



Provider Newsletter

For Molina Healthcare of Iowa, Inc. providers

Third quarter 2025

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Benefits of submitting claims electronically

Molina Healthcare of Iowa, Inc. (MHIA) reminds our providers that submitting claims electronically through clearinghouses or the **Availity Essentials portal** offers many advantages. These include:

- Improved Health Insurance Portability and Accountability Act (HIPAA) compliance
- Increased accuracy of data and efficient information delivery
- Fewer claim delays since errors can be corrected and resubmitted electronically
- Elimination of mail delays

How to submit electronic data interchange (EDI) claims:

A clearinghouse is the easiest way to submit EDI claims to Molina. You may submit EDI transactions through Molina's gateway clearinghouse, SSI Group, or use a clearinghouse of your choice, so long as that clearinghouse establishes a connection with SSI Group. Molina Iowa's Payer ID is MLNIA. Molina offers additional options for electronic claims submissions. If you do not have a clearinghouse, log in to the **Availity portal** for more information.

Update provider data accuracy and validation

Providers must ensure Molina has accurate practice and business information. Accurate information allows us to better support and serve our members and providers.

Molina must maintain an accurate and current Provider Directory. It is a state and federal regulatory requirement and a National Committee for Quality Assurance (NCQA) requirement. Invalid information can negatively impact members' access to care, member/primary care provider (PCP) assignments and referrals. Additionally, current information is critical for timely and accurate claims processing. Providers must validate their information on file with Molina at least once every 90 days for correctness and completeness.

Failure to do so may result in your REMOVAL from the Molina Provider Directory.

Provider information that must be validated includes, but is not limited to:

- Provider or practice name
- Location(s)/address(es)
- Specialty(ies)
- Phone, fax numbers and email
- Digital contact information
- Whether your practice is open to new patients (PCPs only)
- Tax ID and/or National Provider Identifier (NPI)

Delegated and other providers that typically submit rosters must submit a complete roster that includes the above information to Molina.

All other providers must log into their Council for Affordable Quality Healthcare (CAQH) account to attest to the accuracy of the above information for each health care provider and/or facility in your practice contracted with Molina.

If the information is correct, please select the option to attest. If it is incorrect, providers can make updates through the CAQH portal. Providers unable to make updates through the CAQH portal should contact their provider services representative for assistance.

Additionally, per the terms specified in your Provider Agreement, providers must notify Molina of any changes, as soon as possible, but at least 30 calendar days in advance, of any changes in any provider information on file with Molina. Changes include, but are not limited to:

- Change in office location(s)/address, office hours, phone, fax or email
- Addition or closure of office location(s)
- Addition of a provider (within an existing clinic/practice)
- Change in provider or practice name, Tax ID and/or NPI
- Opening or closing your practice to new patients (PCPs only)
- Change in specialty(ies)
- Change in any other information that may impact members' access to care

Additional Provider Directory updates

We'd appreciate your help in providing your business's current website link and letting us know if you have any multilingual providers. You may include these in roster submissions and/or send them directly to IAPODUpdate@MolinaHealthcare.com. If any email contacts are no longer in use, or if you'd like to ensure we have the most up-to-date email for provider communications, please contact Tiffany.Verhey@MolinaHealthcare.com.



National Plan and Provider Enumeration System review for data accuracy

Your NPI data in the National Provider Identifier (NPI) must be reviewed to ensure accuracy. Providers are legally required to keep their NPPES data current.

When reviewing your provider data in NPPES, please update any inaccurate information in modifiable fields, including provider name, mailing address, phone and fax numbers and specialty. You should also include all addresses where you practice and actively see patients and where a patient can call and make an appointment. Do not include addresses where you do not actively practice. Please remove any practice locations that are no longer in use. Once you update your information, you must confirm it is accurate by certifying it in NPPES. Remember, NPPES has no bearing on billing Medicare fee-for-service.

If you have any questions about NPPES, visit [NPPES.CMS.HHS.gov](https://www.nppes.cms.hhs.gov).

Culturally and Linguistically Appropriate Services for providers and office staff

We support and adhere to the **National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care**. We also comply with regulatory and accreditation standards related to culturally and linguistically appropriate practices.

Resources for providers and staff

Training modules and resources are available to providers and office staff. You can access the resources through **Availity**.

The training modules last 5 to 10 minutes. Depending on the topic of interest, you may participate in all or just one module. Upon completing the training, please submit the provider attestation form available through **Availity**. Please contact your Provider Relations representative if you have any questions.

Americans with Disabilities Act (ADA) resources

A series of provider education materials related to disabilities is also available to providers and office staff on Molina's website. To review the materials, please log in to Availity.

Disability educational resources include:

- Overview of the Americans with Disabilities Act (ADA), including frequently asked questions for health care providers
- Information for members who are blind or have low vision, including how to request alternate formats
- Guidance on service animals and related accommodations
- Tips for communicating with people with disabilities and older adults

Please contact your Provider Relations representative if you have any questions.

