

Provider Services

Demographic changes, Provider Claims, Contracting, Credentialing, Training and Provider complaints

H: 8:00 a.m. - 6:00 p.m.
 P: 877-872-4716
 F: 844-879-4509
 E: MHNYPProviderServices@MolinaHealthcare.com

Correspondence Address:
 5232 Witz Dr.,
 N. Syracuse, NY 13212-6501

Member Services

Member Claims, Benefits, Eligibility/Identification, Pharmacy inquiries, PCP changes, Member complaints

H: 8:00 a.m. - 6:00 p.m.
 P: 800-223-7242
 Correspondence Address:
 5232 Witz Dr.,
 N. Syracuse, NY 13212-6501

Utilization Management

Prior Authorizations, Service Requests, Care Management.

Molina highly encourages to use the Provider Portal for PA requests. Forms/PA Guidelines can be found at www.MolinaHealthcare.com.

Provider Portal: <https://provider.molinahealthcare.com>
 P: 877-872-4716
 F: 866-879-4742
 Correspondence Address:
 5232 Witz Dr.,
 N. Syracuse, NY 13212-6501

Compliance and Fraud Alertline

If you suspect cases of fraud, waste, or abuse, you must report it to Molina.

P: 866-606-3889
 Website: www.molinahealthcare.alertline.com
 Correspondence Address:
 ATTN: Fraud, Waste and Abuse Dept.
 5232 Witz Dr.,
 N. Syracuse, NY 13212-6501

Credentialing

Forms can be found on www.MolinaHealthcare.com.

P: 877-872-4716
 F: 844-879-4509

Nurse Advice Line

Members may call our Registered Nurses who are available (24) hours a day, seven (7) days a week, (365) days per year.

P: 800-223-7242
 TTY/TDD: 711

Pharmacy

Prior Authorization Assistance, Inquiries (eg. J Codes). Forms can be found at www.MolinaHealthcare.com.

P: 877-872 -4716
 F: 844-823-5479

Pharmacy Benefit Manager

CVS Caremark

Help Desk: 800-364-6331
 F: 844-823-5479

Dental

HealthPlex is the vendor that administers dental benefits to Molina members.

P: 888-468-2183
F: 516-228-5025

Correspondence Address:
P.O. Box 9255
Uniondale, NY 11553-9255

Vision

Molina Healthcare of New York, Inc. manages vision benefits for Molina members.

P: 800-223-7242
F: 315-234-9812

Claim Guidelines

Paper Submissions

Molina Healthcare of New York, Inc.
PO Box 22615
Long Beach, CA 90801
F: 877-872-4716

Claims Recovery

Molina Healthcare of New York, Inc. Attn: Claims Recovery
200 Oceangate Suite 100
Long Beach, CA 90802
P: 866-642-8999

Appeals/Adjustments

Molina highly encourages the use of the following for clean claims, corrected claims, to appeal claims, and for adjustment requests.

Provider Portal: <https://provider.molinahealthcare.com>
EDI: Payer ID 16146

Molina Healthcare of New York, Inc.
Attention: Appeals and Grievances Department
5232 Witz Dr.,
N. Syracuse, NY 13212-6501
F: 315-234-9812

Transportation

Emergency Transportation

When a Molina Member's condition is life-threatening and requires use of special equipment, life support systems, and close monitoring, emergency transportation is required.

Non-Emergency Transportation

Covered through the State on a fee for service basis for Medicaid Managed Care and Molina Healthcare PLUS Members. Excluded: Child Health Plus (CHP) Members.

ICD-10

Effective 10/01/2015. All claims submitted with DOS on or after 10/01/2015, must include ICD-10 codes. Claims submitted without the appropriate code version, will result in denials. More information can be found online at www.cms.gov/ICD10

For more information, please visit MolinaHealthcare.com.