

# Provider Bulletin

Molina Healthcare of New Mexico, Inc.

October 31, 2025

## **Ouma Health: New Referral Link for Prenatal and Postpartum Support**

As a reminder, Ouma Health continues to support Molina members with virtual prenatal and postpartum visits, helping ensure timely prenatal visits and follow-up after delivery and improving continuity of care for mothers across New Mexico.

Ouma provides telehealth access to licensed maternity clinicians, including OB/GYNs, midwives, and behavioral health specialists, to support members during the critical postpartum period. Services include lactation support, screening for postpartum depression, and coordination back to the member's primary or OB provider.

New Referral Link: Providers and care teams can now submit referrals directly through Ouma's secure referral portal at [ouma.me/refer](https://ouma.me/refer).

In addition to virtual visits, Ouma will be reaching out to coordinate care and conduct warm hand-offs to local providers to ensure members have ongoing, in-person care and support.

Questions? Please contact our Provider Contact Center at (855) 322-4078, Monday through Friday, 8:00 am to 5:00 pm MST.

## **Quality Corner: Molina Healthcare of New Mexico is Collaborating with DocGo, Addus House Calls, and Care Connections**

Molina Healthcare of New Mexico is partnering with DocGo, Addus House Calls, and Care Connections to provide in-home preventive and maintenance health visits to Molina Members who have not yet accessed these services this year. During these appointments, members may receive screenings and referrals, and all results will be communicated directly with their primary care providers. This effort is designed to support completion of essential year-end visits and assist members in planning future appointments, all while maintaining their current patient-provider relationships. Beginning at the end of October, these partner providers will start reaching out to members to schedule appointments.

If you have any questions, please contact your Provider Engagement Specialist or email [MHNM.ProviderEngagement@Molinahealthcare.com](mailto:MHNM.ProviderEngagement@Molinahealthcare.com).

## Molina's Clinical Policy Guidelines & Process

Clinical practice guidelines are based on scientific evidence, a review of the medical literature or appropriately established authority, as cited. All recommendations are based on published consensus guidelines and do not favor any particular treatment based solely on cost considerations. The care recommendations are suggested as guides for making clinical decisions. Providers and our members must work together to develop individual treatment plans tailored to the member's specific needs and circumstances.

Molina follows a structured nine-step procedure to develop and approve clinical policies. The detailed steps are outlined below:

### Clinical Policy Process

1	New Topic or Revision Request Received	Received from Health Plans, Medical Directors, Clinical Staff to create policy for high volume/cost claims
2	Research & Draft Policy	Clinical Policy Team works on revisions and development; collaborates with the Medical Policy Vetting Subcommittee
3	Peer Review - Internal	Molina MD Team and requesting department(s), as applicable
4	Peer Review - External	External Review via an Independent Review Organization (IRO)
5	Approval - Corporate	MCP Committee (comprised of CMOs & Medical Directors)
6	Posting to SharePoint	Policies available on internal SharePoint (≤ 3 days after MCPC)
7	Communication	Bimonthly email to CMOs, Medical Directors, and Leadership from the Health Plans, Pharmacy, Quality Improvement and UM (1 week after MCPC)
8	Compliance Review & Posting (External)	Policies sent for Compliance Review and Posting to External Website (< 4 weeks after MCPC)
9	Approval – State Level	Approval by the Health Plan UM Committees following necessary review, as applicable by State regulations (1-2 months after MCPC)

You can also view all guidelines at <http://www.molinaclinicalpolicy.com> in the Health Resources section on the provider web pages. To request a copy of any guidelines, please contact the Provider Contact Center at (855) 322-4078, Monday through Friday, 8:00 am to 5:00 pm MST.

## 2025 Mandatory Annual Medicaid Turquoise Care Training

If you missed Molina's Provider Roadshow or have not signed up for the 2025 Mandatory Annual Medicaid Turquoise Care Training, there is still time to participate. Virtual sessions in November and December are your final chance to meet the 2025 Medicaid Turquoise Care compliance requirements. If you have not yet attended a live virtual session or an in-person roadshow stop this year, we encourage you to register and complete your training. We hope to see you online soon!

