

Molina Healthcare of Iowa

IHLA – Panel of Payers

October 23, 2025

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Welcome to Molina Healthcare of Iowa!



Jennifer Vermeer
Plan President, CEO

On behalf of all of us at Molina Healthcare of Iowa, we are pleased to welcome you to our provider network and our health plan. As some of you know, Molina Healthcare is a national, for-profit company that serves more than 5 million members across 20 states. While our scope is vast, we also have strong local roots in Iowa.

This presentation will give you a high-level explanation of who we are and how best we can partner with you to care for our members, our patients. We look forward to years of serving both you and your patients!



Timothy Gutshall, M.D.
Chief Medical Officer

Contracting & Credentialing



Coming January 1st – Medicare Advantage (DSNP)

Molina Healthcare of Iowa has announced an exciting expansion of its services. Beginning **January 1, 2026**, we will offer **Medicare Advantage Dual Special Needs Population (D-SNP)** products in 86 counties!

Key dates to remember:

- **Open enrollment:** The open enrollment period for this new Medicare Advantage D-SNP offering will commence in October 2025. During this period, eligible residents can sign up for the new plans and ensure they have coverage starting in 2026.
- **Provider training:** To ensure that health care providers are prepared for this transition, Molina Iowa will initiate training programs in the Fall of 2025. These sessions will equip providers with the necessary knowledge and tools to manage and support the new Medicare plans effectively.

Stay tuned for more updates and information as the launch date draws nearer and take advantage of the opportunities that this new Medicare Advantage D-SNP offering will bring.

Join Our Network

To join Molina Healthcare of Iowa's network, providers must be enrolled as an [Iowa Medicaid provider](#) and have an active Medicaid ID number.



Follow these steps to join our network:

Get Connected

Complete a [Contract Request Form](#) and submit to IAProviderContracts@MolinaHealthcare.com

Documentation

Complete a Provider Agreement, Provider Information Form, W-9, Practitioner Application, and/or Health Delivery Organization Credentialing Application

Credentialing

Work with our Credentialing Dept. and make sure that you complete and update the practitioner CAQH information

Contracted

Molina will countersign your Provider Agreement and provide you with a signed copy

Get Connected

Points of contact and the process for joining our network will differ depending on provider type.

Vision Providers

Please contact our vision vendor, March Vision, for participation at (844) 496-2724 or by visiting MarchVision.com.

Pharmacy Providers

Please contact our Pharmacy benefits manager, CVS Pharmacy, by visiting CVS website here: [Join CVS Caremark Network](#).

All Other Providers

Please complete a [Contract Request Form](#) found on our [website](#) and submit to IAProviderContracts@MolinaHealthcare.com.

Credentialing/Recredentialing Updates & Reminders

Migration to V12

- Integrated platform to increase accuracy and efficiency
- Automated interface to import data previously populated manually
- Uses Provider Trust for sanctions/exclusions checks and credentials

Recredentialing

- Beginning our first recredentialing cycle
- Required every 3 years
- Molina Credentialing will reach out approximately 6 months in advance

Provider Questions & Concerns

Contact a Molina team member

- Please email our Provider Contracting department directly, at IAProviderContracts@MolinaHealthcare.com
- You may also call Molina's Provider Contact Center at [\(844\) 236-1464](tel:8442361464)
- Additionally, the Provider Services team is also ready to assist with next steps at IAProviderRelations@MolinaHealthcare.com

Molina Iowa Website

- MolinaHealthcare.com/IA – our website includes our [provider manual](#), as well as educational resources around this process
- [Provider Network Forms](#) – this link directs you to the documents you may fill out and submit for a faster turn around time on credentialing
- [Join Our Network](#) – this link thoroughly walks you through all contracting and credentialing steps in this presentation

Claims Update



Electronic Payment Requirement

- Participating providers are encouraged to enroll in Electronic Funds Transfer (EFT) and Electronic Remittance Advice (ERA). Providers enrolled in EFT payments will automatically receive ERAs as well.
- EFT/ERA services give providers the ability to reduce paperwork, utilize searchable ERAs, and receive payment and ERA access faster than the paper check and remittance advice (RA) processes.



