PROVIDER BULLETIN
A bulletin for the Molina Healthcare of Ohio provider networks

"It Matters to Molina" Corner
Information for all network providers

Thank you for the wonderful response to the "It Matters to Molina" question! Our winner is Terri Arnold from Med-Trans Inc.

The September "It Matters to Molina" question answer is "1." Effective for what date of service and forward will Molina begin to deny Medicaid claims submitted by providers who are non-enrolled or inactive with the Ohio Department of Medicaid (ODM)?
1. August 15, 2021   3. October 15, 2021
2. August 31, 2021   4. December 31, 2021

October Question: Which of the following items are new or have been recently updated on our Provider Website?
1. New Provider Online Directory
2. Updated Prior Authorization (PA) Request Form
3. New PA Code List
4. New Nursing Facility Request Form
5. Updated Managed Care Plan (MCP) Consolidated Resources
6. All the above

Email your answer to OHProviderBulletin@MolinaHealthcare.com by Oct. 15 to enter the drawing. The correct answer and drawing winner will be announced in the November Provider Bulletin.

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

Reminder: Medicaid Enrollment Requirements Provider Bulletin
Information for Medicaid network providers

As of Aug. 15, 2021, any provider who is not enrolled and noted as "active" in Medicaid Information Technology System (MITS) will receive denials for claims submitted to Molina. Claim denials will continue until the provider's Medicaid enrollment is noted as an "active" status.

For example, if a provider appears in "active" status on Aug. 16, 2021, but appears "inactive" as of Dec. 1, 2021, all claims from this provider will be denied from Dec. 1, 2021 forward until the provider takes action to reactivate their record in MITS.

Note: Providers who update their records after claims begin rejecting, will need to submit corrected claims once the records are updated.

On July 16, Molina communicated the Special Edition Claim Denials for No Medicaid Enrollment – Groups and Individuals Provider Bulletin noting ODM requires providers to be enrolled and active with ODM, and that Molina would begin denying claims submitted by non-enrolled or inactive providers starting on Aug. 15, 2021. For information in response to provider questions regarding this communication, please see the additional details in the September Provider Bulletin.

Questions and Quick Links
Provider Services – (855) 322-4079
8 a.m. to 5 p.m., Monday to Friday
(MyCare Ohio 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
- Molina Provider Portal
- Availity Provider Portal

How to Join WebEx
To join WebEx, call (404) 397-1516 and follow the instructions. To view sessions, log into WebEx.com, click on "Join" and follow the instructions. Meetings passwords are case sensitive. For trouble connecting to a Molina training, email Molina at OHProviderRelations@MolinaHealthcare.com and we'll assist you with getting connected immediately.

The Provider Bulletin is a monthly newsletter distributed to all network providers serving beneficiaries of Molina Healthcare of Ohio Medicaid, Medicare, MyCare Ohio and Health Insurance Marketplace health care plans.

Updated: Ordering, Referring and Prescribing Providers NPI
Information for all network providers

As of July 1, 2021, Molina requires the billing of Ordering, Referring and Prescribing (ORP) providers based upon the requirements developed by the ODM in compliance with federal regulations 42 CFR 438.602 and 42 CFR 455.410. Claims billed with the attending field information will also be used to satisfy the ORP requirements.

For providers with notable ORP billing errors, Molina will be reaching out to address and educate. Molina will continue to share updates on these billing requirements in future Provider Bulletins. Molina's claim system will be updated in mid-November to include warn messages for providers requiring ORP.

Consistent with these rules, a valid National Provider Identifier (NPI) will be required on claims for select ORP provider types which are eligible to order, refer or prescribe including:

Hospital	Independent Diagnostic Testing Facility
Psychiatric Hospital	Waivered Services Organization
Nursing Facility	Medicare Certified Home Health Agency
Professional Medical Group	Other Accredited Home Health Agency
Hospice	OMHAS Certified/Licensed Treatment Program
Pharmacy	Psychiatric Residential Treatment Facility
FQHC	Certified OH Behavioral Analyst
Clinic	Occupational Therapist Individual
Independent Laboratory	Certified RN Anesthetist Individual
Waivered Services Individual	Durable Medical Equip Supplier
Audiologist Individual	Speech Language Pathologist
Anesthesia Assistant Individual	Ohio Department of Mental Health Provider
Physical Therapist Individual	Non-Agency Personal Care Aide
Wheelchair Van	Non-Agency Nurse – RN or LPN
Portable X-Ray Supplier	Non-Agency Home Care Attendant

Notice of Changes to the Provider Manual
Information for Medicaid, MyCare Ohio and Marketplace providers

Molina has added an Addendum page to the Combined and Marketplace Provider Manuals noting an update to the "Emergent Inpatient Admissions" section of the Healthcare Services chapter.

