

## IMPORTANT INFORMATION FOR MOLINA MEDICAID PROVIDERS

**Information generally required to support authorization decision making includes:**

- Current (up to 6 months), adequate patient history related to the requested services.
- Relevant physical examination that addresses the problem.
- Relevant lab or radiology results to support the request (including previous MRI, CT, Lab, or X-ray report/results).
- Relevant specialty consultation notes.
- Any other information or data specific to the request.

**The Urgent / Expedited service request designation should only be used if the treatment is required to prevent serious deterioration in the member’s health or could jeopardize their ability to regain maximum function. Requests outside of this definition will be handled as routine / non-urgent.**

- If a request for services is denied, the requesting provider and the member will receive a letter explaining the reason for the denial and additional information regarding the grievance and appeals process. Denials also are communicated to the provider by fax or electronic notification. Verbal, fax, or electronic denials are given within one business day of making the denial decision or sooner if required by the member’s condition.
- Providers and members can request a copy of the criteria used to review requests for medical services.  
Molina Healthcare has a full-time Medical Director available to discuss medical necessity decisions with the requesting physician at 800-424-0061

## IMPORTANT MOLINA HEALTHCARE MEDICAID CONTACT INFORMATION

Service hours are 8 a.m. to 6 p.m. Monday through Friday, unless otherwise specified

<b>Service authorization requests</b>	Phone: (800) 424-4461 Inpatient physical health fax: (866) 210-1523 Outpatient physical health fax: (855) 769-2116 LTSS fax: (800) 614-8207 Behavioral health fax: (855) 339-8179 Care coordination fax: (800) 614-7934 Pharmacy fax: (844) 278-5731
<b>24-hour behavioral health crisis (7 days/week):</b>	Phone: (800) 424-4518
<b>Radiology authorizations</b>	Phone: (855) 714-2415 Fax: (877) 731-7218
<b>Vision: VSP:</b>	Phone: (800) 877-7195
<b>Provider Services</b>	Phone: (800) 424-4461
<b>Member Services (Benefits/eligibility)</b>	Phone: (800) 424-4518 TTY, 711
<b>Transportation: MTM (non-emergency)</b>	Phone: (877) 790-9472
<b>24-hour Nurse Advice Line (7 days/week)</b>	Phone: (888) 275-8750 TTY, 711 Members who speak Spanish can press 1 at the IVR prompt. The nurse will arrange for an interpreter, as needed, for non-English/Spanish speaking members. <i>No referral or prior authorization is needed.</i>
<b>Transplant authorizations</b>	Phone: (855) 714-2415 Fax: (877) 813-1206

**Providers may utilize Molina Healthcare’s Website at:** <https://provider.molinahealthcare.com/Provider/Login>

Available features include:

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| <ul style="list-style-type: none"> <li>• Authorization submission and status</li> <li>• Member Eligibility</li> <li>• Provider Directory</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Claims submission and status</li> <li><input type="checkbox"/> Download Frequently used forms</li> <li><input type="checkbox"/> Nurse Advice Line Report</li> </ul> |
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