

Next Generation Medicaid December 1 Launch Delay

Information for Medicaid and MyCare Ohio providers

The Ohio Department of Medicaid (ODM) announced that the Dec. 1, 2022, Phase 3 launch of the Next Generation Medicaid Program has been postponed to Feb. 1, 2023. The new timeline for implementation is as follows:

- Feb. 1, 2023: ODM will launch the Next Generation managed care plans and program requirements, including exciting improvements that will support members in accessing the healthcare services and supports they need. ODM will also implement the new Electronic Data Interchange (EDI), increasing transparency and visibility of member care and services.
- Subsequently, ODM will fully launch OMES modules to provide streamlined processes for claims, prior authorizations (PA), and other administrative tasks for providers.

Providers should continue conducting business with Molina as you do today on and after December 1 – including the processes, procedures, and systems used today to submit claims, PA, and complete other administrative functions.

Updated: Notice of Changes to PA Requirements

Information for all network providers

Molina has posted the updated PA Code List on our Provider Website for an effective date of Jan. 1, 2023. To view the list of changes, view the "2023 Q1 PA Code Changes 1-1-2023" tab in the "[Prior Authorization \(PA\) Code List – Effective 1/1/2023](#)" PA Code List, located on the "Forms" page of the Provider Website. This tab indicates non-covered codes, new codes that require PA, and which codes no longer require PA for all lines of business. Codes that continue to require PA appear on the "PA Code List" tab and are to be submitted for review.

Molina posts new comprehensive PA Code Lists to our website quarterly. However, changes can be made to the lists between quarterly updates. Always use the lists posted on our website under the Forms tab instead of printing hard copies. This practice ensures you access the most up-to-date versions.

Updated: Notice of Changes to the Combined Provider Manual

Information for Medicaid and MyCare Ohio providers

The [2023 January Combined Provider Manual](#) has been posted on our Provider Website under the "Manual" tab for a Jan. 1, 2023, effective date. An addendum with significant updates has been included, which provides a section-by-section list of updates for ease of reference.

The following is a summary of the updates made to the Provider Manual:

Language from the Oct. 1, 2022, Addendum was incorporated into the appropriate sections of the Manual.

XVI. Provider Responsibilities, D. Provider Data Accuracy and Validation section:

- Added clarifying language to note Providers must validate their Provider information on file with Molina at least once every 90 days for correctness and completeness
- Added "change in specialty" and "change in provider name" to the list of reasons to notify Molina of Provider information changes

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Questions and Quick Links

Provider Services – (855) 322-4079
8 a.m. to 5 p.m., Monday to Friday
(MyCare Ohio is available until 6 p.m.)

- Email us at OHProviderRelations@MolinaHealthcare.com
- Visit our Provider Website at MolinaHealthcare.com/OhioProviders
 - [Provider Manual](#)
 - [PA Code List](#)
 - [PA Request Form](#)
 - [Provider Bulletin Archive](#)
 - [It Matters to Molina Page](#)
 - [Provider Portal](#)

Join Our Email Distribution List

Get this bulletin via email. Sign up at MolinaHealthcare.com/ProviderEmail.

United Preferred Drug List: 30-Day Change Notice

Information for all Medicaid providers

ODM will post their Ohio Unified Preferred Drug List (UDL) 30-Day Change Notice for a Jan. 1, 2023, effective date on Dec. 1, 2022. Find it at

XIII. Compliance, A. Fraud, Waste, and Abuse, Regulatory Requirements, Anti-Kickback Statute

- Added details to the Anti-Kickback Statute section
- Added a new Marketing Guidelines and Requirements section

V. Claims and Compensation, E. Paper Claim Submissions

- Added language to further detail the required process to submit paper claims to Molina and the requirements that must be met for paper claims to be accepted

V. Claims and Compensation, Z. Electronic Claim Payment

- Added information about the Aug. 2022 transition to ECHO Health, Inc. for payment delivery and 835 processing.
- Added information about the sunseting of the ProviderNet platform

IV. Behavioral Health, H. OhioRISE

- Added information on OhioRISE Transportation for OhioRISE members, their families, caregivers, and siblings (minor residents of the home)

Reminder: Molina posts a new comprehensive Provider Manual to our website semi-annually. However, changes can be made to the manual between updates. Always refer to the manual posted on our website instead of printing hard copies. This practice ensures you are accessing the most up-to-date versions.

