



Molina Medicare

• Understanding the Benefits •

Overview

Vision

Corrective benefits for glasses, and post cataract benefits as well.

Dental

Very comprehensive for a Medicare plan. Attention to detail a must!

Hearing

Similar to a Vision plan, with benefits for Materials and Exams.

Vision

One plan: Options Plus

Coverage for one state: TX

Exam: \$0 copay

Materials: \$ 200.00 material allowance for glasses or contact lenses.

Post cataract benefit available for glasses

Exam frequency: One exam per calendar year

Materials: Once every two calendar years

Dental

Please select the appropriate plan when you pull up the benefit grid in BRAIN:

B.R.A.I.N. ▸ ... Molina Medicare ▸ Molina Dental fee schedules for 2013.xlsx

File Open in Excel Data Find

	A	B	C	D	E	F	G	H	I	J	K	L
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Which plan is the caller requesting information about? Select from the following:

- [California Plan 1](#)
- [California Plan 7 \(Sacramento\)](#)
- [Florida](#)
- [Illinois](#)
- [Michigan](#)
- [New Mexico M.A.P.D.](#)
- [New Mexico S.N.P.](#)
- [Ohio](#)
- [Texas](#)
- [Utah](#)
- [Utah Healthy Advantage](#)
- [Washington](#)

Dental Cont.

Most states have a \$1,000 Max per year benefit including preventive services

The New Mexico M.A.P.D. plan has a \$500 Max per year benefit.

Diagnostic and Preventive services do not have a member copay and the benefit grid tells you the frequency

ADA Code	Covered Service	Member Pays	Frequency
Clinical Oral Evaluations			
00120	Periodic oral evaluation	0%	2 per year
00140	Limited oral evaluation - problem-focused	0%	
00150	Comprehensive oral exam	0%	
00180	Comprehensive periodontal evaluation	0%	
Radiographs / Diagnostic Imaging (Including Interpretation)			
00210	Intraoral - complete series, including bitewings	0%	1 per year
00220	Intraoral - periapical, first film	0%	
00230	Intraoral - periapical, each additional film	0%	
00270	Bitewings - single film	0%	
00272	Bitewings - two films	0%	
00274	Bitewings - four films	0%	
00330	Panoramic film	0%	
Preventive and Fluoride Treatments			
01110	Prophylaxis - adult	0%	2 per year
01204	Topical application of fluoride - without prophylaxis - adult	0%	2 per year

Dental Cont.

All plans have the following “basic” benefits:

2 exams per year (D0120, D0140, D0150, D0180)

One set of radiographs per year (D0210, D0220, D0230, D0270, D0272, D0273, D0274, D0330)

2 Cleanings (Prophylaxis) per year (D1110)

2 Fluoride applications per year (D1204)

Simple extractions (D7140)

Dental Cont.

Comprehensive benefits need to be checked, so get the codes from the caller and cross reference the benefit grid to make sure the procedure is covered.

The member's responsibility does not apply toward the annual benefit maximum for the plans, the amount Avesis pays does.

**Prosthodontics, Periodontics
and treatment plans over \$500
need to be prior authorized!!**

Dental Cont.

A	B	C	D	
D0230	Intraoral - periapical, each additional film	0%	1 per year	
D0270	Bitewings - single film	0%		
D0272	Bitewings - two films	0%		
D0274	Bitewings - four films	0%		
D0330	Panoramic film	0%		
Preventive and Fluoride Treatments				
D1110	Prophylaxis - adult	0%	2 per year	
D1204	Topical application of fluoride - without prophylaxis - adult	0%	2 per year	
Amalgam Restorations - primary or permanent (posterior composites paid at amalgam fee and mbr is resp for the difference)				
D2140	Amalgam - one surface, primary or permanent	20%		
D2150	Amalgam - two surfaces, primary or permanent	20%		
D2160	Amalgam - three surfaces, primary or permanent	20%		
D2161	Amalgam - four or more surfaces, primary or permanent	20%		
Resin-Based Composite Restorations				
D2330	Resin-based composite - one surface, anterior	20%		
D2331	Resin-based composite - two surfaces, anterior	20%		
D2332	Resin-based composite - three surfaces, anterior	20%		
D2335	Resin-based composite - four or more surfaces, or involving incisal angle, anterior	20%		
Crowns and Crown Repair				
D2710	Crown - resin-based composite indirect	50%		
D2740	Crown - porcelain / ceramic substrate	50%		
D2751	Crown - porcelain fused to predominantly base metal	50%		
D2781	Crown - 3/4 cast predominately base metal	50%		
D2791	Crown - full cast predominantly base metal	50%		
D2910	Recement inlay onlay, or partial coverage restoration	50%		
D2915	Recement cast or prefabricated post and core	50%		
Plan Selector CA-001 CA-007 (Sac) FL IL MI NM-MAPD NM-SNP OH TX UT UT-HA WA				

For services with no frequency, the member is able to have these services rendered as long as they still have money left in their annual benefit maximum.

Hearing

Benefits work similar to a vision plan, with separate benefits for exams and materials.

It is important to remember that the diagnostic hearing exam (determines what is medically wrong that is causing the hearing loss) is billed directly to Molina.

Avesis pays claims for the hearing test (how do we correct hearing loss) and the hearing aid.

When providers bill for hearing aids, they need to bill their UCR minus 15%.

Hearing

Example: A member is on the California Molina Medicare Options plan. They have a material allowance for hearing aids of \$600. The provider has a Miracle-Ear hearing aid that would work that has a UCR of \$1000. So the provider bills us \$850 for the hearing aid (\$1000 minus 15%), the member is responsible for \$250 (\$850 minus the \$600 material allowance) and we pay the provider \$510 (Avesis hearing aid payment from fee schedule).

Don't forget to take the assessment in QUIA before
6pm Friday, February 15th.

www.quia.com/web