



Just the Fax

A fax bulletin from Molina Healthcare of Utah and Idaho • April 20, 2018

MOLINA'S CORRECTED CLAIM POLICY UPDATE

Dear Provider:

The purpose of this communication is to notify providers of the upcoming change to utilize RARC N779 when a corrected claim is submitted on an original that is not in a PAID, DENIED or REVERSED status.

The purpose of this communication is to inform you of Molina's upcoming Corrected Claims policy change.

*Effective 06/05/2018 Molina will begin utilizing RARC N779 to deny incoming corrected claims professional claims submitted with a re-submission indicator of 7 (replace) or 8 (Void) is submitted in Box 22 (CLM05-3) when the original claim being corrected as identified in Box 22 (REF*F8) is not in a finalized PAID, DENIED or REVERSED status. This policy change aligns with Molina's RARC standardization initiative.*

Once in effect, the following message will be displayed on the Explanation of Payment/Remittance Advice when the above stated conditions are met:

N779 Replacement/Void claims cannot be submitted until the original claim has finalized. Please resubmit once payment or denial is received.
Start: 11/01/2016

Existing duplicate denials will continue to be applied to incoming duplicate claims when the historical claim is in a DENIED or PAID status

Warmest regards,

Network Management and Operations