
KIDMED Claims Timely Filing Policy Change

POLICY UPDATE: Claims for KIDMED (EPSDT) screening services must be submitted within one year from the date of service. This policy for the timely filing of KIDMED screening claims (electronic and paper) has changed from the previous requirement of submission of KIDMED claims within 60 days from date of service.

KIDMED claims that are not received for processing within the 60 day time period will continue to receive the EOB edit 435 as a reminder to the provider that the claims should be submitted within 60 days; however the claim will not deny for this reason.

Providers should strive to continue to submit KIDMED claims within 60 days in order for the claims to be adjudicated, and paid claims to be reflected on the RS-O-07 series of reports. In addition, the periodicity rate utilized in KIDMED monitoring may be affected unfavorably if claims are not routinely submitted for processing within 60 days from date of service.

Contact Molina Medicaid Solutions Provider Relations at (800) 473-2783 or (225) 924-5040 should you have any questions.