

Cost Recovery

2022 | Molina Healthcare

What is Cost Recovery and Why Does it Happen?

Cost recovery occurs on a claim when the services are identified as overpaid or incorrectly paid.

This can happen through an internal audit, an external audit, a provider reporting the overpayment, or a change in the system configuration.

Some examples of cost recovery situations may include:



Member's enrollment changes retroactively.

Provider's network status is changed.

Audit identified a non-covered benefit was paid without authorization.

An external vendor identifies the Current Procedural Terminology (CPT) code should have been bundled with another service.


Rate changes are implemented and retro-effective.

Cost Recovery Process

Once an overpayment is identified, it will go through the review process




- Claim is flagged as an overpayment.




- Letter is generated to the provider and will include the claim details and the overpayment reason identified.




- The letter is sent to the mailing address on file for the Provider Pay To record.



- Provider will receive direction on how to dispute the overpayment within the overpayment letter.



- Once the dispute period has passed, if the overpayment has not been overturned through the dispute process, it will be processed for recoupment.



- Claim is reversed on a future remit and funds are subtracted from the check issued to the provider. Claims that have been reversed will have an R followed by a number at the end of the claim. Claims that have been adjusted will have an A followed by a number at the end of the claim. For example, an R1 or an A1.

Cost Recovery Disputes

The provider has 60 days from the date of the cost recovery letter to dispute or submit a refund. To submit a dispute providers must fax or mail supporting documentation as outlined in the cost recovery letter. Provider payment should be submitted as outlined in the cost recovery letter.

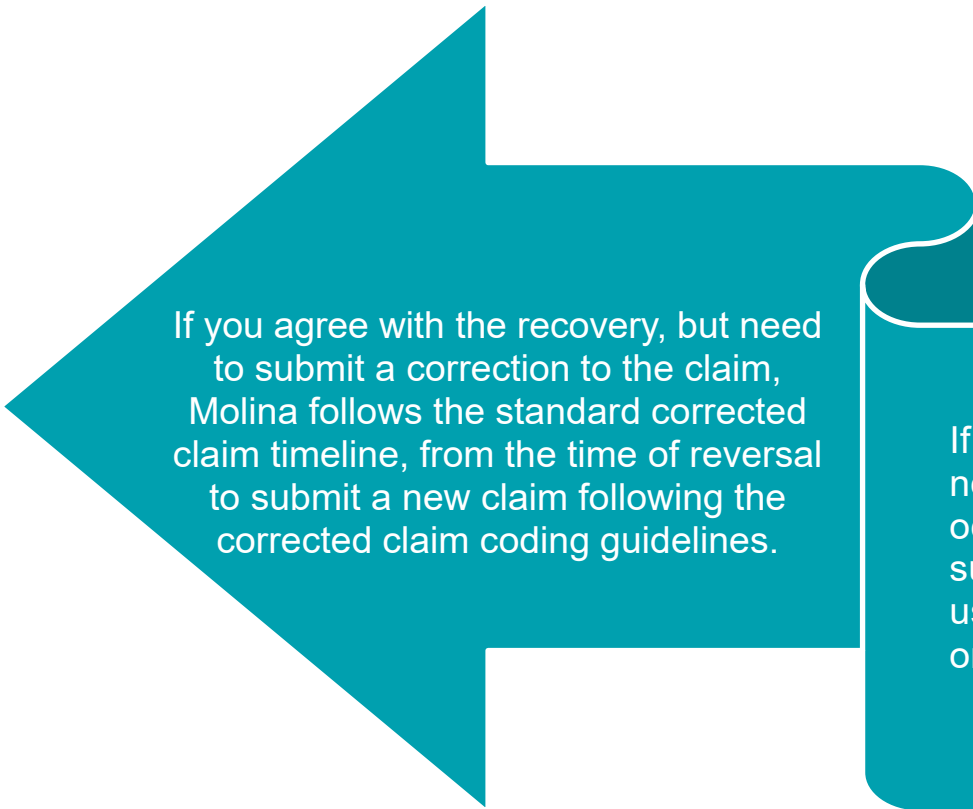
If a recovery dispute is received, the recoupment will be placed on hold until the review is completed. If a recovery dispute is not received within 60 days, the recoupment will be processed.

