



## Notice of Changes to the Provider Manual

### Information for Medicaid and MyCare Ohio network providers

Molina has added an addendum to the [Combined Provider Manual](#) on our Provider Website, under the "Manual" tab. Updates include:

- OhioRISE eligibility effective July 1, 2022
- OhioRISE services effective July 1, 2022
- New Medicaid member identification cards effective July 1, 2022 for OhioRISE and Oct. 1, 2022 for the Single Pharmacy Benefit Manager
- Credentialing process changes for Oct. 1, 2022
- State hearing timeframe updates for Medicaid and MyCare Ohio based on OAC 5160-58-08.4
- Single Pharmacy Benefit Manager (SPBM) effective Oct. 1, 2022
- Provider Enrollment (Ohio Department of Medicaid [ODM]) Functions for Next Generation Medicaid Program
- Provider Contracting (Molina Functions) for Next Generation Medicaid Program

Molina posts a new comprehensive Provider Manual to our website semi-annually. However, changes can be made to the manual between updates. Always refer to the manual posted on our website under the "Manual" tab instead of printing hard copies to ensure you access the most up-to-date version.

## Do You Have Your OH|ID?

### Information for Medicaid and MyCare Ohio providers

Beginning Oct. 1, 2022, all Molina Medicaid providers will need an OH|ID, the State of Ohio's digital identity standard, to access Medicaid's new Provider Network Management (PNM) module and the SPBM secure web portal.

If you missed the Sept. 23 PNM preregistration deadline, you can still get your OH|ID – the first step to securely access Medicaid enterprise systems.

**Why this is important:** The OH|ID is required to securely access state agency systems. It gives providers a single set of login credentials to securely access state agency systems, including ODM's, from any device. The OH|ID adheres to best practice security and privacy regulations as defined by the National Institute of Standards and Technology (NIST). Agencies and users using the OH|ID can rest assured that their digital identities are kept safe and secure.

Get your State of Ohio digital identification - the OH|ID **today** at [ohid.ohio.gov/wps/portal/gov/ohid/home/home](https://ohid.ohio.gov/wps/portal/gov/ohid/home/home).

**Beginning October 1:** Anyone accessing the PNM or the SPBM secure web portal when they go live on Oct. 1 will need an OH|ID to log in and complete key administrative tasks and processes. The following resources are available to assist providers in setting up an account:

- Create an OH|ID account at: [ohid.ohio.gov/wps/portal/gov/ohid/create-account/create-account](https://ohid.ohio.gov/wps/portal/gov/ohid/create-account/create-account)
- Get help logging in at: [ohid.ohio.gov/wps/portal/gov/ohid/help-center/help-logging-in/help-logging-in](https://ohid.ohio.gov/wps/portal/gov/ohid/help-center/help-logging-in/help-logging-in)

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## Questions and Quick Links

Provider Services – (855) 322-4079  
 8 a.m. to 5 p.m., Monday to Friday  
 (MyCare Ohio is available until 6 p.m.)

- Email us at [OHProviderRelations@MolinaHealthcare.com](mailto:OHProviderRelations@MolinaHealthcare.com)
- Visit our Provider Website at [MolinaHealthcare.com/OhioProviders](https://MolinaHealthcare.com/OhioProviders)
  - [Provider Manual](#)
  - [PA Code List](#)
  - [PA Request Form](#)
  - [Provider Bulletin Archive](#)
  - [It Matters to Molina Page](#)
  - [Provider Portal](#)

## Join Our Email Distribution List

Get this bulletin via email. Sign up at [MolinaHealthcare.com/ProviderEmail](https://MolinaHealthcare.com/ProviderEmail).

- View an in-depth OH|ID account creation user guide at:  
[medicaid.ohio.gov/static/Providers/Billing/TradingPartners/OMES/OHID-Account-Creation-User-Guide.pdf](https://www.molinahealthcare.com/ohio/Providers/Billing/TradingPartners/OMES/OHID-Account-Creation-User-Guide.pdf)

Providers needing technical assistance should contact ODM Integrated Help Desk (IHD) at (800) 686-1516. Hours of operation are Monday-Friday, 8 a.m. - 4:30 p.m. ET.

