

## 2026 Marketplace Provider Manual Update

The following table identifies the chapters, sections and subsections updated for the 2026 edition of the [Molina Marketplace Provider Manual](#). This summary does not include all the changes. Providers are encouraged to review and familiarize themselves with the entire document.

Chapter	Section	Subsection	Update	Page	Date
<b>2. Contact Information</b>	Claims	N/A	New Availability link	5	11/2025
<b>3. Provider responsibilities</b>	Provider data accuracy and validation	N/A	New language	10	11/2025
<b>3. Provider responsibilities</b>	Provider data accuracy and validation	Methods to update Provider information	New language	10	03/2026
<b>3. Provider responsibilities</b>	Electronic Claim submission requirement	N/A	Updated language	14	11/2025
<b>3. Provider responsibilities</b>	Availability Essentials portal	N/A	Updated language	15	11/2025
<b>3. Provider responsibilities</b>	Availability Essentials portal	Digital Correspondence Hub	New language	16	03/2026
<b>3. Provider responsibilities</b>	Provider network management portal: enrollment tool	N/A	New section	16	11/2025
<b>3. Provider responsibilities</b>	Participation in quality improvement (QI) programs	N/A	Updated language	19	11/2025
<b>3. Provider responsibilities</b>	Compliance	N/A	New language	20	03/2026
<b>4. Culturally and linguistically appropriate services</b>	Various	Various	Important updates made throughout chapter. Please review in full.	23-29	11/2025
<b>6. Eligibility and grace period</b>	Identification cards	Molina sample Member ID card	Updated card sample	31	11/2025
<b>6. Eligibility and grace period</b>	Grace period	Grace period timing	Updated language	32-33	03/2026
<b>6. Eligibility and grace period</b>	Grace period	Claims processing	Updated language	34	03/2026
<b>7. Benefits and covered services</b>	APL 25-011 HIV Pre-Exposure Prophylaxis (PrEP) Coverage	N/A	New section	36	11/2025
<b>8. Health Care Services (HCS)</b>	Utilization management (UM)	Peer-to-peer review	New contact information	46	03/2026
<b>8. Health Care Services (HCS)</b>	Utilization management (UM)	Requesting prior authorization	Updated language	46	11/2025 03/2026

<b>8. Health Care Services (HCS)</b>	Inpatient management	Continuity of care and transition of members	Updated language	54	11/2025
<b>8. Health Care Services (HCS)</b>	Inpatient management	Reporting of suspected abuse and/or neglect	New language	55	11/2025
<b>8. Health Care Services (HCS)</b>	Health management	Level 1 health management	Updated language	58	11/2025
<b>9. Behavioral health</b>	Utilization management and prior authorization	N/A	Updated language	63	11/2025
<b>9. Behavioral health</b>	Behavioral Health Care Management	Access to Records and Information to Support Member Care Coordination and Care Management Activities	New section	64	11/2025
<b>10. Quality</b>	Maintaining quality improvement processes and programs	N/A	Updated contact information	68	11/2025
<b>10. Quality</b>	Access to care	Entire section	Updated access to care standards	74-76	03/2026
<b>10. Quality</b>	Quality of provider office sites	Administration and confidentiality of facilities	Updated language	78	11/2025
<b>10. Quality</b>	Quality of provider office sites	Monitoring for compliance with standards	Updated language	80	11/2025
<b>10. Quality</b>	Health Management and Care Management	Clinical practice guidelines	Updated language	82	11/2025
<b>11. Risk adjustment accuracy and completeness</b>	Your role as a Provider	N/A	Updated language	89	11/2025
<b>12. Compliance</b>	HIPAA requirements and information	Artificial intelligence	New language	98	11/2025
<b>12. Compliance</b>	HIPAA requirements and information	Confidentiality of substance use disorder patient records	Updated language	100	11/2025
<b>12. Compliance</b>	Additional requirements for Delegated Providers and Atypical Providers	Entire section	New language	102-109	03/2026
<b>13. Claims and compensation</b>	Clean Claim Timely Filing table	N/A	New language	117	11/2025
<b>13. Claims and compensation</b>	N/A	N/A	New language	117	11/2025
<b>13. Claims and compensation</b>	Availity Essentials portal	N/A	New language	117-118	11/2025

<b>13. Claims and compensation</b>	Required elements	N/A	New language	119	11/2025
<b>13. Claims and compensation</b>	Coordination of benefits (COB) and third-party liability (TPL)	N/A	New vendor contact information	122	03/2026
<b>14. Complaints, grievance and appeals process</b>	Provider disputes	How to submit Provider disputes	Updated language	135	11/2025
<b>15. Credentialing and recredentialing</b>	Notification of discrepancies in credentialing information and Practitioner's right to correct erroneous information	N/A	New language	143	11/2025
<b>16. Delegation</b>	Delegation reporting requirements and audit submission requirements	N/A	Updated language	147	11/2025
<b>16. Delegation</b>	Delegation criteria	Claims	Updated language	151	11/2025
<b>17. Pharmacy</b>	Submitting a prior authorization request	Electronic prior authorization (ePA): SureScripts® and CoverMyMeds	New language	157	11/2025