PROVIDER NEWSLETTER
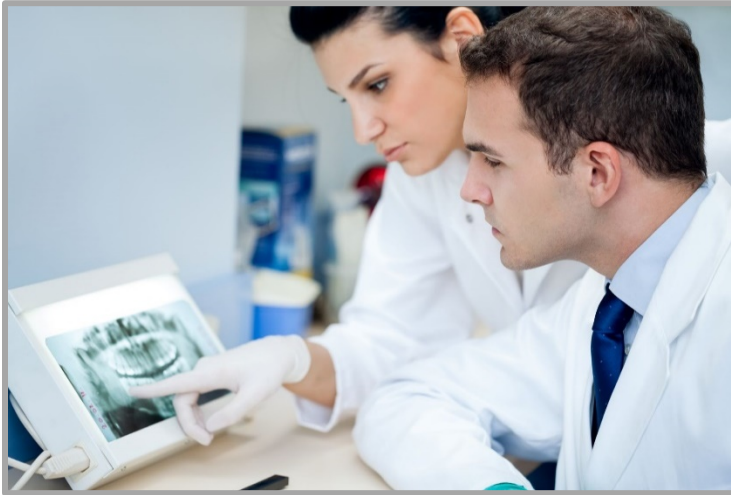
A Newsletter for the Molina Healthcare of Illinois Provider Network

Fourth Quarter 2021

In This Issue

Let's Get Social

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Molina is Expanding into Marketplace

Molina is pleased to offer Marketplace plans in Illinois for the 2022 plan year. Molina's Marketplace plans are designed around the needs of members and include free annual exams, low-cost plan options, and budget-friendly benefits. For 2022, We will be offering these affordable Gold and Silver health plans:

- **Constant Care Silver**—Plans with low-cost doctor visits, prescription drugs, and urgent care. Most plans have free preventive care for adults and children, free telehealth virtual care visits through Teladoc, and no deductible. Plus, some include adult vision care through VSP. Qualifying members can also access cost-sharing reduction plans with extra savings.

- **Confident Care Gold**—Plans provide free preventive care, access to primary care without a deductible (which helps avoid higher emergency room costs) and urgent care for a Primary Care Physician (PCP) copay. These plans also provide choice of

coverage with or without adult vision care through VSP, and free telehealth virtual care visits through Teladoc.

For more than 40 years, Molina has provided quality health plans to those who need it most. As our health care partner, it is important that you have all the latest information about Molina's operations.

Providers can access key Marketplace information at MolinaMarketplace.com. Registering for the Molina Provider Portal will give you 24/7 access to important information, and make it easy to submit claims and more.

Additional questions can be directed to the Provider Network Management team at MHILProviderNetworkManagement@MolinaHealthcare.com.

> **Are You Contracted For Marketplace?**
>
> **Providers participating in one line of business are not automatically contracted for other lines of business.**
>
> **Contact your Provider Network Manager for assistance contracting for Medicaid, MMP, and Marketplace.**

"My Health Perks" Coming to Marketplace
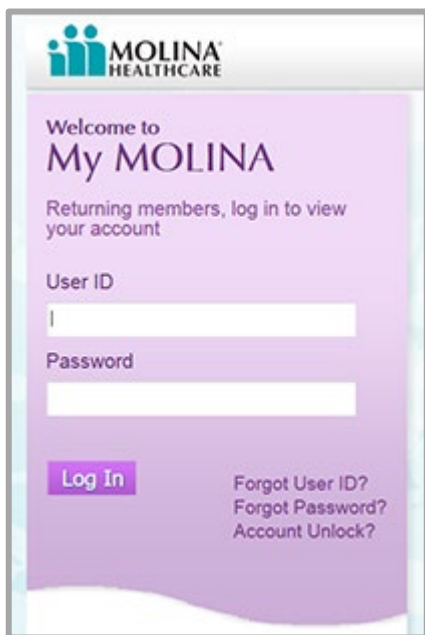
Beginning on **January 1, 2022**, all Molina Marketplace subscribers and dependents 18 years and older will be eligible for Molina's new health and wellness program, **My Health Perks**. Besides providing access to a suite of interactive disease-management programs and healthy lifestyle information, all eligible members will have the opportunity to earn a $50 gift card upon completion of the following activities:

- Complete an annual routine wellness exam with their Primary Care Provider.
- Complete a Health Risk Assessment via the My Wellness tab on the My Molina Portal.

