

Provider Bulletin

Molina Healthcare of California

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July 15, 2024

- Imperial
- Riverside
- San Bernardino
- Los Angeles
- Orange
- Sacramento
- San Diego

Availity: Managing Claims

This is an advisory notification to Molina Healthcare of California (MHC) network providers applicable to all lines of business.

What you need to know:

MHC and Availity Essentials are offering providers new features for managing claims to help facilitate the timely processing of your claims.

There are three categories for managing claims — corrected claims, claims reconsideration and claims appeal. Corrections and reconsiderations are a quick and efficient way to get a response for your finalized claim.

Please refer to the attached flyer for more information.

Provider Action

Please take a few moments to participate in our Communication Preference Survey. Your feedback will directly influence Molina's engagement with providers, creating a more seamless and efficient communication experience for our network.

Take the survey at
[molinahealthcare.surveymonkey.com/r/V55RGTG!](https://molinahealthcare.surveymonkey.com/r/V55RGTG)



What if you need assistance?

If you have any questions regarding the notification, please contact your Molina Provider Relations Representative below.

Service County Area	Provider Relations Representative	Contact Number	Email Address
Los Angeles County	Clemente Arias	562-517-1014	Clemente.Arias@molinahealthcare.com
	Christian Diaz	562-549-3550	Christian.Diaz@molinahealthcare.com
	Daniel Amirian	562-549-4809	Daniel.Amirian@molinahealthcare.com
	Anita White	562-980-3947	Princess.White@molinahealthcare.com
Los Angeles / Orange County	Maria Guimoye	562-549-4390	Maria.Guimoye@molinahealthcare.com
Sacramento County	Johonna Eshalomi	279-895-9354	Johonna.Eshalomi@molinahealthcare.com
	Marina Higby	916-561-8550	Marina.Higby@molinahealthcare.com
San Bernardino County	Luana McIver	909-501-3314	Luana.Mciver@molinahealthcare.com
San Bernardino / Riverside County	Vanessa Lomeli	909-577-4355	Vanessa.Lomeli2@molinahealthcare.com
Riverside County	Patricia Melendez	562-549-3957	Patricia.Melendez@molinahealthcare.com
San Diego / Imperial County	Salvador Perez	562-549-3825	Salvador.Perez@molinahealthcare.com
	Dolores Ramos	562-549-4900	Dolores.Ramos@molinahealthcare.com
	Lincoln Watkins	858-300-7722	Lincoln.Watkins@molinahealthcare.com

California Facilities (Hospitals, SNFs, CBAS, ICF/DD & ASC Providers)	Facility Representative	Contact Number	Email Address
Imperial, San Diego & Sacramento	Teresa Suarez	562-549-3782	Teresa.Suarez2@molinahealthcare.com
Los Angeles & Orange	Laura Gonzalez	562-549-4887	Laura.Gonzalez3@molinahealthcare.com
Riverside & San Bernardino	Mimi Howard	562-549-3532	Smimi.Howard@molinahealthcare.com

If you are not contracted with Molina and wish to opt out of the MHC Provider Bulletin, email mhcproviderbulletin@molinahealthcare.com. Please include the provider's name, NPI, county, and fax number, and you will be removed within 30 days.

Molina Healthcare and Availity Essentials™ are offering providers new features for managing claims to help facilitate the timely processing of your claims. There are three categories for managing claims described below — corrected claims, claims reconsideration and claims appeal. Corrections and reconsiderations are a quick and efficient way to get a response for your finalized claim.



Corrected claims → Demo



Three days to process a corrected claim

A claim has been previously submitted and adjudicated by Molina and is being resubmitted by the provider due to an error or omission. A corrected claim allows the providers to submit the claim with additional or correct information.

Examples of corrected claims:

- ✓ Change to any information previously billed: code, date, diagnosis, units, etc.
- ✓ Claims denied due to another insurance — primary Payer Explanation of Payment required.
- ✓ Claims denied because of missing required invoice.
- ✓ Claims denied for itemized bill required.
- ✓ Claims denied because of billing an unlisted procedure code.



Claims reconsideration → Info guide



3-5 days to receive a response and possible adjustment

A claim reconsideration is a request by a provider to have Molina review a claim that was previously paid, denied or reduced.

Examples of reconsideration requests:

- ✓ The provider perceives their claim to have been paid incorrectly or incompletely.
- ✓ The provider perceives their claim was denied based on incorrect or incomplete information.
- ✓ The provider perceives their claim payment to have been reduced incorrectly based on incorrect criteria.
- ✓ The provider perceives Molina failed to follow the applicable policies, rules or regulations.



Claims appeal → Demo



30-90 days to complete, and appeals require supporting documentation

A provider appeal/dispute is the adjustment request of the processing, payment or nonpayment of a claim by Molina.

Examples of appeal requests:

- ✓ A reduction, suspension or termination of a previously authorized service.
- ✓ A denial, in whole or in part, of payment for a service.
- ✓ Failure to provide services in a timely manner.
- ✓ Failure to make a coverage decision in a timely manner.