

Provider Quick Reference Guide

About Senior Whole Health by Molina HealthCare

Senior Whole Health by Molina Healthcare provides healthcare benefits and services, and help with daily activities, to Medicaid-eligible adults aged 21 years or older who are also eligible for long-term care.

Important numbers

Department name	Telephone number	Fax number	Hours of operation	Email address
Senior Whole Health Member Services	(877) 353-0185 Hearing Impaired (TTY/TDD 711)	(855) 818-4870	Monday-Friday 8:00 AM- 8:00 PM	SWHNY-Info@MolinaHealthCare.com
Senior Whole Health Behavioral Health - Care Management	Senior Whole Health NHC (HMO D-SNP) product: (877) 353-9819 Medicare Complete Care product: (877) 635-3101			Medicare_CM_Team@molinahealthcare.com
Senior Whole Health Clinical Services	(877) 635-3101	(877) 818-4871		SWHNY-ClinicalCoord@MolinaHealthCare.com
Senior Whole Health Pharmacy	NHC (HMO D-SNP) Product (877) 353-9819 Medicare Complete Care product (877) 353-9819			Pharmacy services are covered through CVS. A list of in-network pharmacies is available on the MolinaHealthcare.com website, or by contacting Senior Whole Health.
Senior Whole Health Claims	(877) 353-9819			
Senior Whole Health Provider Relations	(877) 353-9819			

Senior Whole Health Vendors

Dental Care	DentaQuest	(855) 343-4272	dentaquest.com
Vision Services	Superior Vision Provider Relations Department	(877) 235-5317	https://superiorvision.com/
Transportation	Modivcare	(855) 558-1638	

Obtaining Prior Authorizations:

To obtain prior authorization, complete all sections of the Standard Prior Authorization Request Form and fax it to (855) 818-4871. After referral or authorization are approved, Senior Whole Health will send written confirmation to the specialist or facility in writing via mail or fax. Non-participating specialists or facilities can check the status of a referral or authorization by calling (877) 635-3101.

Submitting claims:

Providers can submit medical claims one of three ways.

Type	Format	Submit to
EDI-Professional claims	HIPPA-Complaint 837-p format	EDI Payer ID: SWHNY
Paper	CMS-1500 or UB-04	Senior Whole Health of New York by Molina PO Box 22637 Long Beach, CA 90801
Paper-Claims requiring additional documentation	CMS-1500 or UB-04 and any additional documentation	Senior Whole Health of New York by Molina PO Box 22637 Long Beach, CA 90801

EDI Clearinghouse:
Availity Essentials portal
[Availity.com](https://www.availity.com)
(800) 282-4548

Online resources:

The following resources are available online at [swhnyproviders.com](https://www.swhnyproviders.com) for providers:

- Information on how to join the Senior Whole Health by Molina HealthCare network
- Provider update form
- Prior authorization form
- Provider manual
- Important Senior Whole Health by Molina HealthCare notices including alerts and coverage updates

Questions?

We are here to help you, so you can focus on your patients. Please email Provider Relations at SWHNY-ProviderRel-NY@MolinaHealthCare.com and your provider representative will contact you.