

PROVIDER NEWSLETTER

A Newsletter for Molina Healthcare Provider Networks

First Quarter 2021



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ASC Redirection

Last year, Molina announced plans to redirect certain procedures away from the hospital and to Ambulatory Surgery Centers (ASCs). If these procedures are being done in a hospital, Prior Authorization (PA) **is needed**.

Unlike other procedures that require PA, clinical information is not necessary to determine if the procedure needs to be performed. However, you must provide information that **explains why** the procedure is being done in the hospital and not in an ASC. The information you send (e.g., a note, sentence or two on fax cover sheet, etc.) should **explain why** the procedure is being done in the hospital.

Please **do not** send clinical information without an explanation for why the procedure is planned for the hospital instead of an ASC. If the procedures are to be performed in an ASC, PA is not required*.



* Exceptions are procedures that require Prior Authorization regardless of the location where they are to be performed.

Urgent Requests and Turnaround Times

Molina works to respond to all requests in a timely manner in order to avoid delays in care. We strive to meet the Turnaround Times (TAT) required by accrediting bodies and state law, 100% of the time.

Routine requests are responded to within four (4) days of receipt. Urgent requests require a response within 48 hours of receipt. Urgent requests received on Friday must be responded to—at the latest—by Sunday.

Urgent/Expedited requests are reserved for instances of potential serious deterioration in the member's health or impact on member's ability to regain maximum function.

Please **do not** use “urgent” as a tool to schedule elective cases or obtain a response sooner. Use of “urgent” often and inappropriately affects our overall response time, which may lead to unwanted and unintended consequences for providers and members.

COVID-19 Vaccine FAQ

Molina Healthcare continues to monitor developments related to Coronavirus Disease 2019 (COVID-19). With mRNA vaccines currently available from two manufacturers on a limited basis—and the distribution plans in a state of flux—we have addressed some of the leading questions being asked by the health care community.

Our team has distilled the answers into a simple [COVID-19 FAQ document](#) and posted it to the [COVID-19 page](#) of the Molina provider website.

Vaccine distribution is an ongoing and dynamic situation. The latest information is found on the Illinois Department of Public Health (IDPH) website: dph.illinois.gov/covid19/vaccination-plan.

Requirements for Submitting Prior Authorizations



Molina requires Prior Authorization (PA) for specific services. To assist providers with determining this, Molina offers three tools on MolinaHealthcare.com:

- Prior Authorization Codification List (updated quarterly).
- Prior Authorization Guide.
- Prior Authorization Code LookUp Tool.

Both the PA Codification List and the PA LookUp Tool offer detailed information by CPT and HCPCS code regarding PA requirements. Additional information about the new Prior Authorization Code LookUp Tool, including how to access the tool, is available on page 6, “Molina’s Prior Authorization LookUp Tool has Launched!”

When submitting a PA request, it is important to include **all** clinical information and medical records necessary to support the medical necessity of the requested service/item. For example:

- Current (up to six months) patient history related to the requested service/item.
- Relevant physical examination that addresses the problem.
- Relevant lab or radiology results to support the request (include previous MRI, CT, lab, or X-ray report/results).
- Relevant specialty consultation notes.

- Any other information or data specific to the request showing the member meets the criteria for approving the service/item.

By providing all necessary clinical information with the initial request, Molina will be able to make a more timely and complete decision based on the member's current health condition, while potentially avoiding a need to request additional supporting documentation. When submitting an expedited Prior Authorization request, be sure to submit all necessary clinical information, as the time frame to process the request is extremely short from date and time of receipt of the initial request. The goal is to have all necessary information to make the appropriate decision during the initial review of the service/item and avoid the need for an appeal if the service/item is denied.

Molina's Prior Authorization LookUp Tool has Launched!

A new Prior Authorization LookUp Tool is available on MolinaHealthcare.com. It allows providers to look by CPT/HCPCS code (along with state and line of business) to determine if Prior Authorization is or is not required. Additionally, the tool will indicate if a code is not a covered benefit, or if authorization for that service has been delegated by Molina to a vendor (along with information regarding how to contact the vendor).

This helpful tool is accessible via the [Provider Portal](#) and the Molina website provider main page. Simply go to MolinaHealthcare.com, select "I'm a Provider," and choose your state from the pull-down menu. You will see the Prior Authorization LookUp Tool on the provider landing page under "Need a Prior Authorization?"

Need a Prior Authorization?