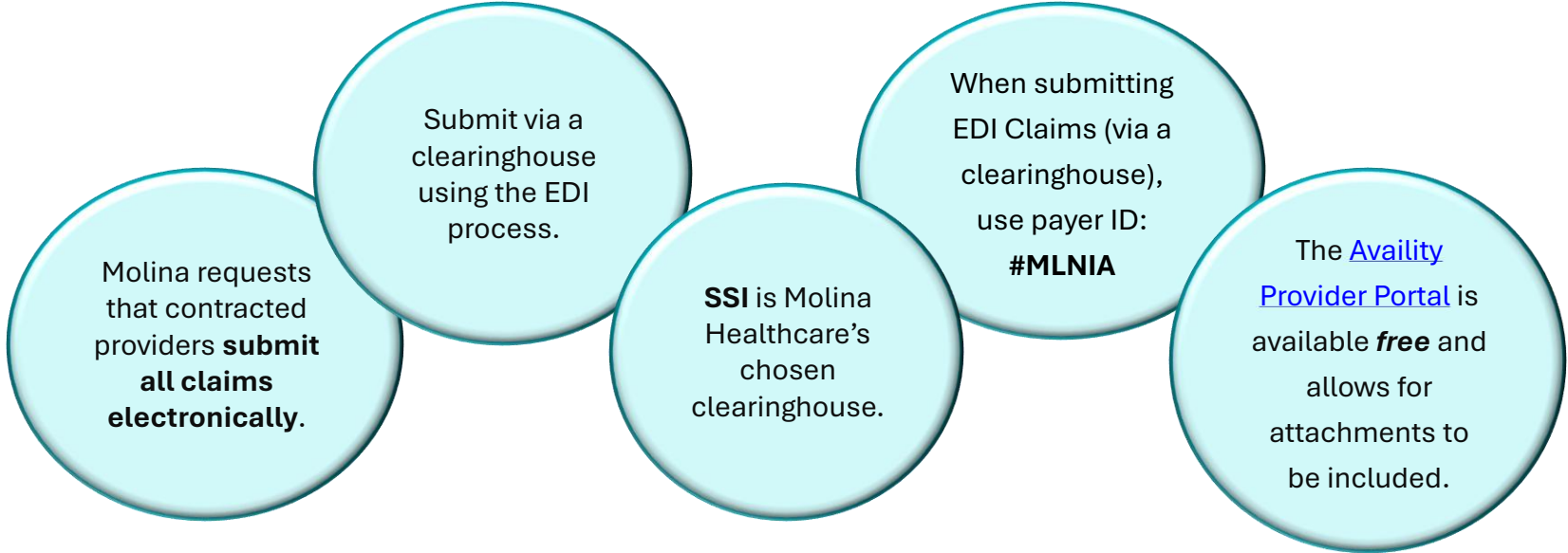
There is no cost to the provider for EFT enrollment, and providers are not required to be in-network to enroll. Molina uses a vendor to facilitate the HIPAA compliant EFT payment and ERA delivery processes.

Molina contracts with our payment vendor, ECHO Health, Inc. Click [here](#) to register.

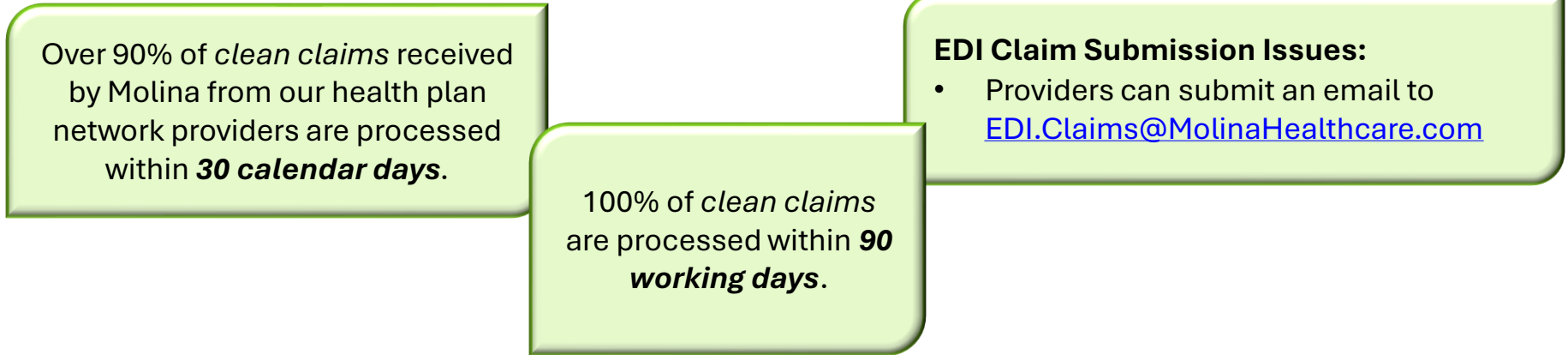
You may contact ECHO Customer Service at [\(888\) 834-3511](tel:(888)834-3511) or edi@echohealthinc.com

