Important Alert
Change to Claim Management for Missing or Incorrect Member Information
Effective December 7, 2018
(Medicaid, Marketplace, Medicare)

Molina Healthcare would like to notify our provider partners of a change to the management of claims submitted with missing or incorrect member information.

Effective December 7, 2018, Molina will reject and return any claims with missing or incorrect member information. Rejected claims will need to be resubmitted with the correct member information.

Molina requires that the following member data elements match what is in our database:
- Member First Name
- Member Last Name
- Member Date of Birth
- Molina generated ID number or ProviderOne ID number

To validate member information and eligibility you can use the secure Molina Provider Web Portal at https://provider.molinahealthcare.com/Provider/Login. You can also access the Web Portal through OneHealthPort at https://www.onehealthport.com/.

Newborn claims are not subject to this change in process and you should continue to submit newborn claims as you currently do.

If you submit a claim with missing or incorrect member information as outlined above, the claim will be rejected and you will be mailed a letter notifying you that Molina cannot find the member in the plan database. The claim will need to be submitted as a new claim with the correct required data elements.

Molina is implementing this change to:
- Ensure HIPAA compliance
- Increase accuracy of data and efficient information delivery
- Reduce claim processing delays

If you have any questions or concerns, please call the Provider Services Contact Center at (800) 869-7165 Monday through Friday between 7:30 a.m. and 6:30 p.m.

Thank you for your continued service to Molina members.