

Behavioral Health Centralized Fax Number

Information for behavioral health Medicare and MyCare Ohio providers

Molina Healthcare has updated the Behavioral Health (BH) and Substance Use Disorder (SUD) centralized fax numbers:

- Central Medicare Prior Authorization (PA): (844) 251-1450
- Central MyCare Ohio PA: (844) 251-1451
- Central Medicare/MyCare Ohio Inpatient and Discharge PA: (844) 834-2152

There are no changes to the Medicaid or Marketplace BH and SUD Fax numbers:

- Marketplace PA Request: (833) 322-1061
- Medicaid PA Request: (866) 449-6843

The process for obtaining PA has not changed.

Claim Reconsiderations

Information for all network providers

As a reminder, BH providers are required to follow the standard claim reconsideration process for disputing how a claim was processed. Submit a claim reconsideration form only when disputing a payment denial, payment amount or code edit.

- A Claim Reconsideration Request Form must be submitted for any dispute that is related to a claim denial that is not due to an authorization.
- An Authorization Reconsideration Form must be attached to any request involving an authorization denial or update.

The forms are available on our website, under the “Forms” tab.

Effective Sept. 6, 2021, any claim reconsideration request, or request to review claims that have not yet been submitted via the standard claim reconsideration process, will be returned to the provider with instructions on the correct process to address the claims. The BHProviderServices@MolinaHealthcare.com email box will no longer address these inquiries.

SUD Services PA Request Form

Information for SUD providers

The Ohio Department of Medicaid (ODM) and the Ohio Department of Mental Health and Addiction Services (OhioMHAS) implemented a new [Substance Use Disorder Services Prior Authorization Request](#) form.

The goals of the form include:

- Improve/support adherence to American Society of Addiction Medicine (ASAM) criteria
- Increase consistency in the PA process
- Standardize required documentation and align with OhioMHAS documentation requirements
- Ensure the member perspective is considered

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Questions?

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 website at MolinaHealthcare.com/OhioProviders

Visit the ODM BH website at <https://bh.medicaid.ohio.gov/manuals>

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Behavioral Health Provider Manual

On March 18, 2021, the [BH Provider Manual](#) was updated by ODM and OhioMHAS. Visit the ODM BH website to view the updated manual.

Non-Contracted Behavioral Health Providers

Information for Medicaid and MyCare Ohio network providers

As of Oct. 1, 2020, non-contracted (out-of-network) Community Behavioral Health Center (CBHC) providers who deliver services to Molina members are required to submit a PA for all services per Molina’s standard policies. Failure of a non-contracted provider to obtain PA

The SUD Services PA Request form is located on the ODM website at <https://medicaid.ohio.gov>, by selecting “Medicaid Forms” and typing in either ODM 10276 or the name of the form. Training on the SUD PA Request form is available at BH.Medicaid.Ohio.gov.

Billing Code Added for Pregnancy Report

Information for Medicaid and MyCare Ohio providers

On July 1, 2021, ODM added coverage for Healthcare Common Procedure Coding System (HCPCS) code T1023 to be used for “Report of Pregnancy.”

Payment may be made for one report of a pregnancy diagnosis in conjunction with an E&M service that is not associated with a normal obstetrics/gynecology visit. The report must be submitted on either form ODM 10257 [Report of Pregnancy \(ROP\)](#) or the [Pregnancy Risk Assessment Form \(PRAF\)](#).

For additional information read the July 1, 2021 [Medicaid Community Behavioral Health Billing Codes for Prolonged Services & Coverage Added for “Report of Pregnancy”](#) MITS Bits, located on the ODM BH website, under “MITs Bits & Newsletters.”

Prolonged Service Codes: 99354 and 99355

Information for Medicaid and MyCare Ohio providers

ODM has announced the continued use of codes 99354 and 99355 as billing codes for prolonged services with the following Evaluation and Management (E&M) codes:

- New Patient: 99202 through 99205
- Established Patient: 99211 through 99215

Starting on Jan. 1, 2022, ODM plans to adopt the American Medical Association (AMA) procedure codes 99415 and 99416 to indicate prolonged E&M services for BH provider types 84 and 95.

For additional information read the July 1, 2021 [Medicaid Community Behavioral Health Billing Codes for Prolonged Services & Coverage Added for “Report of Pregnancy”](#) MITS Bits, located on the ODM BH website, under “MITs Bits & Newsletters.”

Prolonged Services Codes: 99417 and G2212

Information for Medicaid and MyCare Ohio providers

Effective Jan. 1, 2021, two new codes were added to ODM’s Outpatient BH fee schedule: 99417 and G2212. Both of these add-on codes are to be billed in 15-minute increments. These codes should not be reported for any time unit less than 15 minutes. Molina’s system is configured to accept these codes.

Read the “Prolonged Services Code” article in the [February 2021 Special Bulletin: Behavioral Health Provider Bulletin](#), located on the Molina Provider Website, under the Communications tab, on the Provider Bulletin page for more information.

