

# Provider Bulletin

Molina Healthcare of California

[molinahealthcare.com/members/ca/en-us/health-care-professionals/home.aspx](https://molinahealthcare.com/members/ca/en-us/health-care-professionals/home.aspx)

July 22, 2025

- ☐ Imperial
- ☒ Riverside
- ☒ San Bernardino
- ☒ Los Angeles
- ☐ Orange
- ☒ Sacramento
- ☒ San Diego

## Federally Qualified Health Centers (FQHC) Encounters

This is an advisory notification to Molina Healthcare of California (MHC) network providers applicable to the Medi-Cal lines of business.

### What you need to know:

Molina requires all Providers/Practitioners and delegated entities to submit Encounter Data reflecting the care and services provided to our Members. This policy applies to all Primary Care Practitioners (PCPs), contracted either directly with Molina or through an IPA/Medical Group and delegated entities required to submit capitated encounters.

Providers contracted directly with Molina have the option to submit individual encounters through our SSI clearinghouse using a different payer ID than claims, which will appear as paid and be forwarded to the state.

If a Clearinghouse is used to process your electronic Encounters or Claims to Molina, please ensure that your contracted Clearinghouse uses the correct Payer ID for the type of EDI transactions (FFS Claims vs. Encounter):

- FFS Claims Payer ID: 38333
- Encounters Payer ID: 33373

Alternatively, Providers contracted directly with Molina can collaborate with us to submit encounters via 837X through our Secure File Transfer Protocol (SFTP) sites, though this method requires additional setup time.

For Providers contracted through an IPA/Medical Group or delegated entity, the expectation is for the Provider to send their claims/encounters to their contracted IPA/Medical Group or delegated entity. The IPA/Medical Group or delegated entity will then submit the data directly to Molina on the Provider's behalf.

## Provider Action

Please see the **Medi-Cal Provider Manual** for more information:

[molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2025-CA-MEDI-CAL-PROVIDER-MANUAL.pdf](https://molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2025-CA-MEDI-CAL-PROVIDER-MANUAL.pdf)



## **What if you need assistance?**

If you have any questions regarding the notification, please contact your Molina Provider Relations Representative below.

<b>Service County Area</b>	<b>Provider Relations Representative</b>	<b>Contact Number</b>	<b>Email Address</b>
Los Angeles County	Clemente Arias Elias Gomez Anita White	562-233-1753 562-723-9760 310-654-4832	<a href="mailto:Clemente.Arias@molinahealthcare.com">Clemente.Arias@molinahealthcare.com</a> <a href="mailto:Elias.Gomez@molinahealthcare.com">Elias.Gomez@molinahealthcare.com</a> <a href="mailto:Princess.White@molinahealthcare.com">Princess.White@molinahealthcare.com</a>
Los Angeles / Orange County	Maria Guimoye	562-783-0005	<a href="mailto:Maria.Guimoye@molinahealthcare.com">Maria.Guimoye@molinahealthcare.com</a>
Sacramento County	Johonna Eshalomi	916-268-1418	<a href="mailto:Johonna.Eshalomi@molinahealthcare.com">Johonna.Eshalomi@molinahealthcare.com</a>
San Bernardino County	Luana McIver	909-454-4247	<a href="mailto:Luana.Mciver@molinahealthcare.com">Luana.Mciver@molinahealthcare.com</a>
San Bernardino / Riverside County	Vanessa Lomeli	909-419-3026	<a href="mailto:Vanessa.Lomeli2@molinahealthcare.com">Vanessa.Lomeli2@molinahealthcare.com</a>
Riverside County	Patricia Melendez	951-447-7585	<a href="mailto:Patricia.Melendez@molinahealthcare.com">Patricia.Melendez@molinahealthcare.com</a>
San Diego / Imperial County	Lincoln Watkins Tan Do Rita Weldy	619-972-9860 858-287-4869 619-403-7773	<a href="mailto:Lincoln.Watkins@molinahealthcare.com">Lincoln.Watkins@molinahealthcare.com</a> <a href="mailto:Tan.Do@molinahealthcare.com">Tan.Do@molinahealthcare.com</a> <a href="mailto:Rita.Weldy@molinahealthcare.com">Rita.Weldy@molinahealthcare.com</a>

<b>California Facilities (Hospitals, SNFs, CBAS, ICF/DD &amp; ASC Providers)</b>	<b>Facility Representative</b>	<b>Contact Number</b>	<b>Email Address</b>
Los Angeles County	Laura Gonzalez, Manager	562-325-0368	<a href="mailto:Laura.Gonzalez3@molinahealthcare.com">Laura.Gonzalez3@molinahealthcare.com</a>
Imperial Riverside San Bernardino San Diego Sacramento	Laura Gonzalez, Manager  MiMi Howard	562-325-0368  562-455-3754	<a href="mailto:Laura.Gonzalez3@molinahealthcare.com">Laura.Gonzalez3@molinahealthcare.com</a>  <a href="mailto:Smimi.Howard@molinahealthcare.com">Smimi.Howard@molinahealthcare.com</a>

If you are not contracted with Molina and your fax number is not shared with a contracted provider, and you wish to opt out of receiving the MHC Provider Bulletin, please email [mhcproviderbulletin@molinahealthcare.com](mailto:mhcproviderbulletin@molinahealthcare.com).

Please include the provider's name, NPI, county, and fax number, and you will be removed within 30 days.

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