ATTENTION PROVIDERS SUBMITTING SHARED PLAN CLAIMS TO MOLINA

Shared Plan claims received by Molina after the initial one year timely filing limit cannot be processed unless the provider is able to furnish the Shared Plans EOB or Payment Register showing the original claim was filed timely. All proof of timely filing documentation must contain the specific recipient information, provider information and date of service to be considered as proof of timely filing. It must also contain the name of the Shared Plan the claim was originally submitted to. To ensure accurate processing, please be certain that all information is legible. Claims with dates of service two years old must be submitted to DHH for review with proof of timely filing within the initial one year filing limit. These claims must meet one of the following criteria:

- The recipient was certified for retroactive Medicaid benefits, and the claims were filed within 12 months of the date that retroactive eligibility was granted.
- The recipient won a Medicare or SSI appeal in which he or she was granted retroactive Medicaid benefits.
- The failure of the claim to pay was the fault of the fiscal intermediary or the Louisiana Medicaid Program, rather than the provider’s fault, each time the claim was adjudicated.

In order to be considered for the 2-year override, request must include a cover letter describing the criterion that has been met and supporting documentation. Request received that do not meet these requirements will be returned to the provider.

If you have any questions or concerns, please contact Molina’s Provider Relations at 1-800-473-2783.

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