Molina Legacy Provider Portal Sunsetting

Information for all network providers

The Molina Provider Portal will sunset beginning March 28, 2023, and providers will no longer be able to access the Molina Provider Portal and its functions directly.

Availity Essentials (Availity) is now the official secure provider portal for Molina providers. If your organization is not yet registered for Availity Essentials, visit [Availity.com/MolinaHealthcare](https://www.availity.com/MolinaHealthcare) and select the Register button. For registration issues, call Availity Client Services at (800) AVAILITY (282-4548) Monday-Friday from 8 a.m. to 8 p.m.

The Availity Essentials Portal allows you to check eligibility and benefits, submit claims, view remittances, manage PA, upload supporting documentation with your claims, and more:

- Claim Status: Expanded search options include member name, service dates, claim history, or the 276 HIPAA standard. Adjustment and Remittance Codes, along with their descriptions, at the claim and line level.
- Smart Claims: Simplified claim entry tool with only the essential fields you need. Use data from prior eligibility and benefits submissions to autofill the claim.
- Eligibility and Benefits: Use data from prior eligibility and benefits submissions to search for patients and autofill the claim.
- Attachments: Upload supporting documentation with the claim using the Send Attachments feature. Transmit up to 10 attachments (128 MB total file size) with the claim submission.

Coming in 2023:

- Accumulators: Each member/plan submitted returns the Molina Plan/dollar and benefit/count accumulated toward the limit.

pharmacy.medicaid.ohio.gov/drug-coverage.

Provider Payment and Bank Information

Information for all network providers

Reminder, ODM does not share provider payment and/or bank account information with managed care organizations (MCO). Molina will continue to collect and accept payment information from providers that contract with us.

Reminder: Annual Mandatory Model of Care Training

Information for Medicare providers

CMS requires contracted Medicare medical providers to complete basic training on the Dual Eligible Special Needs Plan (D-SNP) Model of Care by Dec. 31, 2022.

- Molina hosts a monthly Model of Care provider training to help train you and your staff and address questions. Find an upcoming training in the Provider Training Session article.
- Find information on Model of Care requirements in the [Model of Care Provider Bulletin](#).

Updated: 2022-2023 Open Enrollment

Information for all network providers

Medicaid and MyCare Ohio: Open Enrollment for all eligible Medicaid recipients ended on Nov. 30, 2022.

In late November, the state released an update indicating the renewal of the Public Health Emergency (PHE) and postponing the December 1 launch of the Next Generation Medicaid program to Feb. 1, 2023.

During this time, Medicaid beneficiaries still have options available to them.

- Newly eligible members will be able to enroll in Medicaid and choose a health plan.
- Those who have recently selected a managed care plan have an additional 90 days to change plans if they find their current managed care plan does not meet their current needs.

Marketplace: The Marketplace open enrollment period began on Nov. 1, 2022, and will end on Jan. 15, 2023.

Medicare: The Medicare open enrollment period began on Oct. 15, 2022 and will end on Dec. 7, 2022.

- Prior Authorizations: Manage your Molina PA on Availity and use the Auth/Referral Dashboard to follow up on the status of the PA.

Learn about the features and functionality offered for Molina providers by logging into the Availity Essentials portal and going to Help & Training > Get Training to:

- View the “Crosswalk from Molina Healthcare to Availity Essentials” topic
- Attend one of the Availity Essentials trainings listed in the [Provider Training Sessions](#) article

Keep an eye on the [Availity Portal](#) and [MolinaHealthcare.com](#) website for additional details about the phased sunset of the Molina Provider Portal.

