

THIS CA UPDATE HAS BEEN SENT TO THE FOLLOWING:**COUNTIES:**

- Imperial
- Riverside/San Bernardino
- Los Angeles
- Orange
- Sacramento
- San Diego

LINES OF BUSINESS:

- Molina Medi-Cal Managed Care
- Molina Medicare
- Molina Marketplace (Covered CA)

PROVIDER TYPES:

- Medical Group/ IPA/MSO**
 - Primary Care**
 - IPA/MSO
 - Directs
- Specialists**
 - Directs
 - IPA
- Hospitals**
 - Ancillary**
 - CBAS
 - SNF/LTC
 - DME
 - Home Health
 - Other

CORRECTION: Cotiviti**Post-Payment Diagnosis Related Group Review**

This is an advisory notification to Molina Healthcare of California (MHC) network providers regarding the Cotiviti Post-Payment Diagnosis Related Group (DRG) Review.

**Please disregard the Just the Fax sent on June 14, 2023.
We apologize as it was prematurely sent out and contained errors.**

WHAT YOU NEED TO KNOW:

Cotiviti is a Business Associate of Molina Payment Integrity department as defined in 45 CFR, Section 160.103 of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and will perform its responsibilities on behalf of Molina Payment Integrity in full compliance with HIPAA requirements.

WHEN IS THIS HAPPENING:

Commencing **July 1, 2023**, Molina Payment Integrity department has engaged the services of Cotiviti to conduct post-payment reviews of inpatient claims to verify payment accuracy of our facilities.

WHAT YOU SHOULD EXPECT:

- Claims will be identified for post-payment audit based on standard clinical or correct coding criteria.
- These audits will not conduct medical necessity reviews and will not result in denial of services for medical necessity.
- If a claim is identified for audit, your Medical Records Department will receive a letter requesting medical records for specific paid claims. You will have 30 days to provide the requested medical records to Cotiviti.
- If records are not received within the required timeframe, you will receive a second notice. Failure to submit the requested records may result in an administrative denial and recovery of the original payment by Molina PI department.
- Should the review of the medical record result in an overpayment finding, you will receive an Audit Determination letter from Cotiviti explaining the results of the audit.
- If you disagree with the Audit Determination, you will have 30 days or as required by contractual guidelines to submit a request for reconsideration with supporting information to Cotiviti.
- If you do not respond to these notifications, we assume you agree, and Molina PI department will proceed with a payment adjustment in accordance with your contract.

If you have any questions, please contact your provider network representative. We appreciate your participation in our network and your dedication to the health and welfare of our members and your patients.

What if you need assistance?

If you have any questions regarding the notification, please contact your Molina Provider Services Representative below:

Service County Area	Provider Services Representative	Contact Number	Email Address
California Hospital Systems	Deletha Foster	909-577-4351	Deletha.Foster@molinahealthcare.com
Los Angeles	Clemente Arias Christian Diaz	562-517-1014 562-549-3550	Clemente.Arias@molinahealthcare.com Christian.Diaz@molinahealthcare.com
Los Angeles / Orange County	Maria Guimoye	562-549-4390	Maria.Guimoye@molinahealthcare.com
Sacramento	Jennifer Rivera Carrasco	562-542-2250	Jennifer.RiveraCarrasco@molinahealthcare.com
San Bernardino	Luana McIver	909-501-3314	Luana.Mciver@molinahealthcare.com
San Bernardino / Riverside County	Vanessa Lomeli	909-577-4355	Vanessa.Lomeli2@molinahealthcare.com
Riverside County	Mimi Howard	562-549-3532	Smimi.Howard@molinahealthcare.com
San Diego / Imperial County	Briana Givens Carlos Liciaga Salvador Perez	562-549-4403 858-614-1591 562-549-3825	Briana.Givens@molinahealthcare.com Carlos.Liciaga@molinahealthcare.com Salvador.Perez@molinahealthcare.com