Effective Oct. 1, 2021 hospital admissions and notification to health plan has been updated from "24 hours or next business day" to "48 hours or next business day."

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

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www.twitter.com/MolinaHealth

Join Our Email Distribution List
Get this bulletin via email. Sign up at MolinaHealthcare.com/ProviderEmail.

Provider Training Sessions
Information for all network providers

It Matters to Molina Forum: Provider Resources for Suicide Prevention
- Thurs., Oct. 7, 2:30 to 3:30 p.m., meeting number 2453 316 2737, password vSvfmxcm725

Model of Care Training Session:
- Wed., Oct. 20, 9 to 10 a.m., meeting number 133 202 2946, password UzFRUivH323
- Fri., Nov. 12 10:30 to 11:30 a.m., meeting number 133 062 6357, password 4ytNUxFqm37

Quarterly Provider Orientation:
- Wed., Oct. 27, 11 a.m. to 12 pm., meeting number 177 287 0814, password Q8rnxi7e3mU

To join WebEx, follow the instructions under "How to Join WebEx."

Notice of Changes to Prior Authorization (PA) Requirements
Information for all network providers

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

Website Roundup
Recently updated documents and webpages include:
- PA Request Form

Did You Know?
Information for all network providers

Did you know that as of Sept. 1, 2021, PA requests for Molina members previously being submitted through eviCore transitioned back to Molina?

Find out more in the Molina Transitioning Away from eviCore article in the September Provider Bulletin on the Provider Website.

New Provider Online Directory
Information for all Providers

Molina has a new Provider Online Directory (POD) offering enhanced search functionality making information available quickly and easily. Check out the new tool on the Provider Website, by selecting "Find a Provider."

Key benefits include:
- User-friendly and intuitive navigation
- Provider profile cards for quick access to information
- Browsing by category, search bar, and common searches
- Expanded search options and filtering for narrowing results
- Provider information that can be saved to use later

As always, providers should confirm the POD information is correct. This allows Molina to accurately generate provider directories, process claims, and communicate with our network. Providers must notify Molina in writing at least 30 days in advance of changes. Changes should be submitted on the Provider Information Update Form located on the Provider Website.

Managing Implicit Bias and Maternal Health Training
Information for Medicaid and MyCare Ohio women's health providers

The Ohio Department of Health (ODH) is conducting free Managing Implicit Bias and Maternal Health trainings, hosted by the Pregnancy Associated and Mortality Review (PAMR) program. Participants in this training will take a Cultural Intelligence (CQ®) assessment before and after training to determine what skills they need in order to improve their culturally intelligent strategies. Results are confidential and for the personal use of participants and aggregate analysis.

Please click on the below links to register for the Zoom meeting:
- Tue., Oct. 19, 9 a.m. to 3:30 p.m. Register at https://www.eventbrite.com/e/october-19-2021-managing-implicit-bias-and-maternal-health-registration-167760810099
- Tue., Nov. 30, 9 a.m. to 3:30 p.m. Register at https://www.eventbrite.com/e/november-30-2021-managing-implicit-bias-and-maternal-health-registration-167761084921
- Wed., Dec. 8, 9 a.m. to 3:30 p.m. Register at https://www.eventbrite.com/e/december-8-2021-managing-implicit-bias-and-maternal-health-registration-167761295551

ODH will award 3.91 contact hours to nurses and social workers who attend 100% of one of the sessions and submit their evaluations.

2021/2022 Flu Season Recommendations
Information for all network providers

Molina has adopted the Advisory Committee on Immunization Practices' (ACIP) Influenza Vaccination Recommendations that stipulate all people six months of age and older who do not have contraindications should receive licensed, recommended, and age-appropriate flu vaccinations.

You can review the entire set of recommendations, including information about persons at risk for medical complications due to severe flu, on the Centers for Disease Control (CDC) website at www.cdc.gov/flu.