ProviderNet Sunsetting

Information for all network providers

Molina's contracted vendor, Change Healthcare, will be sunsetting their ProviderNet portal as of Jan. 1, 2023.

If a provider or providers' clearinghouse was accessing 835 files and Explanation of Payments (EOP) from this portal for payments issued prior to Molina's migration to the ECHO Health portal, they will no longer have access to these documents through ProviderNet and will need to request them from Molina (for 835s) or access the EOP through the Availity Essentials Portal.

What do providers need to do?

- Before Jan. 1, 2023, please log in to ProviderNet and download all 835 files, EOP, and capitation summary documents you may be missing.
- After ProviderNet sunsets, if you require historical 835 files, EOP, or capitation support, please contact Molina at (855) 322-4079.
- When you contact Molina regarding 835 requests, please be sure to include the Secure File Transfer Protocol (SFTP) destination location the 835s should be delivered to, and be ready to provide an IP address if Molina does not have your SFTP information on record. This information is required to send the files via SFTP to you or your clearinghouse. Please note these requests can take 10-14 business days to complete.

Explanation of Payment Refund Reporting

Information for all network providers

As part of the transition to the new payment platform, refunds received from the provider, or a third-party payer that were not previously listed on remits, are now being reflected on the Explanation of Payment. These refunds are reflected on both the Explanation of Payments and 835 files. Below we have outlined how to review and account for this detail.

EOP and 835 files:

- A refund that has been received will be reflected on the reversed claim in the Refund column. In addition, a remit message is included indicating receipt of a refund.
- If the refund received was a partial refund, the remaining balance owed to the provider will be processed on an adjustment claim ending in “A.”
- Recent updates to the EOP were implemented on Nov. 7, 2022, to make this information clearer. The update reflects a Net Plan Payable amount on the reversal claims. The Net Plan Payable amount is the difference between the paid amount and the refund. This update was a display update only. Prior payments related to refund postings were paid correctly and were not recouped from your payments.

Provider Training Sessions

It Matters to Molina Forums:

- Molina Provider Website Navigation: Thurs., Dec. 29, 8 to 9 a.m.
- MCG Auto-Auth Functionality: Thurs., Jan. 26, 10 to 11 a.m.

General Provider Orientation:

- Fri., Dec. 2, 1:30 to 2:30 p.m.
- Thurs., Jan. 5, 2 to 3 p.m.

Model of Care:

- Fri., Dec. 16, 2 to 3 p.m.

Claims and Billing Orientation

- Thurs., Dec. 8, 3 to 4 p.m.

Managed Long-Term Services and Supports (MLTSS) Provider Orientation

- Tues., Jan. 17, 8:30 to 9:30 a.m.

Provider training sessions are in Microsoft Teams. Please visit the IMTM page on our Provider Website and click on the desired training to access meeting details.

Availity Essentials Portal Training:

Register in the Availity Essentials Portal. Under "Help & Training," select "Get Trained." In the training catalog, go to the "Sessions" tab and select one of the following:

- Wed., Dec. 14 at 3 p.m.
- Thurs., Jan. 12 at 11:30 a.m.
- Mon., Jan. 23 at 3 p.m.
- Tues., Feb. 7 at 10 a.m.
- Wed., Feb. 15 at 12:00 p.m.
- Fri., Feb. 24 at 1:00 p.m.
- Contact training@availity.com at any time to receive Availity Portal training

Website Roundup

Information for all network providers

Recently added or updated documents:

- [Q1 2023 PA Code List](#)
- [Q1 2023 Combined Provider Manual](#)
- [Ohio CPC: Managed Medicaid Plans Consolidated Resource Guide](#)
- [Cost Recovery Process YouTube Video](#)
- [MLTSS Orientation YouTube Video](#)

Updated: COVID-19 (Coronavirus) Codes

Information for all Medicaid providers

ODM updated the [COVID-19 Comprehensive Billing Guidelines](#) on Nov. 17, 2022. Notable updates include Pfizer Bivalent vaccine eligibility for individuals ages five and up. View the guidelines at medicaid.ohio.gov/resources-for-providers/covid.

