

Provider Bulletin

Molina Healthcare of California

molinahealthcare.com/members/ca/en-us/health-care-professionals/home.aspx

February 14, 2025

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

2025 Encounter Data Validation & Medical Record Collection

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

What you need to know:

Dear Practitioners & Office Managers:

MHC has been selected by the California Department of Health Care Services (DHCS) to conduct a medical record review for calendar year 2023 to evaluate the encounter data completeness.

As part of this review process Molina will request supporting documentation for the enrollment transactions selected within the monthly Encounter Data Validation (EDV) sample set.

DHCS requires each note to be fully legible, signed, credentialed and dated. Health Services Advisory Group (HSAG) will review the records you provide to make sure they meet these requirements.

When this is happening:

MHC, with your assistance, will facilitate a validation by collecting and compiling medical record data. Beginning **February 17, 2025**, MHC staff will contact you to arrange a convenient method of collecting the required medical record information.

Provider Action

To provide adequate time and prepare the requested information, a member list with required medical record information will be provided and communicated to you. We welcome you to send records fast, quick, and secure by utilizing our Secure Email: MHCHEDISDepartment@MolinaHealthcare.Com.

MHC can also coordinate site visits to access medical records as well, please contact us at **1-562-380-3376**.

As a reminder, providers must follow all HIPAA, State, and Plan contractual requirements when submitting member records that contain PHI electronically via email.

We appreciate your cooperation and professional courtesy to Molina Healthcare Quality Improvement staff, as they begin this year's medical record review process.

Thank you for your assistance in this effort and for your continued work to improve the health of our members and communities.

Sincerely,

Molina Healthcare of California

Quality Improvement Department



What if you need assistance?

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

Service County Area	Provider Relations Representative	Contact Number	Email Address
Los Angeles County	Clemente Arias	562-517-1014	Clemente.Arias@molinahealthcare.com
	Daniel Amirian	562-549-4809	Daniel.Amirian@molinahealthcare.com
	Anita White	562-980-3947	Princess.White@molinahealthcare.com
	Elias Gomez	562-517-0445	Elias.Gomez@molinahealthcare.com
Los Angeles / Orange County	Maria Guimoye	562-549-4390	Maria.Guimoye@molinahealthcare.com
Sacramento County	Johonna Eshalomi	279-895-9354	Johonna.Eshalomi@molinahealthcare.com
San Bernardino County	Luana McIver	909-501-3314	Luana.Mciver@molinahealthcare.com
San Bernardino / Riverside County	Vanessa Lomeli	909-577-4355	Vanessa.Lomeli2@molinahealthcare.com
Riverside County	Patricia Melendez	562-549-3957	Patricia.Melendez@molinahealthcare.com
San Diego / Imperial County	Salvador Perez	562-549-3825	Salvador.Perez@molinahealthcare.com
	Lincoln Watkins	858-300-7722	Lincoln.Watkins@molinahealthcare.com
	Toree Johnson	858-974-1726	Toree.Johnson@molinahealthcare.com

California Facilities (Hospitals, SNFs, CBAS, ICF/DD & ASC Providers)	Facility Representative	Contact Number	Email Address
San Diego & Sacramento, California Facilities	Dolores Ramos	562-549-4900	Dolores.Ramos@molinahealthcare.com
Los Angeles, California Facilities	Laura Gonzalez	562-549-4887	Laura.Gonzalez3@molinahealthcare.com
Riverside & San Bernardino, California Facilities	Mimi Howard	562-549-3532	Smimi.Howard@molinahealthcare.com

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.

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