

Introduction

Molina Medicaid is the brand name of Molina Healthcare of Michigan, Inc.'s (Molina) Medicaid line of business.

Molina is licensed and approved by the Michigan Department of Health and Human Services (MDHHS) to operate in the following counties: Alcona, Alger, Allegan, Alpena, Antrim, Arenac, Barry, Bay, Benzie, Berrien, Branch, Calhoun, Cass, Charlevoix, Cheboygan, Clare, Clinton, Crawford, Eaton, Emmet, Genesee, Gladwin, Grand Traverse, Gratiot, Hillsdale, Huron, Ingham, Ionia, Iosco, Isabella, Jackson, Kalamazoo, Kalkaska, Kent, Lake, Lapeer, Leelanau, Lenawee, Livingston, Macomb, Manistee, Mason, Mecosta, Midland, Missaukee, Monroe, Montcalm, Montmorency, Muskegon, Newaygo, Oakland, Oceana, Ogemaw, Osceola, Oscoda, Otsego, Ottawa, Presque Isle, Roscommon, Saginaw, St. Clair, St. Joseph, Sanilac, Shiawassee, Tuscola, Van Buren, Washtenaw, Wayne, Wexford

Molina Medicaid

Molina Medicaid is the name of Molina's Medicaid (HMO) Plan, which provides Medicaid and Prescription Drug Benefits. The Molina Medicaid HMO plan was designed for Members who are eligible for Medicaid in order to provide quality health care coverage and service with no out-of-pocket costs. Molina Medicaid embraces Molina's long-standing mission to serve those who are the most in need and traditionally have faced barriers to quality health care.

Please contact the Member & Provider Services Contact Center toll free at (855) 322-4077, seven (7) days a week, from 8:00 a.m. to 8:00 p.m. local time, with questions regarding this program. TTY/TDD users, please call 711.

Use of this Provider Manual

From time to time, this Provider Manual will be revised as policies or regulatory requirements change. All changes and updates will be updated and posted to the Molina website as they occur. All contracted Providers will receive an updated Provider Manual annually, which will be made available at www.MolinaHealthcare.com.

This Provider Manual contains samples of the forms needed to fulfill your obligations under your Molina contract. If you are already using forms that accomplish the same goals, you may not need to modify them.



The Benefit of Experience

By focusing exclusively on serving low-income families and individuals who receive health care benefits through government-sponsored programs, Molina has developed strong relationships with Members, Providers and government agencies within each regional market that it serves. Molina's ability to deliver quality care, establish and maintain provider networks, and administer services efficiently has enabled it to compete successfully for government contracts.

Quality

Molina is committed to quality and has made accreditation a strategic goal for each health plan. Year after year, Molina health plans have received accreditation from the National Committee for Quality Assurance (NCQA). The NCQA accreditation process sets the industry standard for quality in health plan operations.

Flexible Care Delivery Systems

Molina has constructed its systems for health care delivery to be readily adaptable to different markets and changing conditions. Health care services are arranged through contracts with Providers that include independent Providers, medical groups, hospitals and ancillary Providers. Our systems support multiple contracting models, such as fee-for-service, capitation, per diem, case rates and diagnostic-related groups (DRG).

Cultural and Linguistic Expertise

National census data shows that the United States' population is becoming increasingly diverse. Molina has over thirty-five (35) years of history developing targeted health care programs for a culturally diverse membership, and is well-positioned to successfully serve these growing populations by:

□ Contracting with a diverse network of community-oriented Providers who have the

these growing populations by:	-
□ Contracting with a diverse network of community-oriented Providers who have	ve the
capabilities to address the linguistic and cultural needs of Members.	
□ Educating employees about the differing needs among Members.	
□ Developing Member education material in a variety of media and languages	and ensure
the literacy level is appropriate for our target audience.	



Contact Information for Providers

The following is a list of contact information to assist you in making the appropriate contact with the service departments of Molina Healthcare of Michigan (MHM).

Molina Healthcare of Michigan 880 W. Long Lake Rd, Suite 600 Troy, MI 48098

1. Provider Services Department

The Provider Services Department handles telephone and written inquiries from Providers regarding address and Tax-ID changes, Provider denied Claims review, contracting, and training. The department has Provider Services Representatives who serve all of M's Provider network.

Web Portal	https://provider.MolinaHealthcare.com
Telephone	(855) 322-4077

2. <u>Member Services Department</u>

The Member Services Department handles all telephone and written inquiries regarding Member Claims, benefits, eligibility/identification, selecting or changing Primary Care Providers (PCP), and Member complaints. Member Services Representatives are available seven (7) days a week, from 8:00 a.m. to 8:00 p.m., local time, excluding holidays. Eligibility verifications can be conducted at your convenience via Molina's web portal.

Telephone	(855) 322-4077
Hearing Impaired	711
(TTY/TDD)	

3. Claims Department

Molina strongly encourages Participating Providers to submit Claims electronically (via a clearinghouse or Molina's Provider Portal).

- Access the Provider Portal
- EDI Payer ID number 38334

To verify the status of your claims, please use Molina's Provider Portal. For other claims questions contact Provider Services.