As a reminder, the flu vaccine is a covered benefit for Molina members. Members can receive the vaccine at a contracted pharmacy and/or

Updated: SUD PA Request Form
Information for SUD providers

In August 2021 ODM and the Ohio Department of Mental Health and Addiction Services (OhioMHAS) implemented a new Substance Use Disorder Services Prior Authorization Request form.

The form was recently updated to incorporate provider and plan requests for additional space for open-ended responses. Updates include:
- Enlarged text boxes throughout
- Additional comment text boxes on the last page

Completed forms should be submitted to the MCP in which the member is enrolled, or to the MITS PA Portal for fee-for-service Medicaid.

For additional details view the Updated SUD Services Prior Authorization Request Form Available to Use MITS Bits under MITS BITS & Newsletters at BH.Medicaid.Ohio.gov.

Q3 Provider Newsletter
Information for all network providers

The Q3 2021 Provider Newsletter is available on the Communications tab on the Molina website. Articles in this edition include:
- Molina Healthcare and PsychHub Partner for Mental Health Resources
- New Provider Online Directory
- Naloxone Saves Lives
- 2021 Molina Healthcare Model of Care Provider Training
- Is Your Authorization Request Urgent?
- Culturally Competency Resources for Providers and Office Staff
- Submitting Electronic Data Interchange (EDI) Claims
- Electronic Funds Transfer (EFT)

Managed Care Nursing Facility Request Form Instructions
Information for MyCare Ohio and Medicare providers

The MyCare Ohio Managed Care Plans (MCOPs) and the Medicaid MCPs have been working to address and reduce the administrative burden providers experience with the PA and level of care (LOC) process. The Nursing Facility Request Form was created to assist with this endeavor.

Primary Care Provider (PCP) office. For more information about the flu vaccine benefit, members can contact Member Services using the number on the back of their member ID cards. Thank you for helping keep your patients healthy during this flu season!

Your patients may receive one or more of the following communications from Molina:
- a verbal flu shot reminder when members contact Molina
- a newsletter with an article about the importance of getting a flu shot
- preventive tips available on the Molina Provider Website
- calls from Molina Care Managers and Pharmacists encouraging members to receive a flu shot
- social media messages encouraging members to get a flu shot
- a planner to keep track of recommended preventive care services, including the flu shot

Managed Care Plan Consolidated Resources
Information for Ohio Comprehensive Primary Care (CPC) Practices

Molina and the other Ohio MCPs continue to collaborate on simplifying the work of our Ohio CPC practices by offering consolidated resources. Recently, the MCPs worked to include additional documents to create a quick tool for our practices to have for easy reference. This includes:
- 2021 Ohio CPC practice roster with Lead MCP assignments
- MCP Primary Care Change form
- MCP Transportation overview
- MCP coverage of well and sick visits, on the same day
- MCP consolidated resource guide, by plan
- Behavioral Health (BH) Virtual Pediatric office hours

Molina has posted the latest version of the Ohio CPC – Managed Medicaid Consolidated Plan Resource Guide on the Provider Website, under the Health Resources tab. Recommendations for additional resources are welcome as the MCPs work to continue to make helpful improvements.

Data Accuracy for Electronic Visit Verification (EVV) Providers
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

As a reminder, Electronic Visit Verification (EVV) providers must ensure any changes to provider information is submitted to Molina for system updates via the Provider Information Update Form, located on the Provider Website, on the Forms page. This data validation is necessary to ensure accuracy of matching claim data information when claims are sent to Sandata for verification. If Molina has not received the correct information from the provider, the claim will not match to a verified visit in Sandata, and providers will receive a letter from ODM noting visits are not recorded appropriately within the Sandata Aggregator. Please contact your Provider Services Team if you have any questions.

Long-Term Services and Support Bi-Annual Audit
Information for all LTSS providers

As a reminder, in accordance with the ODM's 1915(c) Center for Medicare & Medicaid (CMS) Services approved waiver, Molina is required to verify through a bi-annual random audit that Long-Term Services and Support (LTSS) claims have been paid in accordance with individual members' waiver service plan. This verification is confirmed by reviewing provider

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The NF Request Form is available on the Molina Provider Website, on the Forms page, under the Prior Authorization header.

Molina has also posted the Ohio Medicaid Managed Care/MyCare Ohio Nursing Facility Request Form Instructions training guide on the Provider Website, under the Communications tab, on the It Matters To Molina page, under Tools and Resources.

