Corrected Claims Billing Guide

Providers can submit corrected claims when changing or adding information, such as a change in coding.

Medicaid: There are two ways to submit a corrected claim to Molina Healthcare:
1. Via Electronic Data Interchange (EDI) through the Ohio Department of Medicaid's (ODM) Ohio Medicaid Enterprise System (OMES) using payer ID 0007316.
2. Via the Availity Essentials Portal (Availity)

Medicare, MyCare Ohio and Marketplace: There are two ways to submit a corrected claim to Molina:
1. Via EDI using payer ID 20149.
2. Via Availity

Billing Requirements: Follow these billing requirements when submitting corrected claims for all lines of business:
- **Always** submit through the appropriate channel based on the line of business: Availity or EDI.
- **Do not** submit corrected claims through the claim dispute/reconsideration process.
- **Always** include the original claim (most recent adjudication of the original claim) in the appropriate fields with a corrected claim indicator.
- **Do not** submit a corrected claim with only codes that were edited by Molina on the original claim. All codes billed on the original claim should be resubmitted.
- **Do not** submit paper corrected claims for the Medicaid line of business. (Paper submission is non-preferred for all other lines of business.)

PROVIDER PORTAL SUBMISSION

All Lines of Business: Providers may submit claims, PA, eligibility inquiries, claim status inquiries and associated attachments through Availity.

ELECTRONIC SUBMISSION

Medicaid: Providers may submit claims, eligibility inquiries, claim status inquiries and associated attachments using EDI by being a trading partner (TP) authorized by ODM or by contracting with an ODM authorized TP at medicaid.ohio.gov/resources-for-providers/billing/trading-partners/trading-partners.

Molina's payer IDs for OMES EDI transactions for dates of service on or after Feb. 1, 2023, are noted in the chart below.

Medical Claims	
Line of Business	Payer ID
Ohio Aged, Blind, or Disabled (ABD) (Medicaid)	0007316
Ohio Adult Extension (Medicaid)	0007316
Ohio Healthy Families (Medicaid)	0007316
Molina SKYGEN Dental	D007316
Molina March Vision	V007316
Ohio Marketplace Program	20149

Medical Claims	
Line of Business	Payer ID
Ohio Marketplace Program Primary with Ohio Medicaid Secondary (ABD, Adult Extension, Healthy Families)	20149
Medicare-Medicaid Plan (MMP) Medicare (MyCare Ohio)	20149
MMP Medicaid (MyCare Ohio)	20149
MMP Opt-Out/MMP Medicaid Secondary (MyCare Ohio)	20149
Medicare Advantage Prescription Drug (MAPD)	20149

Molina's payer ID is 20149 for Medicaid EDI transactions with dates of service prior to Feb. 1, 2023.

Inpatient claims are based on the member's discharge date.

ODM Billing Guidelines are located at medicaid.ohio.gov/resources-for-providers/billing/billing.

Medicare, MyCare Ohio and Marketplace:

Providers may submit claims, PA, eligibility inquiries, claim status inquiries and associated attachments via an EDI clearinghouse using Payer ID 20149.

TIMELY FILING

Participating Providers
- Claims received with a correction of a previously adjudicated claim must be received by Molina no later than 365 calendar days from the date of the remit of the claim number that is being corrected. Find additional information in the Provider Manual for the corresponding line of business.
- Claims submitted after the filing limit will be denied.

Non-Participating Providers
- Non-participating providers have 365 days from the original remittance advice to submit corrected claims. Find additional information in the ODM Designated Provider and Non-Contracted Provider Guidelines.
- Find additional information in OAC 5160-1-19 Claim Submission

ADDITIONAL INFORMATION

- Medicaid Provider Manual
- MyCare Ohio Provider Manual
- Medicare Provider Manual
- Marketplace Provider Manual
- Ohio Department of Medicaid
- Reference Guide for Supporting Documentation for Claims

Date		Action
Effective Date	April 2016	Original

Corrected Claims Billing Guide

Revision Date	Feb. 2018	Addition of Timely Filing section
Revision Date	April 2019	Updated to include new timely filing guidelines for corrected claims
Revision Date	April 2022	Updated to include new submission guidelines for Provider Portal
Revision Date	Jan. 2023	Updated to align to Next Generation Medicaid program EDI updates for Feb. 1, 2023, Phase 3A launch. Streamlined language throughout the document.
Revision Date	Feb. 2024	Updated Availity hyperlink and payer IDs, streamlined language.