Members who complete both activities will be eligible for a gift card of their choosing. Please encourage members to learn more about the My Health Perks program online via the My Wellness tab on the My Molina Portal. Members can also contact Customer Support for additional information at **(833) 644-1623**.

2022 Provider Webinar Schedule

Molina is in the final stages of developing the 2022 schedule for the Provider Education Series. Check back later on the Communications page of the provider website, or simply **sign up to receive email notifications for upcoming sessions**:

Register for Provider Emails ➜

Avēsis Becoming Ophthalmology Service Vendor On January 1

Molina will be delegating ophthalmology services, including claims and utilization management, to Avēsis (Avēsis.com) beginning on **January 1, 2022**.

Eye-related medical claims for both Medicaid and MMP will transition to Avēsis:

- **Ophthalmologist** claims will be submitted to **Avēsis** for dates of service on and after January 1, 2022. Note that **Avēsis' Payer ID is 87098**.

- **Facility** claims for related services, whether outpatient hospital or ambulatory surgical centers, will continue to be submitted to **Molina**.
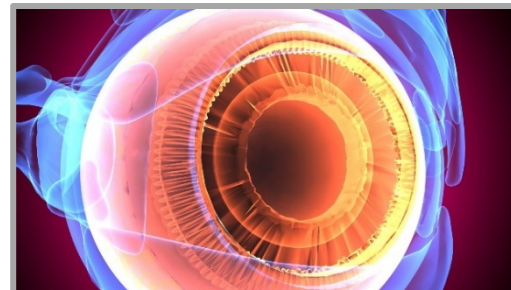
Important: We encourage all ophthalmologists to begin the contracting process with Avēsis to prevent any service disruption.

Join the Avēsis Network

We also encourage all routine vision and medical eyecare providers to contract with Avēsis as we continually strive to eliminate gaps in care. Contact **Avēsis Provider Services** at EyeCareServicesCredentialing@avesis.com or **(855) 214-6777.** You can also start the process on Avēsis' Provider Contracting page.

Refer to this provider notice for additional details.

Provider Bonus for In-Home COVID-19 Vaccinations

Molina is offering an incentive to increase vaccination rates among members. Any providers who are qualified to render COVID-19 vaccines in the home (place of service 12) will receive an additional fee of $200 per home visit. The bonus covers dates of service September 1, 2021, through December 31, 2021, and will be paid in first quarter 2022. This will **not** include the administration of booster shots.

The goal is to increase vaccination rates among members who have difficulty leaving their homes or otherwise lack access. Providers are strongly encouraged to administer vaccines to one or more residents in a home setting. These individuals are often at-risk patients who could potentially require complex care in a hospital setting if they contracted COVID-19.

Provider Types Eligible for Reimbursement
089, 052, 051, 048, 044 with specialty 261QP2300X, 043, 040, 016, 010

This provider memo includes further details, including the fee schedule, applicable locations, applicable patient situations, and billing restrictions.

2021–2022 Flu Season

The Advisory Committee on Immunization Practices (ACIP) continues to recommend annual influenza vaccinations for everyone who is 6 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.

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 2021–2022 season.

### Important 2021–2022 Updates from the Advisory Committee on Immunization Practices:

1. All seasonal influenza vaccines expected to be available for the 2021–22 season are quadrivalent, containing hemagglutinin (HA) derived from one influenza A(H1N1)pdm09 virus, one influenza A(H3N2) virus, one influenza B/Victoria lineage virus, and one influenza B/Yamagata lineage virus.

2. The composition of the 2021–2022 U.S. seasonal influenza vaccines includes updates to the influenza A(H1N1)pdm09 and influenza A(H3N2) components. For this season, U.S.-licensed influenza vaccines will contain 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/Cambodia/e0826360/2020 (H3N2)-like virus, an influenza B/Washington/02/2019 (Victoria lineage)-like virus, and an influenza B/Phuket/3073/2013 (Yamagata lineage)-like virus.

3. One labeling change is described. In March 2021, the FDA granted approval for the use of Flucelvax Quadrivalent (cell-culture-based quadrivalent inactivated influenza vaccine [ccIIV4]) for children aged 2 to <4 years. Flucelvax Quadrivalent had previously been approved for persons aged ≥4 years. Approval for those aged 4 to <18 years was based on immunogenicity data and required a post-marketing efficacy study. The new approval is based on a randomized, observer-blinded clinical efficacy study conducted among children aged 2 to <18 years over three seasons, in which Flucelvax Quadrivalent demonstrated efficacy against laboratory-confirmed influenza of 54.6% (95% confidence interval [CI] = 45.7%–62.1%) compared with a non-influenza control vaccine. Flucelvax Quadrivalent is now approved for persons aged ≥2 years (21).