### Reminder: PNM and OH|ID: Top 5 Things You Need to Know

#### Information for Medicaid and MyCare Ohio providers

- Ohio Medicaid is replacing the Medicaid Information Technology System (MITS) with a modernized Provider Network Management (PNM) module:** The PNM module will replace the current MITS provider enrollment subsystem and MITS provider portal beginning Oct. 1, 2022. The PNM system and portal will allow for one front door for provider enrollment, centralized credentialing, provider self-service (demographic updates and group affiliations), and an enhanced provider directory.
- Providers are required to obtain a State of Ohio supplier ID to do business with Ohio Medicaid:** The PNM will require Ohio Medicaid providers to use an OH|ID to log in and complete key administrative tasks and processes.
- Be in the know on Medicaid provider changes coming:** To prepare for the launch of the PNM, be sure to stay up to date on all email communications from ODM, which will include valuable information about training, support resources, and launch timeline updates for PNM and Centralized Credentialing. Subscribe to the Next Generation provider newsletter by checking the box next to *ODM 2022 Press* at [medicaid.ohio.gov/home/govdelivery-subscribe](https://www.molinahealthcare.com/ohio/home/govdelivery-subscribe) or visit the PNM & Centralized Credentialing page at [managedcare.medicare.ohio.gov](https://managedcare.medicare.ohio.gov) for updates.
- Providers should register for their OH|ID now.**
- Medicaid providers can email [PNMCommunications@medicaid.ohio.gov](mailto:PNMCommunications@medicaid.ohio.gov) with questions.**

### Reminder: Next Generation Medicaid Program Updates and Trainings

#### Information for Medicaid and MyCare Ohio providers

Providers should visit [managedcare.medicare.ohio.gov/providers](https://managedcare.medicare.ohio.gov/providers) to access the most updated information on the Next Generation Medicaid Program and access upcoming training offerings and other resources.

#### Training:

PNM training: Providers can register for a self-paced training session or sign up for virtual and/or in-person learning at [managedcare.medicare.ohio.gov/managed-care/centralized-credentialing](https://managedcare.medicare.ohio.gov/managed-care/centralized-credentialing) and select "Provider Webinars and Training." Training topics include:

- PNM login and access
- System navigation
- New enrollment applications
- Demographic updates
- Revalidations

Medicaid Single Pharmacy Benefit Manager (SPBM) trainings: ODM is offering several SPBM training opportunities via online instructor-led webinars, recorded online training, and weekly Question and Answer (Q&A) forums. View

#### Connect with Us

[www.facebook.com/MolinaHealth](https://www.facebook.com/MolinaHealth)  
[www.twitter.com/MolinaHealth](https://www.twitter.com/MolinaHealth)

#### Provider Training Sessions

##### It Matters to Molina Forums:

- Availity Single Sign-On: Tues., Oct. 25, 1 to 2 p.m.
- Pregnancy Related Services and Billing: Tues., Nov. 29, 1 to 2 p.m.

##### General Provider Orientation:

- Tues., Oct. 4, 12 to 1 p.m.
- Wed., Nov. 2, 3 to 4 p.m.

##### Model of Care:

- Mon., Oct. 31, 12 to 1 p.m.
- Tues., Nov. 22, 9 to 10 a.m.

##### Managed Long-Term Services and Support (MLTSS) Orientation:

- Wed., Oct. 12, 3 to 4 p.m.

##### Provider Portal Orientation:

- Thurs., Nov. 10, 2 to 3 p.m.

Molina has moved provider training sessions to Microsoft Teams. Please visit the IMTM page on our Provider Website and click on the desired training to access meeting details.

**Availity Portal Training: Register in the Availity Portal. Under "Help & Training," select "Get Trained." In the training catalog, go to the "Sessions" tab and select one of the following:**

- Wed., Oct. 12 at 10 a.m.
- Tues., Oct. 25 at 12 p.m.
- Wed., Nov. 16 at 12:30 p.m.
- Wed., Dec. 14 at 3 p.m.
- Contact [training@availity.com](mailto:training@availity.com) at any time to receive Availity Portal training

#### Notice of Changes to 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 updates. Always use the lists posted to our website under the Forms tab instead of printing hard copies. This practice ensures you access the most up-to-date versions.

#### Website Roundup

##### Information for all network providers

Recently added or updated documents include:

- [ODM Consent to Sterilization Form](#)
- [October Provider Manual](#)

"Announcements" at [spbm.medicaid.ohio.gov](https://spbm.medicaid.ohio.gov) for registration instructions.