PsychHub on the Molina Provider Website

Information for Behavioral Health providers

Molina members and providers now have access to PsychHub via our Provider Website. PsychHub is an online platform for digital mental health education, including a library with more than 180 consumer-facing, animated

will result in claim denials for those services. This change is based on the July 1, 2020 update by ODM to the transition of care language in Appendix C of the Managed Care Plan (MCP) Provider Agreement, under 31. Transition of Care Requirements for Managed Care Members Receiving Behavioral Health Services.

Providers who wish to join the Molina network should reach out to MHOBHProviderTeam@MolinaHealthcare.com.

Provider Enrollment in MITS

Information for CBHC providers

As a reminder, ODM and OhioMHAS have discontinued the universal roster and moved towards using the Medicaid Information Technology System (MITS) as the primary source of provider enrollment and affiliation information.

CBHC providers must update MITS with accurate information to be shared with all MCPs via the daily Provider Master File (PMF).

Changing a Remittance Address

Information for providers in all networks

It is important for providers to update any changes to their remittance Explanation of Payment (EOP) address with Molina directly in order to avoid delays or misrouted payments. All agency level or contractual updates need to be sent directly to Molina following the Provider Information Update process. To make these critical updates, complete the [Provider Information Update Form](#), available on the Molina Provider Website, under the “Forms” tab. Submission should include an updated W-9. The completed form can be emailed, mailed or faxed to Molina.

As a clarification, the March 2020 MITS Bits “[Universal Roster Discontinuation and Move to Provider Master File Only, Effective Immediately](#)” is critical to follow for practitioner enrollments and updates, but agency-level updates must be completed by direct contact with Molina following the process noted above.

Changing a Service Location Address

videos focused on improving mental health literacy and reducing stigma about seeking care.

Molina participating providers can sign up for free to access content and videos as well as have access to BH 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.

Note: If a provider wants to enroll in one of the online courses on the PsychHub Learning Hub, they can enter the Molina defined coupon code instead of paying the fee for the course. Please reach out to BHProviderServices@MolinaHealthcare.com to obtain the coupon code available to Molina's provider partners.

Reminder: Behavioral Health Limits, Audits and Edits Information for Medicaid and MyCare Ohio providers

As a reminder, when a patient is in a residential treatment and counseling program, sending the patient off-site for therapy services would not be considered a covered service. Please refer to the ODM "[BH Workgroup Limits, Audits and Edits](#)" document on the ODM BH website, under "Provider" then "Manuals, Rates & Resources" and under "Billing and IT Resources" and "Additional Resources."

Top Denials

Information for all network providers

Molina has identified the most recent top denial reasons that are responsible for the highest volume of denied BH claims.

Molina continues to see BH claim denials due to the following reasons:

Provider type/provider specialty may not bill this service:

- MITS is the primary source of provider enrollment and affiliation information. Community Behavioral Health Center (CBHC) providers must update MITS with accurate information to be shared with all Managed Care Plans (MCPs) via the daily Provider Master File (PMF). If MITS is not updated timely, claim payment can be impacted.

Missing/incomplete/invalid replacement claim information:

- Corrected claims must be submitted with the Molina claim ID number from the original claim being corrected and with the appropriate corrected claim indicator based on claim form type. Additional information is located in the Corrected Claims section of the Provider Manual in the Claims and Compensation chapter.

Non-contracted (out-of-network) providers are not submitting the mandatory PA requests:

- All non-emergent services rendered by non-contracted providers require PA, unless specified otherwise. Please review the [Non-Contracted Provider Billing Guidelines](#) housed on the Molina Provider Website at www.MolinaHealthcare.com

Information for all network providers

Service locations are key to claim processing, so it is important that any changes to a service location address are submitted timely to Molina to avoid claim denials. To update a service location address, complete the Provider Information Update Form, available on the Molina website, under the "Forms" tab. Submission should include any appropriate attachments for specialists or primary care providers. The completed form can be emailed, mailed or faxed to Molina.

Urine Drug Screening Information for Medicaid and MyCare Ohio providers

ODM has posted an "[Ohio Urine Drug Testing Prior Authorization Request Form](#)" to the ODM website under "Managed Care" and "For Managed Care Plans," on the "Forms" tab at <https://medicaid.ohio.gov>. The form is also posted to our website, on the "Forms" tab.

OhioMHAS has established broad guidelines for the appropriate clinical use of urine drug screening (UDS) for patients with SUD.

For additional information read the "[Medicaid Advisory Letter \(MAL\) No. 650: Guidelines for Urine Drug Screen Services](#)," document on the ODM website at <https://medicaid.ohio.gov>, under "Resources for Providers" then "Policies & Guidelines" and "Medicaid Advisory Letter (MAL)."

BH Cash Advance Repayments Information for Community BH providers in the Medicaid network

As a reminder, providers who suspended their payments should have resumed their agreed-upon repayment schedules and monthly payment amounts as of July 1, 2020.