4. Guidance regarding administration of influenza vaccines with other vaccines has been updated to reflect consideration for COVID-19 vaccination, which is expected to continue in the United States before and during the 2021–2022 influenza season. Current guidance for the use of COVID-19 vaccines indicates that these vaccines can be co-administered with other vaccines, including influenza vaccines. Providers should consult current COVID-19 vaccine recommendations and guidance for up-to-date information. ACIP recommendations for the use of COVID-19 vaccines are available at cdc.gov/vaccines/hcp/acip-recs/vacc-specific/covid-19.html. Interim clinical guidance for the use of COVID-19 vaccines is available at cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html. These pages should be checked periodically for updated information.
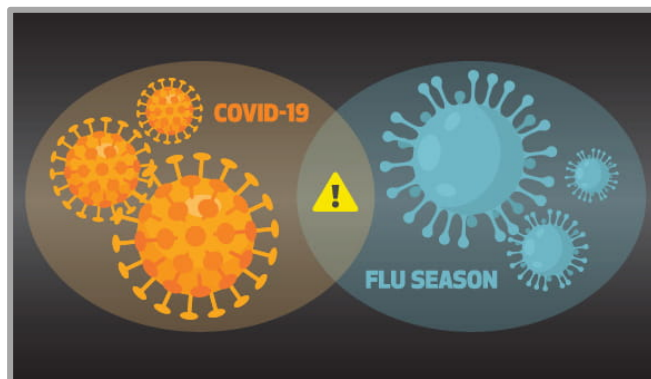
5. Guidance concerning timing of vaccination has been modified. Women in the third trimester of pregnancy may now be considered for vaccination soon after the vaccine is available. As in previous seasons, children who need two doses of influenza vaccine administered ≥ four weeks apart (those aged 6 months through 8 years who have never received influenza vaccine or who have not previously received a lifetime total of ≥ two doses) are recommended to receive the first dose as soon as possible after vaccine becomes available. For nonpregnant adults, early vaccination (i.e., in July and August) should be avoided unless there is concern that later vaccination might not be possible.

6. Contraindications and precautions to the use of ccIIV4 and RIV4 have been modified, specifically with regard to persons with a history of severe allergic reaction (e.g., anaphylaxis) to an influenza vaccine. A history of a severe allergic reaction (e.g., anaphylaxis) to a previous dose of any egg-based IIV, LAIV, or RIV of any valency is a precaution to use of ccIIV4. A history of a severe allergic reaction (e.g., anaphylaxis) to a previous dose of any egg-based IIV, ccIIV, or LAIV of any valency is a precaution to use of RIV4. Use of ccIIV4 and RIV4 in such instances should occur in an inpatient or outpatient medical setting under supervision of a provider who can recognize and manage a severe allergic reaction; providers can also consider consulting with an allergist to help identify the vaccine component responsible for the reaction. For ccIIV4, history of a severe allergic reaction (e.g., anaphylaxis) to any ccIIV of any valency or any of component of ccIIV4 is a contraindication to future use of ccIIV4. For RIV4, history of a severe allergic reaction (e.g., anaphylaxis) to any RIV of any valency or any component of RIV4 is a contraindication to future use of RIV4. For a complete copy of the ACIP recommendations and updates or for information on the flu vaccine options for the 2021–2022 flu season, please visit the Centers for Disease Control and Prevention at cdc.gov/mmwr/volumes/70/rr/rr7005a1.htm.
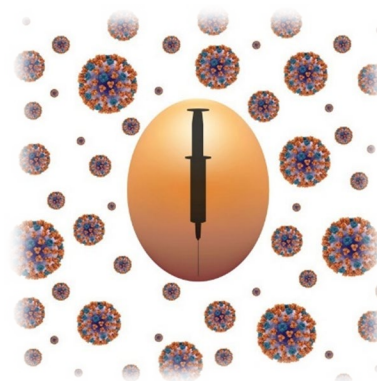
EPSDT Program

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 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. 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.

Suicide Prevention & Awareness

Shockingly, 45% of individuals who die by suicide visit their Primary Care Physician within a month before their death. Furthermore, 67% of those who attempt suicide receive medical attention as a result of their attempt (source: samhsa.gov).

In recognition of National Suicide Prevention Month, which occurred in September, Molina introduced an enterprise-wide Suicide Prevention Program—an organizational strategy to provide more awareness and education around preventing suicides.

