P2P Scheduling Tool QRG

MOLINA HEALTHCARE

Purpose: To provide a high-level overview of the Molina P2P Scheduling Tool.

Step 1. Go to molinahealthcare.com/providers/wi/medicaid/schedulerform.

Step 2: Answer 3 questions to populate the template.

Note: If the request does not meet requirements for a P2P, a message will populate instructing you to follow the appeals process.

Step 3: Complete all required template fields.

Here are some tips to complete the form appropriately:

- **Provide 2-3 dates and times** to assist with scheduling the P2P.
- Enter your **direct** phone number and email to ensure seamless and timely P2P scheduling .
- Include your **professional designation**.
- Include **your relationship to the case**. If you are a third party, include the name of the third party company.
- Enter the **patient DOB** as 2-digit month, 2-digit day and 2-digit year.

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Welcome to Molina Healthcare Peer-to-Peer Online Scheduling

The online P2P Scheduling Tool is currently only for Medicaid Medical P2P Review Requests, not Advanced Imaging, Behavioral Health, or Pharmacy.
"For Advanced Imaging, Behavioral Health or Pharmacy peer-to peer scheduling, please follow the instructions in your denial letter."
To complete a peer-to-peer request, you will need the following information:
- Requester name and contact information
- Provider name, NPI and contact information
- Patient date of birth and authorization number
- Provider availability

(*) Indicates a required field.

Is this a Molina Medicaid member?   ◉ Yes ○ No

Has it been more than 5 business days since you received the denial?   ◉ Yes ○ No

Have you started the appeal process for this denial?   ○ Yes ◉ No

> Peer-to-peer reviews must be requested within 5 business days of receiving a denial letter and before starting the appeal process. Please follow up with the appeals department. To submit a post service dispute use Molina's provider portal.

Requester Information

*Requester First Name:

*Requester Last Name:

*Requester Phone Number:

Requester Cell Phone Number:

*Requester Email:

Step 3: Click "Submit" at the bottom.

Provider Information

*National Provider Identification (NPI):

*NPI Category:

*Provider First Name:

*Provider Last Name:

*Provider Professional Designation:

*Provider Relationship to the case:

If Third-Party Reviewer, Name of Company:

*Provider Group Facility/Name:

*Provider Direct Phone Number:

Provider Cell Phone, if different than "direct" phone number:

*Provider Email Address:

Patient and Authorization Information

*Patient Date of Birth: mm/dd/yyyy

*Authorization Number:

Provider Availability

Dates/Times Available for Peer to Peer (Please provide 2-3 options)

Please provide available times, M-F, between 10am and 4pm cst. Please do not schedule same day as request.

*1. Date/Time   mm/dd/yyyy --:-- --

*2. Date/Time   mm/dd/yyyy --:-- --

3. Date/Time   mm/dd/yyyy --:-- --

☐ By submitting my information via this form, I consent to having Molina Healthcare collect my personal information. I understand and agree that my information will be used and shared in accordance with Molina Healthcare's Privacy Policy Terms of Use.

Submit

Peer-to- Peer Confirmation: You will receive web confirmation immediately upon completing the form. Within 15 minutes of completing the form, you will also receive an email confirmation. *Note: While the confirmation states to allow two business days for a response, Molina strives to respond in one business day or less.*	**Request for Peer-to-Peer Review Confirmation** Molina Healthcare has received your request for a peer-to-peer review. The requester will receive an email when the peer-to-peer is scheduled. This is your confirmation, you will not receive an immediate email. Please allow 2 business days for a response, please do not resubmit your request as this could cause a delay in scheduling. Please call Molina Healthcare at (855) 326-5059 if you have not received an email after 2 business days. Confirmation Number aba88d5b-c083-4dd4 *Authorization Number 123456789 **MOLINA HEALTHCARE** This e-mail serves as an acknowledgement that your Peer-to-Peer Inquiry has been received on *9-25-25*. Your inquiry Confirmation number is *0d7f28cd-8f38-4681*. Authorization number related to inquiry is *1234567891200145884*. We have started to review your request for a Peer-to-Peer call with a Molina Medical Director. The *requestor* will receive an email communication when the Peer-to-Peer is scheduled or if we need more information to setup your Peer-to-Peer call. If your case does not fall within the criteria for a Peer-to-Peer Review you will receive a fax update to the original fax number indicating why your request could not be processed and a return email communication to the *requestor*, please see Molina guidelines below for criteria needed to successfully schedule a Peer-to-Peer call: • *The request is for a Molina Medicaid member* • *The date of request is 5 Business Days or less from notification of denial* • *The request is not an Administrate denial* Please do not submit multiple cases for same inquiry as this will delay our ability to respond in a timely manner. Please allow 2 business days for a response, please do not resubmit your request as this could cause a delay in scheduling. Please call Molina Healthcare at (855) 326-5059 if you have not received an email after 2 business days. This Peer-to-Peer inquiry is a request to schedule a meeting, this inquiry does not guarantee you a Peer-to-Peer meeting. This is not a formal request for an appeal, for appeal rights please review your denial letter and follow the appeal filing step Thank you, Molina Healthcare

Process Request	**What happens next:**
	• Molina staff will review the request for accuracy and P2P criteria.
	• If the request does not meet our criteria, Molina staff will inform you, via email, to follow the appeals process.
	• If the request meets our criteria, Molina staff will:
	    o Send an email to you confirming the meeting date/time.
	    o Add the P2P meeting to the Molina Medical Director's calendar.
	    o Add a clinical note with P2P details and appropriate attributes.