Several bodies of experts have published statements in support for the use of biosimilars and integration into clinical practice guidelines, such as the Crohn's and Colitis Foundation, American College of Rheumatology, and the American Society of Clinical Oncology.

As costs for biological specialty drugs continue to rise, the growing biosimilar market will benefit providers and patients by broadening biological treatment options and expanding access to these medications at lower costs.

An anticipated launch of the first biosimilars for popular drugs such as Humira and Stelara are just around the corner in the first half of 2023. However, it is important to note that while the competition generated by these new launches can help lower healthcare costs—depending on pricing—biosimilars may not necessarily be the lowest cost option in all therapeutic categories. Other considerations that may affect the savings potential from a biosimilar launch include the reliability of supply, experience of the manufacturer, and patient or prescriber adoption.

Molina continues to be committed to continually reevaluating preferred strategies and applying innovative cost-controls to ensure patients receive safe, effective, and quality healthcare.

This commitment includes potentially creating a preference for biosimilars when value can be added without compromising member satisfaction and safety.

Food and Drug Administration. Biosimilar and Interchangeable Products. Retrieved from:

<https://www.fda.gov/drugs/therapeutic-biologics-applications-bla/biosimilars>

<https://www.nccn.org/docs/default-source/clinical/nccn-pharmacy-directors-forum-white-paper-operationalizing-the-safe-and-efficient-use-of-biosimilars.pdf>

<https://www.rheumatology.org/portals/0/files/biosimilars-position-statement.pdf>

https://www.crohnscolitisfoundation.org/sites/default/files/2019-06/biosimilars-statement-needs_0.pdf

Balance Billing



Balance billing Molina Healthcare members for covered services is prohibited other than the member's applicable copayment, coinsurance and deductible amounts. The provider is responsible for verifying eligibility and obtaining approval for those services that require prior authorization. Providers agree that under no circumstance shall a Molina member be liable to the provider for any sums owed that are the legal obligation of Molina to the provider. Examples of

balance billing include:

1. Holding members who are dually eligible for Medicaid and Medicare liable for Medicare Part A and B cost sharing

2. Requiring Molina members to pay the difference between the discounted and negotiated fees, and the provider's usual and customary fees; and
3. Charging Molina members fees for covered services beyond copayments, deductibles, or coinsurance

Early Periodic Screening, Diagnostic and Treatment (EPSDT) Program

The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental and specialty services.

Molina Healthcare is required to provide comprehensive services and furnish all appropriate and medically necessary services needed to correct and ameliorate health conditions, based on certain federal guidelines. EPSDT is made up of screening, diagnostic, and treatment services and all providers serving members eligible for EPSDT are required to:

- Inform all Medicaid-eligible individuals under age 21 that EPSDT services are available and of the need for age-appropriate immunizations;
- Provide or arrange for the provision of screening services for all children; and
- Arrange (directly or through referral) for corrective treatment as determined by child health screenings.

As a provider, it is your responsibility to adhere to and understand EPSDT guidelines and requirements to ensure access to the right care at the right time in the right setting.

Additional information and training regarding Molina's EPSDT program are available at <https://www.molinamarketplace.com/providers/az/medicaid/forms/fuf.aspx>.

2022-2023 Flu Season

The Advisory Committee on Immunization Practices (ACIP) continues to recommend annual influenza vaccinations for everyone who is at least six months of age and older and who does not have contraindications. It's especially important that certain people get vaccinated, either because they are at high risk of having serious flu-related complications or because they live with or care for people at high risk for developing flu-related complications. Additionally, flu vaccinations can reduce the prevalence of flu symptoms that might be similar to and confused with COVID-19.

A licensed, recommended, and age-appropriate vaccine should be used. Inactivated influenza vaccines (IIV4s), recombinant influenza vaccine (RIV4), and live attenuated influenza vaccine (LAIV4) are expected to be available for the 2022–23 season.

Important 2022-2023 Updates from the Advisory Committee on Immunization Practices:

1. The composition of the 2022–23 U.S. seasonal influenza vaccines includes updates to the influenza A(H3N2) and influenza B/Victoria components. For the 2022–23 season, U.S.-licensed influenza vaccines will contain hemagglutinin (HA) derived from an influenza A/Victoria/2570/2019 (H1N1)pdm09-like virus (for egg-based vaccines) or an influenza A/Wisconsin/588/2019 (H1N1)pdm09-like virus (for cell culture–based and recombinant vaccines); an influenza A/Darwin/9/2021 (H3N2)-like virus (for egg-based vaccines) or an influenza A/Darwin/6/2021 (H3N2)-like virus (for cell culture–based or recombinant vaccines);