Behavioral Health Tool Kit
To better support our network providers, Molina offers resources related to assessment and intervention for suicidal ideation on the Suicidal Ideation page of the Behavioral Health Tool Kit found on the Molina provider website.

PsychHub
Plus, to support your administrative staff, Molina has partnered with PsychHub, the world's most comprehensive platform for mental health education. We are excited to offer providers and staff the opportunity to become a Certified Mental Health Ally. This certification helps equip staff with valuable tools and resources to support mental health in provider offices and beyond. The Mental Health Ally Certification program is an eight-module training program where you will learn about critical mental health topics and gain actionable skills to help others through difficult times.

To access the Mental Health Ally Certification Program and other PsychHub education resources, go to lms.psychhub.com and create an account by clicking Log In. Click the Dashboard button on the navigation toolbar and select Join Cohort with Code. Use this provider Cohort Code: **sGDcuXXmQXZEGsu** (copy and paste).

FQHC—Key Opportunity To Improve Maternal Health

FQHCs are in a unique position to improve maternity dental utilization rates and maternal health outcomes in Illinois by incorporating a dental visit into the mother's prenatal care plan.

In 2006, the Maternal and Child Health Journal published an article that stated, "Maternal oral health has significant birth outcomes and infant oral health. Maternal periodontal disease, that is a chronic infection of the gingiva and supporting tooth structure, has been associated with preterm birth, development of preeclampsia, and delivery of a small-for-gestational age infant."[1]

Once a pregnancy has been confirmed, Molina encourages FQHCs to refer the member for a dental appointment.

If assistance is needed in finding a dentist, please contact our dental vendor Avēsis at (866) 857-8124 for Medicaid or (855) 704-0433 for MMP.

(1) Boggess KA, Edelstein BL. Oral health in women during preconception and pregnancy: implications for birth outcomes and infant oral health. *Maternal Child Health J*. 2006;10(5 Suppl):S169-S174. doi:10.1007/s10995-006-0095-x.

MHIL Community Outreach—Partner With Us

Molina partnered with Operation Warm and Boys & Girls Clubs on October 15 for a winter coat giveaway in Alton. Over 150 coats were handed out to local kids during this drive-up event. The Boys & Girls Club will give the remaining coats to new kids joining the club or to any community member in need.

Molina would like to partner with you to help the community. Contact Tammy Lackland today at Tammy.Lackland@MolinaHealthcare.com.

MCG Cite Guideline Tool—Medical Determination Transparency

What is Cite Guideline Transparency? Cite Guideline Transparency is a tool offered through MCG that allows providers to view all MCG guidelines that Molina currently uses.

Access to Cite Guideline Transparency is available via the Molina Provider Portal and Molina's Availity Provider Portal. There, you will find a link to view the evidence-based criteria used to support member care decisions.

- **Transparency**—Industry-leading medical determination transparency.
- **Access**—to MCG clinical evidence that payers use to support member care decisions.
- **Security**—Ensures easy and flexible secure web access.

These guides will show you how to access the MCG feature:

> MCG Quick Reference Guide—Molina Provider Portal.
> MCG Quick Reference Guide—Molina's Availity Provider Portal.

MCG Cite for Care will **not** affect your process for notifying Molina of admissions or for seeking Prior Authorization approval. The Transparency tool is live, and we encourage providers to use it.

MCG guidelines are proprietary to MCG, and Molina is not able to distribute them without the permission of MCG.
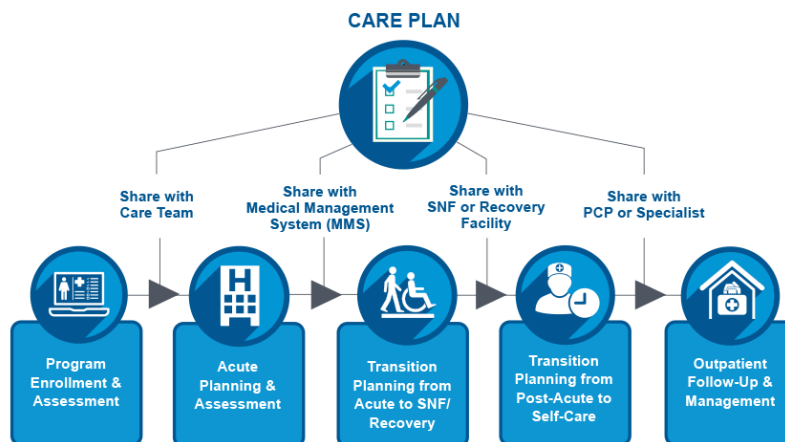
Transition to Availity Portal Proceeding

Have You Registered With Availity Yet?