Molina's language access services

Language access services ensure mutual understanding of illness and treatment, increase patient satisfaction and improve health care quality for patients who speak a language other than English. Molina ensures effective communication with members by providing language access services. Providing language access services is a legal requirement for health care systems that receive federal funds. A member cannot be refused services due to language needs. Molina provides the following services directly to members at no cost, when needed:

- Written materials in other formats, such as large print, audio, accessible electronic formats and braille
- Written materials translated into languages other than English
- Interpreter services, including American Sign Language
- Relay service (TTY: 711)
- 24-hour Nurse Advice Line
- Bilingual staff



Culturally and Linguistically Appropriate Services for providers and office staff (continued)

In many cases, Molina will also cover the cost of an interpreter for our members' medical appointments. Molina members and providers are instructed to call Member and Provider Services to schedule interpreter services or to connect to a telephonic interpreter.

Molina's materials are always written simply in plain language and at the required reading levels.

You can access resources and materials on culturally and linguistically appropriate practices, disability-related services and language access services by logging in to **Availity**. Once logged in, navigate to Molina Healthcare under Payer Spaces, then select the Resources tab to view the available resources. If using the **Molina website**, navigate to the Health Care Professionals site and review the Health Resources tab.

For additional information on Molina's culturally and linguistically appropriate services, contact your Provider Relations representative or visit **MolinaHealthcare.com**.

Provider Manuals

Provider Manuals are customarily updated annually but may be updated more frequently as needed. Providers can access the Provider Manual at **MHIA Medicaid | 2025 Provider Manual**.

Clinical policies

Molina's clinical policies (MCPs) are located at **MolinaClinicalPolicy.com**. These policies are based upon evidence-based guidelines supported by professional provider organizations. Providers, medical directors and internal reviewers use these policies to determine medical necessity. The Molina Clinical Policy Committee (MCPC) reviews MCPs annually and approves them bimonthly.

Clinical Practice and Preventive Healthcare Guidelines

Molina adopts clinical practice guidelines based on evidence-based standards and recommendations from national specialty organizations and governing bodies. These guidelines are reviewed, updated and evaluated in collaboration with network providers through Molina's Quality Improvement Committee.

If you are interested in participating in the Quality Improvement Committee, please contact your Provider Relations representative.

Molina's website provides a comprehensive list of adopted guidelines and links to national resources.

If using the [Molina website](#), navigate to the **Health Care Professionals** site and click **Preventive Health or Clinical Practice Guidelines** from the **Health Resources** tab.

Coming 2026: Medicare Advantage D-SNP

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, we 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.

MHIA Provider Relations representative map update

We recently updated our map regions. Please view our representative map to ensure you are in contact with the correct Provider Relations representative for your provider inquiries at [MHIA Medicaid | Contact Us](#).

Diabetes care virtual webinar series

Molina Iowa has created a virtual diabetes care series for your patients who are Molina members! We encourage members to join in if they are:

- An adult with diabetes or pre-diabetes (or with a history of these conditions)
- A caregiver of someone with diabetes

They can also earn multiple Healthy Rewards through Molina if they meet qualification criteria. Click [here](#) to download the flyer with more details and the Webex registrations. To learn more and register now, please go to our landing page for this series at [Diabetes Care Series](#).

Changes to NCQA credentialing requirements effective July 1, 2025

Effective July 1, 2025, Molina will be required to verify that providers' licenses to practice are renewed on or before the expiration date. Currently, practitioners with an expired license may no longer participate in the Molina network. Please be sure to renew your license in a timely manner to prevent any unnecessary terminations from occurring. Our system auto-verifies all licenses daily, so there's no need to submit a copy of your renewed license.



September 1, 2025: Go live for Evolent partnership

Molina Healthcare of Iowa cares about its members' health and is continually enhancing programs to improve the quality of care. We are pleased to announce our collaboration with Evolent, formerly known as New Century Health, as the administrator of the Molina Healthcare Oncology/Radiation Oncology Quality Management Program, as well as the Cardiology Quality Management Program. Here are the resources we would like oncology, radiation oncology and cardiology providers to review:

- [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](#)

Please visit [Evolent.com](https://www.evolent.com) for more information.

Provider Advisory Council

The Molina Iowa Provider Network thanks its providers who participate in the Iowa Molina Provider Advisory Council (IMPAC). To join this council, please complete the sign-up form [here](#). We look forward to our next meeting in November 2025.

HCBS Work Group

If you would like to be included in the work group that meets during the open forum portion of our IMPAC meeting, please sign up [here](#). We will send you the Webex information the month before the meeting.

Want regular Molina Iowa provider communications?

We have partnered with Constant Contact to be our provider communications email vendor. The first time you receive this trusted name, you will need to check your spam/junk folder to “accept and release” it. For regular news, updates and announcements, sign up [here](#)!

Follow us on Facebook!

“Like” our Molina Healthcare of Iowa [Facebook page](#) to see all of our community events!