

MHIL Provider Memo

Molina Healthcare of Illinois, Inc. | April 9, 2026

How To Read a Molina Explanation of Payment (EOP)

Molina Healthcare of Illinois (Molina) utilizes a standardized template for EOPs. The following outlines a typical EOP and details the information and values that comprise the document. Every Molina claim payment that is issued generates an EOP document.

| Field Name | Definition |
|--------------------|--|
| <Provider Name> | Your payee name on record with the IRS, validated by ECHO Health. |
| <Address> | Your pay-to street address on record with Molina Healthcare. |
| <City, State, ZIP> | Your city, state, and ZIP of pay-to address on record with Molina Healthcare. |
| <IRS Name> | Your payee name on record with the IRS, validated by ECHO Health. If this validation fails, a notification will be displayed here to direct you to ECHO's IRS validation team for remediation. |
| <TIN> | Your Tax ID. |
| <Draft #> | The payment number generated by ECHO Health. |
| <Draft Date> | The date of payment for the ECHO Health draft. This will typically one business day after the Molina check date. |

| Patient Name: Subscriber Name: Carrier Name: Rendering Provider: | | | | Member ID: Patient Control #: NPI #: | | | | Payer Claim Ctrl #: Payer Check Number: Policy Number: Program: | | | | | | | |
|---|--------------|-----------|-------|--|----------------|--------------------|------------|--|--------------------|---------|------------------|---------|-------------|-------------------|--------|
| Claim Line | Service From | Proc/Rev | Units | Billed Amount | Allowed Amount | Disallow Amount | COB Amount | Other Adjustments | Patient Obligation | | Net Plan Payable | FFS CAP | Line Status | Adjustment Reason | Remark |
| | | | | | | | | | Co-Ins | Co-Pay | | | | | |
| | Service Thru | Modifiers | | | | Gross Plan Payable | Refund | FFS Withhold | Deductible | Non-Cov | | | | | |
| Claim Total: | | | | | | | | | | | | | | | |

| Field Name | Definition |
|--------------------|--|
| Patient Name | The individual who received service. |
| Subscriber Name | The individual with a Molina policy. |
| Carrier Name | This will list the member's additional carrier (if applicable). |
| Rendering Provider | The rendering physician on this claim. |
| Member ID | The patient's Molina member ID number. |
| Patient Control # | The patient control number for this claim. |
| NPI # | The pay-to provider's NPI |
| Payer Claim Ctrl # | The Molina claim number. |
| Payer Check Number | The Molina payment number. If there is no payment, this will be populated with the Check History ID, starting with CHKHST. |
| Policy Number | If the member has another carrier, the secondary carrier policy number is listed here. |
| Program | The Molina program name. |
| Claim Line | The Molina claim ID number. |
| Service From | The starting date of service on the claim. |
| Service Thru | The ending date of service on the claim. |
| Proc-Rev | The procedure/service code on the claim. |
| Modifiers | Any claim code modifiers will be listed here. |
| Units | The number of billed units on the claim. |
| Billed Amount | The amount billed on the claim. |
| Allowed Amount | Contractual payment amount on the claim line. |
| Disallow Amount | Amount ineligible for payment on each claim line. |
| Gross Plan Payable | Contractual payment amount on the claim line. |
| COB Amount | If the member has a coordination of benefit with another carrier, any COB amount paid by another carrier will report here. |

| Field Name | Definition |
|-------------------|---|
| Refund | If any refund has been received by Molina from either a third-party liability (TPL) or your office, it is recorded here. |
| Other Adjustments | Interest or other miscellaneous adjustments to a claim. |
| FFS Withhold | Additional adjustment to a claim that will correspond to a CARC/RARC on the claim. Typically, this is used to display the Medicare Sequestration. |
| Co-Ins | Member's coinsurance, if any, on the claim. |
| Co-Pay | Member's copay, if any, on the claim. |
| Deductible | Member's deductible, if any, on the claim. |
| Non-Cov | Member's responsibility not from coinsurance, copay, or deductible. |
| Net Plan Payable | Total claim amount after interest and refunds have been applied. |
| FFS CAP | Indicates if claim line is fee-for-service or capitated. |
| Line Status | Indicates if Molina paid or denied each claim line. |
| Adjustment Reason | The Claim Adjustment Reason Code for the claim line. |
| Remark | The Remittance Advice Remark Code for the claim line. |

Items labeled adjustments were added by our payment system to balance the transaction. They reflect no adjustment to actual payment.

| Payment Adjustments (Refund & Recovery) | | | | | |
|---|--------------|--------------------|-------------------------|------------------------------|-------------------|
| Advance Create Date | Reference ID | Adjustment Type | Original Advance Amount | Advance Remaining Balance | Adjustment Amount |
| 03/13/2023 | | Forwarding Balance | \$4.22 | \$0.00 | -\$4.22 |
| | | | | Total Net Adjustments | -\$4.22 |

This Explanation of Payment (EOP) reflects an advance applied. Please refer to the EOPs referenced in the Reference ID above for the specific claim details that create this advance.

