

Provider Alert

Illinois Configuration Issue: CMS 1500 Claims

Molina Healthcare of Illinois (Molina) is working to reprocess approximately 75 CMS 1500 claims that were incorrectly processed as a facility benefit instead of a professional benefit. This has resulted in improper CMS 1500 claims denials for providers.

Affected Providers

This issues may affect allopathic and osteopathic physicians, podiatric medicine and surgery service providers, physician assistants and advanced practitioner nurses.

Impacted Lines of Business

The issue may affect Molina Medicaid providers who use HealthChoice Illinois and/or HealthChoice Illinois MLTSS lines of business.

Issue

Starting around March 1, 2019, approximately 75 CMS 1500 claims were incorrectly processed against a facility benefit rather than a professional benefit. These claims received an internal edit 214 in error (Bill Type does NOT match Benefit). Providers will see remark code MA30 (Missing/Incomplete/Invalid type of bill) on the Explanation of Payment (EOP).

Resolution

Molina has resolved the issue and will reprocess the claims. Providers will **NOT** be required to resubmit claims or submit disputes for claims that were affected by the issue.

Questions

Providers who have questions may contact their provider network managers or email the Provider Network Management department at MHIL_Provider_Information_Management@MolinaHealthCare.Com.

For help identifying your provider network manager, visit Molina's Service Area page at www.MolinaHealthcare.com.