Training topics include:

- SPBM login and access
- System navigation
- Verifying member pharmacy benefit eligibility
- Submitting and viewing pharmacy claims
- Submitting and viewing pharmacy prior authorization (PA)

#### Credentialing Information:

- **Effective Oct. 1, 2022, ODM will be the single point of contact for provider credentialing for Medicaid and MyCare Ohio.**
- Initial Credentialing: Applications must be directed to ODM via the new PNM module.
- Recredentialing: Molina will continue to process recredentialing files for our providers until Jan. 31, 2023.

Note: Molina is unable to process new provider applications during the MITS freeze due to the need to validate the Medicaid ID with ODM. All providers must have an active and valid Medicaid ID at the time of enrollment with Molina.

### Maternal and Infant Support Program (MISP)

#### Information for Medicaid providers

Effective Oct. 1, 2022, Molina will begin editing claims in accordance with [OAC 5160-21-04](#), Maternal and Infant Support Program (MISP), an ODM regulatory program that provides additional support to members and babies. MIPS allows for group prenatal care services while continuing to reimburse for pregnancy education such as Lamaze and tobacco cessation.

Group pregnancy care (evidence-based pregnancy education) represented by Current Procedural Terminology (CPT) code 99078 with modifier TH should be billed in conjunction with a 99211, 99212, or 99213 Evaluation and Management (E&M) code by a physician, physician assistant, or advanced practice registered nurse.

- Both the CPT 99078 and E&M code must also have a modifier TH or must use a TH modifier for all codes
- The E&M code must be billed on the same date of service as 99078
- 99078 and the E&M codes do not have to be the same provider but do have to be billed with the same date of service
- There is a limit of six sessions per pregnancy

### Claims Processing Update: Modifiers

#### Information for all network providers

Effective Nov. 1, 2022, Molina is adding some claims processing enhancements. These enhancements will increase the accuracy and appropriateness of claim adjudication for our provider community. We will be adding new edits that address coding situations that are complex and cannot auto-adjudicate. The edits are based on correct coding rules published by national industry sources, and administrative bodies, to detect potential coding errors and incorrect billing.

Some of the new edits support the correct use of modifiers. Modifiers have been defined by the American Medical Association (AMA) and adopted by the Centers for Medicare and Medicaid Services (CMS) to provide additional information about the services that were rendered. The National Correct Coding Initiative (NCCI) Policy Manual, Chapter 1: General Correct Coding Policies, provides

- [Independent Provider Resources](#)
- [Return of Overpayment Form](#)
- [Q3 Provider Newsletter](#)

### Respiratory Syncytial Virus Season

#### Information for Medicaid and MyCare Ohio providers

ODM has been monitoring the spike in Respiratory Syncytial Virus (RSV) positivity tests. Based on this analysis, ODM has started the Synagis season effective immediately.

For additional information, visit the Centers for Disease Control (CDC) website at [cdc.gov/surveillance](https://cdc.gov/surveillance) and search "RSV State Trends."

### Claim Reconsideration Status Now Live on the Availity Portal

#### Information for Medicaid and Marketplace providers

Providers can now access Claim Reconsideration status on the portal through the Availity Single Sign On (SSO) features. To access this functionality, please take the following steps:

- Log in to Availity Portal at [provider.molinahealthcare.com/](https://provider.molinahealthcare.com/) for Molina Healthcare of Ohio
- Enter Claim Search Information that you are checking
- Click on the Claim ID
- Now you can see the Appeal Status and view or print the letter
- Click on the .pdf Letter icon to view the decision letter

### Chiropractic Services Benefit Year

#### Information for Medicaid and MyCare Ohio providers

ODM has provided information in the [Chiropractic Services – Benefit Year Medicaid Advisory Letter \(MAL\) No. 642](#) defining a benefit year as a calendar year (1/1/xx-12/31/xx). On January 1 of each year, the utilization history of individuals covered by Medicaid and receiving chiropractic services are reset to zero.

View the MAL under "Resources for Providers" by selecting "Policies & Guidelines" and then "Medicaid Advisory Letters (MALs)" at [medicaid.ohio.gov](https://medicaid.ohio.gov).

directions on when modifiers should be used. It states, "Modifiers may be appended to HCPCS/CPT codes only if the clinical circumstances justify the use of the modifier. A modifier shall not be appended to a HCPCS/CPT solely to bypass an NCCI PTP edit if the clinical circumstances do not justify its use."