Claims Submission & Processing

Claims Submission Options



Claims Processing Standards



Claims Updates & Reminders

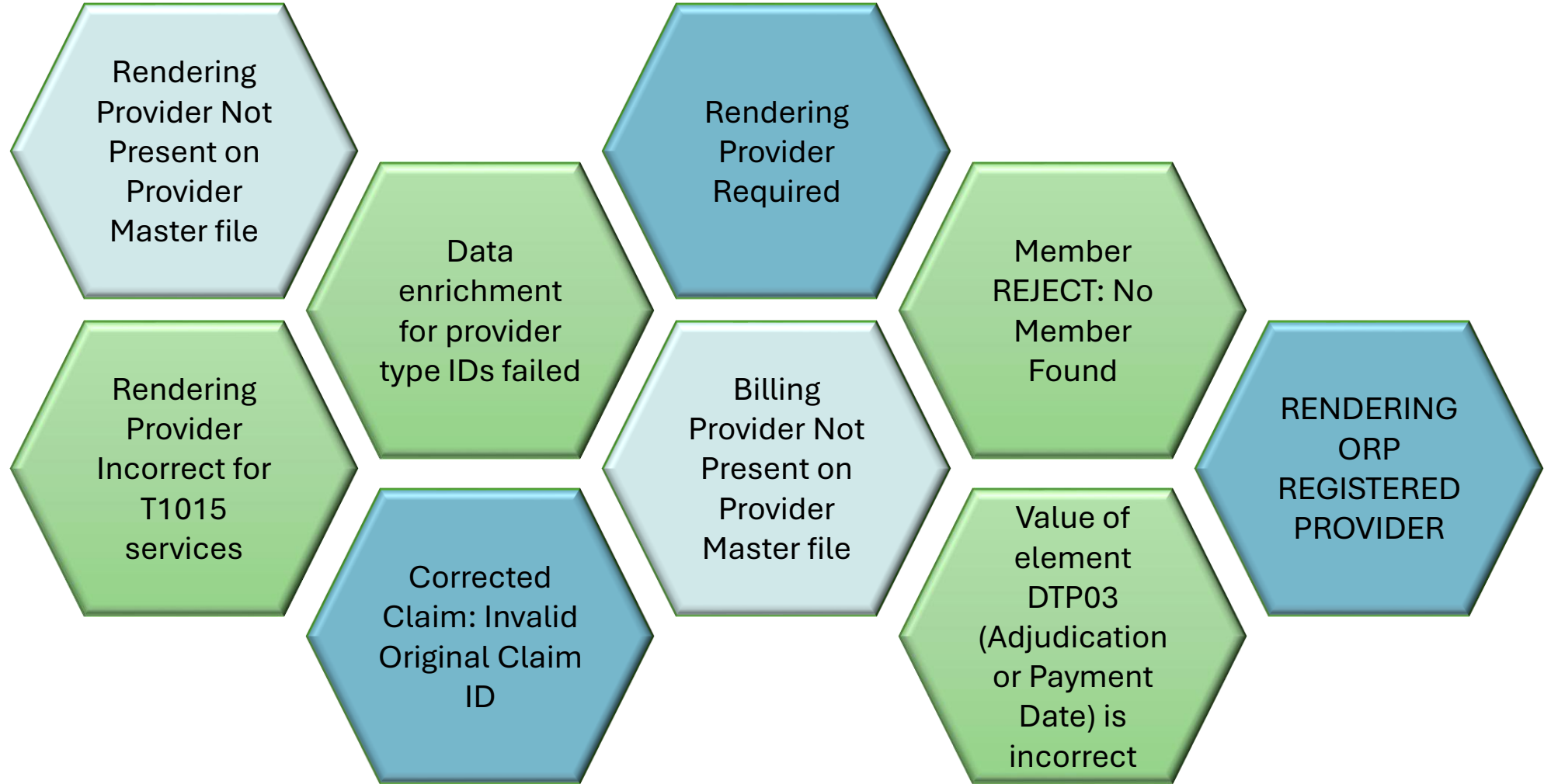
- Providers should promptly submit to Molina Claims for Covered Services rendered to Members.
- All Claims shall be submitted in a form acceptable to & approved by Molina
- This should include all medical records pertaining to the Claim if requested by Molina or otherwise required by Molina's policies and procedures
- Claims that are not submitted to Molina within these timelines shall not be eligible for payment & Provider hereby waives any right to payment
- Need for providers to submit primary EOBs
- Duplicate claim denials – corrected claims must be billed with frequency code 7 to avoid duplicate denials

