

Provider Bulletin

Molina Healthcare of California

Molinahealthcare.com/members/ca/en-us/health-care-professionals/home.aspx

March 29, 2024

- Imperial
- Riverside
- San Bernardino
- Los Angeles
- Orange
- Sacramento
- San Diego

Claims Rejections

This is an advisory notification to Molina Healthcare of California (MHC) network providers applicable to all lines of business.

What you need to know:

Dear Valued Provider, MHC is committed to ensuring the highest standards of service and care for our members and a seamless, efficient partnership with our providers. As part of our ongoing efforts to enhance operational efficiency and ensure timely reimbursement for services rendered, we wish to address a critical aspect of our collaboration: **the accuracy and completeness of claims submissions.**

In recent reviews, we have identified a trend of increasing claims submissions lacking essential details. Such omissions not only hinder the processing of claims but also pose a risk of claims rejection. This situation can adversely affect both our operational efficiency and your timely reimbursement.

To mitigate any potential issues, we advise double-checking the following:

1. **Patient Information:** Confirm that all patient details, including name, date of birth, and insurance information, are accurately recorded.
2. **Service Details:** Provide comprehensive information about the services rendered, including dates, codes, and descriptions.
3. **Provider Information:** Ensure that the rendering provider's details are correctly indicated on the claim form.
4. **Supporting Documentation:** Include any necessary documentation or notes that support the services billed.

We appreciate your attention to these important details and your ongoing partnership with Molina Healthcare of California.

Provider Action

Please verify the accuracy of the following details on your claim submission:

Rendering NPI Missing on claim

- Providers are required to submit claims with rendering NPI in 2310B/ box 24J.

Missing Supervising physician

- Midlevel providers are required to submit claims with a supervising physician in 2310D/box 17a.



What if you need assistance?

If you have any questions regarding the notification, please contact your Molina Provider Relations Representative below.

Service County Area	Provider Relations Representative	Contact Number	Email Address
California Hospital Systems (SNFs, LTSS, ICF/DD)	Teresa Suarez Laura Gonzalez	562-549-3782 562-549-4887	Teresa.Suarez2@molinahealthcare.com Laura.Gonzalez3@molinahealthcare.com
Los Angeles County	Clemente Arias Christian Diaz Daniel Amirian LaToya Watts Anita White	562-517-1014 562-549-3550 562-549-4809 562-549-4069 562-980-3947	Clemente.Arias@molinahealthcare.com Christian.Diaz@molinahealthcare.com Daniel.Amirian@molinahealthcare.com Latoya.Watts@molinahealthcare.com Princess.White@molinahealthcare.com
Los Angeles / Orange County	Maria Guimoye	562-549-4390	Maria.Guimoye@molinahealthcare.com
Sacramento County	Johonna Eshalomi Marina Higby	279-895-9354 916-561-8550	Johonna.Eshalomi@molinahealthcare.com Marina.Higby@molinahealthcare.com
San Bernardino County	Luana McIver	909-501-3314	Luana.Mciver@molinahealthcare.com
San Bernardino / Riverside County	Vanessa Lomeli	909-577-4355	Vanessa.Lomeli2@molinahealthcare.com
Riverside County	Mimi Howard	562-549-3532	Smimi.Howard@molinahealthcare.com
San Diego / Imperial County	Briana Givens Salvador Perez Dolores Ramos Lincoln Watkins	562-549-4403 562-549-3825 562-549-4900 858-300-7722	Briana.Givens@molinahealthcare.com Salvador.Perez@molinahealthcare.com Dolores.Ramos@molinahealthcare.com Lincoln.Watkins@molinahealthcare.com