Date	Time	Virtual	Location	Register
11/19/2025	9:00 AM	Yes	Microsoft Teams	<a href="https://events.teams.microsoft.com/event/6f13e52b-991f-4d0f-8537-dac4b02b09be@5e625f8d-0b53-4f56-9e46-19fa14bb2e5c">https://events.teams.microsoft.com/event/6f13e52b-991f-4d0f-8537-dac4b02b09be@5e625f8d-0b53-4f56-9e46-19fa14bb2e5c</a>
12/15/2025	1:00 PM	Yes	Microsoft Teams	<a href="https://events.teams.microsoft.com/event/6f13e52b-991f-4d0f-8537-dac4b02b09be@5e625f8d-0b53-4f56-9e46-19fa14bb2e5c">https://events.teams.microsoft.com/event/6f13e52b-991f-4d0f-8537-dac4b02b09be@5e625f8d-0b53-4f56-9e46-19fa14bb2e5c</a>

### Training Curriculum:

- Participating with Molina Healthcare
- Provider & Member Responsibilities
- Claims & Billing
- Care Coordination
- Telemedicine
- Provider Online Resources
- Culturally and Linguistically Appropriate Services
- Service Authorizations
- Covered Services
- ...and much more!

Your participation provides a valuable opportunity for collaboration, knowledge sharing, fulfilling the mandatory Health Care Authority (HCA) requirement, and strengthening our partnership. The Molina Provider Relations team looks forward to connecting with you during these interactive sessions as we work together to deliver outstanding care to New Mexicans enrolled in Turquoise Care.

### Helpful Resources:

- Questions? Email us at [MHNM.ProviderServices@Molinahealthcare.com](mailto:MHNM.ProviderServices@Molinahealthcare.com)
- For a complete list of training and resources, please visit [Training Resources, Availability Essentials Portal \(molinahealthcare.com\)](#) or [New Mexico Providers Home \(molinahealthcare.com\)](#).

### **Claim Management for Member Match Requirements: Molina Subscriber ID Required**

A reminder to all providers regarding the required elements for Member match requirements. All claims must include the Molina Member ID number. Claims submitted without the Member ID number will be rejected. This information is essential for accurately identifying, managing, and matching member data to the correct claim. Providers must adhere to specific coding requirements when submitting claims.

To ensure proper claim matching to the member's record, each claim must include the following details:

- Member ID number (found on the member's identification card)
- Member's first and last name
- Member's gender
- Date of birth (month, day, and year)
- Correct plan address (the address of the plan where the member has coverage, which may differ from the provider's location)

To help ensure prompt claims processing and avoid returns, Molina recommends the following steps:

- Step 1 - Verify insurance eligibility every time a patient is seen,
- Step 2 - Include complete and current member information when submitting claims, and
- Step 3 - Submit claims electronically.

Molina offers two options for electronic claim submission:

- Submit claims directly through the [Molina's Provider Portal | Availity Essentials](#), which is available to all providers at no cost, 24/7.
- Submit claims via your standard EDI clearinghouse using Payer ID 09824.

For more details, please refer to the Required Elements section of Molina's Provider Manual, available at <https://www.molinahealthcare.com/providers/nm/medicaid/home.aspx>.

Questions? Please contact our Provider Contact Center at (855) 322-4078, Monday through Friday, 8:00 am to 5:00 pm MST. Thank you for your commitment to serving Molina Healthcare of New Mexico members and the community.



## **Availity Essentials is Molina's Exclusive Provider Portal**

Not registered with Availity Essentials? Register and get started with Availity to securely submit claims, check eligibility, submit service authorization requests, appeals, and more at: <https://www.availity.com/molinahealthcare> or by calling 1-800-AVAILITY (1-800-282-4548) for additional help.

