

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
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San Diego County

X121805	X121401
X127709	X121413
X123006	X120630

Imperial County

X125682	X125666
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CONTRACT EXPIRATION: GOLDEN SHORE MEDICAL GROUP

This is an advisory notification to Molina Healthcare of California (MHC) network providers regarding MHC's contract expires with Golden Shore Medical Group (GSMG) effective January 31, 2019.

When available, members will retain their existing PCP under another contracted IPA affiliation. All other previously assigned GSMG members will be transitioned to a new PCP to ensure continued access to care. All IPA and PCP changes will be effective February 1, 2019.

If a member wishes to change their PCP, please direct them to log on to their My Molina and follow the instructions or call Member Services:

Medi-Cal: (888) 665-4621

Marketplace: (888) 858-2150

Medicare: (800) 665-0898

Duals: (855) 665-4627

Please note: You may have also received a Provider Update from Health Net of California. Please follow the information in this Just the Fax for all of your assigned MHC membership. For Medi-Cal members enrolled with MHC in Los Angeles County, members must contact Health Net's Member Services department at (800) 675-6110 if they wish to change their PCP.

If a member arrives at a participating provider's office to receive care, please verify the member's eligibility through: Molina's Provider Portal, Eligibility List file, or MHC Member Services. A member must not be denied services because his/her name does not appear on the eligibility roster.

MEMBERS ASSIGNED TO PARTICIPATING PHYSICIAN GROUPS

IPAs are requested to follow the existing process with regard to medical management, prior authorization requests, claims submission, and continuity of care services. There are no changes as a result of this notification.

CONTINUITY OF CARE

Under certain circumstances, members may be able to continue treatment with an out of network provider for a given period of time. The standards for continuity of care have not changed. Providers or members may contact the Member Services Department to arrange for continuity of care:

Medi-Cal: (888) 665-4621

Marketplace: (888) 858-2150

Medicare: (800) 665-0898

Duals: (855) 665-4627

PRIOR AUTHORIZATION

New requests will be directed to the member's new provider group or to Molina if they are assigned to a directly contracted provider. Providers are required to adhere to MHC's prior authorization requirements and request prior authorization from MHC. MHC's prior authorization guide and code matrix can be found in the "Forms" section of the provider website.

CLAIMS PROCESSING

Claims with a date of service prior to 1/31/19 should be submitted directly to Golden Shore Medical Group. For dates of service 2/1/19 and after, claims should be submitted to the new medical group.

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.