![Molina Healthcare logo]

# PROVIDER NEWSLETTER
### A newsletter for Molina Healthcare Provider Networks

## Fourth Quarter 2022

## "My Health Perks" Program is Live!

Molinas My Health Perks Platform and Wellness Incentive are live!

My Health Perks is Molinas member wellness platform featuring free programs and tools. Members can explore content on topics like good health, diet, and exercise. They can also learn how to manage conditions like high blood pressure, depression, diabetes and more.

To access the platform, point members log in to their My Molina portal and click on the My Wellness page.

Additionally, Molina Marketplace subscribers and dependents 18 years and older are eligible for a wellness incentive featured on the My Health Perks platform. The incentive program gives all eligible members the opportunity to earn a $50 gift card by completing both of the following activities:

1. Complete a preventive wellness examination with their Primary Care Provider; and,
2. Complete the designated Health Risk Assessment via the My Wellness tab on the My Molina portal.

*The Provider Newsletter is available to all network providers serving*
*Molina Healthcare Members.*

Members who complete both incentivized activities will be eligible to claim a $50 gift card on the platform.

## 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, and PET scans. To see the full list of imaging codes that require PA, refer to the PA Code Look-up 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 and in the Molina Provider Portal. 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 are also available.

Cite AutoAuth is currently available for Medicaid and Marketplace members. Medicare will be live soon!

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/



PsychHub

## Acceptance and Commitment Therapy (ACT) Foundations

INTERMEDIATE | 2.00-2.50 CE CREDITS | 2 HRS. 33 MIN

After completing this course, you will be able to:

- Explain the key concepts and six core principles of ACT
- Describe the common barriers for practitioners and clients new to ACT and ways to overcome
- Evaluate how to apply the six core principles and the hexaflex model, using metaphor and exercises in conducting individual ACT therapy sessions

## 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 Cardiology, Gastroenterology, and Neurology 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 15th, 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:

| Service County Area | Provider Services Representative | Contact Number | Email Address |
|---|---|---|---|
| San Diego/Imperial County | Carlos Liciaga | 858-614-1591 | Carlos.Liciaga@molinahealthcare.com |
| Los Angeles/Orange County | Clemente Arias | 562-517-1014 | Clemente.Arias@molinahealthcare.com |
| California Hospital Systems | Deletha Foster | 909-577-4351 | Deletha.Foster@molinahealthcare.com |
| Sacramento | Jennifer Rivera Carrasco | 562-542-2250 | Jennifer.RiveraCarrasco@molinahealthcare.com |
| San Bernardino | Luana McIver | 909-501-3314 | Luana.Mciver@molinahealthcare.com |

| Riverside County | Mary Hernandez | 562-542-1550 | Mary.Hernandez2@molinahealthcare.com |
|---|---|---|---|
| California Hospital Systems | Shelly Lilly | 858-614-1586 | Michelle.Lilly@molinahealthcare.com |
| Los Angeles/San Bernardino | Vanessa Lomeli | 909-577-4355 | Vanessa.Lomeli2@molinahealthcare.com |
| San Diego | Salvador Perez | 562-549-3825 | Salvador.Perez@molinahealthcare.com |
| Los Angeles | Maria Guimoye | 562-549-4390 | Maria.Guimoye@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 approximately three (3) percent of the nation's health care costs, amounting to tens of billions of dollars, are lost to fraud, waste, or abuse. This is money that would otherwise cover legitimate care and services for the most vulnerable in our communities. To address the issue, federal and state governments have passed laws to improve program integrity, including required audits of medical records against billing practices. Molina Healthcare proactively ensures that government funds are used appropriately with the help of Molina's Special Investigation Unit (SIU) which aims to safeguard Medicare, Medicaid, and 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 of 1,300 algorithms identifies 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 tracks provider compliance with coding and billing standards, and provider contractual obligations.

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. Should your practice receive a notice from the SIU, please comply with instructions, such as providing requested medical records and other supporting documentation. Should you have questions, 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 of the SIU's important work, and we hope to minimize any inconvenience the SIU audit might cause your practice.

To report potential fraud, waste, and abuse, contact the Molina AlertLine toll-free at (866) 606-3889 24 hours per day, 7 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.
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.
- 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.

## 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. Influenza vaccines expected to be available for the 2022–23 season, their age indications, and their presentations are described (Table 1). Afluria Quadrivalent is not expected to be available in a 0.25-mL prefilled syringe presentation. When using Afluria Quadrivalent for children aged 6 through 35 months (who require a 0.25-mL dose), the dose must be obtained from a multidose vial. One labeling change is described. In October 2021, FDA granted approval for the use of Flucelvax Quadrivalent (cell culture–based quadrivalent inactivated influenza vaccine [ccIIV4]) for children aged 6 months through <2 years. As of March 2021, Flucelvax Quadrivalent had been approved for persons aged ≥2 years. Approval for children aged 6 months through <2 years was based on results of a randomized, observer-blind study that compared immunogenicity and safety of Flucelvax Quadrivalent with that of a licensed comparator IIV4 among 2,402 children aged 6 through 47 months, of whom 894 were aged 6 through 23 months. Flucelvax Quadrivalent is now approved for persons aged ≥6 months.