[Code LookUp Tool](#)

Help Your Patients Quit Smoking

Molina has a program to help our members stop smoking. The program is for members who are over 18 years of age and are ready to quit—and it is at no cost to members. Some of the program tools are:

- Free educational materials.
- Free one-on-one counseling. As part of the program, members will get guidance and ideas from trained counselors to help them quit smoking.
- If eligible, Nicotine replacement therapy or Zyban®, based on what you as the provider decide is appropriate.



Help Members Enroll

The patient (member) must meet certain requirements to be in the program. Please call our Health Education department at **(855) 687-7861** for details.

As the provider, you can also help them stay on track by scheduling periodic follow-ups via phone, telehealth visit, or in-person visit, as appropriate for you and the member. To start helping your patients kick the tobacco habit, call your Provider Network Manager, or the Provider Network Management team at **(855) 866-5462**.

March Is Women's History Month—Take Care of Women's Wellness

October (aka, Breast Cancer Awareness Month) is nine months away. But March is Women's History Month—an opportune time to encourage female Molina members to complete their preventive health screenings. Women's preventive care to do this March:

- Annual wellness visits.
- Cardiac health assessments.
- Breast cancer screenings.
- Cervical cancer screenings.
- Screenings for Sexually Transmitted Infections (STIs).
- Reproductive life plan counseling.
- Healthy pregnancy and postpartum care.

Consider telephoning female patients to schedule wellness visits with age-appropriate health screenings.

Remind them that if transportation is an issue, they may call MTM Transportation (Molina's nonemergency transport vendor) at **(844) 644-6354** to schedule a ride to and from their appointment—this is a covered service.

Molina believes that one of the most effective ways to serve members is through preventive care such as this. We always encourage our valued providers to promote preventive care among Molina's members and all patients.



The Most Overlooked Aspect of Prenatal Care...Oral Health

Oral health during pregnancy has been the subject of debate in the health care community. Just as dental hygiene is a factor in overall health in non-pregnant patients, It is just as important in pregnant patients. Precautionary measures can make a visit to the dentist as safe for a pregnant patient (and the fetus) as it is for a non-pregnant patient. Two providers—an OB-GYN and a dentist—share their perspectives on routine dental care for pregnant members:

Sarita Massey, MD, OB-GYN Molina Healthcare

“Oral health is a key indicator of overall health, well-being, and quality of life.”⁽¹⁾ Underserved and vulnerable populations continue to suffer from effects of poor oral health (including lost productivity at work and school) at disproportionate rates⁽²⁾. Insurance is one barrier to receiving dental care. Pregnancy improves access to oral health through acquisition of Medicaid. Pregnancy is also a “teachable” moment when women may be motivated to adopt healthy behaviors⁽³⁾.

Treatment of periodontal disease during pregnancy is not associated with any adverse maternal or birth outcomes. There have been no significant fetal or lactation risk reported with radiation exposure from diagnostic X-rays⁽⁴⁾. Currently used anesthetic agents have not been

Henry Lotsof, DDS Avēsis

There has always been some concern about treating dental patients while they are pregnant. According to a recent article from the American Dental Association (ADA), the Association offers a piece of advice—RELAX. The American Dental Association and the American Congress of Obstetricians and Gynecologists agree that dental care during pregnancy **is safe**. Delaying dental treatment can lead to more complicated procedures later and decreased favorable outcomes.

Items of interest regarding the treatment of these patients include:

- In 2012 the Oral Health During Pregnancy Expert Workshop⁽¹⁾ released a consensus statement about dental care during pregnancy. The statement said that dental

shown to have any teratogenic effects when using standard concentrations. Penicillins, erythromycin, and cephalosporins have not been associated with an increased risk of birth defects⁽⁵⁾.

It is **safe** to provide dental care to pregnant women. Pregnancy provides an opportunity to improve oral health—not just for the pregnant mother but for her children as well. It has been shown that when caregivers go to the dentist, they are more likely to take their children⁽²⁾.

Providing dental care to pregnant women is an opportunity to improve their oral health, expand the use of dental services through education for women and children, as well as reduce oral health disparities.

Important: Remember to shield the abdomen.

