

Claim Management for Missing or Incorrect Member Information Effective December 7, 2018

Molina Healthcare would like to notify our provider partners of a change to the management of claims submitted with missing or incorrect member information. This communication is to assist you with any questions you may have.

Effective December 7, 2018, Molina will return any claims with missing or incorrect member information. The letter below indicates how providers will be notified of claims returned for missing or incorrect member information. Any returned claims will need to be resubmitted with the correct member information. These should not be submitted as adjustments.

Newborn claims are not subject to this return policy. The process for newborn information has not changed. Please continue to follow claim submission guidelines for all newborns.

Sample Notice for Returned Claims



Editor EDI Claim Returns Denials

ABC Provider

ABC Provider
123 ABC Street
Any City, ST 98765

Provider								
Patient Acct #	123456789		Member ID #	Jane Doe				
Member	Jane Doe		Member DOB	10/15/1962				
Form Type	1500							
Claim ID	Claim Line	Date of Service	CPT/HCPC	Modifier	Units	Billed Amount	Status	
18341360073	1	11/13/2018	A0425	NH	13.00	\$195.00	Rejected	
18341360073	2	11/13/2018	A0429	NH	1.00	\$500.00	Rejected	
						\$695.00		
Summary of Acct #	123456789							
Message: Cannot find member in plan database								

Frequently Asked Questions:

- **What is this changing?**
Molina will begin automatically rejecting claims up front when the member information is missing or is incorrect.

- **Why is this changing?**
To support the need for accurate member records
- **When does this change take place?**
Effective December 7, 2018 with new claim receipts
- **Will claims be denied?**
Claims will be returned with a notice, not denied. The correct member information should be submitted to the member's plan as a new claim submission, not as an adjustment.
- **What type of notification will be received for claims returned for missing or incorrect member information?**
Please see the sample notice above.
- **Which Lines of Business (LOB) are impacted?**
This change is for all Lines of Business.
- **What are the newborn claim submission guidelines?**
Please refer to your billing guidelines. For additional information on claim submissions for newborns, please contact our Provider Services Call Center at (855) 322-4080.
- **Who do I contact with questions?**
Please contact our Provider Services Call Center at (855) 322-4080.