The new edits involve the review of the information on the claim and in the patient's claim history to determine if the modifier has been used correctly. Modifiers 25, 59, XE, XS, XP, and XU are among the most commonly used modifiers; therefore, the new edits will evaluate the correct use of these and other overriding modifiers. To prevent the incorrect processing of claims, we are providing information about when these modifiers should be used.

- **Modifier 25:** CPT and the AMA specify that by using modifier 25, the provider is indicating that a "significant, separately identifiable evaluation and management service (was provided) by the same physician on the same day of the procedure or other service." CPT guidelines also state that this significant and separate service must be "above and beyond" the other service provided or beyond the usual preoperative and postoperative care associated with the procedure that was performed. The AMA Guidelines in "Coding with Modifiers" state that "The E/M service must meet the key components (i.e., history, examination, medical decision making) of that E/M service including medical record documentation. To use modifier 25 correctly, the chosen level of E/M service needs to be supported by adequate documentation for the appropriate level of service, as well as referenced by a diagnosis code. The CPT codes for procedures do include the evaluation services necessary before the performance of the procedure (e.g., assessing the site and condition of the problem area, explaining the procedure, obtaining informed consent); however, when significant and identifiable (i.e., medical decision making and another key component) E/M services are performed, these services are not included in the descriptor for the procedure or service performed."
- **Modifier 59:** is used to identify procedures/services that are not normally reported together but are appropriate under the circumstances. This may represent a different session or patient encounter, different procedure or surgery, different site or organ system, separate incision/excision, separate lesion, or separate injury (or area of injury in extensive injuries) not ordinarily encountered or performed on the same day by the same physician.
- **Modifier XE:** Separate Encounter is used for a service that is distinct because it occurred during a separate encounter.
- **Modifier XP:** Separate Practitioner is used for a service that is distinct because it was performed by a different practitioner.
- **Modifier XS:** Separate Structure is used for a service that is distinct because it was performed on a separate organ/structure.
- **Modifier XU:** Unusual Non-Overlapping Service is for the use of a service that is distinct because it does not overlap the usual components of the main service.

When preparing claims for submission, it is important to make sure that all the appropriate diagnosis codes are assigned to the claim and that modifiers are used only when clinically appropriate based on published guidelines. If you have claims that you believe were incorrectly denied due to the incorrect use of modifiers, please follow the standard claim dispute process outlined in the Provider Manual. Additional information about when to use modifiers can be

### **Updated: MCG Auto-Authorization Information for Medicaid, Medicare, and Marketplace providers**

In the September Provider Bulletin Molina announced MCG Auto-Authorization services for Medicare will be available on Sept. 30, 2022. The go-live for Medicare has been delayed. Molina will send out notification with a new go-live date in coming months.

As a reminder, in March 2022, Molina introduced MCG Auto-Authorization, a self-service method for providers to submit Advanced Imaging PA requests, available 24/7 via the Provider Portal for applicable lines of business.

This submission method is an alternative to the existing submission process. The status of each authorization will be available immediately upon completion of the submission. The clinical documentation will be submitted for review by Molina.

The MCG Auto-Authorization service is available for Marketplace and Medicaid. Note: MCG Auto-Authorization for Medicaid is to-be-determined as Molina works with ODM on processes once the Next Generation Medicaid Program starts on Dec. 1, 2022.

Reach out to the Molina Provider Services Team to learn more about MCG Auto-Authorization.

### **Americans with Disabilities Act Information for all network providers**

Section 504 of the Rehabilitation Act forbids organizations receiving federal financial assistance from denying individuals with disabilities. The Americans with Disabilities Act (ADA) prohibits discrimination against people with disabilities that may affect public accommodations, including health care. By eliminating barriers to health care access, we can improve the quality of life for people with disabilities.

To learn more, read the Molina Provider Education Series [Americans with Disability Act \(ADA\)](#) on our website, on the "You Matter to Molina" page under the "Molina Provider Education Series" tab or read the [Americans with Disabilities Act FAQ](#) on our MyCare Ohio website under the



found in the CPT manual and in the Provider and NCCI manuals found on CMS's website at [cms.gov](https://www.cms.gov).

