

Payments Made Easy

Molina Wisconsin is happy to share our monthly resource called *Payments Made Easy*, that brings you billing tips, tricks, and trends to help your claims get paid correctly and quickly.

March 2022

Hospice Patient Status Codes: When a member passes in hospice care, DHS recommends a patient status code of 20, with an occurrence code of 55, and the date that the member passes. This applies not only when SIA codes are billed, but for all hospice claim submissions for when members pass. For additional information, reference [ForwardHealth](#) and topic #1155.

Balance Billing: Balance billing a Molina Member for Covered Services is **prohibited**, other than for the Member's applicable copayment, coinsurance and deductible amounts.

Providers contractually agreed that under no circumstance shall a Member be liable to the Provider for any sums that are the legal obligation of Molina to the Provider. Providers are responsible for verifying eligibility and obtaining approval for services that require prior authorization, before services are rendered.

Referrals: Providers should direct Molina Members to health professionals, hospitals, laboratories, and other facilities and Providers which are contracted and credentialed with Molina. There may be circumstances in which referrals may require an out-of-network Provider; prior authorization will be required from Molina except in the case of Emergency Services.

If there are additional team members that you would like added to this distribution list or if you have any questions, please reach out to your Provider Network Manager at WIProviderNetworkManagement@MolinaHealthCare.Com.

All the Payments Made Easy campaigns can be viewed on the [Molina public website](#).

Register Now for Availity, Molina Healthcare's Inc. (Molina) New Provider Portal

Learn how Molina is working with Availity at [availity.com/molinahealthcare](https://www.availity.com/molinahealthcare)