Top Denial Edits:

Claim Edit Message	Claim Count
Missing Explanation of Benefits (Coordination of Benefits or Medicare Secondary Payer).	<u>45,052</u>
Duplicate Mem/DOS/Srvc Code/Mod/Rendering Phys	<u>26,892</u>
Precertification/authorization/notification/pre-treatment absent.	<u>25,416</u>
This drug/service/supply is not included in the fee schedule or contracted/legislated fee arrangement.	<u>21,810</u>
Claim Line Submission Window Exceeded	<u>16,919</u>
Pend claim if COB is 0 on secondary enrollment claim	<u>7,162</u>
Invalid Medicare Action Code	<u>5,658</u>
Missing/incomplete/invalid diagnosis or condition.	<u>4,365</u>
This provider was not certified/eligible to be paid for this procedure/service on this date of service.	<u>4,322</u>
	223,520

Join Our Network

The TOP claim rejections our team sees:



Availity Essentials



Availity Registration

Organization Registration Resource: <http://www.availity.com/registration-tips>

Availity Payor ID: **MLNIA**

Availity Payor Name: **Molina Healthcare of Iowa**



Services Offered by Availity and Molina:

- Claim Submission/Resubmission
- Self service member eligibility
- Provider searches
- Submit requests for authorizations
- Submit claims
- Claim Status
- Remittance Viewer
- Obtaining Member Eligibility & Benefits
- Submitting Authorization Requests
- HEDIS Information

Recoupments & Overpayments



Recoupments



Molina adjustments appear as 'full claim takeback adjustment' (original claim ID with suffix "R#" followed by a new claim with suffix "A#").



Molina uses a "backout and replace" claims system.



Refunds applied appear as 'recoupments/offsets' but are reflected by a refund amount on the EOP/825 which "nets" against the takeback claim in the amount of the refund.



Please log in to Availity Essentials to see all overpayment letters. This is where you can also dispute, agree to recoup, etc. in the portal directly.

Claims Submission – Timely Filing

Providers are encouraged to submit claims for **Covered Services** rendered to members as soon as possible following the date of service.

Claims must be submitted by provider to Molina Healthcare within one hundred eighty (180) calendar days

All claims shall be submitted electronically, and include medical records pertaining to the claim if requested by Molina Healthcare

Out-of-network providers = 365 calendar days after discharge from Date of Service

Corrected Claims = 365 calendar days from the last adjudication date for up to 2 years from Date of Service

Claims Disputes

Providers are encouraged to submit claim disputes electronically, using the Availity Essentials portal.

The item(s) being resubmitted should be clearly marked as an Appeal and must include the following documentation:

- Any documentation to support the adjustment and a copy of the Authorization form (if applicable) must accompany the Appeal request.
- The Claim number clearly marked on all supporting documents.

Providers are encouraged to submit claim disputes electronically, using the Availity Essentials portal.

Please note: a provider claim dispute is not an appeal.

Availity Essentials portal:
<https://Availity.com/Essentials>

Fax:
[\(855\) 275-3082](tel:(855)275-3082)

Utilization Management Update



PA Reminder

As of 10/01/2024:

Molina makes the determination and provides notification no later than 7 calendar days from the receipt of complete request.

You can access Molina's Prior Authorization Look Up Tool [here](#)



You may reach out to the UM team through our Provider Services Contact Center by calling (844) 236-1464, 7:30am-6:00pm, M-F to assist with:

- Answering your questions
- Provide guidance
- Help schedule a peer-to-peer conversation
- Assist clinical providers navigate our Prior Authorization process

UM 7-Day Turn-Around Time (TAT)

What we did to prepare

- **Exposure**
- **Communication with internal staff**
- **Communication with Providers**
 - **Provider Notice posted timely on website**
 - **Provider Email Blast with Notice sent out**
- **Monitoring of trends / Ques**

Experience the first 2 weeks

- **Que volumes decreased**
- **Quicker turn-around times**
- **Limited reviews due over weekend**



Provider Data Accuracy and Validation



Provider Data Accuracy and Validation

- It is important for providers to ensure Molina has accurate practice and business information.
- This allows us to better support and serve Molina members and provider network.