The dispute and supporting documentation will be reviewed by our claims specialists, coding team members and clinical specialists as needed to evaluate the appropriate action needed.

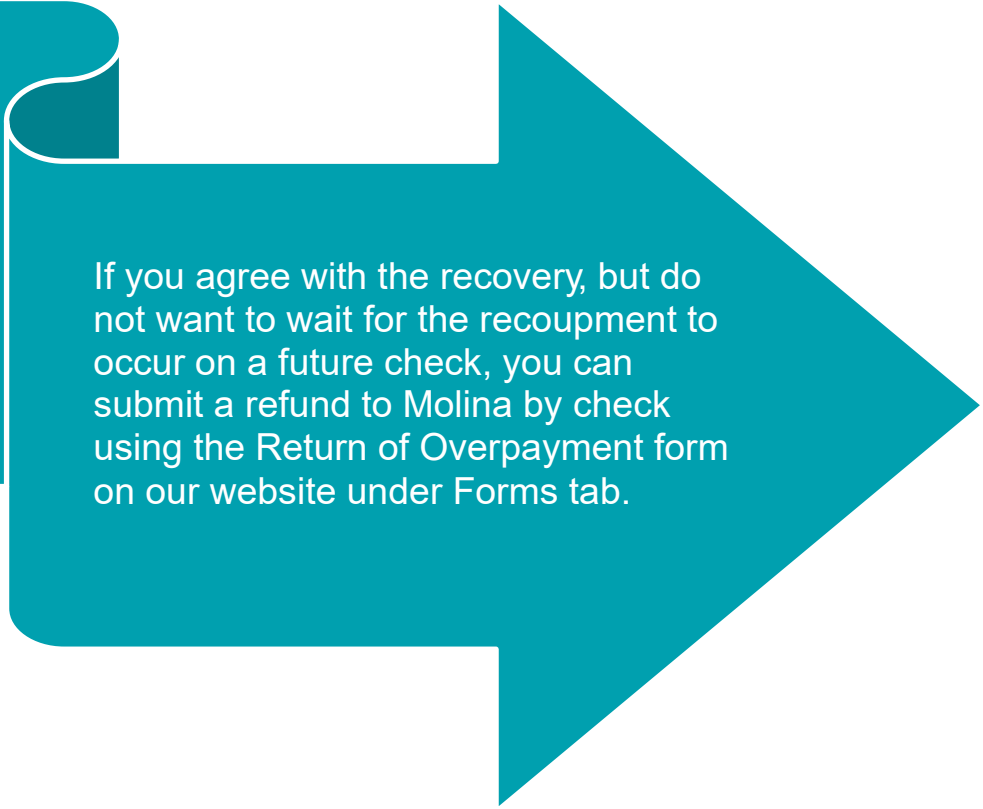
If it is determined to be overturned, the recovery is cancelled and a notice is sent to the provider.

If it is determined to be upheld, a notice is sent to the provider and cost recovery moves forward with reversing the payment.

Additional Actions Related to Cost Recoveries



If you agree with the recovery, but need to submit a correction to the claim, Molina follows the standard corrected claim timeline, from the time of reversal to submit a new claim following the corrected claim coding guidelines.



If you agree with the recovery, but do not want to wait for the recoupment to occur on a future check, you can submit a refund to Molina by check using the Return of Overpayment form on our website under Forms tab.

Post Recovery Disputes

Once a claim has been reversed due to a recovery, a new claim ID will be generated with an R at the end of the claim, followed by a number will signify a reversal.

An A at the end of the claim, followed by a number will signify the new adjusted claim that is either denied or paid at a different amount.

Once a claim is reversed or adjusted the provider then has the standard claim dispute timeframes to dispute or correct the new claim.

To dispute the new claim providers should follow the claim reconsideration process.

Reminder: A provider must file the dispute against the final claim with the A or R and not the original claim, or the dispute will be denied.

