

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
2. Contact Information	Claims	N/A	New Availability link	5
3. Provider responsibilities	Provider data accuracy and validation	N/A	New language	10
3. Provider responsibilities	Electronic Claim submission requirement	N/A	Updated language	14
3. Provider responsibilities	Availability Essentials portal	N/A	Updated language	15
3. Provider responsibilities	Provider network management portal: enrollment tool	N/A	New section	16
3. Provider responsibilities	Participation in quality improvement (QI) programs	N/A	Updated language	19
4. Culturally and linguistically appropriate services	Various	Various	Important updates made throughout chapter. Please review in full.	22-28
6. Eligibility and grace period	Identification cards	Molina sample Member ID card	Updated card sample	30
7. Benefits and covered services	APL 25-011 HIV Pre-Exposure Prophylaxis (PrEP) Coverage	N/A	New section	35
8. Health Care Services (HCS)	Utilization management (UM)	Requesting prior authorization	Updated language	46
8. Health Care Services (HCS)	Inpatient management	Continuity of care and transition of members	Updated language	53
8. Health Care Services (HCS)	Inpatient management	Reporting of suspected abuse and/or neglect	New language	54
8. Health Care Services (HCS)	Health management	Level 1 health management	Updated language	57
9. Behavioral health	Utilization management and prior authorization	N/A	Updated language	63
9. Behavioral health	Behavioral Health Care Management	Access to Records and Information to Support Member Care Coordination and Care Management Activities	New section	64
10. Quality	Maintaining quality improvement processes and programs	N/A	Updated contact information	68
10. Quality	Quality of provider office sites	Administration and confidentiality of facilities	Updated language	78
10. Quality	Quality of provider office sites	Monitoring for compliance with standards	Updated language	80

10. Quality	Health Management and Care Management	Clinical practice guidelines	Updated language	82
11. Risk adjustment accuracy and completeness	Your role as a Provider	N/A	Updated language	89
12. Compliance	HIPAA requirements and information	Artificial intelligence	New language	98
12. Compliance	HIPAA requirements and information	Confidentiality of substance use disorder patient records	Updated language	100
13. Claims and compensation	N/A	N/A	New language	111
13. Claims and compensation	Availity Essentials portal	N/A	New language	111
13. Claims and compensation	Required elements	N/A	New language	113
14. Complaints, grievance and appeals process	Provider disputes	How to submit Provider disputes	Updated language	129
15. Credentialing and recredentialing	Notification of discrepancies in credentialing information and Practitioner's right to correct erroneous information	N/A	New language	137
16. Delegation	Delegation reporting requirements and audit submission requirements	N/A	Updated language	141
16. Delegation	Delegation criteria	Claims	Updated language	142
17. Pharmacy	Submitting a prior authorization request	Electronic prior authorization (ePA): SureScripts® and CoverMyMeds	New language	151