Only the person who will become the organization's primary administrator needs to register. Before you get started, gather this information for your organization:

- Physical and billing address(s)
- Tax ID (EIN or SSN)
- NPI
- Primary specialty/taxonomy

To register as a billing service, dental provider, or an atypical provider, please visit [Availity's Getting Started Page](#) for additional registration information.

## **Provider Call to Action: Watch for Our Provider Satisfaction Survey**

To further enhance our services, we will soon launch a provider satisfaction survey centered on key areas such as care coordination, claims processing, provider relations, pharmacy and drug benefits, utilization management, and our network overall. If your practice is selected to participate, we highly encourage your involvement in this important initiative.

- Who: Press Ganey will conduct the survey by reaching out to providers through email and telephone.
- When: The survey will take place from September through December 2025.
- Why: Your feedback is essential to our ongoing commitment to quality improvement and ensures our continued compliance with National Committee for Quality Assurance (NCQA) accreditation standards and Centers for Medicare & Medicaid Services (CMS) guidelines.

We appreciate your partnership and thank you in advance for your valuable input. If you have any questions about the survey, please contact us at [MHNM.ProviderServices@MolinaHealthcare.com](mailto:MHNM.ProviderServices@MolinaHealthcare.com) for more information.

### Provider Reminder: Schedule 2025 Retinal Eye Exams for Diabetic Members

Molina Healthcare of New Mexico is notifying providers about members who need to complete their diabetic retinal eye exam in 2025. As part of our ongoing effort to promote better health outcomes, we are reaching out to these members directly and encouraging them to book this essential annual screening.

Your patients may contact your office to request a referral to a contracted Ophthalmologist or Optometrist. If your practice offers retinal eye exams in-house, please encourage members to schedule their appointments before December 31, 2025.

To make referrals easier, we have prepared a list of contracted eye care providers by region. This resource can help you guide your patients to the appropriate provider for their retinal eye exam.

#### Contracted Eye Care Providers by Region

Region	Counties	Contracted Providers
Central	Bernalillo, Sandoval, Torrance, Valencia	Presbyterian Medical Group, UNM Medical Group, Eye Associates of NM, Retina Consultants of NM, Juliette Eye Institute
Northeastern	San Juan, McKinley, Cibola	Gallup Indian Medical Center, Tohatchi Health Center, Eye Associates of NM, SW Eye Consulting, Northern Navajo Medical Center, Orchard Eye Center, Thoreau Clinic
Southeastern	Quay, De Baca, Curry, Lincoln, Roosevelt, Chaves, Eddy, Lea	Engstrom Eye Center, Michel Lim, MD, Eye Associates of NM
Southwestern	Catron, Socorro, Grant, Sierra, Hidalgo, Luna, Doña Ana, Otero	Filmore Eye Clinic, Looks PA, SW Eye Institute, Andrew Johnson, OD, PC, Gila Eyecare, Veteto Vision Center

If your practice refers members to vision providers not included in the resources above, please use the following directories to access the full list of contracted vision care professionals:

- March Vision Care: [Locate a Provider](#)
- Molina Healthcare of New Mexico: [Find a Healthcare Provider](#)

Accurate coding plays a critical role in boosting HEDIS scores and supporting preventive care for patients with diabetes. For HEDIS Diabetic Eye Exams (EED), be sure to document the exam date, the provider's specialty (Optometrist or Ophthalmologist), and all exam findings. If you utilize AI-based imaging, make certain that results are properly interpreted and documented. Use CPT II codes to clearly indicate whether retinopathy is present or absent.