- Maintaining an accurate and current Provider Directory is a State and Federal regulatory requirement, as well as an NCQA required element.
- Invalid information can negatively impact member access to care, member/PCP assignments and referrals.

- Providers must validate their provider information on file with Molina at least once every 90 days for correctness and completeness.

Provider Data Accuracy and Validation Cont.

Please visit our Provider Online Directory at MolinaHealthcare.com/IA to validate your information.

For corrections/updates, providers can make updates through the [CAQH Portal](#) or submit a full roster that includes the required information for each health care provider and/or health care facility in your practice.

Providers unable to make updates through the [CAQH Portal](#) or roster process should contact their [Provider Relations representative](#) for assistance.

Molina's Partners



Molina Healthcare of Iowa Partners

Molina Healthcare of Iowa is partnering with the following providers for our Medicaid, LTSS, and CHIP members:

March Vision
Vision Services

- Toll Free #: **(844) 496-2724**
- [March Vision](#)

Carebridge
Electronic Visit Verification

- Toll Free #: **(844) 496-2724**
- [EVV Carebridge Iowa](#)

Teladoc
Virtual Care

- Toll Free #: **(800) 835-2362**
- [Teladoc - Molina Iowa](#)

MTM Health (Access 2 Care)
Non-Emergency Transportation

- Toll Free #: **(844) 544-1389**
- [A2C](#)



Molina Healthcare of Iowa Partners

Molina Healthcare of Iowa is partnering with the following providers for our Medicaid, LTSS, and CHIP members:

Progeny Health
Neonatal Care Management

- Toll Free #: **(888) 832-2006**
- www.ProgenyHealth.com

Mae
Doula Services

- Email support@meetmae.com
- <https://meetmae.com/doula>

Pyx Health
Virtual Care

- Toll Free #: **(855) 499-4777**
- [Pyx Health - Molina Iowa BH](#)

TCare & Trualta
Caregiver Support

- Caregiver specialty, and eLearning-based caregiver support program
- [Caregiver Connect](#)



Molina Healthcare of Iowa Partners



- Our new administrator for Oncology/Radiation Oncology Quality Management program, as well as the Cardiology Quality Management program
- Resources on our [Molina Provider Website](#):
 - [Evolent MHIA Cardiology FAQ - Go Live 9.1.2025](#)
 - [Evolent MHIA Oncology/Radiation Oncology FAQ - Go Live 9.1.2025](#)
 - [Evolent MHIA PA SCOPE LIST](#)



- Kidney Population Health Management company serving health plans and provider groups seeking value-based solutions that improve the clinical care and financial performance of high-risk, high-cost kidney patient populations
 - [Healthmap Provider Brochure](#)
 - [Healthmap Provider Webinar Presentation](#)
- Please visit [HealthmapSolutions.com](#) to learn more

Newest Value-Added Benefits for your Members



Flu Shot: Earn \$10 in healthy rewards for getting a flu shot.

Annual YMCA Membership:

Members (*all ages*) who have completed an annual adult physical exam or well-child visit qualify.

Diabetic Care Management:

Members (*age 18+; diagnosed with diabetes*) can earn up to **\$175** in healthy rewards throughout the year by:

- Completing annual A1c tests (\$25 per test; 4 maximum)
- Diabetic eye exam (1 per year; \$50)
- Kidney function lab test (1 per year; \$25)



Member Portal Set Up:

Earn a \$25 healthy rewards card for setting up member portal for you or your child.

Pregnancy Notification:

Notification during 1st Trimester – \$50 gift card, once per pregnancy.

Notification during 2nd or 3rd Trimester - \$25 gift card, once per pregnancy



Molina Virtual Diabetes Care Series:

Members (*18+ years with type 1 or 2 diabetes or pre-diabetes*) can earn a healthy rewards up to \$100 for completing the series.

Provider Engagement



Iowa Molina Provider Advisory Council (I.M.P.A.C.)