Molina is continuing to work with our vendor partners for additional enhancements and revisions to this process to make these transactions clearer for providers. These high-priority items we are reviewing are:

- Enhancements to the 835 files to better indicate the recording of a refund, such as a WO or 72 segment.
- Exploring options to exclude some refund types from EOP and 835 files, such as refunds received directly from primary payers due to coordination of benefits (pay and chase) or subrogation settlements (auto-accidents, malpractice, etc.).

Providers should review their EOP and remit messages when a question arises about a refund posting resulting in recoupment. The posting of a refund on a reversal should not result in recoupment on a payment and is functionally only a reporting process to indicate a refund has been received.

For questions about this transition, please contact Molina at (855) 322-4079.

Healthmap Solutions

Information for all Marketplace providers

On Nov. 15, 2022, Molina launched a partnership with Healthmap Solutions (Healthmap), a leading kidney population health management company, to provide more comprehensive care for members with Chronic Kidney Disease (CKD) Stages 3, 4, 5, Unspecified, and End Stage Renal Disease (ESRD). Healthmap is available at no cost to members through Molina.

The Healthmap Care Navigation Team is led by registered nurses, including renal specialists, pharmacists, registered dietitians, licensed clinical social workers, and behavioral health experts. The team directly supports providers and members with care coordination, education, therapy adherence coaching, medication management, and assistance to address social barriers to care.

The Healthmap platform harnesses advanced data and analytics to extend a provider's ability to optimize health outcomes for members with kidney disease and supports providers with actionable insights into gaps in care and changes in a member's condition while addressing kidney disease and its comorbidities.

Molina Help Finder

Information for all network providers

Molina is proud to introduce Molina Help Finder, a new, one-stop resource, powered by Findhelp that assists Molina members in finding the resources and services they need, when they need them, right in their communities.

With Molina Help Finder, providers have the ability to refer patients in real time right from the Provider Portal. Search by category for the types of services needed, such as food, child care, education, housing, employment, and more. Results can then be narrowed by applying personal and program-specific filters.

For questions about Molina Help Finder, reach out to your Provider Services Team, or visit [MolinaHelpFinder.com](https://www.molinahealthcare.com/molinahelpfinder).

Reminder: Claim Submission: Electronic and Paper

Information for all network providers

Effective Jan. 1, 2023, Molina will no longer accept claims submitted via non-approved submission pathways. Molina accepts claims electronically via clearinghouse and through the [Provider Portal](https://www.molinahealthcare.com/providerportal). Molina also accepts paper claims

PNM Requirement for EVV System

Information for impacted home and community-based service providers who will bill the following codes: G0151, G0152, G0153, G0156, G0299, G0300, S5125, T1000, T1001, T1002, T1003, T1019, and T2025

Providers using the state-provided Sandata Electronic Visit Verification (EVV) system have their account automatically created for them using provider enrollment information in ODM's system.

On October 1, 2022, the ODM system changed from the Medicaid Information Technology System (MITS) to the PNM system. This means providers who need to update information on their Sandata EVV account will need to do so in PNM.

Note: One item that may need updated is the provider's email address, which will be the provider username in the Sandata EVV system. Learn how to update the email address in the PNM module by viewing the ["Updating Email Address in PNM"](#) ODM resource at [medicaid.ohio.gov](https://www.medicaid.ohio.gov), by selecting "Programs & Initiatives," under "Resources for Providers," then on the "Electronic Visit Verification" page select "Tools and Help Documents."

Reminder: EVV Training

Information for impacted home and community-based service providers who will bill the following codes: G0151, G0152, G0153, G0156, G0299, G0300, S5125, T1000, T1001, T1002, T1003, T1019, and T2025

Sandata is offering virtual EVV deep-dive sessions to providers with their EVV training certificates. Each session will be offered monthly and include more in-depth Sandata instructor-led training. Register at go.oncehub.com/ODMEVVHelp.