1. https://www.who.int/health-topics/oral-health/#tab=tab_1
2. Dominique H Como et al. The Persistence of Oral Health Disparities for African American Children: A Scoping Review. *International Journal of Environmental Research and Public Health* 2019, 16, 710;doi:10.3390/ijerph16050710.
3. Oral Health Care During Pregnancy and Through Lifespan: The American College of Obstetricians and Gynecologists Committee Opinion Number 569, August 2013 (Reaffirmed 2017).
4. Guidelines for Diagnostic Imaging During Pregnancy and Lactation: The American College of Obstetricians and Gynecologists Committee Opinion Number 723, October 2017.
5. Sulfonamides, Nitrofurantoin, and Risk of Birth Defects: The American College of Obstetricians and Gynecologists Committee Opinion Number 717, September 2017.

treatment during pregnancy is safe and key to overall health and well-being.

- In a 2015 article, the Journal of the American Dental Association stated that the use of local anesthetic during dental procedures is safe⁽²⁾.
- Dental radiographs are also considered to be safe during pregnancy⁽³⁾.
- The American Congress of Obstetricians and Gynecologists recommend a protective lead apron with throat and abdomen coverage be used during radiographs.

Unique periodontal and hard tissue conditions can manifest themselves during pregnancy. Failure to address these issues only leads to patients needing more complex and invasive procedures down the road.

1. Oral Health Care During Pregnancy Expert Workgroup Oral Health Care During Pregnancy: A National Consensus Statement. Nation Maternal and Child Health Resource Center, Washington, DC201 (Available at: <http://mchoralhealth.org/PDFs/OralHealthPregnancyConsensus>)
2. Hagai A. Diav-Citron O. Shechtman S. Ornoy A. Pregnancy outcome after in utero exposure to local anesthetics as part of dental treatment: a prospective comparative cohort study. *JADA*. 2015; 146 ([published correction appears in *JADA*. 2015;146(12):874]): 572-580
3. American College of Obstetricians and Gynecologists Committee on Health Care for Underserved Women. Oral health care during pregnancy and through the lifespan, 2013 (reaffirmed 2017) <https://www.acog.org/-/media/Committee-Opinions/Committee-on-Health-Care-for-Underserved-Women/co569.pdf?dmc=1&ts=20161014T1326459399>

Consumer Assessment of Healthcare Providers and Systems (CAHPS®)

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is an industry standard survey tool used to evaluate patient satisfaction. Improving patient satisfaction has many benefits.

Focusing together on a positive patient experience will have many important benefits to your practice:

- Increase patient retention.
- Increase compliance with physician clinical recommendations.
- Improve patient's overall wellness and health outcomes.
- Ensure preventive care needs are addressed in a timelier fashion.
- Reduce no-show rates.

Additional resources are available for office staff and patients:

- For additional after-hours coverage, Molina Healthcare members can call the 24-Hour Nurse Advice Line:
 - English Phone **(888) 275-8750**
 - English TTY **(888) 735-2929**

- Spanish Phone (866) 648-3537
- Spanish TTY (866) 833-4703
- Molina Healthcare members can access interpreter services at no cost by calling Member Services at (855) 687-7861 (English & Spanish) or TTY/TTD 711.
- Providers can access the Provider Portal at provider.molinahealthcare.com to:
 - Search for patients and check member eligibility.
 - Submit service request authorizations and/or claims, plus check status.
 - Review a Patient Care Plan.
 - Obtain CAHPS® Tip Sheets.
 - Participate in cultural competency training (also available on MolinaHealthcare.com under “Health Resources”).

Please encourage your patients who have received the CAHPS® survey to participate.

Molina Healthcare’s 2020 Quality Improvement Results

Molina Healthcare conducts an annual program evaluation to assess how well we meet the performance goals and objectives for improving the quality and safety of clinical care and services specified within the Quality Improvement Program description and annual Work Plan. These are highlights from the annual evaluation.



CAHPS®

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is a survey that assesses Molina members’ satisfaction with their health care:

Medicaid: Molina Healthcare performed well in Care Coordination and the overall rating of health care. We also showed improvement in members getting needed care and getting care quickly. An area that needs improvement is rating of personal doctor.

Medicare-Medicaid Plan: Molina Healthcare demonstrated improvement in getting members needed care, members getting care quickly, Care Coordination, rating of all health care, and rating of drug plan. We need to improve the number of members who receive an annual flu vaccine.

HEDIS®*

Another tool used to improve member care is the Healthcare Effectiveness Data and Information Set or HEDIS®. These scores allow Molina Healthcare to monitor how many members are receiving the services they need:

Medicaid: Molina Healthcare improved on the HEDIS® measures related to avoidance of antibiotic treatment for acute bronchitis and bronchiolitis, timeliness of prenatal care, and postpartum care. We need to improve on appropriate testing for pharyngitis, appropriate treatment for upper respiratory infection, and metabolic monitoring for children and adolescents on antipsychotics.

