

Provider Newsletter
May 2021

MAY IS MENTAL HEALTH AWARENESS MONTH



Each year millions of Americans face the reality of living with a mental illness. Please support this national movement to raise awareness about mental health. Mental Health Awareness Month helps fight stigma, provide support, educate the public and advocate for policies that support people with mental illness and their families.

The National Alliance on Mental Illness (NAMI) offers excellent resources to amplify the message of “You Are Not Alone.” Resources that focus on acknowledging that it’s okay to not be okay include NAMI’s blog, personal stories, videos, digital toolkits, social media engagements and national events. Click [here](#) to find images and graphics that you may want to display in your office for #MHAM throughout May.

MONROE PLAN’S BEHAVIORAL HEALTH SUPPORT PROGRAMS

CASE MANAGEMENT SERVICES

Do you have pediatric or adult patients that would benefit from ongoing case management services? To see if your patient qualifies or for more information email triage@monroeplan.com.

BEHAVIORAL HEALTH AND SUBSTANCE USE DISORDER SUPPORT

Do you have patients who recently received inpatient or emergency substance use disorder or behavioral health services and would benefit from support? Monroe Plan for Medical Care has Licensed Mental Health, Social Work, and Registered Nurse Case Managers to support you and your patients. Please email cmtriage@monroeplan.com.

REFERRALS

For guidance on referrals to in-network BH/SUD providers & services, email providerrelations@monroeplan.com.

MONROE PLAN’S PROVIDER PORTAL– Register Today!

Monroe Plan is dedicated to providing outstanding service and support to our provider network. Our latest enhancement is our Provider Portal! The portal centralizes forms and useful resources and tracks communications and transactions-so you don’t have to. Email providerrelations@monroeplan.com to learn more or to register, go to <https://monroeplan.healthtrioconnect.com>.

MEDICAID MANAGED CARE NETWORK PROVIDER ENROLLMENT



The 21st Century Cures Act requires all Medicaid Managed Care and Children's Health Insurance Program network providers to be enrolled with State Medicaid programs. The Medicaid provider enrollment process is to ensure appropriate and consistent screening of providers and improve program integrity. To enroll, you will need to go to [Provider Index](#) and navigate to your provider type to print and review the instructions and enrollment form. Here, you will also find a [Provider Enrollment Guide](#) and [How Do I Do It?](#) resource guide.

UPDATED PROVIDER ROSTERS

To best represent your office in Molina Healthcare of New York Inc. Provider Directories, we ask that you submit your latest standard provider roster to us at pfmemails@monroeplan.com. If already regularly submit updated rosters, thank you for your on-going submissions. Your roster submission can be in the same detailed format that you send to other Health Plans if the following information is included:

- [Group Taxpayer Identification Number](#)
 - [Group Location\(s\) and/or Business Office Address if Different](#)
 - [Group Sponsoring MD \(For Midlevel Providers\)](#)
 - [Provider Name](#)
 - [Provider Type \(PCP or Specialist\)](#)
 - [Provider Specialty\(s\)](#)
 - [Provider NPI](#)
 - [Provider Practice Location](#)
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UPSTATE AMERICAN DIABETES ASSOCIATION & MONROE PLAN’S “GROUP MEDICAL VISIT TOOLKIT”



Nearly a decade ago, the American Diabetes Association (ADA) Upstate NY region and the Monroe Plan for Medical Care (MP) partnered together in the development of a “Group Medical Visit Toolkit” as a vehicle for primary care and other practitioners to offer Group Medical Visits for individuals with diabetes. Studies consistently show that Group Medical Visits do result in improved outcomes for individuals with diabetes. The empowering nature and peer dynamics of these visits lead to better outcomes. Additionally, financially it can be a win-win for both the patient and the medical practice.

This toolkit covers everything from starting and organizing a group, to conducting successful group visits as well as providing specific content topic information on diabetes and billing information. It has been updated to provide guidance on the use of telemedicine in implementing and conducting virtual Group Medical Visits.

The ADA and MP are making this toolkit available free of charge to clinicians throughout Upstate New York. The toolkit is readily accessed on the MP website: [Monroe Plan > Provider > Provider Resources & Forms](#). It is our hope that this guide will serve you and your practice in producing better outcomes for patients with diabetes in our communities. For support in establishing group visits please reach out to Samantha Tolbert, Manager of Clinical Performance at stolbert@monroeplan.com.