Future payments will be deducted until the net result of this advance is \$0.00.

| Field Name | Definition |
|---------------------|--|
| Advance Create Date | This is the date in Molina's system that the forwarding balance was created. |
| Reference ID | This will contain the Check History ID (CHKHST) that is assigned to every payment or non-payment Molina generates. |

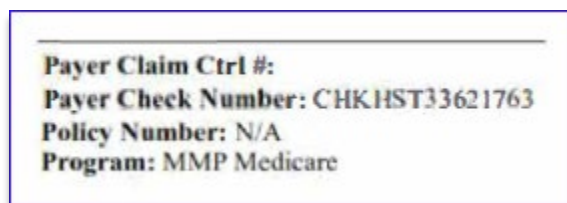
| Field Name | Definition |
|---------------------------|--|
| Adjustment Type | This will indicate the type of adjustment being reported: Forwarding Balance indicates a previous balance owed to Molina is being applied for recoupment. Overpayment Recovery indicates the total of all reversal claims on the payment that are related to refund postings. Provider Return/Refund Credit indicates the total of all refunds applied on the payment. |
| Original Advance Amount | This is the full amount of the recoupment and does not reflect any amounts recouped as of the current payment. |
| Advance Remaining Balance | This reflects the remaining balance on the recoupment, including any amounts recouped on the current payment. |
| Adjustment Amount | This reflects the amount of the recoupment applied to the current payment. |

Understanding Molina advances: Creation

Advance type: FFS

On each check run, Molina pulls all available claims ready to be processed and finalizes them by provider and program. If the net total of all claims during this process is a positive, a Molina payment number is assigned and payments are issued via check, virtual card, or EFT.

When the net total of all claims is a negative, a forwarding balance (or advance) is created. When this occurs, the following information is reported on the Explanation of Payment:



1. The Molina Payer Check Number will be populated with a number starting with CHKHST. This is called the Checkhistory ID.
2. The Payment Adjustments section of the EOP will reflect the total of the advance/forwarding balance created and reference the Checkhistory ID.
3. The Total Amount Paid will reflect the net total of all claims on the EOP. If you have a Tax ID with multiple NPIs consolidated, this amount may reflect positive dollars.
4. The Total Payment will reflect the combined payment minus the forwarding balance created.

On your 835, this will be reflected as a negative on CS adjustment. Example: *CS:CHKHST1234567*-348530.07.

Items labeled adjustments were added by our payment system to balance the transaction. They reflect no adjustment to actual payment.

| Payment Adjustments (Refund & Recovery) | | | | | |
|---|----------------|--------------------|-------------------------|------------------------------|-------------------|
| Advance Create Date | Reference ID | Adjustment Type | Original Advance Amount | Advance Remaining Balance | Adjustment Amount |
| | CHKHST33621763 | Forwarding Balance | \$0.00 | \$0.00 | \$215.88 |
| | | | | Total Net Adjustments | \$215.88 |

| Statement Summary | | | | | | |
|-------------------|-----------------|------------|-------------------|--------------|--------------------|------------------|
| Billed Amount | Disallow Amount | COB Annual | Other Adjustments | FFS Withhold | Patient Obligation | Net Plan Payable |
| -\$7,124.25 | -\$6,908.37 | \$0.00 | -\$215.88 | \$0.00 | \$0.00 | -\$215.88 |

Document Total

Total Amount Paid: -\$215.88

Payment Adjustment: \$215.88

Total Payment: \$0.00

Advance type: capitation

In the event an Advance/Forwarding Balance is created as a result of a negative capitation balance, the capitation summary report will report a negative amount.

The Molina Payment Number will not display a Checkhistory ID.

| Capitation Summary for: 3/1/2023 | |
|----------------------------------|------------------|
| Total Amount: | (\$36.00) |
| Less Advances: | \$0.00 |
| Total Paid: | (\$36.00) |

Advance type: manual

In the event an Advance/Forwarding Balance is created as a result of a manual creation by Molina—such as recoupments of a cash advance, levy, or other cause—please contact your Molina provider relations manager with the Checkhistory ID reported on the Forwarding Balance section for support.