- an influenza B/Austria/1359417/2021 (Victoria lineage)-like virus; and an influenza B/Phuket/3073/2013 (Yamagata lineage)-like virus.
2. The composition of the 2022–23 U.S. seasonal influenza vaccines includes updates to the influenza A(H3N2) and influenza B/Victoria components. For the 2022–23 season, U.S.-licensed influenza vaccines will contain hemagglutinin (HA) derived from an influenza A/Victoria/2570/2019 (H1N1)pdm09-like virus (for egg-based vaccines) or an influenza A/Wisconsin/588/2019 (H1N1)pdm09-like virus (for cell culture–based and recombinant vaccines); an influenza A/Darwin/9/2021 (H3N2)-like virus (for egg-based vaccines) or an influenza A/Darwin/6/2021 (H3N2)-like virus (for cell culture–based or recombinant vaccines); an influenza B/Austria/1359417/2021 (Victoria lineage)-like virus; and an influenza B/Phuket/3073/2013 (Yamagata lineage)-like virus.
 3. The composition of the 2022–23 U.S. seasonal influenza vaccines includes updates to the influenza A(H3N2) and influenza B/Victoria components. For the 2022–23 season, U.S.-licensed influenza vaccines will contain hemagglutinin (HA) derived from an influenza A/Victoria/2570/2019 (H1N1)pdm09-like virus (for egg-based vaccines) or an influenza A/Wisconsin/588/2019 (H1N1)pdm09-like virus (for cell culture–based and recombinant vaccines); an influenza A/Darwin/9/2021 (H3N2)-like virus (for egg-based vaccines) or an influenza A/Darwin/6/2021 (H3N2)-like virus (for cell culture–based or recombinant vaccines); an influenza B/Austria/1359417/2021 (Victoria lineage)-like virus; and an influenza B/Phuket/3073/2013 (Yamagata lineage)-like virus.

For a complete copy of the ACIP recommendations and updates or for information on the flu vaccine options for the 2022-2023 flu season, please visit the Centers for Disease Control and Prevention at <https://www.cdc.gov/mmwr/volumes/71/rr/rr7101a1.htm>.

Molina Healthcare will cover the following flu vaccines during the 2022 – 2023 flu season:

- Injectable Seasonal Influenza Vaccine (Quadrivalent) - Available from August-April or per state requirements
- Intranasal Seasonal Influenza Vaccine (FluMist) - Available from August-April or per state requirements
- Intradermal Influenza Vaccine Quadrivalent (Short Needle) and Flublok - Available from August-April or per state requirements
- Injectable Seasonal Influenza - Vaccine High-Dose - Available from August-April or per state requirements.

Clinical Policy Updates Highlights from Third Quarter 2022

Molina Clinical Policies (MCPs) are located at www.molinaclinicalpolicy.com. The policies are used by providers as well as medical directors and internal reviewers to make medical necessity determinations. MCPs are reviewed annually and approved bimonthly by the Molina Clinical Policy Committee (MCPC). The third quarter 2022 updates are noted below.

The following policies were revised:

- Epidural Steroid Injections for Back and Neck Pain (previously *Epidural Steroid Injections for Chronic Back Pain*)
- Radioembolization for Primary and Metastatic Tumors of the Liver
- Spinraza (nusinersen)

The following policies have been retired and are no longer available on the website:

- Abecma (idecabtagene vicleucel)
- Breyanzi (lisocabtagene maraleucel)
- Carvykti (ciltacabtagene autoleucel)
- Intensity Modulated Radiation Therapy (IMRT)
- Kymriah (tisagenlecleucel)
- Lutathera (lutetium Lu 177 dotatate)
- Proton Beam Radiation Therapy
- Proton Beam Therapy for Prostate Cancer
- Provenge (sipuleucel-T)
- Tecartus (brexucabtagene autoleucel)
- Yescarta (axicabtagene ciloleucel)

Well-Woman Preventative Care Services Provider Requirements

An annual well-woman preventive care visit is intended for the identification of risk factors for disease, identification of existing physical/behavioral health problems, and promotion of healthy lifestyle habits essential to reducing or preventing risk factors for various disease processes. As such, the well-woman preventive care visit is inclusive of a minimum of the following:

- a) A physical exam (Well Exam) that assesses overall health,
- b) Clinical Breast Exam,
- c) Pelvic exam (as necessary, according to current recommendations and best standards of practice),
- d) Review and administration of immunizations, screenings, and testing as appropriate for age and risk factors as specified in AMPM Chapter 300, [AHCCCS Medical Policy Manual \(AMPM\) \(azahcccs.gov\)](https://www.azahcccs.gov).
- e) Screening and counseling focused on maintaining a healthy lifestyle and minimizing health risks and addresses at a minimum the following:
 - i. Proper nutrition,
 - ii. Physical activity,
 - iii. Elevated BMI indicative of obesity,
 - iv. Tobacco/substance use, abuse, and/or dependency,
 - v. Depression screening, vi. Interpersonal and domestic violence screening, that includes counseling involving elicitation of information from women and adolescents about current/past violence and abuse, in a culturally sensitive and supportive manner to address current health concerns about safety and other current or future health problems,
 - vi. Sexually transmitted infections,
 - vii. Human Immunodeficiency Virus (HIV),
 - viii. Family Planning Services and Supplies as outlined in [AMPM Policy 420 \(azahcccs.gov\)](https://www.azahcccs.gov).
 - ix. Preconception Counseling that includes discussion regarding a healthy lifestyle before and between pregnancies that includes:
 - a) Reproductive history and sexual practices,
 - b) Healthy weight, including diet and nutrition, as well as the use of nutritional supplements and folic acid intake,

- c) Physical activity or exercise,
- d) Oral health care,
- e) Chronic disease management,
- f) Emotional wellness,
- g) Tobacco and substance use (caffeine, alcohol, marijuana, and other drugs), including prescription drug use, and
- h) Recommended intervals between pregnancies, and f. Initiation of necessary referrals when the need for further evaluation, diagnosis, and/or treatment is identified.