### Paper Claim Submission

#### Information for all network providers

Participating providers should submit claims electronically. If electronic claim submission is not possible, please submit paper claims to the following address:

Medicaid, MyCare Ohio, and Marketplace:	Medicare
Molina Healthcare of Ohio PO Box 22712 Long Beach, CA 90801	Molina Medicare of Ohio PO Box 22664 Long Beach, CA 90801

Please keep the following in mind when submitting paper claims:

- Paper claims should be submitted on the original red and white CMS-1500 or UB04 claim form
- Paper claims must be completed using black ink
- Paper claims that are not sent to the correct PO box will be returned to the submitting provider unworked

Effective Dec. 1, 2022, all Medicaid claims must be submitted via the PNM portal or EDI portal for all Managed Care Organizations. Paper claims will not be accepted by ODM so no paper claims can be submitted for Molina to process.

### Sterilization, Hysterectomy, and Abortion Consent Forms

#### Information for Medicaid and MyCare Ohio providers

Molina would like to remind providers of the process necessary for proper claim payment for Sterilization, Hysterectomy, and Abortion Consent Forms.

The Signed Consent Form (SCF) for Sterilization, Hysterectomy, and Abortion forms are available on our Provider Website under the "Forms" tab and must be submitted with the claim when these services are billed:

- [Consent to Sterilization Form](#): Required except in unique circumstances of an unscheduled clinical event that requires sterilization because of a life-threatening emergency.
- [Consent to Hysterectomy Form](#): Required.
- [ODM Abortion Certification Form](#): Covered when medically necessary to save the life of the member or in instances of reported rape or incest, as noted in [OAC 5160-17-01](#).

If the form is missing or incomplete, the claim will be denied. The [Claim Reconsideration Request Form](#) must be used when submitting a claim reconsideration and include the complete SCF. Additional information is available in the Molina Provider Manual on our Provider Website

For circumstances when a procedure was done as an emergency or the member was not made sterile, an Operative Report should be submitted with the claim for review.

### "It Matters to Molina" Corner

#### Information for all network providers

Thank you for the great response to the "It Matters to Molina" question! Our winner is Victoria Hayes from Life Long Transportation.

The September "It Matters to Molina" question answer is "4." ODM has communicated a lot of important information and training opportunities about

"Manual" tab, on the "Quick Reference Guides & FAQs" page.

### Q3 Provider Newsletter

#### Information for all network providers

The [Q3 2022 Provider Newsletter](#) is available on Provider Website, on the "Communications" tab. Articles in this edition include:

- NPPES Review for Data Accuracy
- Clinical Policy Update Highlights from Second Quarter 2022
- Payment Solutions
- Post-Traumatic Stress Disorder (PTSD) Awareness
- Marketplace Benefit Interpretation Policy Guide
- Importance of Metabolic Monitoring of Antipsychotic Medications
- 2022 Molina Model of Care Provider Training
- Is Your Authorization Request Urgent
- Submitting Electronic Data Interchange

(EDI) Claims

### Reminder: Screening Mammography Update

#### Information for all Medicaid providers

As of Oct. 1, 2022, ODM has revised Ohio Revised Code (ORC) sections 1751.62, 3702.40, 3923.52, 3923.53, and 5164.08, governing coverage of screening mammography. The list of conditions dictating the use of mammography benefits will be extended to include Digital tomosynthesis, additional coverage of annual Mammography screenings, and supplemental breast cancer screenings if certain conditions are met.

### American Academy of Pediatrics Foundation Luncheon

#### Information for all network providers

The American Academy of Pediatrics (Ohio AAP) Foundation Luncheon, From Fear to Medical Freedom: Overcoming the Vaccine Hesitancy Movement and Medical Misinformation to Increase Rates Through Pediatricians, Legislators, Media, and the Community, is being held on Oct. 28, 2022, at 11:30 a.m. at the Polaris Hilton.

In addition to single tickets, sponsorship and table options are available. For more information or to register today, visit: [ohioaap.org/luncheon2022](https://ohioaap.org/luncheon2022). All funds raised

the upcoming Next Generation Medicaid Program, including OhioRISE, Centralized Credentialing, the SPBM, and the Fiscal Intermediary. Where is the best source of information for the Next Generation Medicaid Program?

1. [managedcare.medicaid.ohio.gov](https://managedcare.medicaid.ohio.gov)
2. [medicaid.ohio.gov](https://medicaid.ohio.gov)
3. [molinahealthcare.com/providers/oh/medicaid/comm/provbulletin.aspx](https://molinahealthcare.com/providers/oh/medicaid/comm/provbulletin.aspx)
4. All of the above

**October Question:** What module is replacing the MITS provider enrollment subsystem?

1. SPBM
2. PNM
3. OH|ID
4. OhioRISE

Email your answer to [OHProviderBulletin@MolinaHealthcare.com](mailto:OHProviderBulletin@MolinaHealthcare.com) by October 15 to enter the drawing. Molina will announce the winner and the correct answer to the question in the November Provider Bulletin.

