# My Choice Wisconsin by Molina Healthcare, Inc

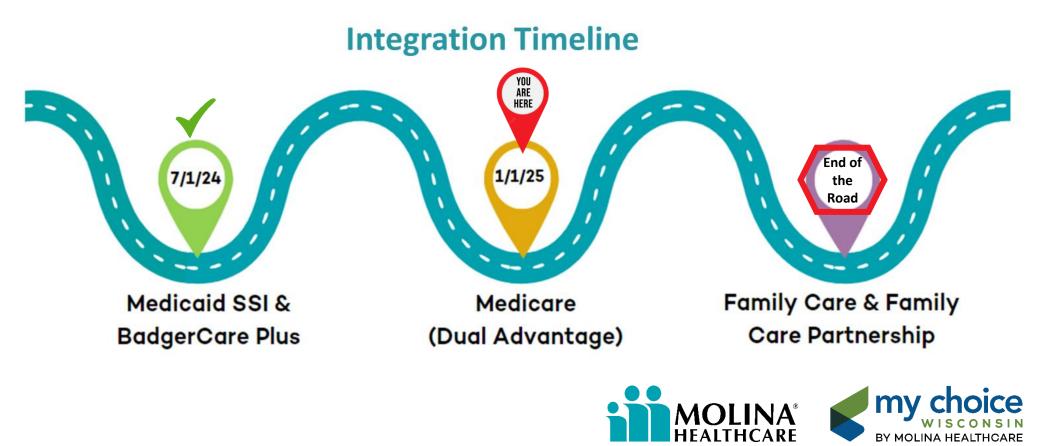
**Provider Orientation – Medicare Dual Advantage** 



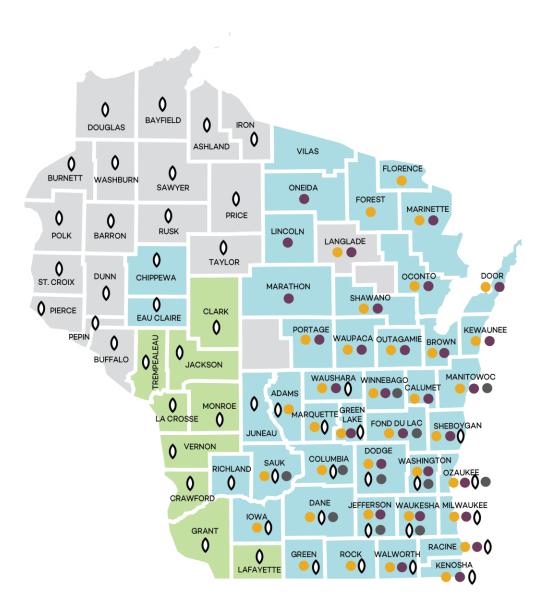
## **Integration Timeline**

- Molina Healthcare of Wisconsin, Inc. (Molina) purchased My Choice Wisconsin in September 2023.
- Molina now offers access to all government sponsored healthcare programs in WI.

This includes BadgerCare Plus, Medicaid SSI, Marketplace (ACA), Medicare, Family Care, Family Care Partnership, and Molina's TMG subsidiary in the IRIS program.



### **Service Area**

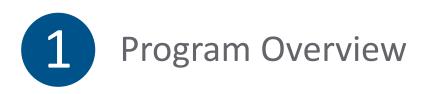


#### Map Key Medicaid SSI and BadgerCare Plus





## Agenda







**Provider Operations** 



Member Benefits







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## **Program Overview**



## **Benefit Programs**

The following illustrates the eligibility requirements for each My Choice and Molina Healthcare program. Eligibility commonalities and differences are noted below.



- Eligible for Medicaid.
- Frail adult, age 65 or older, or 18 or older with physical, intellectual or developmental disabilities.
- Meet functional requirements meaning the individual needs help performing other activities such as bathing, dressing, or eating.
- Verify member eligibility at each member encounter via the ForwardHealth Portal and Medicare's MARx User Interface for members eligible for Medicare.



- Eligible for Medicaid and may also be eligible for Medicare.
- Frail adult, age 65 or older, or 18 or older with physical, intellectual or developmental disabilities
- Meet functional requirements meaning the individual needs help performing other activities such as bathing, dressing, or eating.
- Verify member eligibility at every member encounter via the ForwardHealth Portal.





## **Benefit Programs**

The following illustrates the eligibility requirements for each My Choice and Molina Healthcare program. Eligibility commonalities and differences are noted below.

