

# MHIL Provider Memo

Molina Healthcare of Illinois, Inc. | February 24, 2025

## Communication Roadmap: Disputes/Appeals, Recoveries, Medical Records

Molina Healthcare of Illinois (Molina) is reminding providers about the correct submission methods and addresses for various types of interactions with Molina.

**Important:** The preferred method for most tasks is the [Availity Essentials Provider Portal](#), which is faster, easier, and HIPAA-compliant. For claims, the next best avenue is a clearinghouse. Molina's payer ID is **20934**. The next best avenue is fax. The method of last resort is mail/paper.

Medicaid	
<b>Disputes/Appeals</b> Molina Healthcare of Illinois Medicaid does not accept claims appeals/disputes via mail (i.e., paper). The preferred submission method is the Availity Essentials provider portal. <b>Availity</b> <a href="#">provider.molinahealthcare.com</a> <b>Fax</b> (855) 502-4962  Must include a completed Claims Dispute Request form.	<b>Overpayment/Recovery Appeals</b> Molina Healthcare of Illinois, Inc. Claims Recovery Department PO Box 2470 Spokane, WA 99210-2470  <b>Availity</b> <a href="#">provider.molinahealthcare.com</a> <b>Phone</b> (866) 642-8999 <b>Fax</b> (855) 260-8740  Must include a completed Claims Dispute Request form.
<b>Overpayment Refund Checks Lockbox</b> Molina Healthcare of Illinois, Inc. PO Box 631264 Cincinnati, OH 45263-1264  <b>Phone</b> (866) 642-8999 <b>Fax</b> (855) 260-8740  Mail overpayment checks to this address.	<b>Medical Record Submissions</b> Molina Healthcare of Illinois, Inc. Attention: Provider Disputes PO Box 182273 Chattanooga, TN 37422  <b>Availity</b> <a href="#">provider.molinahealthcare.com</a> <b>Fax</b> (855) 502-4962  Must include a completed Claims Dispute Request form <b>and</b> the password to the CD or the CD will be returned.  Medical records requests from Optum, Cotiviti, or any party other than Molina Healthcare should be sent to the address provided by the vendor.

## MMP/Dual Options & Medicare (MAPD)

### Disputes/Appeals

Molina Healthcare of Illinois, Inc.  
Attention: Provider Disputes/Appeals  
PO Box 22816  
Long Beach, CA 90801-9977

**Availity** [provider.molinahealthcare.com](http://provider.molinahealthcare.com)

**Fax** (562) 499-0610

Must include a completed Claim Dispute & Appeal form.

### Overpayment/Recovery Appeals

Molina Healthcare of Illinois, Inc.  
Claims Recovery Department  
PO Box 2470  
Spokane, WA 99210-2470

**Availity** [provider.molinahealthcare.com](http://provider.molinahealthcare.com)

**Phone** (866) 642-8999

**Fax** (888) 396-1163

Must include a completed Claim Dispute & Appeal form.

### Overpayment Refund Checks Lockbox

Molina Healthcare of Illinois, Inc.  
PO Box 631264  
Cincinnati, OH 45263-1264

**Phone** (866) 642-8999

**Fax** (888) 396-1163

Mail overpayment checks to this address.

### Medical Record Submissions

Molina Healthcare of Illinois, Inc.  
Attention: Provider Disputes/Appeals  
PO Box 22816  
Long Beach, CA 90801-9977

**Availity** [provider.molinahealthcare.com](http://provider.molinahealthcare.com)

**Fax** (562) 499-0610

Must include a completed Claim Dispute & Appeal form **and** the password to the CD or the CD will be returned.

Medical records requests from Optum, Cotiviti, or any party other than Molina Healthcare should be sent to the address provided by the vendor.

## Marketplace (Exchange)

### Disputes/Appeals

Molina Healthcare of Illinois, Inc.  
Marketplace does not accept claims appeals/disputes via mail (i.e., paper). The preferred submission method is the Availity Essentials provider portal.

**Availity** [provider.molinahealthcare.com](https://provider.molinahealthcare.com)

**Fax** (855) 502-4962

Must include a completed Claims Dispute Request form.

### Overpayment/Recovery Appeals

Molina Healthcare of Illinois, Inc.  
Claims Recovery Department  
PO Box 2470  
Spokane, WA 99210-2470

**Availity** [provider.molinahealthcare.com](https://provider.molinahealthcare.com)

**Phone** (866) 642-8999

**Fax** (855) 260-8740

Must include a completed Claims Dispute Request form.

### Overpayment Refund Checks Lockbox

Molina Healthcare of Illinois, Inc.  
PO Box 631264  
Cincinnati, OH 45263-1264

**Phone** (866) 642-8999

**Fax** (888) 396-1163

Mail overpayment checks to this address.

### Medical Record Submissions

Molina Healthcare of Illinois, Inc.  
Attention: Provider Appeals & Grievances  
PO Box 182273  
Chattanooga, TN 37422

**Availity** [provider.molinahealthcare.com](https://provider.molinahealthcare.com)

**Fax** (855) 502-4962

Must include a completed Claims Dispute Request form **and** the password to the CD or the CD will be returned.

Medical records requests from Optum, Cotiviti, or any party other than Molina Healthcare should be sent to the address provided by the vendor.

## Questions?

We're here to help! Contact your dedicated provider relations manager or email the Provider Relations team at [MHILProviderNetworkManagement@MolinaHealthcare.com](mailto:MHILProviderNetworkManagement@MolinaHealthcare.com). To help identify your dedicated provider relations manager, visit [Molina's Service Area page](#).

## Provider portal alert

[Availity Essentials](#) is the exclusive provider portal for Molina Healthcare. Log in today to ensure that you and your staff have access to streamlined claims management, authorizations, eligibility/benefit verification, and more.

## Get critical updates

Receive news and updates about Molina services, plan requirements, and more delivered straight to your inbox! [Click here](#) to receive information curated exclusively for Molina's Illinois providers.