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

### You Matter to Molina: Get to Know Your Provider Representatives

#### Information for all network providers

Our Molina Provider Services team is here to help answer your questions and connect you with training opportunities. Throughout 2022 we will introduce you to our team members and how to contact us directly for assistance.

Deanna Putman, Director of Provider Services:

- My favorite thing to do is spend time with my husband and five (yes, five!) dogs.
- Interesting Fact: I am an enthusiastic Cincinnati Bengals fan and traveled to attend their playoff games last season.
- **Why I serve our Molina providers:** My father had a private practice specializing in internal medicine, and my extended family is comprised of many medical professionals. I've always been surrounded by caring, passionate providers who put their patients first. I lead our Provider Services team to offer exemplary provider support, training, and education so our network of quality providers can continue to put their Molina patients first.

Our Provider Services Team is available by email at:

- [OHProviderRelations@MolinaHealthcare.com](mailto:OHProviderRelations@MolinaHealthcare.com)

### Molina Quality Living Program Awardees

#### Information for all network providers

Molina is proud to announce the most recent quarter's performance for nursing facilities in the Molina Quality Living Program.

Level	Nursing Facility
Platinum Level	Respiratory and Nursing Center of Dayton
Gold Level	Friendship Village of Columbus
Silver Level	CHS Batavia Inc
	CHS Huntington Inc
	Friends Care Community

at this year's event will support Ohio Champions for Vaccines (OC4V).

### Reminder: OhioRISE Information

#### Information for all Medicaid providers

Effective July 1, 2022, ODM launched the OhioRISE program for eligible Medicaid members. For additional information, read the August "[OhioRISE Implementation](#)" Provider Bulletin on our Provider Website, on the "Provider Bulletin" page, and under the "Communications" tab.

### Reminder: SUD Residential Treatment Notification of Admission Form

#### Information for Medicaid BH providers

ODM has released a standardized form and process for providers of residential treatment for substance use disorders (SUD) to notify managed care entities (MCE) that a Medicaid member has been admitted for treatment. View the ODM 10294 [SUD Residential Treatment Notification of Admission](#) form at [medicaid.ohio.gov](https://medicaid.ohio.gov) on the "Medicaid Forms" page.

### Reminder: LTSS Respite Services for Children

#### Information for Medicaid providers

Effective July 1, 2022, ODM updated Ohio Administrative Code (OAC) 5160-26-03.2 Managed Care: Long-Term Services and Supports (LTSS) respite services for children to align with new behavioral health respite services offered through the OhioRISE program. Updates include removing the 100-hour service limit and adding PA. Find out more at [codes.ohio.gov/ohio-administrative-code/rule-5160-26-03.2](https://codes.ohio.gov/ohio-administrative-code/rule-5160-26-03.2).

### Reminder: Provider Contract for Next Generation Medicaid

#### Information for Medicaid providers

Molina has received provider inquiries regarding what actions they need to take contractually with Molina in preparation for the Next Generation Medicaid program. No provider action is required at this time. Molina will continue to share information as it becomes available.

### Reminder: Annual Mandatory Model of Care Training

#### Information for Medicare providers

CMS requires contracted Medicare medical providers to complete basic training on the

	Guardian Elder Care at Columbus
	Siena Gardens
	The Residence at Salem Woods
	Twin Towers

About the Molina Quality Living Program: This program recognizes and awards nursing facility partners that meet or exceed select CMS quality measures when providing care to Molina MyCare Ohio members in custodial care.

### Updated: Monkeypox Vaccine Codes

#### Information for Medicaid and MyCare Ohio providers

ODM has updated the Enhanced Ambulatory Patient Groups (EAPG) Covered Code List and the Outpatient Hospital Behavioral Health (OPHBH) Fee Schedule to add the monkeypox vaccines and their administration codes. Find additional information in the Fee Schedules located at [medicaid.ohio.gov](https://www.medicaid.ohio.gov) under "Resources for Providers" by selecting "Billing" and then "Fee Schedule & Rates."

Note: In addition, a new laboratory code, has been added to the EAPG covered list.

