Provider Bulletin

Molina Healthcare of California molinahealthcare.com/members/ca/en-us/health-careprofessionals/home.aspx

May 28, 2025

Important Provider Communication: Reinstatement of PCS Form Requirement Effective June 1, 2025

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

What you need to know:

In support of communities affected by the fires earlier this year, Molina temporarily waived the requirement for Physician Certification Statements (PCS) forms for transportation services.

Effective June 1, 2025, the PCS form requirement will be reinstated.

To avoid any disruptions to services, providers should begin assisting members now with the completion and submission of PCS forms.

Transportation Services for Molina Medi-Cal Members

American Logistics is the transportation manager for all Molina California Medi-Cal members. They are dedicated to providing reliable, accessible transportation through a simple scheduling process.

If a member lacks access to transportation for a Medi-Cal covered appointment, American Logistics can help. **Trips must be scheduled at least 48 hours in advance.**

How to Schedule a Ride:

- **By Phone:** Call the Molina Medi-Cal Transportation Line at (844) 292-2688
- Online: Visit molina.americanlogistics.com

When this is happening:

Effective June 1, 2025.

Imperial
Riverside
San Bernardino
Los Angeles
Orange
Sacramento
San Diego

Provider Action

PCS Form Requirement Details

A PCS Form is required for the following modes of transportation:

- Car or Van with Door-to-Door/Driver Assistance
- Wheelchair Accessible Van (Ramp or Lift)
- Stretcher/Gurney/Litter Van
- Non-Emergency Ambulance Services (NEMT)

Note: NEMT services will not be scheduled without a completed PCS form after June 1, 2025.

How to Submit a PCS Form:

- Online Submission:
 <u>molina.americanlogistics.com/pcs</u>
- Fax: (877) 282-8441
- Email: molinafax@americanlogistics.com

Need Assistance?

Molina Healthcare General Line: (888) 665-4621

For Medical Providers Only:

- Provider Line: (888) 808-2206
- Hospital Discharge Staff Line: (844) 420-0257
- Email:

molina_support@americanlogistics.



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	562-233-1753	Clemente.Arias@molinahealthcare.com
	Daniel Amirian	747-331-0150	Daniel.Amirian@molinahealthcare.com
	Elias Gomez	562-723-9760	Elias.Gomez@molinahealthcare.com
Los Angeles / Orange County	Maria Guimoye	562-783-0005	Maria.Guimoye@molinahealthcare.com
Sacramento County	Johonna Eshalomi	916-268-1418	Johonna.Eshalomi@molinahealthcare.com
San Bernardino County	Luana McIver	909-454-4247	Luana.Mciver@molinahealthcare.com
San Bernardino / Riverside County	Vanessa Lomeli	909-419-3026	Vanessa.Lomeli2@molinahealthcare.com
Riverside County	Patricia Melendez	951-447-7585	Patricia.Melendez@molinahealthcare.com
San Diego / Imperial County	Lincoln Watkins	619-972-9860	Lincoln.Watkins@molinahealthcare.com
	Tan Do	858-287-4869	Tan.Do@molinahealthcare.com

California Facilities (Hospitals, SNFs, CBAS, ICF/DD & ASC Providers)	Facility Representative	Contact Number	Email Address
Facilities Manager, Los Angeles	Laura Gonzalez	562-325-0368	Laura.Gonzalez3@molinahealthcare.com
San Diego, Sacramento & Imperial Facilities	Dolores Garcia	619-980-7984	Dolores.Garcia@molinahealthcare.com
Riverside & San Bernardino Facilities	MiMi Howard	562-455-3754	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.