Web Portal	https://provider.MolinaHealthcare.com
Telephone	(855) 322-4077
Fax	(248) 925-1768
Address	Molina Healthcare of Michigan, Inc
	P.O. Box 22668
	Long Beach, CA 90801

4. Claims Recovery Department

The Claims Recovery Department manages recovery for Overpayment and incorrect payment of Claims. Refunds and supporting documentation must be submitted to the address indicated.

Address	Molina Healthcare of Michigan, Inc
	25874 Network Place
	Chicago, IL 60673-1258
Fax	(888) 396-1167

5. <u>Compliance/Anti-Fraud Hotline</u>

If you suspect cases of fraud, waste, or abuse, you must report it to Molina. You may do so by contacting the Molina AlertLine or submit an electronic complaint using the website listed below. For more information about fraud, waste and abuse, please see the Compliance section of this Provider Manual.

Address	Confidential
	Compliance Official
	Molina Healthcare, Inc.
	200 Oceangate, Suite 100
	Long Beach, CA 90802
Telephone	(866) 606-3889
Email	https://MolinaHealthcare.AlertLine.com

6. <u>Credentialing Department</u>

The Credentialing Department verifies all information on the Provider Application prior to contracting and re-verifies this information every three (3) years or sooner, depending on Molina's Credentialing criteria. The information is then presented to the Professional Review Committee to evaluate a Provider's qualifications to participate in the Molina network.

Telephone	(855) 322-4077
Address	Molina Healthcare of Michigan Inc 880 W. Long Lake Rd, Suite 600
	Troy, MI 48098

7. 24-Hour Nurse Advice Line

This telephone-based nurse advice line is available to all Molina Members. Members may call anytime they are experiencing symptoms or need health care information. Registered nurses are available twenty-four (24) hours a day, seven (7) days a week to assess symptoms and help make good health care decisions.

English Telephone	(888) 275-8750
Spanish Telephone	(866) 648-3537
Hearing Impaired	711
(TTY/TDD)	

MOLINA* HEALTHCARE

Introduction

8. Healthcare Services Department

The Healthcare Services (formerly UM) Department conducts concurrent review on inpatient cases and processes Prior Authorizations/Service Requests. The Healthcare Services (HCS) Department also performs Care Management for Members who will benefit from Care Management services. Participating Providers are required to interact with Molina's HCS department electronically whenever possible. Prior Authorization/Service Requests and status checks can be easily managed electronically.

Managing Prior Authorizations/Service Requests electronically provides many benefits to providers, such as:

- Easy to access to twenty-four/seven (24/7) online submission and status checks.
- Ensures HIPAA compliance.
- Ability to receive real-time authorization status.
- Ability to upload medical records.
- Increased efficiencies through reduced telephonic interactions.
- Reduces cost associated with fax and telephonic interactions.

Molina offers the following electronic Prior Authorizations/Service Requests submission options:

- Submit requests directly to Molina via the Provider Portal.
- See Molina's Provider Portal Quick Reference Guide or contact your Provider Services Representative for registration and submission guidance.
- Submit requests via 278 transactions. See the EDI transaction section of Molina's website for guidance.

Web Portal	https://provider.MolinaHealthcare.com
Telephone	(855) 322-4077
Fax	(800) 594-7404
Address	Molina Healthcare of Michigan
	880 W. Long Lake Rd, Suite 600
	Troy, MI 48098

9. Health Management Level 1 and Health Management Department

Molina's Health Management Level 1 (previously Health Education) and Health Management (previously Disease Management) programs will be incorporated into the Member's treatment plan to address the Member's health care needs.

Weight Management and Smoking Cessations Programs:

Phone (866) 472-9483 Fax: (562) 901-1176

Health Management and Maternity Programs:

Phone: (866) 891-2320 Fax: (800) 642-3691

10. Behavioral Health

Molina manages all components of covered services for Behavioral Health. For Member Behavioral Health needs, please contact Molina directly.

(855) 322-4077 available 24/7
Molina Healthcare of Michigan, Inc 880 W. Long Lake Rd, Suite 600 Troy, MI 48098

11. Pharmacy Department

Pharmacy services are covered through CVS Caremark by Molina. The drug formulary and a list of in- network pharmacies are available on the website.

Telephone	(855) 322-4077
	8:00 a.m 8:00 p.m., local time, seven (7) days a week.
Hearing Impaired (TTY/TDD)	711
Fax	(888) 373-3059
Web	www.Molinahealthcare.com

12. Quality Improvement

Molina maintains a Quality Improvement (QI) Department to work with Members and Providers in administering the Molina Quality Improvement Program.

Telephone	(855) 322-4077
Fax	General Fax Number: (248) 925-1732 Notification of Pregnancy Form (NOP): Fax to (844) 861-1932 MIHP Enrollment and Discharge Notifications Forms: Fax to (844) 861-1932
Email	MolinaMIHP@molinahealthcare.com



13. Supplemental Services

Molina offers the following supplemental services benefits.

Service	Vendor Name & Address	Telephone
Dental	Scion Dental, Inc	(855) 609-5158
	N92 W14612 Anthony Ave	
	Menomonee Falls, WI 53051	
Hearing	Hear USA	(877) 664-9353
	10455 Riverside Dr	
	Palm Gardens, FL 33410	
Vision	VSP	(844) 853-6294
	3333 Quality Drive,	
	Rancho Cordova, CA 95670	
Transportation	Access2Care	(888) 616-4842
	1164 Columbia, IN 46725	