## Medicaid SSI & BadgerCare+

- Eligible for Medicaid
- Meet Federal and/or State guidelines to be eligible for the program(s) based on income level, age, and/or disability.
- Verify member eligibility at each member encounter via the ForwardHealth Portal or through Molina's provider portal, Availity.



## **Medicare Dual Advantage**

- Eligible for both Medicaid and Medicare
- Family Care and Medicaid SSI Members Eligible for Medicare Can Also Join Medicare Dual Advantage.
- Verify member eligibility via Medicare's MARx User Interface. Medicare Dual Advantage members may receive Medicaid benefits with other insurers. Verify member eligibility in ForwardHealth at each encounter.

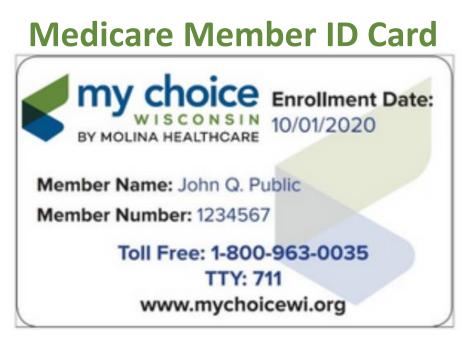




## **Medicare Product Information for 2025**

Medicare Dual Advantage members will be enrolled under 'My Choice Wisconsin Medicare Dual Advantage offered by Molina Healthcare of Wisconsin, Inc.'

- Our goal is to bring the best of both My Choice Wisconsin and Molina to our Medicare Dual Advantage members for calendar year 2025.
- Members were made aware of these program changes during the notice for open enrollment.
- Members also received detailed information in their Annual Notice of Changes (ANOC) document.







## **Provider Operations**



## **My Choice Wisconsin Website**

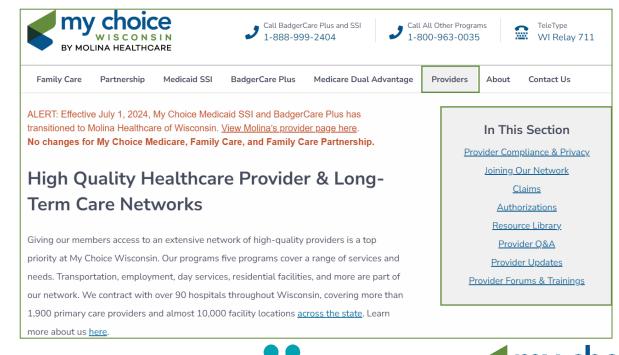
Our <u>website</u> is your best resource for all activities related to Medicare. Some of the online resources include:

- o Provider Handbook/Manual
- My Choice Wisconsin Provider Orientation
- o Authorization guidelines, forms, and submission directions

 $\circ$  Helpful links:

- Cognizant (TriZetto) Claims Portal
- $\,\circ\,$  Who to Contact When
- Claims & Appeals

O <u>Q&A Resources</u>



Can't find what you're looking for? Contact our provider relations team at <u>MHWIProviderNetworkManagement@MolinaHealthcare.com</u>.

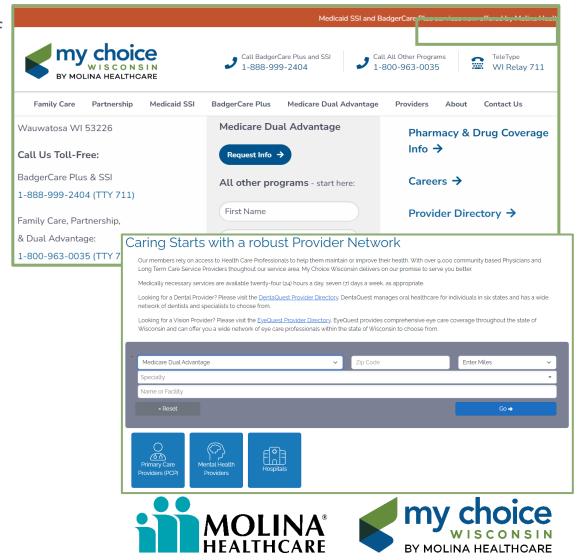




## **Provider Online Directory**

The Provider Directory is where our members and providers find other in-network providers, specialists, and facilities.

- For 2025, you will want to use and reference the My Choice Wisconsin directory to locate in network providers for the Medicare line of business.
- Provider Directory highlights include:
  - User-friendly navigation.
  - Immediate search options and functionality to find in network providers 24/7.
  - Ability to quickly and easily export results.
- Providers are encouraged to use the Provider Directory to verify their information and to find other in-network providers.
  - To update your demographic information, please send in current roster or completed <u>Provider</u> <u>Information Update form</u>.
- To find a My Choice provider, check out the website and select **Provider Directory**.