The NF Request Form is not required for Long-Term Care providers to use.

Nursing Facility Ventilator Rates
Information for Medicaid and MyCare Ohio providers

Molina has updated the Nursing Facility (NF) Ventilator Rates based on ODM's updates to OAC 5160-3-18 Nursing facilities: ventilator program.

As of July 1, 2021, ODM will pay eligible NFs an enhanced rate for ventilator dependent residents instead of the facility's regular Medicaid per diem rate.

Note: The rates apply to fee-for-service, MyCare Ohio, and Managed Care Plan (MCP) individuals participating in the NF Ventilator Program, including individuals receiving hospice services.

COVID-19 Vaccine Billing Guide
Information for Medicaid providers

ODM has updated the COVID-19 Administration Billing Guidelines to include new CPT codes for administration of third vaccine doses. Read it at https://medicaid.ohio.gov, under Resources for Providers, select COVID-19, and then download the COVID-19 Vaccine Administration Billing Guidelines.

Value Code 80 & 81: Missing/ Invalid Covered Days
Information for Inpatient and Long-Term Care providers in all LOBs

Value code 80 (Covered Days) must be present on inpatient and long-term care claims or the claims will be denied. Institutional (UB) outpatient services are excluded from this requirement.

Claims with non-covered days must bill value code 81 (Non-Covered Days) to

documentation that indicates the services were performed and the member signed off.

During the bi-annual Waiver audit, Molina will ask a random sample of waiver providers for specific documentation by waiver service category. The documentation requested will be based on the services provided.

Contracted providers are required to comply if they are selected for this audit. Claims will be recovered if the provider is unable to furnish supporting documentation that the authorized level of waiver services were both rendered and within the member's service plan.

Additional information regarding the requirements for My Care Ohio Waiver covered services can be found in [OAC 5160-58-04](#) MyCare Ohio waiver: covered services and providers.

Annual Mandatory Medicare Model of Care Training
Information for providers in the Medicare network

CMS requires all contracted <u>Medicare</u> medical providers complete a basic training on the Dual Eligible Special Needs Plan (D-SNP) Model of Care (MOC) by Dec. 31, 2021. Providers only participating in the Medicaid, MyCare Ohio and Marketplace LOBs <u>do not</u> need to complete this training. Provider types include the following:
- Primary Care Provider (PCP): all specialties for PCP Physicians
- Cardiologists: Cardiovascular Disease/Cardiovascular Diseases, Interventional Cardiology, Cardiology, Cardiology – Interventional & Hypertension Specialist)
- Pain Management: Pain Medicine, Interventional Pain Medicine, Pain Medicine – Pain Medicine
- Psychiatry: Child and Adolescent Psychiatry, Geriatric Psychiatry, Psychiatry

WebEx Training: Molina will be hosting monthly MOC provider training sessions to help train you and your staff, and address questions. To join WebEx, follow the instructions under "[How to Join WebEx](#)."
- Wed., Oct. 20, 9 to 10 a.m., meeting number 133 202 2946, password UzFRUivH323
- Fri., Nov. 12 10:30 to 11:30 a.m., meeting number 133 062 6357, password 4ytNUxFqm37

Online Training: Our online training is available on the MyCare Ohio Provider website, under the "Communications" tab, on the "Resources & Training" page. Select the "[2021 Model of Care Provider Training](#)." After reviewing the training, providers should complete and submit the "[OH MOC Attestation Form](#)" located in the "Select State Form" drop-down menu.

New in 2021, individual providers can fill out and submit the OH MOC Attestation Form online. If one provider is willing to sign off for a group or clinic, the provider <u>should not</u> fill out and submit the OH MOC Attestation Form online, instead the provider must:
1. Export the OH MOC Attestation Form using the "Export to PDF" button on the Provider Website
2. Fill out an Excel spreadsheet of all the providers in the clinic/group and include:
   - Name of the provider giving the training
   - Clinic/Practice name

indicate the total number of full days that are not reimbursable.

As a reminder:
- If the covered and non-covered day's values are not reported on separate lines, the claim will be denied
- The total covered days and non-covered days billed must match at the line and header level
- This process must be followed by the provider for billing collapsed preventable readmissions

For additional information read the "Updated: Value Code 80 & 81: Missing/Invalid Covered Days" article in the [February Provider Bulletin](#), located on the Provider Bulletin page of the Provider Website, under the Communications tab.

