MOLINA HEALTHCARE

THIS CA UPDATE HAS BEEN SENT TO THE FOLLOWING:

COUNTIES:

☒ Imperial
☒ Riverside/San Bernardino
☒ Los Angeles
☒ Orange
☒ Sacramento
☒ San Diego

LINES OF BUSINESS:

☒ Molina Medi-Cal Managed Care
☒ Molina Medicare Options Plus
☒ Molina Dual Options Cal MediConnect Plan (Medicare-Medicaid Plan)
☒ Molina Marketplace (Covered CA)

PROVIDER TYPES:

☐ **Medical Group/ IPA/MSO**
  Primary Care
☐ IPA/MSO
☐ Directs
  Specialists
☐ Directs
☐ IPA
☒ **Hospitals**
  Ancillary
☐ CBAS
☐ SNF/LTC
☐ DME
☐ Home Health
☐ Other

FOR QUESTIONS CALL PROVIDER SERVICES:
(855) 322-4075, Extension:

Los Angeles/Orange Counties
X111113   X123017
X127657   X120104

Riverside/San Bernardino Counties
X127684   X128010
X120618

Sacramento County
X126232   X121360

San Diego County
X121805   X121401
X127709   X121413
X123006   X120630

Imperial County
X125682   X125666

MOLINA HEALTHCARE NOTIFICATION PROCESS – BULLETIN #3

This is an advisory notification to Molina Healthcare of California (MHC) network providers.

Molina Healthcare of California ("MHC") has been notified that in at least one instance, an MHC contracted provider has mis-keyed our fax number in submitting required forms to us. This has resulted in a misdirected fax. Please note, fax numbers must be checked prior to transmission of Protected Health Information ("PHI") via fax.

We appreciate your efforts in protecting the privacy of your patients and our members by using appropriate safeguards when faxing PHI in order to help ensure that patient PHI is sent to the correct location.

MHC requires notification of a member which has been seen in the Emergency Department (ED), placed under Observation Status, or admitted as an Inpatient.

When an MHC member presents to the ED, a facility faxed face sheet notification is requested, and a phone call notification is no longer required.

Emergency Department ("ED") Notification Face Sheet Fax: (877) 665-4625

MHC requires notification of all inpatient admissions of MHC members within twenty-four (24) hours of admission or by the close of the next business day when admissions occur on the weekends.

Inpatient Admissions/Observation Status Fax: (866) 553-9263

For eligibility questions, such as Primary Care Provider, IPA, or effective date, please utilize the resources below:

Provider Portal available at www.molinahealthcare.com

Member Services:

- Medi-Cal Member Services
    - Toll Free: (888) 665-4621 TTY/TDD: 711
    - 7:00 a.m. - 7:00 p.m. Monday to Friday
- Medicare Member Services
    - Toll Free: (800) 665-0898 TTY/TDD: 711
    - 8:00 a.m. - 8:00 p.m. daily local time
- Cal MediConnect Member Services
    - Toll Free: (855) 665-4627 TTY/TDD: 711
    - 8:00 a.m. - 8:00 p.m. Monday to Friday
- Cal Marketplace Member Services
    - Toll Free: (888) 858-2150 TTY/TDD: 711
    - 8:00 a.m. - 8:00 p.m. Monday to Friday
    - 8:00 a.m. - 6:00 p.m. Saturday

After Hours Eligibility:

- Please call the Nurse Advice Line at (888) 275-8750

QUESTIONS

If you have any questions regarding the notification, please contact your Molina Provider Services Representative at (855) 322-4075. Please refer to the extensions on page one.