

# PROVIDER NEWSLETTER

A Newsletter for the Molina Healthcare of Illinois (MHIL) Provider Network

# **Third Quarter 2022**

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# NPPES Review for Data Accuracy

Please review your National Provider Identifier (NPI) data in the National Plan & Provider Enumeration System (NPPES) as soon as possible to ensure that accurate provider data is displayed. Providers are legally required to keep their NPPES data current.

The Centers for Medicare & Medicaid Services (CMS) encourages Medicare organizations to use NPPES as a resource for online provider directories. By using NPPES,

we can decrease the frequency by which we contact you for updated directory information and provide more reliable information to our members.

When reviewing your provider data in NPPES, please update any inaccurate information in modifiable fields including provider name, mailing address, telephone and fax numbers, and specialty, to name a few. You should also include **all** addresses where you practice and actively see patients, and where a patient can call and make an appointment. Do **not** include addresses where you **could** see a patient, but do not actively practice. Please remove any practice locations that are no longer in use.

Once you update your information, you will need to confirm it is accurate by certifying it in NPPES. Remember, NPPES has no bearing on billing Medicare Fee-for-Service.

If you have any questions, please reference NPPES help at NPPES.cms.hhs.gov.

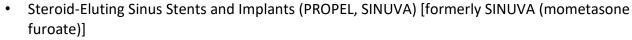
## **Clinical Policy Update Highlights from Second Quarter 2022**

Molina Clinical Policies (MCP) are located at <u>molinaclinicalpolicy.com</u>. The policies are used by providers—as well as Molina Medical Directors and internal reviewers—to make medical necessity determinations. MCPs are reviewed annually and approved bimonthly by the Molina Clinical Policy Committee (MCPC). The second guarter 2022 updates are noted below.

The following new policies were approved:

- Carvykti (ciltacabtagene autoleucel)
- Gastric Electrical Stimulation
- Gender Affirmation Treatment and Procedures
- Occupational Therapy
- Prescription Digital Therapeutics
- Shoulder MRI

Please note the name change of the following existing policies:



Minimally Invasive Sacroiliac Joint Fusion (formerly iFuse Implant for Sacroiliac Joint Fusion)

The following policy has been retired and is no longer available on the website:

Computer Aided Evaluation Malignancy Breast with MRI and Lung Radiology

## **Payment Solutions**

Molina Healthcare has partnered with our payment vendor, Change Healthcare, to disburse all payments and payment support via the ECHO Health (ECHO) platform. Access to the ECHO portal is **free** to providers, and we encourage you to register after receiving your first payment from Molina.

The ECHO payment platform offers enhanced functionality to better serve Molina providers, such as echeck and virtual card (where available). Additionally, 835s will be generated and available to you for every transaction. You will also have access to yearly 1099s directly through your account.

ECHO support is available to answer questions regarding registration and 835s at (888) 834-3511.

Login or register for the ECHO payment platform today: providerpayments.com/Login.aspx.

## Post-Traumatic Stress Disorder (PTSD) Awareness



Post-Traumatic Stress Disorder (PTSD) is an anxiety disorder developed by some people who have been exposed to an event that threatened serious harm or death. It can present with sleep disturbance, irritability and angry outbursts, avoidance of places or events that are reminders, recurrent dreams about the event, intense reactions to reminders of the event, and can lead to relationship issues and isolation.

This was initially noticed in veterans, but can affect anyone at any age who has endured a traumatic event. In general, PTSD affects approximately 12.5% of the population in primary care. Younger children can present differently, exhibiting symptoms such as wetting the bed after toilet training,



regressions in speech, reenacting the event during playtime, and being atypically clingy to parents and other adults. Symptoms typically arise within three months of the event but can be delayed.

Medication and psychotherapies are the primary forms of treatment for PTSD and, often, the primary care provider (PCP) is the first professional that people talk to about these symptoms arising. If you have a patient who needs screening for PTSD, the National Center for PTSD offers this five-question screening tool: <a href="Primary Care PTSD Screen for DMS-5">Primary Care PTSD Screen for DMS-5</a> (PC-PTSD-5).

Additionally, the American Psychological Association (APA) provides information on the APA website to help patients and families understand what they are experiencing.

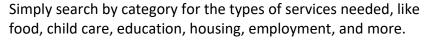
#### References:

- 1. VA PTSD Reference
- 2. Youth.gov PTSD Reference
- 3. Harvard Review of Psychiatry PTSD in Primary Care: Summary of Recommended Care
- 4. NIMH.nih.gov

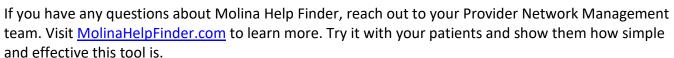
## Help Your Patients Tackle Social Determinants of Health

Molina is proud to introduce Molina Help Finder, a repository that helps Molina members find the resources and services they need, when they need them, right in their own communities.

