

# 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)

September 9, 2024

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

## Informational Bulletin Regarding Emergency Declaration – San Bernardino County Line Fire

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

### **What you need to know:**

On September 7, 2024, California Governor Gavin Newsom proclaimed a State of Emergency in San Bernardino County to support the response to the Line Fire.

The Governor’s proclamation is available at: [gov.ca.gov/wp-content/uploads/2024/09/2024.09.07.SOE-Line-Fire.FINAL\\_.pdf](https://gov.ca.gov/wp-content/uploads/2024/09/2024.09.07.SOE-Line-Fire.FINAL_.pdf)

This notification is meant to provide a summary of those declarations and information that Molina Healthcare is sharing with our internal and external partners for communication.

## Provider Action

Molina’s 1st priority is safety for our communities – our members, our providers, and our employees. Molina wants to ensure that members needing care or medication in impacted areas can get help.

In that regard, members should call the Nurse Advice line, which is available 24/7 to guide members to urgent care, emergency rooms, or pharmacies nearby: (888) 275-8750 English; (866) 648-3537 Spanish; 711 Hearing Impaired.

Molina will be monitoring this matter closely and providing further communication as needed.

To view the State of Emergency in full, please visit: [gov.ca.gov/2024/09/07/governor-newsom-proclaims-state-of-emergency-in-san-bernardino-county-secures-federal-assistance-to-support-response-to-line-fire/](https://gov.ca.gov/2024/09/07/governor-newsom-proclaims-state-of-emergency-in-san-bernardino-county-secures-federal-assistance-to-support-response-to-line-fire/)



## **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>
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<b>California Facilities (Hospitals, SNFs, CBAS, ICF/DD &amp; ASC Providers)</b>	<b>Facility Representative</b>	<b>Contact Number</b>	<b>Email Address</b>
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If you are not contracted with Molina and wish to opt out of the MHC Provider Bulletin, 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.