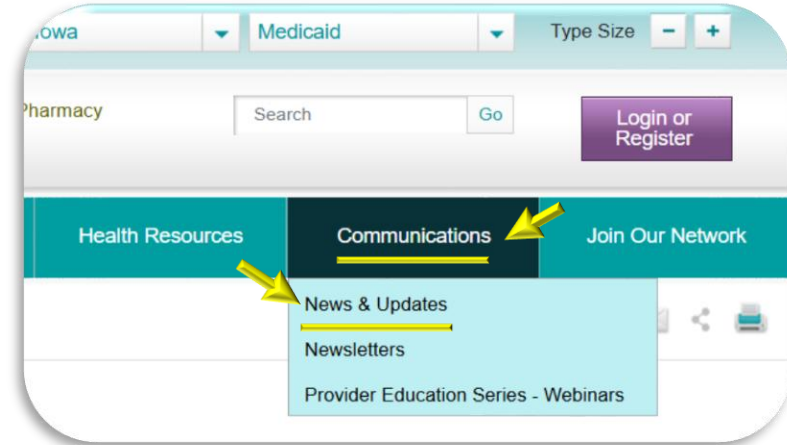
You Matter to Molina!

- The purpose of the **Iowa Molina Provider Advisory Council (I.M.P.A.C.)** is for Molina to gather input with a representative voice for Iowa providers.
- We use this platform to discuss and learn about issues impacting providers; this will also be a forum to identify challenges and barriers to providing care for our members.
- The council will problem-solve and collectively find ways to improve and strengthen the health care service delivery system.
- IMPAC is one of many ways Molina presents new information and get direct feedback from the provider network. Our next meeting is November 19, 2025!

I.M.P.A.C. and the HCBS Group

Next I.M.P.A.C. Meeting:

When: TBD - November 19, 2025
Time: 10-11:30am
Where: Virtually, via Webex
Get registered on our [Molina Provider website](#)



HCBS Work Group

- We hold an HCBS Work Group at the end of the council meeting.
- This serves as more of an office hour to answer specific questions providers have.
- Get registered on our [Molina Provider website](#)