CREDENTIALING FAQ

Credentialing Question	Answer
<p>We are a facility; do I credential individual providers or as a facility? Example: Physical Therapy Office</p>	<p>To ease the credentialing process Molina is credentialing your organization as a facility. To obtain this HDO/DO form please reach out to PFMemails@monroeplan.com.</p>
<p>I am a professional how do I initiate credentialing?</p>	<p>Molina Health Plan of New York will process the credentialing, however if you are a new provider with an existing contract, we will need a practitioner application. We will update our network data and forward the cred app to Molina to initiate credentialing. To obtain the form or ask questions please reach out to PFMemails@monroeplan.com.</p>
<p><i>Reminder: Once credentialing has been approved with Molina, an approval letter will be sent out with the participating effective date. The provider is considered a non-participating until credentialing is complete.</i></p>	
<p>How long does the credentialing process take?</p>	<p>Credentialing can take up to 60 days to complete.</p>
<p>What can delay my credentialing process?</p>	<p>There are several items that can delay or even reject a request for credentialing.</p> <ul style="list-style-type: none"> Incomplete form CAQH expired CAQH not updated Failure to attest and authorize Molina to view the application. Failure to include and attach additional information such as liability insurance info.
<p>Who do I reach out to obtain my credentialing submission status?</p>	<p>You should reach out to PFMemails@monroeplan.com</p>

NEWS AND UPDATES

MOLINA HEALTHCARE OF NEW YORK UPDATES AND INFORMATION

ESSENTIAL PLAN BENEFIT UPDATE – VISION AND DENTAL COSTS

The New York State of Health (Office of Insurance Programs), has updated the budget and the following changes will be implemented to Essential Plan 1 and 2 **effective June 1, 2021**:

- **Elimination of \$20 Premium for EP 1 Enrollees** (there will no longer be any monthly premiums for EP 1 enrollees.)
- **Vision and Dental Benefit and Cost-Sharing Change for EP 1 and 2 Enrollees** (Vision and dental benefits will now be embedded within all EP products and there will be no premium and no cost-sharing for these benefits.)

All other cost sharing and premiums related to medical coverage will remain the same.

Any questions or concerns can be directed to the Provider Relations Team at MHNYProviderservices@MolinaHealthCare.com or by calling **(877) 872-4716**.

PHARMACY VS. MEDICAL AUTHORIZATION REQUIREMENTS

A reminder that there is a **Prior Auth LookUp Tool for J Codes** on Molina's website located [here](#), in addition to the Pharmacy benefit formulary (**non- J codes**) is available [here](#).

Providers should specify the benefits they are requesting the authorization from: J Code or Pharmacy Benefit. This can be included in a fax or stated verbally when calling.

The phone and fax for providers to request an auth (either J code or Pharmacy benefit):

- Fax number 1-844-823-5479
- Phone number 1-877-872-4716
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SIGNING UP FOR MOLINA'S EFT

If you have not already done so, we encourage you to sign up for Molina's EFT to receive the quickest payment. You can sign up by registering [here](#). Any questions regarding the process should be directed to **Change Healthcare Provider Services** at wco.provider.registration@changehealthcare.com or **(877) 389-1160**.

MOLINA HEALTHCARE OF NEW YORK'S PROVIDER WEBSITE: FEATURED RESOURCES

www.MolinaHealthcare.com

- ☑ Privacy Notices
- ☑ Provider Manual
- ☑ Current Formulary & Updates
- ☑ Cultural Competency Provider Trainings
- ☑ COVID Updates
- ☑ Communications
- ☑ Practice and Preventive Health Guidelines
- ☑ Health Management Programs
- ☑ Quality Improvement Programs
- ☑ Member Rights & Responsibilities



If you would like to receive any of the information posted on our website in hard copy, call **(877) 872-4716**.

MOLINA'S NEW AVAILITY PROVIDER PORTAL IS LIVE

Molina's Availity provider portal is live as of 4/1/21. If you are not registered with Availity, you can go to Availity.com to register or contact your Molina Provider Rep for more information.

IMPORTANT MESSAGE – UPDATING PROVIDER MESSAGE

It is important for Molina Healthcare of New York, Inc. to keep our provider network information up to date. Up to date provider information allows Molina Healthcare of New York, Inc. to accurately generate provider directories, process claims and communicate with our network of providers. Providers must notify Molina Healthcare of New York, Inc. in writing at least 30 days in advance when possible of changes, such as:

- Change in practice ownership or Federal Tax ID number
- Practice name change
- A change in practice address, phone or fax numbers
- Change in practice office hours
- New office site location
- Primary Care Providers Only: If your practice is open or closed to new patients
- When a provider joins or leaves the practice
- Updated roster information

You can submit changes via:

Provider Portal: <https://provider.molinahealthcare.com/>

Email: MHNYNetworkOperations@MolinaHealthCare.com

Fax: < (844) 879-4509

Mail:

Molina Healthcare of New York, Inc.

5232 Witz Drive

North Syracuse, NY 13212

ATTN: Provider Services Department

Contact your Molina Provider Services Representative at **(877) 872-4716** if you have questions.

REPORTING FRAUD WASTE & ABUSE TO MOLINA

If you suspect cases of fraud, waste, or abuse, you must report it to Molina Health Care. You may do so by contacting the Molina Healthcare Alert Line or submitting an electronic complaint using the website listed below. For more information about fraud, waste and abuse, please see the Compliance Section of the Provider Manual located [here](#).

Molina Healthcare Alert Line

Phone: (866) 606-3889

Website: <https://molinahealthcare.alertline.com>