Medicare-Medicaid Plan: Molina Healthcare performed well in BMI assessment for adults, medication review for older adults, and pain assessments for older adults. Improvements are needed for care related breast cancer screening, 30-day follow-up after hospitalization for mental illness, and received statin therapy for patients with cardiovascular disease.

Culturally and Linguistically Appropriate Services

Molina Healthcare also assesses the cultural, ethnic, racial, and linguistic needs and preferences of members to identify and eliminate cultural and/or linguistic barriers to care through the implementation of programs and interventions.

The majority of Molina Medicaid members (98%) identified English as their preferred language, followed by Spanish (2%) and Arabic (0.1%). Spanish was the most requested language for Molina's interpreter services, followed by Cantonese and Arabic. The percentage of requests for Cantonese and Arabic interpreters decreased slightly between 2019 and 2020.

Overall, Molina found that the current Culturally and Linguistically Appropriate Services program resources, structure, and practitioner and community participation are sufficient based on member needs. Additionally, Molina has a series of short culturally competency training videos available via the [Provider Portal](#) and at MolinaHealthcare.com on the Culturally and Linguistically Appropriate Resources/Disability Resources page, under the Health Resources tab. New disability resources are available at this location under Molina Provider Education Series:

- Americans with Disability Act (ADA).
- Members who are Blind or have Low Vision.
- Service Animals.
- Tips for Communicating with People with Disabilities & Seniors.

The progress related to the goals that Molina Healthcare has set for the annual CAHPS[®] (QHP for Marketplace) survey results and the annual HEDIS[®] measures can be viewed in more detail on the website. You can also view or print information about the Quality Improvement Program. Please visit the provider page on Molina's website MolinaHealthcare.com.

* The Healthcare Effectiveness Data and Information Set (HEDIS[®]) is one of health care's most widely used performance improvement tools.

Electronic Funds Transfer (EFT)

Molina has partnered with our payment vendor, ProviderNet, for Electronic Funds Transfer (EFT) and Electronic Remittance Advice (ERA). Providers must be registered for EFT payments in order to access and receive the benefits of ProviderNet. With EFT, providers benefit from:

- Faster payment and zero mailing time—processing can take as little as three days from submission.
- Ability to search for a historical Explanation of Payment (EOP) by claim number, member number, etc.
- Ability to view, print, download, and save a PDF version of the EOP for easy reference with no paperwork to store.
- Easy File Transfer Protocol (FTP) with your clearinghouse—Molina payer ID **20934**.
- Automatic HIPAA compliance with Electronic Funds Transfers.
- It's a **free** service for you!



Time-Saving ProviderNet Reminders:

- Providers should always log in to their ProviderNet account and view their payment history **before** contacting Molina about a missing EFT payment.
- ProviderNet only facilitates the payments **from** Molina **to** the provider. Questions regarding claims payment should be directed to Provider Network Management at **(855) 866-5462**.

- If a provider receives a Molina payment that is **not** on their ProviderNet account (typically, Accounts Payable payments), providers should contact Provider Network Management at **(855) 866-5462**.
- Providers should add to their account **all NPIs** that receive Molina payments.

Get started today! Providers **not registered** for EFT payments should contact Electronic Funds Transfer at **(866) 409-2935** or email EDI.Claims@Molinahealthcare.com.

Molina Partners with PsychHub for Provider Education



PsychHub is an online platform for digital behavioral health education. Molina providers are able to access PsychHub's online learning courses through its Learning Hub for **free**. Opportunities for continuing education are also available through a variety of courses. Contact your Provider Network Management team at **(855) 866-5462** to learn more, or [click here to visit PsychHub](#).

Electronic Solutions for Streamlined Credentialing

The need for a current credentialing application goes beyond initial credentialing. Following NCQA (National Committee for Quality Assurance) guidelines requires providers to be recredentialed at a minimum of every three years.