# Credentialing

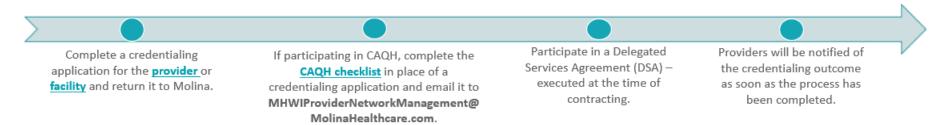


## Credentialing

The purpose of the credentialing program is to ensure My Choice and Molina's subsidiary network consists of quality providers who meet clearly defined criteria and standards.

Please note:

- Providers and facilities must be credentialed with Molina before rendering services to members.
- Providers must be Medicaid certified and credentialed to provide services to Medicaid members.
- How to get credentialed:

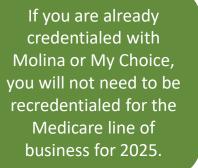


#### Credentialing is Already Consolidated Across Molina & My Choice

#### What This Means

- If you are credentialed with one organization, you are credentialed with both organizations.
- Future recredentialing will be facilitated by the Molina Credentialing team.
- Credentialing applications can be found on the **Molina website** and be returned to **MHWIProviderNetworkManagement@MolinaHealthcare.com**.







## **Claims & Payment**



## **Claims Submission**

My Choice Wisconsin partners with Cognizant TriZetto for Medicare claims processing and payment.

Clean claims must be submitted via one of the following and should be appropriately coded in accordance with CMS guidelines.

- Electronic claims submission
- Paper claim form

Questions related to Medicare billing, claims, reimbursement, denials, adjustments, or refunds, should be directed to

My Choice Wisconsin Provider Help Desk (TriZetto) (855) 878-6699 Monday - Friday, 8:00 a.m. to 4:00 p.m.

Members who are cross covered between benefit plans: If a member is covered under My Choice Medicare (DSNP) and Molina Medicaid, the claim will cross over internally, you do not need to resubmit. Remember to submit your claim to MCW Medicare first as Medicaid is always the payer of last resort. Medicare:

Cognizant (TriZetto) Web Portal

EDI Payer ID: 27004 EFT Enrollment

Paper Claims Mailing Address

My Choice Wisconsin PO Box 226897 Dallas, TX 75222-6897





## **Provider Claim Appeals**

My Choice Wisconsin also partners with Cognizant TriZetto for Claim Appeals.

Appeals must be submitted to MCW within 60 calendar days, or whatever timeframe is outlined in your Molina (or My Choice) agreement. Appeals should only be submitted on finalized claims.

My Choice will respond to provider appeals within 45 calendar days of the receipt of the request for review. Response will be in writing, similar to Molina processes.

To start a Medicare appeal, or to ask a question related to Medicare provider appeals, you can also reach out to My Choice Wisconsin Customer Service. (800) 963-0035 (608) 245-3448

#### **Provider Appeal Address**

Cognizant Claims Appeals 5117 W. Terrace Drive, Suite 100 Madison, WI 53718

Email: providerhelpdesk@mychoicewi.org Fax: (608) 245-3340

**Provider Appeal Form** 





## **Provider Claim Appeals**

The following information must be included when submitting an appeal:

- Provider name and ID number
- Member name and member ID number
- Date of service
- Procedure code
- Units billed
- Copy of the original claim
- Copy of Remittance Advice
- Copy of Primary Insurer EOB or Medicare (EOMB), if applicable
- Reason for reconsideration request
- Any additional documentation to support the appeal



# **Clinical Operations**



### **Health Care Services**

#### **Resource management**

- Prior authorization referral and management.
- Pre-admission, admission, and inpatient review.
- Referrals for discharge and planning & care transitions.
- Staff education on consistent application of UM functions.

#### **Eligibility and oversight**

- Eligibility verification and benefit administration and interpretation.
- Verify current physician/hospital contract status.
- Ensure authorized care correlates to member's medical necessity need(s) and coverage.

#### **Quality management**

- Evaluation of the UM program using member and provider input/satisfaction.
- Quality-based care and oversight.
- Monitor for possible over-or under-utilization of clinical resources.
- Monitor for adherence to CMS, NCQA, state and health plan UM standards.



