

ADDRESSES AND PHONE NUMBERS

Please register on the Molina Healthcare WebPortal at <https://eportal.molinahealthcare.com/Provider/Registration>. By registering you can access online member eligibility, claims status and claims submission. You can also submit authorization requests through the WebPortal or Clear Coverage online and in some cases receive auto approval for services using our rules based submission process. Our secure Provider Portal is also available through OneHealthPort (OHP) single sign on at www.onehealthport.com/.

Member and Provider Contact Center

The Contact Center handles all telephone and written inquiries regarding claims, benefits, eligibility/identification, selecting or changing Primary Care Providers (PCPs), and Member complaints. Contact Center Representatives are available to assist Members and Providers 7:30am to 6:30pm Monday through Friday, excluding State holidays.

Contact Center
Address: Molina Healthcare of Washington, Inc. PO Box 4004 Bothell, WA 98041-4004
Member Phone: (800) 869-7165 Provider Phone: (855) 322-4082
TTY: 711

CLAIMS

Molina requires Providers to submit Claims electronically through a clearinghouse or Molina's secure Provider Portal. Claims submitted electronically must use EDI payer ID number – 38336. To verify the status of your claim, please use the Provider Portal or call our Provider Contact Center Representatives at the numbers listed below. Contact Center Representatives are available 7:30am to 6:30pm Monday through Friday, excluding State holidays.

Claims
EDI Payer ID: 38336
Phone: (855) 322-4082
Fax: (800) 816-3778

CLAIMS RECOVERY DEPARTMENT

The Claims Recovery Department manages recovery for overpayment and incorrect payment of claims.

Claims Recovery Disputes and Refunds	
Refunds	
Address: Molina Healthcare of Washington, Inc. PO Box 30717 Los Angeles, CA 90030-0717	
Disputes	
Address: Molina Healthcare of Washington, Inc. PO Box 2470 Spokane, WA 99210-2470	
Phone:	(866) 642-8999
Fax:	(888) 396-1520

CONTRACTING DEPARTMENT

The Contracting department should be contacted if you are interested in contracting with Molina Healthcare or checking on the status of your contract. Contracting is available 8:00am to 5:00pm Monday through Friday, excluding State holidays.

Contracting Department	
Address: Molina Healthcare of Washington, Inc. PO Box 4004 Bothell, WA 98041-4004	
Phone:	(855) 322-4082 ex.142630
Fax:	(877) 814-0542
e-mail: MHWProviderContracting@MolinaHealthCare. Com	

CREDENTIALING DEPARTMENT

The Credentialing Department verifies all information on the Washington Practitioner Application prior to contracting and re-verifies this information every three years. The information is then presented to the Professional Review Committee to evaluate a Provider's qualifications to participate in the Molina Healthcare network. The Credentialing Department also performs office and medical record reviews.

Credentialing	
Address:	Molina Healthcare of Washington, Inc. PO Box 2470 Spokane, WA 99210-2470
Phone:	(888) 562-5442
Fax:	(800) 457-5213

24-HOUR NURSE ADVICE LINE

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

HEALTHLINE (24-Hour Nurse Advice Line)	
Phone:	(888) 275-8750 (English) (866) 648-3537 (Spanish) TTY (866) 735-2929 (English) (866) 833-4703 (Spanish)

HEALTHCARE SERVICES (AUTHORIZATIONS) DEPARTMENT

The Healthcare Services (formerly UM) Department conducts concurrent review on inpatient cases and processes prior Authorization requests. The Healthcare Services Department also performs Case Management for members who will benefit from Case Management services.

Healthcare Services Authorizations Apple Health	
Address:	Molina Healthcare of Washington, Inc. PO Box 4004 Bothell, WA 98041-4004
Phone:	(855) 322-4082
Medical/Behavioral Services Fax:	(800) 767-7188
Inpatient Census Fax:	(800) 413-3806
NICU Fax:	(877) 731-7220
Transplant Fax:	(877) 813-1206
Advanced Imaging Fax:	(877) 731-7218

EXCEPTION: *If the Member's PCP belongs to a delegated medical group/Independent Practice Association (IPA), listed in Section 14, the Provider should contact that medical group/IPA for Authorization guidance.*

HEALTH EDUCATION & HEALTH MANAGEMENT DEPARTMENT

The Health Education and Health Management Department provides education and health information to Molina Healthcare Members and facilitates Provider access to the program and services.

Health Education & Health Management	
Address:	Molina Healthcare of Washington, Inc. PO Box 2470 Spokane, WA 99210-2470
Phone:	(800) 423-9899, Ext. 141453
Fax:	(800) 461-3234

PHARMACY DEPARTMENT

Molina Healthcare’s drug formulary requires prior Authorization for certain medications. The Pharmacy Department can answer questions regarding the formulary and/or drug prior Authorization requests. The Molina Healthcare formulary is available at www.MolinaHealthcare.com.

Pharmacy Authorizations	
Phone:	(855) 322-4082
Fax:	(800) 869-7791

CAREMARK SPECIALTY PHARMACEUTICALS

When a Molina Healthcare Member needs an injectable medication, the prescription can be submitted to Molina Healthcare by fax. For a current listing of available injectable medications, please check the web address below or use the link at www.MolinaHealthcare.com.

Caremark	
Fax:	(800) 869-7791
Online:	https://www.caremark.com

PROVIDER RESOLUTION DEPARTMENT

The Provider Resolution Department handles telephone and written inquiries from Providers regarding address and Tax-ID changes, Provider appeals and disputes and training. Provider Resolution Representatives are available to assist you Monday through Friday 8:00am to 5:00pm, excluding State holidays.

Provider Services	
Address:	Molina Healthcare of Washington, Inc. PO Box 4004 Bothell, WA 98041-4004
Phone:	(855) 322-4082
Fax:	(877) 814-0342
e-mail:	MHWProviderServicesInternalRep@Molinahealthcare.com

March Vision

Molina Healthcare is contracted with March Vision to provide routine vision services for our Members. Members who are eligible may directly access a March Vision network Provider.

March Vision	
Phone:	(888) 493-4070

***EXCEPTION:** If the Member's PCP belongs to a delegated medical group/IPA, listed in Section 14, the Provider should contact that medical group/IPA for Authorization guidance.*