With Molina Help Finder, providers like you have the ability to address Social Determinants of Health (SDOH) by referring patients in real time right from your office.



Results can then be narrowed by applying personal and program-specific filters.





Molina Healthcare is committed to transparency with providers regarding the benefits available to our Marketplace members. One way we do this is by making our Marketplace Benefit Interpretation Policies available for reference and review on the <a href="MolinaMarketplace.com">MolinaMarketplace.com</a> website. These policies provide:

- Description of the benefit(s) from the Marketplace evidence of coverage (EOC)
- Overview of applicable federal and/or state regulations for Marketplace
- Enhancements to the Marketplace benefit, if any
- Applicable exclusions for the state
- Clinical perspective, if any

#### **How to Access**

MolinaMarketplace.com Home Page → Provider → Policies → Benefit Interpretation Policies

**Note**: Remember to select Illinois in the dropdown menu at the top.

**Direct link**: Benefit Interpretation Policies (molinamarketplace.com)



## Importance of Metabolic Monitoring of Antipsychotic Medications

The Molina Healthcare National Pharmacy and Therapeutics committee would like to remind providers about the importance of metabolic monitoring of antipsychotic medications.

Patients taking antipsychotic medications are a population at increased risk for metabolic problems such as diabetes, hyperlipidemia, hypertension, or obesity. These metabolic effects may occur in any patient but are particularly concerning in children and adolescents, drug-naive patients, or patients with first-episode schizophrenia.

The first consensus guideline was released in 2004 by the American Diabetes Association, and endorsed by the American Psychiatric Association (APA) and the American Association of Clinical Endocrinologists. It recommended metabolic screening for children and adolescents. Since that time, several data reports suggest metabolic monitoring of antipsychotic medications is only occurring in roughly 35% of patients.



Based on recommendations from the APA, patients should have the following assessments four months after initiating a new treatment, and annually thereafter: fasting blood glucose, or hemoglobin A1C and lipid panel.

Some reasonable strategies to overcome the barriers associated with adherence to monitoring include engaging patients or caregivers in a self-management strategy to enhance their own monitoring, ensuring patients have a scale, and encouraging healthy

behaviors. Ordering laboratory tests in a timely manner and communicating these expectations with the patient and/or caregiver during the visit may help to increase patient adherence as well.

Within the past year, you may have received educational notifications from Molina to support metabolic monitoring where Molina believes a member can benefit from an improved quality of care.

#### References:

- 1. American Psychiatric Association. (2020). The American Psychiatric Association Practice Guideline for the Treatment of Patients with Schizophrenia. doi: 10.1176/appi.books.9780890424841
- 2. R.L. Finding et al. (2011) American Academy of Child and Adolescent Psychiatry: Practice Parameter for the Use of Atypical Antipsychotic Medications in Children and Adolescents. <u>AACAP.org</u>
- 3. Agency for Healthcare Research and Quality: Metabolic Monitoring for Children and Adolescents on Antipsychotics. AHRQ Publication No. 14(18)-P011-2 (2/2018) AHRQ.gov

## Is Your Authorization Request TRULY Urgent?

Molina Healthcare renders decisions on Prior Authorization requests as quickly as a member's health requires. In accordance with CMS and state guidelines, providers may submit expedited or urgent requests when standard timelines could seriously jeopardize a member's life or health.

When submitting Prior Authorization requests, keep the following in mind:



- An urgent/expedited service request designation should be used only when "applying the
  standard time for making a determination could seriously jeopardize the life or health of the
  enrollee or the enrollee's ability to regain maximum function." When submitting requests that
  don't fulfill this definition, please mark them elective/routine in the portal submission process
  or on the Molina Healthcare Prior Authorization Request Form if requesting via fax.
- By requesting an expedited/urgent authorization, providers are asking Molina to make a decision within mandated time frames. Because these time frames are measured in hours rather than days, the provider or provider's office staff **must** be available to answer any potential questions about the request in a timely manner.
- Submit **all** necessary information with the initial request. Failure to do so will require Molina to ask for additional information, which could delay the decision. If Molina requests more information, we urge providers to **respond immediately** to allow Molina to render a decision within the mandated expedited time frame.
- Molina will provide member Prior Authorization notification and decisions in accordance with CMS and/or any state guidelines which may include verbal and written decisions.

## **Cultural Competency Resources for Providers and Office Staff**



Molina Healthcare is committed to improving health equity by being a culturally competent organization. We support and adhere to the <u>National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care</u> as established by the Office of Minority Health. Additionally, we work to achieve NCQA's <u>Health Equity Accreditation</u> in the markets we serve.