- 87593: Infectious agent detection by nucleic acid (DNA or RNA); orthopoxvirus (eg, monkeypox virus, cowpox virus, vaccinia virus), amplified probe technique, each

Reminder: Based on guidance from the AMA, ODM issued the following CPT codes for monkeypox:

#### Vaccine Codes:

- 90622: Vaccinia (smallpox) virus vaccine, live, lyophilized, 0.3 mL dosage, for percutaneous use
- 90611: Smallpox and monkeypox vaccine, attenuated vaccinia virus, live, non-replicating, preservative free, 0.5 mL dosage, suspension, for subcutaneous use

#### Laboratory Diagnostic Testing Procedure Code:

- 87593: Infectious agent detection by nucleic acid (DNA or RNA); orthopoxvirus (e.g., monkeypox virus, cowpox virus, vaccinia virus), amplified probe technique, each

Dual Eligible Special Needs Plan (D-SNP) Model of Care by Dec. 31, 2022.

- Molina hosts a monthly Model of Care provider training via Microsoft Teams throughout the year to help train you and your staff and address questions. Find an upcoming training in the Provider Training Session article.
- Find information on Model of Care requirements in the [Model of Care Provider Bulletin](#).

### Reminder: Health Care Education: Improved Outcomes for People with Disabilities

#### Information for all network providers

Join the Ohio Association of Health Plans, the Ohio Center for Autism and Low Incidence (OCALI), and an amazing lineup of speakers to build your confidence, skill, and ability to improve outcomes for people with disabilities. Find additional information or register for a session at [sites.google.com/ocali.org/improving-outcomes-2022](https://sites.google.com/ocali.org/improving-outcomes-2022).

### Fighting Fraud, Waste, and Abuse

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.

### Update: Change Healthcare Settlement Advocate Migration with ECHO Health Inc.

#### Information for all network providers

The implementation of our new payment platform through ECHO Health, Inc. (ECHO) is now complete. Molina Healthcare is committed to listening to our providers and responding to feedback. We have heard from our provider network that there are questions regarding Electronic Funds Transfer (EFT) payments and access to EFT payment support. Outlined below are key topics to address the questions and feedback received.

#### Electronic Funds Transfer (EFT) Delivery Times

With the move to the new payment platform, you may see a change in delivery times from what you experienced previously. The average deposit timeframe is five days from the Molina payment date; however, your bank may not make the funds available until day six (this would depend on your bank).

#### Access to Explanation of Payments (EOP)/835/Payment Status through ProviderPayments.com

We want to ensure all our providers have access to EOP and 835 documents through the [providerpayments.com](https://providerpayments.com) website. Below is some additional guidance to help you get the information you need to register.

**Please note:** if you already have an account on [providerpayments.com](https://providerpayments.com) from another payer, you do not need to register again. Your existing login will allow you access to your Molina payments.

**Locating an ECHO Draft Number:** This is typically found on each Molina payment received from ECHO. Locating this number may require additional steps if:

- You are registered for EFT payments currently since you cannot access your EOP.
- You have not received a payment from Molina with a positive dollar amount.

If you need assistance registering for the provider portal, please contact ECHO Customer Service at (800) 895-0621. Customer Service can also assist you in locating an ECHO Draft Number. Please note the updated phone number (800) 895-0621 is specific to [providerpayments.com](https://providerpayments.com) registration and will connect you with the appropriate support resources more quickly.

### **Combining Payments for Multiple National Provider Identifiers (NPIs)**

In some cases, providers who have multiple NPI's for one Tax ID and have the same bank account across NPI's will see the payments for those NPI's are being combined onto one EOP/835. If this makes your reporting difficult, this option can be turned off by contacting ECHO Customer Service at (888) 834-3511 or [edi@echohealthinc.com](mailto:edi@echohealthinc.com).

### **Payment Numbers Omitting EFT**

When utilizing the provider portal, Molina payment numbers no longer display the EFT prefix. This does not indicate that your payments are no longer on EFT. This is because additional payment types besides check and EFT are now available. To verify the payment method view the claim or payment number on ECHO. Please contact ECHO Customer Service at (888) 834-3511 with any questions.

Molina is here to support you as well. If you have questions for Molina about this transition, please contact us at [OHProviderRelations@MolinaHealthcare.com](mailto:OHProviderRelations@MolinaHealthcare.com). For additional information on Change Healthcare and ECHO, view the previous [Change Healthcare and ECHO Health, Inc.](#) Provider Bulletin on the Molina Provider Website, under the "Communications" tab.