#### Eye Exam Coding Table

Category	Codes	Description
Eye Exams by PCPs or In-Office Imaging	CPT 92227, 92228	Retinal imaging for disease detection, interpretation, and reporting by a qualified reading center
Eye Exams by PCPs or In-Office Imaging	CPT 92229	Autonomous AI-based retinal exam
Eye Exams with Evidence of Retinopathy	CPT II 2022F	Dilated retinal exam with interpretation
Eye Exams with Evidence of Retinopathy	CPT II 2024F	7-field stereoscopic photos with interpretation
Eye Exams with Evidence of Retinopathy	CPT II 2026F	Eye imaging validated to match diagnosis (exclude modifiers 1P, 2P, 3P, 8P)
Eye Exams without Evidence of Retinopathy	CPT II 2023F, 2025F, 2033F	Same procedures as above, but without retinopathy (exclude modifiers 1P, 2P, 3P, 8P)
Other Relevant Codes	HCPC G2102	Dilated retinal eye exam with interpretation by ophthalmologist or optometrist
Other Relevant Codes	ICD-10 E10.9, E11.9, E13.9	Diabetes without complications
Other Relevant Codes	CPT II 3072F (Retired)	Do not use

Our Provider Engagement team is here to assist you. For questions or additional support, please reach out via email at [MHNM.ProviderEngagement@MolinaHealthcare.com](mailto:MHNM.ProviderEngagement@MolinaHealthcare.com).

Thank you for your continued partnership in supporting the health and well-being of your patients.

### **Provider Online Directory: Has your information changed?**

Our members rely on accurate provider information to find care. We must know about any changes to your practice, such as new addresses or phone numbers, as soon as possible. We need to be informed of demographic changes to ensure the accuracy of our provider directory and systems and the mailing of checks and correspondence to the correct location. Take the following steps to notify Molina and the NPI Registry of any changes:

- Update your demographic information using Molina's [Provider Change Form](#).
- Review Molina's [Provider Online Directory](#) for accuracy.
- Update the [National Provider Identifier Registry](#) if you have an NPI.
- Update your information through the [National Plan & Provider Enumeration System website](#), or
- Download and mail in the Centers for Medicaid & Medicare Services' [NPI update form](#). Instructions are provided online in the [NPPES FAQs](#). See the [CMS website](#) for more on NPIs.

Federal law requires that directory information be verified every 90 days even if it has not changed. Additionally, members must be notified of any address change before an appointment. For changes like PCP termination, provider affiliation, and reassignment to a new PCP, CMS requires that we send a written notice or call the member at least 30 calendar days before the effective date of the change. So, if you move to a new location, contract with a new medical group or retire, you must give us proper written notice so we can make the necessary changes and have time to notify affected members. This will help us ensure payment is not disrupted. It also prevents you from having to go through the recredentialing process.

In addition, Molina has implemented a new process change for initial credentialing submissions. The submission will be denied if an email address is not included on the provider information forms. Before submitting, please ensure an email address is provided on the initial credentialing request.



## **Maternal Health Innovation: Molina NM Partners with Marani Health**

As part of our continued commitment to improving maternal and infant health outcomes across New Mexico, Molina Healthcare of New Mexico is partnering with Marani Health, a company specializing in technology-driven solutions for maternal and fetal care.

Marani Health, founded in collaboration with the Mayo Clinic, offers a digital platform that combines remote monitoring, connected devices, and AI-driven analytics to support early detection of complications during pregnancy and postpartum. Their system enables continuous monitoring of key maternal and fetal indicators, helping providers identify risks earlier, improve coordination of care, and expand access for members in rural and underserved communities.

This collaboration supports Molina NM's broader goal of leveraging innovation to promote equitable, high-quality care for expectant mothers enrolled in the Medicaid program. More details about implementation and provider engagement opportunities will be shared in the coming months.

If you have any questions or need assistance, please reach out to us at [MHNM.ProviderServices@Molinahealthcare.com](mailto:MHNM.ProviderServices@Molinahealthcare.com). Our team is here to support you.

## **Helpful Resources**

Molina provider websites:

- [Marketplace](#)
- [Medicaid](#)
- [Medicare](#)

## **Questions?**

Please email your general inquiries to [MHNM.ProviderServices@MolinaHealthcare.com](mailto:MHNM.ProviderServices@MolinaHealthcare.com), and it will be routed to the appropriate individual. Thank you for your commitment to serving Molina Healthcare of New Mexico members and the community. Molina is here to support you.