Cultural and linguistic competency is the ability to provide respectful and responsive care to members with diverse values, beliefs, and behaviors, including tailoring health care delivery to meet members' social, cultural, and linguistic needs.

#### **Building Culturally Competent Healthcare: Training for Providers and Staff**

Cultural competency can positively impact a patient's health care experience and outcomes. A series of five short cultural competency training videos are available to providers and office staff on the Culturally and Linguistically Appropriate Resources/Disability Resources page under the Health Resources tab at Molinahealthcare.com.

## **Training topics:**

- Module 1: Introduction to Cultural Competency
  - The need for cultural competency
  - How culture impacts health care
  - Implicit bias
  - Federal requirements related to cultural competency (Affordable Care Act, Americans with Disabilities Act)
- Module 2: Health Disparities
  - Examples of racial health disparities and health disparities among persons with disabilities
  - Health equity
  - Social determinants of health

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  - Module 3: Specific Population Focus—Seniors and Persons with Disabilities
    - Social model of disability and accepted protocol and language of the independent living/disability rights movement
  - Module 4: Specific Population Focus—LGBTQ and Immigrants/Refugees
    - o Health disparities among LGBTQ population
    - o Clear communication guidelines for health care providers interacting with LGBTQ patients
    - Disparities among immigrant and refugee communities
    - Clear communication guidelines for health care providers interacting with immigrant and refugee patients
  - Module 5: Becoming Culturally Competent
    - Perspective-taking
    - o Clear communication guidelines
    - Tips for effective listening
    - Assisting patients whose preferred language is not English
    - Tips for working with an interpreter
    - o Teach back method
    - Molina Healthcare's language access services

Each training video ranges in length from five to ten minutes. Viewers may participate in any or all five training modules, depending on topics of interest. Please contact your Provider Network Manager with questions.

### Americans with Disabilities Act (ADA) Resources: Provider Education Series

A series of provider education materials related to disabilities is now available to providers and office staff on Molina's website. Find them at Molina's Culturally and Linguistically Appropriate Resources/Disability Resources page under the Health Resources tab at Molinahealthcare.com.

#### **Available Educational Resources**

- Americans with Disabilities Act (ADA)
  - Introduction to the ADA, and questions and answers for health care providers (i.e. which health care providers are covered under the ADA, how does one remove communication barriers that are structural in nature, are funds available to assist with ADA compliance costs).
- ADA
  Americans with Disabilities Act

  Eg , 7 6-3 © ...
  Braille
- Members who are Blind or have Low Vision
  - How to get information in alternate formats such as Braille, large font, audio, or other formats that members can use.
- Service Animals
  - Examples of tasks performed by a service animal; tasks that do not meet the definition of service animal; inquiries you can make regarding service animals; and exclusions, charges, or other specific rules.
- Tips for Communicating with People with Disabilities & Seniors
  - Communicating with individuals who are blind or visually impaired, and deaf or hard of hearing; communicating with individuals with mobility impairments; communicating with individuals with speech impairments; and communicating with seniors.

Please contact your Provider Network Manager with questions.

## **Molina's Language Access Services**

Language access services ensure mutual understanding of illness and treatment, increase patient satisfaction, and improve the quality of health care for patients with limited English proficiency. Molina strives to ensure good communication with members by providing language access services; this is a legal requirement for health care systems that are recipients of federal funds (i.e., a member cannot be refused services due to language barriers).



When needed, Molina provides the following services directly to members at no cost:

- Written material in other formats (i.e., large print, audio, accessible electronic formats, Braille)
- Written material translated into languages other than English
- Oral and sign language interpreter services
- Relay service (711)
- 24-hour Nurse Advice Line
- Bilingual/bicultural staff

In many cases, Molina will also cover the cost for a language or sign language interpreter for our members' medical appointments. Molina members and providers are instructed to call the Contact Center to schedule interpreter services or to connect to a telephonic interpreter.

Also, Molina's member materials are always written simply, in plain language, and at required reading levels. For additional information on Molina's language access services or cultural competency resources, contact Provider Network Management or visit Molinahealthcare.com.

## **Submitting Electronic Data Interchange (EDI) Claims**

Submitting claims electronically through methods like clearinghouses or through the Availity Essentials Provider Portal offers many advantages:

- Improved HIPAA compliance
- Reduced operational costs associated with paper claims (printing, postage, etc.)
- Increased accuracy of data and efficient information delivery
- Fewer claim delays since errors can be corrected and resubmitted electronically
- Claims reach Molina faster with the elimination of mailing time

#### **How To Submit EDI Claims**

A clearinghouse is the easiest way to submit EDI claims to Molina. You may submit EDI transactions through Molina's gateway clearinghouse, Change Healthcare, or use a clearinghouse of your choice. If you do not have a clearinghouse, Molina offers additional options for electronic claims submissions. Log onto the <u>Availity Essentials Provider Portal</u> for more information.