Understanding Molina advances: Recoupment

When a provider has an outstanding advance balance owed to Molina, it will be applied to each claims payment made until the balance reaches zero. In instances when multiple advances are applied, each advance will be listed separately.

On the Explanation of Payment, when an outstanding balance is applied, the following information is provided:

1. **Advance Create Date:** The date on the advance that was created in Molina's systems. The original EOP with claim information will be dated around this time.
2. **Reference ID:** The Checkhistory ID, which is listed on the original EOP if the advance was created from a claims payment run.
3. **Adjustment Type:** When an advance is applied, this will be reflected as a forwarding balance.
4. **Original Advance Amount:** The total amount of the advance that was created.
5. **Advance Remaining Balance:** The amount remaining on the advance after being recouped from the current payment.
6. **Adjustment Amount:** The amount of the advance being recouped from the current payment.

On the 835, this transaction will be listed in the PLB segment as a Forwarding Balance referencing the CHKHST number. Example: FB:CHKHST1234567*315214.91.

Items labeled adjustments were added to our payment system to balance the transaction. They reflect no adjustment to actual payment.

| Payment Adjustments (Refund & Recovery) | | | | | |
|---|----------------|--------------------|-------------------------|------------------------------|-------------------|
| Advance Create Date | Reference ID | Adjustment Type | Original Advance Amount | Advance Remaining Balance | Adjustment Amount |
| 03/08/2023 | CHKHST33621763 | Forwarding Balance | \$215.88 | \$0.00 | -\$215.88 |
| | | | | Total Net Adjustments | -\$215.88 |

| Statement Summary | | | | | | |
|-------------------|-----------------|------------|-------------------|--------------|--------------------|------------------|
| Billed Amount | Disallow Amount | COB Annual | Other Adjustments | FFS Withhold | Patient Obligation | Net Plan Payable |
| \$19,659.00 | \$19,345.40 | \$0.00 | \$215.88 | \$0.00 | \$0.00 | \$313.60 |

Document Total

Total Amount Paid: \$313.60

Payment Adjustment: -\$215.88

Total Payment: \$97.72

Molina advances are recouped as part of a bulk total, decreasing the total payment owed to a provider until the balance is fulfilled. Recoupment dollars are not applied to specific claims. When Molina pays a claim, but no check/EFT is issued due to an outstanding balance owed to Molina, the provider should consider the claim as paid, as previous claim(s) were overpaid.

Accessing advance explanation of payments

Copies of original Explanation of Payments can be accessed through the ECHO Health website Providerpayments.com or through the Availity Essentials provider portal.

Copies of the original EOP that created recoupments, as well as each payment the recoupment applied to, can be located by doing the following:

1. Log in to Providerpayments.com or your profile in Availity.
2. Enter the Checkhistory ID into the search field "Claim."
3. You will receive results, which will include the original EOP that created the recoupment, and each payment that advance was applied to.
4. Click on "EPP" to download the EOP. Click on "835" to download the 835 for that payment date.

Certain caveats apply. Due to Molina's migration to ECHO in 2022, EOP documents dated prior to the migration will only be searchable on Availity.

If the advance created was from capitation or manually by Molina, searching in this manner will only list the payments that the advance was applied to. Please contact your dedicated provider relations manager for additional support.

ECHO Providerpayments.com search



Molina 835

Every Molina payment is eligible to have an 835 generated for electronic remitting. Molina's 835s are generated by ECHO Health Inc. and conform to industry standards. Listed below are some Molina-specific 835 logic.

Refund postings (as of 02/15/2023)

Refund postings for all claims on the current payment are reported on the 835 on the PLB03-2 PLB segment as a lump sum in two parts.

The reversal claim information will be logged as type 72:

PLB*<Provider NPI>*YYYYDDMM*72:<Checkhistory ID>*<Amount>

The refund amount information will be logged as type WO:

PLB*<Provider NPI>*YYYYDDMM*WO:<Checkhistory ID>*<Amount>

Advance applied/forwarding balance recoupment

Forwarding balances (also called advance applied) are reflected on the 835 in the PLB03-01 segment with the Checkhistory ID of the payment that created the forwarding balance.

Questions?

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

Digital-only PA

[Availity Essentials](#) is the exclusive provider portal for Molina Healthcare—and the **only** way to submit authorization requests, with the exception of Pharmacy requests and delegated UM vendors. Clinical supporting documents **must** accompany **all** authorization requests. Log in today to access claims management, eligibility/benefit verification, Digital Correspondence Hub, 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.