May 25th, 2023

Provider Memorandum

Molina Clinical Services – Planned Inpatient Admission – Marketplace & Medicaid

All Planned Inpatient Procedures require prior authorization; however, Molina's Prior Authorization review and decision **does not** contain a determination for any inpatient level of care included on the request. Inpatient level of care will be determined upon notification of admit during IP UM (Concurrent Review). In order to determine medical necessity for inpatient stays, there must be sufficient documentation in the hospital's records to verify the inpatient services performed were "reasonable and necessary". After completing the approved procedure/surgery, if you believe an inpatient level of care is warranted, please follow the Molina Healthcare inpatient notification process and the stay will be reviewed for medical necessity and decided at that time.

Exception: Molina will continue to align with WI Forward Health Topic #15297, Medicaid Procedures Reimbursable Only as Inpatient Hospital Services. Timely notification of admission, per Molina inpatient notification process, is required.

Thank you for your understanding and continued partnership.

Questions?

We're here to help. For questions related to this update, please email the Utilization Management Department at WIUM@MolinaHealthcare.com (*formerly MHWICRPLOAs@MolinaHealthcare.com*).

Contact your Provider Network Manager or email the Provider Network Management team at MHWIProviderNetworkManagement@MolinaHealthCare.com or visit MolinaHealthcare.com.

Availity Essentials - Molina's Provider Portal

Ensure that you and your staff have access to streamlined claims management, authorizations, eligibility/benefit verification, and more at availity.com/molinahealthcare.