Training is offered from 12 to 2 p.m. on the following topics:

- **Dec. 6: System Setup:** Intended for Agency Providers, Independent Providers, and Alt EVV Agency Providers
- **Dec. 13: Visit Capture:** Intended for Agency Providers and Independent Providers
- **Dec. 20: Visit Maintenance:** Intended for Agency Providers and Independent Providers

on original (red colored) CMS-1500 and 1450 (UB-04) claim forms sent to the Molina Claims PO Box identified below. This PO Box is also found in the Provider Manual and on the Member ID card.

New and/or corrected paper claims must be sent via these approved routes to ensure they are received in a controlled, secure environment and to reduce delays in processing. **Paper claim submissions will not be considered "accepted" by Molina until received at the appropriate Claims PO Box.** Claims submitted to non-approved locations/pathways (e.g., Molina physical office locations) will be returned.

- Medicare and Molina Dual Options MyCare Ohio: PO Box 22664, Long Beach, CA 90801
- Marketplace: PO Box 22712, Long Beach, CA 90801
- Medicaid and Molina MyCare Ohio Medicaid: PO Box 22712, Long Beach, CA 90801. **Note:** Once all Medicaid claims must be submitted via the ODM Medicaid Provider Network Management (PNM) portal or EDI, paper claims will no longer accepted by ODM or Molina.

Paper claim submission requirements:

Submission of paper claims must adhere to the following requirements:

- Must use original Flint OCR red and white CMS 1500 (02/12) and CMS 1450 (UB-04) paper claim forms. Other claim form types will be rejected upfront and returned to the provider. This includes black and white forms, copied forms, and forms with any altering to include claims with handwriting.
- Be typed with either 10- or 12-point Times New Roman font in black ink.
- Must avoid the use of highlights, italics, bold text, or staples.

Additional information on claim submission requirements is available in our Provider Manual(s) at [MolinaHealthcare.com](https://www.molinahealthcare.com).

"It Matters to Molina" Corner

Information for all network providers

Thank you for the great response to the "It Matters to Molina" question! Our winner is Becky Herron from Brown Memorial Home.

The November "It Matters to Molina" question answer is "2." On what date will ODM implement Phase 3 of the Next Generation Medicaid Program, which will include streamlining the providers' process of claims and PA submission to the Managed Care Plans?

1. Nov. 1, 2022
2. Dec. 1, 2022
3. Jan. 1, 2023

December Question: ODM has postponed the launch of Phase 3 of the Next Generation Medicaid Program. What is the new launch date?

1. Jan. 1, 2023
2. Feb. 1, 2023
3. July 1, 2023

Email your answer to OHProviderBulletin@MolinaHealthcare.com by December 15 to enter the drawing. Molina will announce the winner and the correct answer to the question in the January Provider Bulletin.

In addition to participating in the monthly drawings, we want to hear from you. Please take the time to share feedback with us about your experience working with Molina. Your feedback is essential, and It Matters to Molina.

- **Dec. 27: Claims Matching and Reports:** Intended for Agency Providers, Independent Providers, and Alt EVV Agency Providers

Reminder: Claim Reconsideration Status Now Live on the Availity Portal Information for Medicaid and Marketplace providers

Providers can access the claim reconsideration status on the Provider Portal through the Availity Single Sign On features. To access this functionality:

- Log in to Availity Portal at provider.molinahealthcare.com
- Enter Claim Search Information that you are checking
- Click on the Claim ID
- Now you can see the Appeal Status and view or print the letter
- Click on the .pdf Letter icon to view the decision letter

Reminder: Provider Contract for Next Generation Medicaid Information for Medicaid providers

Molina has received provider inquiries regarding what actions they need to take contractually with Molina in preparation for the Next Generation Medicaid program. No provider action is required at this time. Molina will continue to share information as it becomes available.