Commitment to Provider Satisfaction

Molina Healthcare of Ohio is committed to increasing our Provider Partners' satisfaction by obtaining your feedback. Some of the ways we do this include:

- Dedicated Provider Services Representatives in each region of the state for training and questions
- An annual Provider Satisfaction Survey
- It Matters to Molina program that includes monthly forums and an information page on the Provider Website including surveys for providers to share feedback



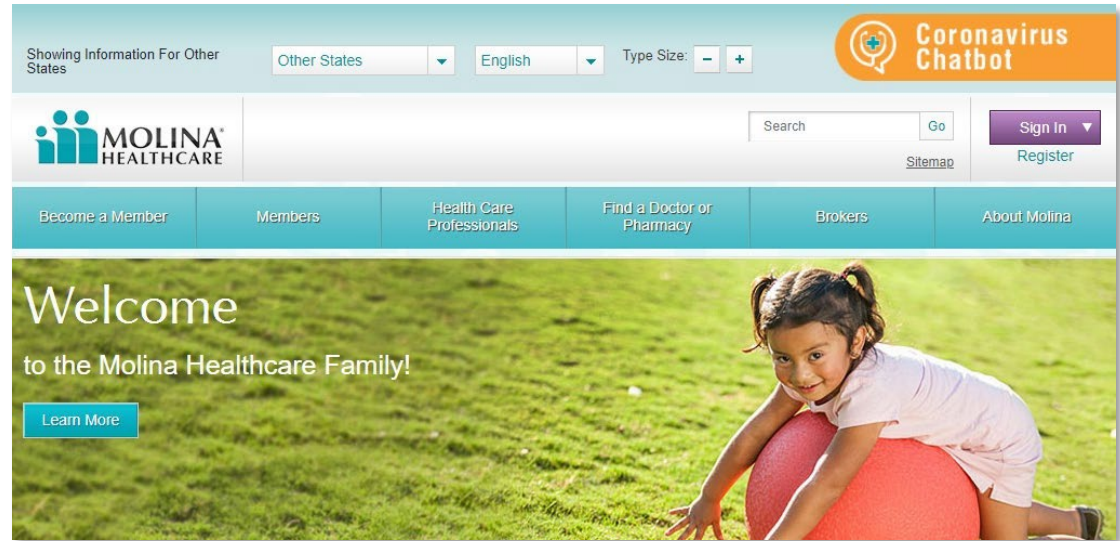
Your Opinion Matters to Molina

Email us to share your comments, concerns, or ideas. Your feedback is important to us. Let us know what we're doing well and what we can do to improve.

Please share your feedback with us so we can continue to provide you with excellent customer service!

Provider Online Resources

- Provider Manual
- Dental Manual
- Provider Online Directory
- Provider Portal
- Prior Authorization Information
- Advance Directives
- Claims Information
- Claim Reconsiderations
- Pharmacy Information
- Preventive & Clinical Care Guidelines
- Fraud, Waste and Abuse Information
- Frequently Used Forms
- Communications & Newsletters
- Member Rights & Responsibilities
- Contact Information
- Health Insurance Portability and Accountability Act (HIPAA)



Find the Provider Website at www.MolinaHealthcare.com.

Provider Manual Highlights

Benefits & Covered Services	Interpreter Services
Behavioral Health	MCG for Cite Guideline Transparency
Claims & Compensation	Compliance and Fraud, Waste & Abuse
Member Grievance & Appeals	Member Rights & Responsibilities
Credentialing & Recredentialing	Preventive Health Guidelines
Delegation Oversight	Provider Responsibilities
Enrollment, Eligibility, Disenrollment	Quality Improvement
Health Care Services	Transportation Services
Provider Information Update Form for Data Accuracy	Utilization Management, Referral, and Authorization
Managed Long Term Services & Support	Pharmacy
HIPAA	Contact Information

Find the Provider Manual on our Provider Website at www.MolinaHealthcare.com.

Provider Manuals are specific to each line of business.

Resources

Molina has designated email addresses based on provider types to help get your questions answered more efficiently or to connect you to training opportunities.

- Behavioral Health questions:
BHProviderServices@MolinaHealthcare.com
- Hospital or hospital-affiliated physician group questions:
OHProvider.ServicesHospital@MolinaHealthcare.com
- MyCare Ohio LTSS and Ancillary questions:
OHMyCareLTSS@MolinaHealthcare.com
- Nursing Facilities questions:
OHProviderServicesNF@MolinaHealthcare.com
- Physician practice questions:
OHProviderServicesPhysician@MolinaHealthcare.com
- General questions:
OHProviderRelations@MolinaHealthcare.com

