Provider Bulletin

Molina Healthcare of Nevada

June 2025

Re: Commitment to Wellness Push

Dear Provider,

Molina Healthcare of Nevada believes that preventative care achieved through annual wellness visits is a cornerstone of our mission of improving the health and lives of our members.

We recognize the importance of these visits in proactively identifying underlying conditions that require further care and establishing needed relationships with their medical providers. These cannot be achieved without your assistance and dedication. We appreciate your support in this mission.

The Molina Healthcare of Nevada leadership team is excited to announce a program in place intended to provide incremental compensation to our providers for delivering these essential visits: **Molina Healthcare of Nevada Commitment to Wellness Push 2025**.

Details of this exciting program include:

- Molina Healthcare of Nevada will process applicable claims to add an incremental $30 wellness payment to providers for claims described below, in addition to normal claims processing guidelines.
- Applicable claims will be reprocessed in 2026 to include this incremental payment by – 1/31/26.

The following table applies to the first claim for a Molina Healthcare of Nevada Medicaid member for one of the qualifying codes below submitted and accepted as a clean claim prior to 11/15/2025, for a date of service from 6/1/2025 through 9/30/2025. Providers are eligible for one claim per member.

This excludes members who received qualifying services with a date of service of 1/1/2025 through 5/31/2025.

Only one $30 incremental payment per eligible Molina member.

Measure Description	Code
Well Care Visits	**CPT** 99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, 99395, 99461 **HCPCS** G0438, G0439, S0302, S0610, S0612, S0613 **ICD-10CM** Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129 Z00.2, Z00.3, Z01.411, Z01.419, Z02.5, Z02.84, Z76.1, Z76.2

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Ambulatory Visits	CPT 92002, 92004, 92012, 92014, 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98016, 98966, 98967, 98968, 98970, 98971, 98972, 98980, 98981, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99421, 99422, 99423, 99429, 99441, 99442, 99443, 99457, 99458, 99483 HCPCS G0071, G0402, G0438, G0439, G0463, G2010, G2012, G2250, G2251, G2252, S0620, S0621, T1015 UBREV 0510, 0511, 0513, 0514, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0524, 0525, 0526, 0527, 0528, 0529, 0982, 0983 ICD-10CM Z00.00, Z00.01, Z00.121, Z00.129, Z00.3, Z00.5, Z00.8, Z02.0, Z02.1, Z02.2, Z02.3, Z02.4, Z02.5, Z02.6, Z02.71, Z02.79, Z02.81, Z02.82, Z02.83, Z02.84, Z02.89, Z02.9, Z76.1, Z76.2

Table represents all qualifying codes including ambulatory and/or annual visit codes

Telehealth codes are only applicable to AAP visits

Exclusion of laboratory claims with a POS 81

This PCP P4P Program is being implemented in accordance with the provision in your Provider Services Agreement ("Agreement") titled **Quality Bonus Payment Program** or equivalent section(s) thereof. All provisions in the agreement will apply. If there is a conflict between this PCP P4P Program and any other provision in the agreement, the provisions in the PCP P4P Program will control the PCP P4P Program.

If you have any questions, please contact your practice transformation specialist or provider services representative or email **NVProviderRelations@MolinaHealthcare.com**.

We are excited to partner with you on this and appreciate your support.

Sincerely,

Molina Healthcare of Nevada

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