BH Centralized Fax Number
Information for BH Medicare and MyCare Ohio providers

Molina has updated the Behavioral Health (BH) and Substance Use Disorder (SUD) centralized fax numbers:
- Medicare PA: (844) 251-1450
- MyCare Ohio PA: (844) 251-1451
- Medicare/MyCare Ohio Inpatient and Discharge PA: (844) 834-2152

There are no changes to the Medicaid or Marketplace BH and SUD PA Fax numbers:
- Marketplace: (833) 322-1061
- Medicaid: (866) 449-6843

The process for obtaining PA has not changed.

Submitting Professional Claims When the Billed Amount Exceeds $99,999.99
Information for Medicaid, MyCare Ohio and Medicare providers

Per the CMS [Standard Companion Guide Health Care Claim: Professional (837P)](#), the maximum number of characters in any dollar amount field is seven characters. Claims containing a dollar amount in excess of $99,999.99 will be rejected. When a claim has services that exceed $99,999.99, the claim is to be submitted on separate claims.

For additional information read the full "[Submitting Professional Claims When the Billed Amount Exceeds](#)

- Clinic/Practice address
- Tax Identification Number (TIN)
- The method used to train office staff and providers
- Date the office staff and providers were trained
- Date the office staff and providers sign the attestation
3. Email the completed OH MOC Attestation Form and Excel spreadsheet to OHAttestationForms@MolinaHealthcare.com

Find additional information in the Model of Care Provider Bulletin on the Provider Website, under the Communications tab.

Diabetes Self-Management Education for Medicaid
Information for all Medicaid network providers

Effective June 1 through December 31, 2021, Molina has added the Diabetes Self-Management Education (DSME) value-added benefit for Medicaid members with diabetes. Eligible members will have access to up to 10 hours of initial training. DSME is provided by educators in an American Diabetes Association (ADA)-recognized and/or Association of Diabetes Care and Education Specialists (ADCES)-accredited program.

The core content includes these self-care behaviors:
- Diabetes pathophysiology and treatment options
- Healthy eating
- Physical activity
- Medication usage
- Monitoring and using patient health data
- Preventing, detecting and treating acute and chronic complications
- Healthy coping with psychosocial issues and concerns
- Problem solving

Healthcare Common Procedure Code System (HCPCS) code G0108 should be utilized for individual DSME and G0109 for group DSME. Hospitals are strongly encouraged to bill G0109/G0108 separately when submitting a UB-04 claim form to Molina for quicker processing.

For more information about when to refer to DSME and to locate a Medicaid DSME provider in the Molina network, view the Diabetes Chronic Conditions Resources on the Molina Provider Website, under the Health Resources tab. Reminder: Providers should verify a member's eligibility each time the member receives services.

Fighting Fraud, Waste & Abuse
Information for all network providers

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.

$99,999.99" article in the September Provider Bulletin, or by reading section "7.2 General Transaction Notes," at https://www.cgsmedicare.com/pdf/edi/837p_compguide.pdf, starting on page 14 of the Standard Companion Guide Health Care Claim: Professional (837P).

Drug Waste Codes Billed with Modifier JW
Information for Medicaid network providers

As of Sept. 1, 2021, professional claims for drug waste codes billed with JW modifier will pay zero ($0) in accordance with ODM payment methodology.

EVV Updates
Information for impacted home and community-based service providers

Sandata Mobile Connect® (SMC) application (app): The app is required to be version 1.1.573 or higher. Providers are able verify the app version on the app login screen.

Training: Providers may utilize the video library for assistance on the EVV system:
- Agency: https://sandata.wistia.com/projects/vkywg2l6bp/channel
- Non-Agency: https://sandata.wistia.com/projects/qkz324kz0p/channel

Alternative EVV Certification: Based on stakeholder feedback, ODM and Sandata have updated the alternative EVV certification process. Effective Sept. 15 the alternative EVV certification process in Ohio changed from requiring each new vendor and provider to pass certification to only requiring this step for new vendors.

Reminder: It is important to log visits via the EVV system and verify before billing the services.

Email ODMEVV@Sandata.com for questions or call the EVV Provider Hotline at (855) 805-3505.