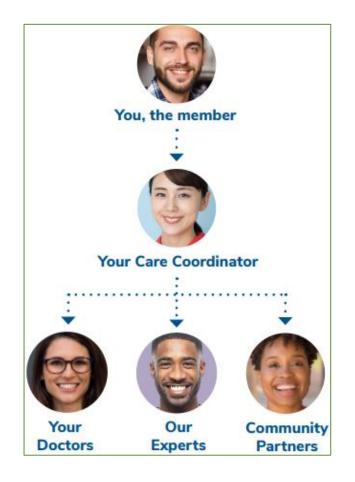


### **Care Management**

My Choice will continue to provide top tier care and case management services to members addressing a broad spectrum of needs – including chronic conditions that require the coordination and provision of health care services.

Care management focuses on members who have been identified for integrated care management programs.

If you were previously working with a Molina Medicare member through Care Management, or an existing My Choice Medicare member, your members will continue to participate in the Care Management program.



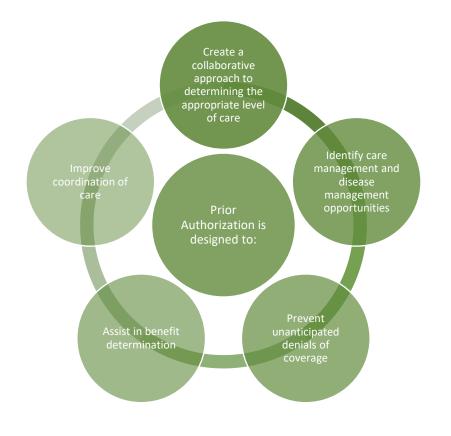




## **Prior Authorization**

Molina and My Choice partnered to streamline prior authorization requirements for all lines of business, including Medicare.

- This review resulted in ~10,000 fewer codes from requiring prior authorization, effective 1/1/2025.
- My Choice will utilize the **Prior Authorization LookUp tool**, mimicking Molina's functionality.
- The above changes do not apply to any long-term care benefits / services; continue to work through Care Planning channels for LTC.



#### **Prior Authorization Resources**

 My Choice Wisconsin Website & Authorization <u>library</u>

#### **Prior Authorization Contact Information**

- Fax completed PA forms to (608) 210-4050
- To check PA status, call (800) 963-0035

#### My Choice Integration Tip

All Medicare DSNP Prior Authorization requests must be submitted to My Choice for dates of service 1/1/2025 and after.





## **Member Benefits**



## **Quality Care and Member Satisfaction**

- For plan year 2023, My Choice Wisconsin was awarded 4 out of 5 stars in the Medicare Star Ratings for our Medicare Dual Advantage (and Partnership) health plans.
  - 2024 scores are not yet available.
- Member experience is a top priority at My Choice Wisconsin. The Quality Management (QM) Program monitors the quality of services for members across all programs and continuously improves processes that will lead to enhanced outcomes.
  - The goal of the Provider Quality Committee (PQC) is to foster collaboration, communication, and improvement as it relates to the quality of care for all My Choice Wisconsin Members.





### **Dental Benefits - Medicare**

2025 dental benefits will be administered by Skygen.

- No change for legacy Molina Members / Providers
- Change from DentaQuest for legacy My Choice Members / Providers

Members will receive preventative dental care and an allowance per year for select comprehensive care through the dental vendor, Skygen.

**This includes** Oral exams, cleanings, fluoride, x-rays, restorative services, endodontics, periodontics, extractions, & prosthodontics.

For more information on the Medicare dental program visit the dental provider page on our <u>website</u>.

#### **Dental Contact Information:**

- Email: <u>MDVSProviderServices@MolinaHealthcare.com</u>
- Phone Number: (855) 326-5059





## **Vision Benefits - Medicare**

Routine 2025 vision benefits will be administered by VSP Vision Care

- Change from March Vision Care for Molina Members / Provider
- Change from EyeQuest for legacy My Choice Members / Providers

#### **Benefits Include**

Routine eye exam every year and eyewear allowance every year through VSP. Eyewear allowance can be used for...

- Contact Lenses
- Eyeglasses (lenses and frames)
- Upgrades (such as tinted, UV, polarized, etc.)