To avoid an incomplete application, consider logging into your electronic application, CAQH (Council for Affordable Quality HealthCare), for regular maintenance. A few tips to improve and streamline your credentialing process:

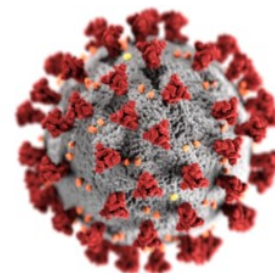
- Attestations are considered current for 180 days. Electronically updated attestations are acceptable and encouraged.
- Professional liability insurance is considered current at time of signoff; update your application or attach your new policy as soon as it's available.
- If you recently became board certified, update your board status. Verification of board certification is required by NCQA.
- DEA certifications can be verified by attaching a current copy to your application.
- Review the specialty listed on your application. Do you have the corresponding education listed on your application? If not, complete the education section.
- NCQA also requires five years of work history. Make sure your application lists dates in the MM/YY format. Be sure to also include gap explanations for any gaps over six months.

If you have any questions about how to complete or update your electronic application, please reach out to the specialist listed on your credentialing request.

CMS Guidance for COVID-19: Vaccine Tool Kits & Significant Cost Determination

In preparation for the release of the COVID-19 vaccine, Centers for Medicare & Medicaid Services (CMS) developed centrally located COVID-19 vaccine tool kits to convey critical information to stakeholders. CMS will update the tool kits as needed.

Additionally, CMS announced the legislative change in benefits to add Part B coverage of a COVID-19 vaccine, and its administration meets the significant cost threshold. Given the significant cost determination, Medicare payment



for COVID vaccinations administered during calendar years 2020 and 2021 to Medicare Advantage (MA) beneficiaries will be made through the Medicare Fee for Service (FFS) program. Medicare beneficiaries enrolled in MA plans will be able to access the COVID-19 vaccine without cost sharing at any FFS provider or supplier that participates in Medicare and is eligible to bill under Part B for vaccine administration (including those enrolled in Medicare as a mass immunizer or a physician, non-physician practitioner, hospital, clinic, or group practice). Therefore, contracted Molina Healthcare providers should submit claims for administration of the COVID-19 vaccine to the appropriate CMS Medicare Administrative Contractor (MAC) for payment.

Links to MACs:

- [CMS Medicare Administrative Contractors page.](#)
- [CMS Medicare Administrative Contractors: Who Are the MACs? page.](#)

Links to Important COVID-19 Vaccine Resources:

- [CMS Tool Kit on COVID-19 Vaccine for Medicaid.](#)
- [CMS COVID-19 Vaccine Policies and Guidance.](#)
- [CMS Press Release: Trump Administration Takes Action, November 13, 2020.](#)
- [CMS COVID-19 Vaccine IFC, January 1, 2021.](#)
- [IDPH COVID-19 Vaccine Resources.](#)

Molina in the Community

Molina Healthcare of Illinois is a mission-driven, health care organization committed to providing the highest quality care to each member and strengthening the communities in which we serve. As our communities continue to face COVID-19 and the rippling effects of systemic racism, Molina's mission is critical in addressing the need.

This commitment is supported by our:

- Holistic, community-based approach designed to better meet the needs of our members.
- Exclusive focus on government programs.
- A dedicated team that works to help address social determinants of health.

In response to COVID-19 and its varied impacts on the lives of our members, Molina has ramped up efforts to help those in need. Our community initiatives aim to address critical issues, such as food scarcity, educational outreach programs for youth to assist in virtual learning, and making sure families have a safe place to rest if facing homelessness.

The Molina team will continue striving to reach members and nonmembers alike in 2021 by expanding our efforts. These are just a few examples of events that our Community Outreach team championed in 2020:



Molina helped to revitalize the 69th and Stewart Community Garden, located in Chicago's Englewood neighborhood, in partnership with [Herban Grown Chicago](#) and [NeighborSpace](#).

Molina launched Community Free Laundry Day programs so that residents hard-hit by the economy and the pandemic could come in and wash their clothes, free of charge. This event was hosted by So Fresh & So Clean Laundromat in the East Pullman neighborhood of Chicago.



Molina hosted various Drive-Through Food Giveaway events in Illinois. This event took place over the summer in East St. Louis, where community members picked up food in reusable Molina grocery bags.

Cars snaked through parking lots during Molina’s Drive-Through Baby Showers, including this one, which was held in partnership with Mercyhealth Hospital in Rockford.



We’d Like To Work With YOU On Initiatives Like This!

We invite you to partner with the Molina Outreach team this year on COVID-19 vaccinations and our array of Drive-Through hosted events. Please reach out to Tammy Lackland via email at Tammy.Lackland@molinahealthcare.com.