3. On the basis of review of evidence concerning high-dose inactivated influenza vaccine (HD-IIV), recombinant influenza vaccine (RIV), and MF59-adjuvanted inactivated influenza vaccine (aIIV), recommendations for influenza vaccination of persons aged ≥65 years have been modified. ACIP recommends that adults aged ≥65 years preferentially receive any one of the following higher doses or adjuvanted influenza vaccines: quadrivalent high-dose inactivated influenza vaccine (HD-IIV4), quadrivalent recombinant influenza vaccine (RIV4), or quadrivalent adjuvanted inactivated influenza vaccine (aIIV4). If none of these three vaccines is available at an opportunity for vaccine administration, then any other age-appropriate influenza vaccine should be used. Higher dose vaccines include HD-IIV4 and RIV4, both of which contain a higher dose of HA antigen per virus than standard-dose vaccines (60 µg for HD-IIV4 and 45 µg for RIV4, compared with 15 µg for standard-dose inactivated vaccines). Adjuvanted inactivated influenza vaccine (aIIV4) contains MF59 adjuvant.

4. 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. (Pharmacy benefits for CA Medicaid members, such as flu vaccines given in an outpatient pharmacy, will be covered by Medi-Cal RX as well as subject to formulary coverage and requirements by Medi-Cal RX):**

- 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)

## Availity

**Molina Healthcare's New Claims Experience has arrived Featuring Enhanced Claims Status and Smart Claims**

Learn how to better manage your claims with Enhanced Claims Status. Molina Healthcare and Availity Essentials have developed new claim status features and a refreshed workflow to make processing claims easier.

**New Features:**
- Succinct Layout: Look for an easy-to-navigate response page that includes patient, claim, line-level, and payment details, allowing you to process crucial information quickly.
- Remark Codes: Adjustment codes and remittance along with their descriptions, which will display at both the claim and line level.

- More Search Options: Search by service date or the 276 HIPAA standard. The "Search by Service Dates" tab displays only the fields required for a more streamlined search experience.
- Attachments: You will have the ability to include supporting documentation with a specific claim using the "Send Attachments" tool.

### Learn the End-to-End, Ins and Outs in Live Webinar

We know you've been busy so we're offering a few more training opportunities to fit with your schedule. Join Availity and Molina for one of these dates:

- Wednesday, December 14 @ 3:00 p.m. - 4:15 p.m. ET, 12 p.m. - 1:15 p.m. PST

**Bonus:** For your convenience, all attendees will receive a handout with tips on accessing the Availity tools that they can use for Molina.

### Entering Multiple Prior Authorization Requests in Availity Payer Spaces

To better serve you and your Molina members, you can now submit multiple prior authorization service requests (SRAs) in Availity Payer Spaces.

Two (2) new buttons were added to the SRA (Prior Auth) submission form for SSO users for faster and easier use. Now users can click the "Submit New SRA" button to start a new one bypassing returning to the Availity Payer space home page. The new "SRA Inquiry" button will allow users to go directly to the inquiry page without the need to go back to Availity and selecting the SRA inquiry and SSO in again.

### Core Features Available for Molina Healthcare

Many great features are available for you when you partner with Molina Healthcare.

**Available features:**
- Eligibility & benefits
  - Easy access to patient eligibility and benefits information including COB and IPA (CA). For ACA, plan documents can be downloaded.
  - Check HEDIS® gaps or missed services with care reminders.
- PayerSpaces
  - Download documents and get to useful Molina links.
  - Access features not yet available in the Availity Portal through PayerSpaces Applications such as:
    - Submit and check Prior Authorizations
    - Appeal status and appeal/dispute or correct a claim or create templates for easier claims submission
    - View PCP member rosters and patient health records
    - Run and retrieve/download health plan specific reports
- Claims & Remits
  - Search by service date or the 276 HIPAA standard.
  - View claims status, electronic remittance advices and EOP/EOB documents, including adjustment codes and remittance codes, along with their descriptions at both the claim and line level.
  - Enter and submit professional and institutional/facility batch claims online.
  - Streamlined claim entry for regular patients or repeatable claims through Smart Claims, which uses data from prior E&B submissions to search for patients and autofill your claim.
  - Attach medical documents to any claim.

- Secure messaging
  - Connect with Molina agents to resolve eligibility & benefits and claims inquiries.

### Coming Soon in 2022

- Claims Correction
  - Allows a provider who has submitted a claim(s) to make a correction on the non-finalized claim.
- Claims Overpayments
  - Recovery is performed on all claims identified as overpaid or paid in error based on the specific state guidelines.
- E&B Accumulators
  - For each member/plan submitted, returns Molina Plan/dollar & benefit/count level accumulated (HIPAA-Health Benefit Plan-30) toward threshold/limit.
- Member Search
  - Will return Comprehensive E&Bs for subscriber and dependents on subscriber's plan.

### Checking Appeal Status on Legacy Portal

Molina has launched a new Claims Appeal status feature that allows Availity users to view and print final determination letters. It's as simple as searching for the claim via the Availity Appeal or Correct Eligible Claims Payer Spaces function. When the claim is located, you will see the status of the appeal displayed and can view and/or print the decision letter by clicking on the .pdf document file.

Additional information and training regarding the Availity program are available at: https://www.molinahealthcare.com/providers/ca/medicaid/comm/bulletin.aspx.