Phone number: (888) 794-7268 Website: <u>vsp.com</u>

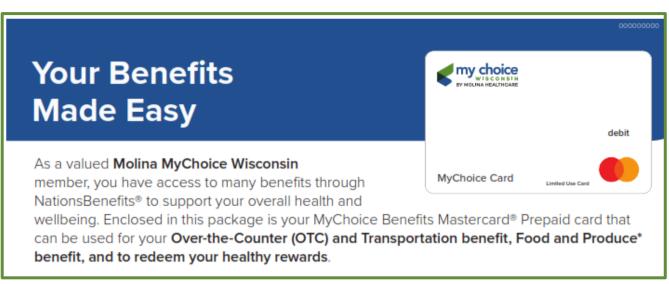




## **Extra Member Benefits**

2025 Medicare Supplemental Benefits:

- \$100 every month for OTC and transportation
- \$200 every month for healthy food and produce
- \$200-\$300 every year for eyewear
- Up to 2 pre-selected hearing aids every 2 years
- \$2,500 annual dental benefit
- PERS+ (an in-home medical alarm system for emergency and nonemergency needs scheduling appts, transportation, or support when feeling lonely)
- And more!







## Compliance



## **Cultural & Linguistic Competency**

We encourage our providers, regardless of legacy organization, to undergo annual cultural competency training and review to ensure we're meeting all members' unique and diverse needs.

- Molina offers cultural competency training for providers, their staff, and community-based organizations. Providers may:
  - Utilize Molina's training, located under <u>Health Resources</u> on our website, and provide us with an attestation of completion.
  - Utilize their own cultural competency training and provide us with an attestation of completion.

The provider attestation form is also on the <u>Health Resources</u> page of our website, linked here for your convenience.

Molina provider resources are public and available to all, regardless of LOB. Feel free to check them out!

Home	Manual	Forms	Policies	HIPAA	EDI ERA/EFT	Drug Formulary	Health 👆 Resources	Communications	Contact Us
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Cultura Interpreter	Ily and Lin Services	guistically	CAHPS     Medical Record Documentation     Standards						
interpreter s	meet the divers services throug t at 1-888-999-2 <b>rainings</b>	h Molina Health			titled to receive Member Services				

### Fraud, Waste, and Abuse

Molina is dedicated to the detection, prevention, investigation, and reporting of potential health care fraud, waste, and abuse. Molina and My Choice maintain a comprehensive plan that addresses how we'll uphold and follow state and federal statutes and regulations.

• My Choice Wisconsin Fraud, Waste, and Abuse Training

If you suspect cases of fraud, waste, or abuse, you must report it to Molina. You can do this by contacting the Molina AlertLine or submitting an electronic complaint. Complaints can be submitted:

- By phone: (866) 606-3889
- Online: <u>MolinaHealthcare.AlertLine.com</u>

For more information, read the *Fraud, Waste and Abuse* section of the Provider Manual online at **MolinaHealthcare.com**.



## **Medicare Model of Care**

My Choice and Molina are committed to offering a Model of Care (MOC) that meets the unique needs of our SNP members. These members face chronic and often co-occurring physical and behavioral health conditions while also navigating complex psychosocial issues and concerns.

Providers participating in the Medicare line of business **must** complete and attest to the Model of Care training annually.

#### 2024 MOC Resources

- MOC Training
- MOC Quick Reference Guide
- MOC Attestation Form

2025 materials will be available in January and posted to the My Choice Wisconsin website. We will also send an email to participating providers with direct links and due dates.



## Resources



### **Provider Resources**

My Choice Wisconsin has several helpful references and resources available the website for providers, members, and potential members. Check out the resource library <u>here</u>.

In the resource library you will find two of our most utilized tools:

- **Provider Handbook** (Family Care, Partnership, Dual Advantage)
- My Choice Wisconsin Provider Orientation (YouTube)
- Quick Reference Guide (2025)

**Can't find what you need?** Contact Provider Relations <u>MHWIProviderNetworkManagement@MolinaHealthcare.com</u> Phone: (800) 963-0035



### **Provider Resources**

Department	Contact information			
<b>Provider Network</b> General inbox for provider questions, concerns, contracting, credentialing and demographics	MHWIProviderNetworkManagement@MolinaHealthcare.com			
Prior Authorizations	Authorization Resource Library Phone: (800) 963-0035 Fax: (608) 245-3096			
Provider Appeals	Claim Appeal Form Fax: (608) 245-3340 providerhelpdesk@mychoicewi.org			
Skygen Dental Team: Medicare	Phone: (855) 326-5059 MDVSproviderservices@MolinaHealthcare.com			
VSP Vision	Phone: <b>(888) 794-7268</b> <u>vsp.com</u>			
TriZetto Claims	<u>Portal</u> Phone: <b>(855) 878-6699</b> <u>EFT Enrollment Form</u>			
Member & Provider Services	Phone: (800) 963-0035			





## **Questions?**