Molina Healthcare of Illinois is available on Availity Provider Portal as your one-stop shop for transactions with Molina (and other participating payers). The transition to Availity continues, so it's important that you register.

Get to Know Availity

Are you new to the Availity Portal? Lay the groundwork with an introductory webinar. The Availity staff will show you and your administrators how to launch your organization's free Availity Portal account.

Once your organization is registered and your account is set up, you can sign up for Molina-specific training in the Availity Learning Center. In Availity Provider Portal, select **Help & Training** > **Get Trained** > **Sessions**.

Get your organization started at availity.com/molinahealthcare. If you need assistance, contact the Availity Help Desk at **(800) 282-4548**.

No Balance Billing

Balance billing Molina members for covered services is **prohibited**, other than the member's applicable copay, 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 **prohibited** balance billing include:

- Holding the Molina D-SNP members liable for Medicare Parts A and B cost-sharing.
- Requiring Molina members to pay the difference between the discounted and negotiated fees, and the provider's usual and customary fees.
- Charging Molina members fees for covered services beyond copays, deductibles, or coinsurance.

Molina SIU & You Can Prevent Fraud, Waste, and Abuse

The National Health Care Anti-Fraud Association (NHCAA) estimates that least 3% 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) works to safeguard Medicare, Medicaid, and Marketplace funds.

You and the SIU

The SIU analyzes provider claims by using software to identify questionable coding and/or billing patterns, and to determine compliance with the terms of the Provider Agreement. This includes investigating potential fraud, waste, and abuse. 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. You may contact your Provider Network Manager with questions.

> "Molina Healthcare appreciates the partnership it has with providers in caring for the medical needs of our members," explains **Scott Campbell**, the Molina AVP of 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 an SIU audit might cause you and/or your practice.

To report potential fraud, waste, and abuse, contact the Molina AlertLine 24/7 year-round at **(866) 606-3889**, or use the website to make a report MolinaHealthcare.Alertline.com.

Serving Medicare Beneficiaries Through MMP

Molina continues to expand our portfolio to include a broader scope of beneficiaries, including those aging into Medicare and MMP from Marketplace or other special election period.

Call us to learn more: **(855) 687-7861 (TTY 711)**. Molina continually strives to provide a better member experience by offering more innovative benefits and designing products that align with members' needs.

HFS Claims Process and Template

Per the Department of Healthcare and Family Services (HFS), providers are **required** to use the new standard Complaints/Claim-Issue template to monitor and resolve claim issues.

Before You Go to HFS—The HFS provider dispute resolution process **requires** providers to use the MCO's internal dispute/appeal process **before** submitting a complaint to HFS. This means providers must first follow the process and exhaust all avenues provided by Molina to resolve a dispute **before** submitting a complaint to HFS.

Molina's Dispute Process—Providers have two options for submission of a claim dispute/appeal:

- **Provider Portal (preferred method)**:
  - Submit appeals through the Provider Portal with supporting documentation.
  - The Provider Portal, provider.molinahealthcare.com/provider/login.
  - Molina Availity Provider Portal availity.com/molinahealthcare.
- **Fax:**
  - A Claims Dispute Request form is **required** when submitting an appeal via fax to (855) 502-4962.
  - Access the Claims Dispute Request form on Molina's Frequently Used Forms page.

Providers **must** use the new standard Complaints/Claim-Issue template when working with Molina to resolve claim issues. Reference the provider memo dated September 15, 2021 for further details.

IAMHP Roster Template

Molina reminds providers that they are **required** to use the new IAMHP Roster template. **Important**: Utilization of the standardized roster is **statutorily mandated** for Medicaid MCOs and contracted providers (305 ILCS 5/5-30.1).

Get the Updated Roster Template

All providers should download the updated template from the Molina website. Go to the Frequently Used Forms page, under the header Contracting & Provider Forms. Scroll down to **Universal IAMHP Roster Template (download)** for the Excel file.

	A	B	C	D	E	F	G	H	I
1		Provider Status							
2	New/No Change/ Update/ Term	Provide detail on what is being updated or termed if "Update" or "Term" is selected (i.e. - terming service location or termed from the group)	Effective Date	NPI	Last Name	First Name	Middle Name	Suffix	Degree
3									
4									
5									

Important Note: The Provider Information email box has been **deactivated**. It is critical that you use the **MHIL Provider Network address**: MHILProviderNetworkManagement@MolinaHealthcare.com.