

Provider Quick Reference Guide

(effective 11/1/21)

Provider Services P: 877-872-4716 F: 844-879	ovider Services P: 877-872-4716 F: 844-879-4509		
Provider Claims, Training, and Provider Complaints	MHNYProviderServices@MolinaHealthcare.com		
Demographic changes, Rosters and Credentialing	MHNYNetworkOperations@molinahealthcare.com		
Provider Contracting	MHNYProviderContracting@molinahealthcare.com		

Member Services | 1776 Eastchester Road | Bronx, NY 10461 | P: 800-223-7242 | F: 844-879-4509

Member Claims, Benefits, Eligibility/Identification, Pharmacy Inquiries, PCP changes, Member Complaints

Utilization Management | 1776 Eastchester Road | Bronx, NY 10461 | P: 877-872-4716 | F: 866-879-4742

Prior Authorizations, Service Requests, Care Management. Molina highly encourages the use the Availity Provider Portal Provider Portal. Providers can register at Availity.com/MolinaHealthcare.

Fraud Waste Abuse

If you suspect cases of fraud, waste, or abuse, you must report it to Molina:

Online: www.molinahealthcare.alertline.com

Mail: ATTN: Compliance Officer | 5232 Witz Drive | North Syracuse, NY | 13212

P: 866-606-3889 | **F:** 855-366-5462

Nurse Advice Line | P: (844) 819-5977

Members may call and connect to a Registered Nurse 24/7, 365 days per year.

Pharmacy | CVS/Caremark ® | P: 877-872-4716 | F: 844-823-5479

Prior Authorization Assistance, Inquiries (J Codes and Home Infusion): P: 877-872-4716 | F: 844-823-5479 **Retail Drugs Only: P:** 800-364-6331 | **F:** 844-823-5479

Dental (DentaQuest ®) P: 888-308-2508

Claims/payment issues: F: 262-241-7379 Claims to be processed: F: 262-834-3589 | All Other: F: 262-834-3450

Claims Questions: denclaims@dentaquest.com | Eligibility/Benefit Questions: denelig.benefits@dentaquest.com

Electronic claims direct entry <u>www.dentaquest.com</u> Mailing Address: DentaQuest IPA of New York LLC - Claims PO Box 2906 Milwaukee WI 53201-2906 Same Name and address except Att: Utilization Management/Appeals for appeals

Vision (Superior Vision ®) | P: 866-819-4298 | Superior vision.com

Superior Vision manages vision benefits for Molina Healthcare members: Payer ID 41352

Versant Health Complaints & Appeals Department | PO Box 791 Latham NY 12110

Paper Claims Att: Claims Dept | PO Box 967 Rancho Cordova CA 95670

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1776 Eastchester Road Bronx, NY 10461

P: 877-872-4716 | F: 315-234-9812

(effective 11/1/21)

Medical Claim Guidelines

Paper Submissions | Molina Healthcare | P.O Box 22615 | Long Beach, CA 90801 | P: 877-872-4716

EDI/ERA/EFT

Clearinghouse: SSI/Claimsnet

P: 800-356-0092 Payer ID 16146

To register for EFT/ERA's

Appeals / Adjustments

providernet.adminisource.com/Start.aspx

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	Provider Portal:	Provider Portal:
	Molina strongly encourages the use of the provider portal for clean claims, corrected claims,	Availity.com/MolinaHealthcare
	and to appeal claims.	
	Appeals	Molina NY Healthcare
		Attention: Appeals Department

Transportation

Emergency Transportation:

When a member's condition is life-threatening and requires use of special equipment, life support systems, and close monitoring, emergency transportation is required.

Non-Emergency Transportation:

Covered through the State on a fee for service basis for Medicaid Managed Care and Molina Healthcare PLUS members Excluded: Child Health Plus Members (CHP).

Medical Answering Services (MAS) is the contracted Transportation Manager for all of New York State with the exception of Nassau and Suffolk counties.

ModivCare (formerly LogistiCare) is the contracted Transportation Manager for the Long Island Region (Nassau and Suffolk counties).