## **Frequently Asked Questions**

Q: Can I submit Coordination of Benefits (COB) claims electronically?

A: Yes, Molina and our connected clearinghouses fully support electronic COB.

#### Q: Do I need to submit a certain volume of claims to send EDI?

A: No, any number of claims via EDI saves both time and money.

### Q: Which clearinghouses are currently available to submit EDI claims to Molina?

**A:** Molina uses Change Healthcare as our channel partner for EDI claims. You may use the clearinghouse of your choice. Change Healthcare partners with hundreds of other clearinghouses.

#### Q: Which claims EDI transactions Molina Utilize?

- A: 0 837P (Professional claims) and 837I (Institutional claims)
  - 270/271 (Health Care Eligibility Benefit Inquiry and Response)
  - 278 (Health Care Services Review Request for Review and Response)
  - 276/277 (Health Care Claim Status Request and Response)
  - 835 (Health Care Claim Payment/Advice)

#### Q: What is Molina's Payer ID?

A: Molina Healthcare of Illinois' Payer ID is 20934.

#### **Q:** What if I still have questions?

**A:** More information is available at Molinahealthcare.com under the EDI tab.

## **Critical Time for Youth Immunizations**

School is out, summer is going strong, and now is the time that children and adolescents should get their needed vaccines for the upcoming school year. Two age groups that Molina is eager to partner on with the provider community are Immunizations for Adolescents and Childhood Immunizations.



#### **Adolescents**

Adolescents should complete one dose of meningococcal vaccine; one tetanus, diphtheria toxoids, and acellular pertussis (Tdap) vaccine; and have completed the human papillomavirus (HPV) vaccine series by their 13th birthday. One of the trends that Molina has seen over the last year is that teens are receiving their meningococcal and Tdap vaccines but are falling short on completing the full series of HPV vaccinations prior to turning 13.

As you see your patients this summer, talk with them and their parent/guardian(s) about the importance of preventing HPV.

#### **Newborns to 24 Months**

Newborns and children under two years of age should have completed the following series of vaccinations:

Vaccine	DTaP	Polio-IPV	MMR	HiB	НерВ	VZV	PCV	НерА	RV	Flu
Qty	4	3	1	3	3	1	4	1	2 or 3	2

Getting children in for these vaccines helps to earn you and your practice credit toward the 2022 Provider Pay for Performance (P4P) Incentive Program. For more information on this year's program, please visit the MHIL Quality page at Molinahealthcare.com.

## **MHIL Quality Partnering With Providers**

The MHIL Quality team is committed to provider collaboration. We can work together toward keeping your patients healthy and visiting your practice/facility for their needed services. Some ways we can assist are:

- Targeted member outreach to your patients who need specific services.
- Clinic Days focusing on specific screenings or visit types for specific conditions you are focused on improving.
- Coding review to maximize your HEDIS® rates for measures in the 2022 P4P Incentive Program.
- Establishing electronic connectivity for faster and more secure data transfer. This can be granting access to your group's EMR system and establishing a secure FTP site.

To partner with the Molina Quality team on any of these collaborative efforts, reach out to your Quality Specialist to get started. To find your Quality Specialist, visit the <u>Quality Improvement</u> page on Molina's website.



## ProgenyHealth Partnership Begins October 1, 2022

Molina is pleased to announce a partnership with ProgenyHealth, a company that specializes in neonatal Care Management (CM) and Utilization Management (UM) services. ProgenyHealth's CM and UM programs will enhance services to our members and support our mission to make a lasting difference in members' lives by improving their health and well-being.

Beginning October 1, 2022, ProgenyHealth will assume CM and UM operations for Molina's NICU families. ProgenyHealth's Neonatologists, Pediatricians, and Neonatal Nurse Care Managers will work

closely with Molina members—as well as their attending physicians and nurses—to promote healthy outcomes for premature and medically complex newborns.

Please reference this provider notice for more details.



## Let's Get Social! Follow Us On Facebook



Molina Healthcare of Illinois has a presence on Facebook!

Follow us—and encourage your patients to follow as well. They will see announcements for community events, preventive health reminders, videos, quick health tips, and much more.

Check it out: facebook.com/molinahealthcarelL.



# MHIL In the Community—Be You: Pride Fest 2022

MHIL sponsored and participated in both the Woodstock Pride Fest (June 12) and Chicago Pride Fest (June 18–19). We gave out bags with condoms, lubricants, and Jolly Ranchers to adult attendees. Hand sanitizer, fans, and lollypops were provided to all. Both the Woodstock and the Chicago Pride Festivals were amazing events filled with pride, fun, and love. We look forward to participating in 2023!





