

IMPORTANT NOTICE FOR PARTICIPATING SKILLED NURSING FACILITIES

UPDATED INFORMATION – JUNE 30, 2022

Thank you for being a valued part of our Senior Whole Health provider network.

On January 1, 2021 Senior Whole Health (SWH) was purchased by Molina Healthcare. Integration to Molina systems was completed effective January 1, 2022. SWH previously communicated expected changes as a result of this system transition in November 2021 and provided a post-integration update in January 2022. We continue to revise our communication based on frequently asked questions and feedback from our community partners. Please review the below updates applicable to our participating Skilled Nursing Facility network. SWH Provider Service Representatives are available for additional review, as needed.

- **Claims Payment:** Historically, SWH delivered a single check inclusive of both Medicare and Medicaid payments for members of our DSNP population. We previously communicated the change to pay separate claims for each line of business beginning January 1, 2022. We are receiving reports of SWH members receiving bills for services that are paid on the secondary claim. ***As a reminder, balance billing Senior Whole Health members is not permitted.*** Please review the Evidence of Payment (EOP) document for each claim. We are continuing to work with vendors to streamline the EOP document to remove any barriers that are resulting in the generation of member bills. Hospice claim billing code changes are still being discussed and a communication will be sent out when finalized. Please contact the Provider Service Center or your Provider Relations Account Manager if you have any questions.
- **Enhanced Benefit Days Claims:** Previously, Skilled Nursing Facilities were able to bill Enhanced Benefit Days using Revenue Codes 0195, 0196, and 0197. These codes are no longer available under CMS and cannot be paid by SWH. Please use the following grid as a reference for submission of these claims. These codes will be effective 8/1/22. SWH will override timely filing requirements for claims for dates of service in 2022 that are received by *September 30, 2022*.

Former Rev Code	New Rev Code	Description
0195	0110	R&B Private General
0196	0118	R&B Private Rehab
0197	0100	R&B All Inclusive

Prior Authorizations: The **PA Look Up Tool**, available at www.SWHMA.com, is an interactive tool that identifies if a Prior Authorization is required for individual services. Downloadable versions are also available. Please be sure to check both the Medicare and Medicaid product lines when verifying if a Prior Authorization is required.

- Starting July 1st, SWH will no longer require Prior Authorization on bed holds.
- Physical/ Occupational Therapy – Prior Authorizations are not required for the initial evaluation and first 11 visits. Prior Authorizations are required for additional visits. Please note this guidance is included on the PA Look Up Tool.
- SWH does not require Prior Authorization for Observation for Participating and Non-Participating Hospitals.
- Long Term Care Authorizations-a request must be submitted for a LTC auth from the provider. If the auth is to expire a new request would be required.
- Prior Authorization requests should include a provider order, unless otherwise stated or communicated. Additional clinical documentation may also be required. The physician order should include the following information:
 - Prescribing Physician Name, NPI, and Signature
 - Member Demographics, including:
 - Member Full Name
 - Member DOB
 - Member Address (*preferred, not required*)
 - Member Phone Number (*preferred, not required*)
 - Product Name/Description
 - Units
 - Frequency
 - ICD-10
 - Order must be dated

Thank you for your continued support for our shared members. Should you have any questions, please contact the Provider Service Center, at 1-855-838-7999, your Provider Relations Account Manager directly, or email our team at SWHProviderRelations@molinahealthcare.com.

Sincerely,
Lauren Morton

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