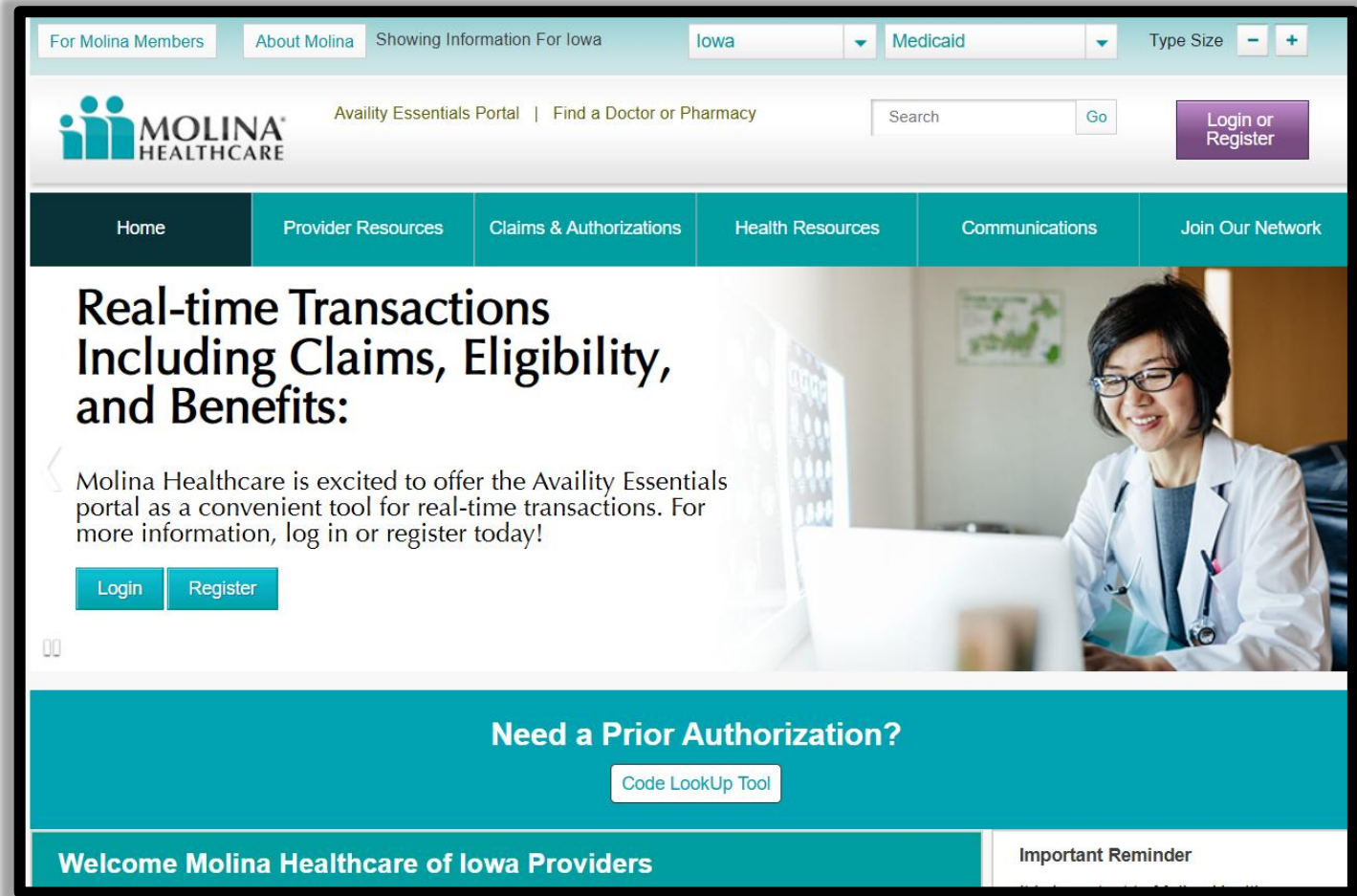
Provider Online Resources



Provider Online Resources

www.MolinaHealthcare.com/IA

- ✓ Provider Online Directories
- ✓ Preventative & Clinical Care Guidelines
- ✓ Provider Manual
- ✓ Provider Portal: Availity Essentials
- ✓ Prior Authorization Information
- ✓ Advanced Directives
- ✓ Model of Care Training
- ✓ Claims Information
- ✓ Pharmacy Information
- ✓ HIPAA
- ✓ Fraud, Waste & Abuse Information
- ✓ Frequently Used Forms
- ✓ Communications & Newsletters
- ✓ Member Rights & Responsibilities
- ✓ Contact Information



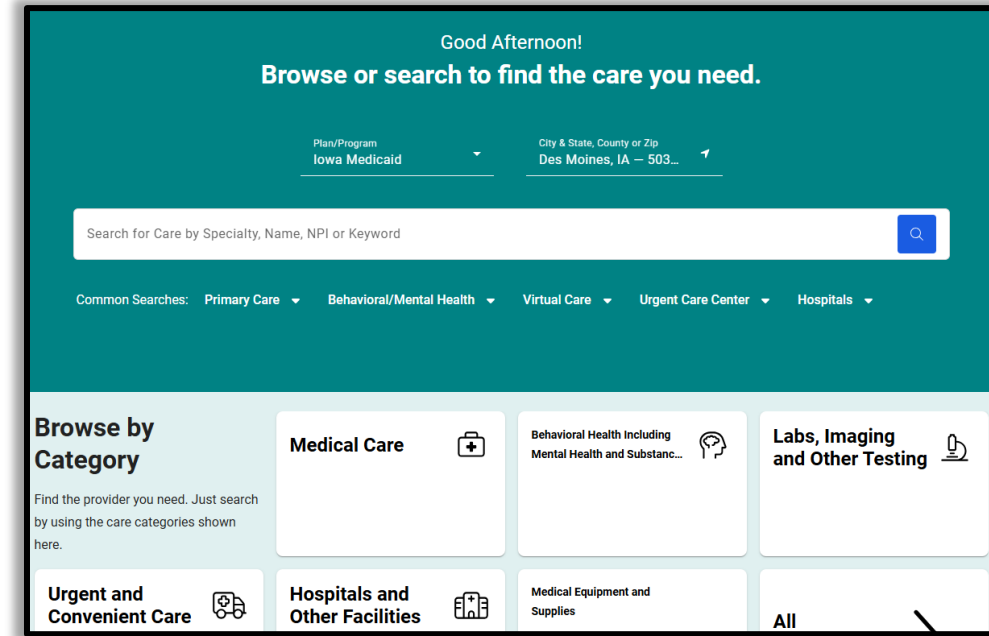
The screenshot displays the Molina Healthcare website interface. At the top, there are navigation links for 'For Molina Members', 'About Molina', and 'Showing Information For Iowa'. The state is set to 'Iowa' and the plan type is 'Medicaid'. A search bar is present with a 'Go' button and a 'Login or Register' button. The main navigation menu includes 'Home', 'Provider Resources', 'Claims & Authorizations', 'Health Resources', 'Communications', and 'Join Our Network'. The central banner features the headline 'Real-time Transactions Including Claims, Eligibility, and Benefits:' followed by a sub-headline and a paragraph: 'Molina Healthcare is excited to offer the Availity Essentials portal as a convenient tool for real-time transactions. For more information, log in or register today!'. Below this text are 'Login' and 'Register' buttons. A teal bar at the bottom of the banner contains the text 'Need a Prior Authorization?' and a 'Code LookUp Tool' button. The footer of the page includes 'Welcome Molina Healthcare of Iowa Providers' and an 'Important Reminder' section.