Reminder: Tips for Preparing Patients for Telehealth Visits Information for Medicaid and MyCare Ohio providers

Offering telehealth visits can be a great way to ensure your patients receive needed services while removing barriers that may prevent them from keeping scheduled office appointments, such as transportation. Molina developed a resource document to support our members and providers by removing some of the mystery around telehealth to make this service more accessible to our members. Please feel free to print and share this information with your patients or point them to our website. These tips may help your patients feel more knowledgeable about telehealth and have a better understanding of the benefits of this service delivery method.

To access the materials, visit the Molina Member Website at [MolinaHealthcare.com](https://www.molinahealthcare.com).

Reminder: Next Generation Medicaid: PNM, SPBM, and OH|ID**Information for Medicaid and MyCare Ohio providers**

OH|ID Requirement: As of Oct. 1, 2022, all Medicaid providers need an OH|ID. Providers must obtain an OH|ID to access Medicaid's PNM module and the Single Pharmacy Benefit Manager (SPBM) secure web portal and do business with Ohio Medicaid.

Get your State of Ohio digital identification (OH|ID) today:

- Create an OH|ID account at: ohid.ohio.gov/wps/portal/gov/ohid/create-account/create-account.
- Get help logging in at: ohid.ohio.gov/wps/portal/gov/ohid/help-center/help-logging-in/help-logging-in.
- View an in-depth OH|ID account creation user guide at: medicaid.ohio.gov/static/Providers/Billing/TradingPartners/OMES/OHID-Account-Creation-User-Guide.pdf.
- Contact the ODM Integrated Help Desk at (800) 686-1516, Monday-Friday, 8 a.m. - 4:30 p.m. ET. for technical assistance. Medicaid providers can email PNMCommunications@medicaid.ohio.gov with questions.

Training for PNM and SPBM:

- PNM Training: Visit managedcare.medicaid.ohio.gov/providers/provider-webinars-training to register for a self-paced training session or sign up for virtual and/or in-person learning. Training topics include PNM login and access, system navigation, new enrollment applications, demographic updates, revalidations, and PA and claim submissions.
- SPBM Trainings: Visit the Gainwell website to view Pharmacy Web Portal training or Prescriber Web Portal training at spbmmol.ohio.gov. Training topics include SPBM login and access, system navigation, verifying member pharmacy benefit eligibility, submitting and viewing pharmacy claims, and submitting and viewing pharmacy PA. Note: SPBM only pertains to the Medicaid line of business.

Credentialing Information: As of Oct. 1, 2022, ODM is the single point of contact for provider credentialing for Medicaid and MyCare Ohio.

- Initial Credentialing: Applications must be directed to ODM via the new PNM module.
- Recredentialing: Molina will continue to process recredentialing files for our providers until Jan. 31, 2023.

Reminder: All providers must have an active and valid Medicaid ID at the time of enrollment with Molina.

Be in the know about Medicaid provider changes coming: Be sure to stay up to date on all email communications from ODM. Subscribe to the Next Generation provider newsletter by checking the box next to *ODM 2022 Press* at medicaid.ohio.gov/home/govdelivery-subscribe.

[com/members/oh](https://www.molinahealthcare.com/members/oh). Under the "Member" tab, select "Medicaid," then click on "About Medicaid," then "Member Resources" and select "[Telehealth Appointments](#)." From this page, you can access the link to the [tips](#) document.

Reminder: PsychHub Information on Provider Website**Information for all network providers**

PsychHub is an online platform for digital mental health education, including a library with more than 180 consumer-facing, animated videos focused on improving mental health literacy and reducing stigma about seeking care. Providers can sign up for free to access content and videos at app.psychhub.com/signup/molina-mhp and access behavioral health-focused learning hubs. Some courses have Continuing Education Credits available for Clinical Psychologists, Clinical Social Workers, and Licensed Professional Counselors. With the successful completion of courses, the provider will unlock industry-recognized certificates delivered electronically.

View the "[Psych Hub: Access Your Mental Health Practitioner HUB](#)" document on the "It Matters to Molina" page of the Provider Website for more details.

Fighting Fraud, Waste, and Abuse

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

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twitter.com/MolinaHealth