Provider Online Directory

Providers may use Molina's Provider Online Directory (POD) located on our website or request a copy of the Provider Directory from their Provider Relations Representative.

We would like your help collecting your business' up-to-date website link as well as if you have providers that are multi-lingual. You may include these in roster submissions, and/or send directly to IAPODUpdate@MolinaHealthcare.com.

Molina Iowa Provider Online Directory



Provider profile cards for quick access to information

Expanded search options and filtering for narrowing results

User-friendly and intuitive navigation

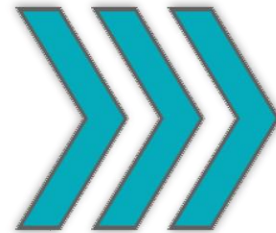
Browsing by category, search bar and common searches

Provider information you can save to use later

Provider Website: News & Updates

All provider updates, announcements & materials are hosted here

1. [Molina Iowa Provider Website](#)
2. Click on '**Communications**' tab
3. Choose '**News & Updates**'



- MHIA Medicaid Provider Manual
- Provider Claims & Billing Guide
- Provider Rep Map by County
- Molina Healthcare 275 Companion Guide
- SSI Claim Submission FAQ
- Optum Pause and Pay FAQ
- MHIA - PA Code Updated List
- Maternal Health Providers
 - Pregnancy Notification Form
 - Newborn Notification Form
- MHIA Provider Quick Reference Guide
- MHIA Provider Newsletter

Provider Escalation Process Update



Provider Escalation Steps

- 1 Call Provider Services Contact Center:
(844) 236-1464
7:30am – 6:00pm, Monday through Friday
- 2 Contact Availity:
[Availity Essentials \(Molina Provider Portal\)](#)
- 3 Reach out to your Provider Relations Rep:
Email the PR box IAProviderRelations@MolinaHealthcare.com
or contact your PR Rep for your county using our [map](#).
- 4 Contact Health Plan Leadership:
Manager, Provider Relations: Angela.Schmidt@MolinaHealthcare.com
Director, Provider Relations: Rondine.Anderson@MolinaHealthcare.com

Provider Relations Rep Map by County

Health Systems Contacts

Theresa Ellis – Unity Point, CHI, Methodist
Adrian Cain – MercyOne, Genesis
Veronica Billingsley – University of Iowa

Border States

Illinois – Sara Tubbs
Minnesota – Jordan Kohlmeyer
Missouri – Erica Baker
Nebraska – Theresa Ellis
South Dakota – Theresa Ellis
Wisconsin – Marcia Petsche

Polk County (cities are divided)

Veronica Billingsley – Altoona, Beaverdale, Bondurant, Des Moines, Elkhart, Mitchellville, Pleasant Hill, Runnells
Elizabeth Erickson – Ankeny, Clive, Grimes, Huxley, Johnston, Polk City, Urbandale, West Des Moines, Windsor Heights

All ICDAC & CDAC:

IA_CM@MolinaHealthcare.com

All Chiropractic Providers:

ChiropracticInfo@MolinaHealthcare.com



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Amber Meador	Amber.Meador@MolinaHealthcare.com
Erica Baker	Erica.Baker@MolinaHealthcare.com
Sara Tubbs	Sara.Tubbs@MolinaHealthcare.com

Provider Services: (844) 236-1464



Scan to learn more



Sign Up for
Provider Comms



MHIA Provider
Reference Guide



Contact Provider
Services

Thank You

