

Provider Bulletin

Molina Healthcare of California

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July 24, 2025

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Alert: Medicare Fraud Scheme Involving Phishing Fax Requests

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

What you need to know:

The Centers for Medicare & Medicaid Services (CMS), in collaboration with the Investigations Medicare Drug Integrity Contractor (I-MEDIC), have become aware of a scheme to obtain patient records through fax requests.

CMS has been made aware of faxes sent to providers demanding all patient information and medical records for Medicare patients. These requests include verbiage demanding information within a 72-hour deadline. These demand requests appear to include CMS headers for authenticity. Other examples include a header for National Archives and Records Administration (NARA).

CMS reminds providers that medical record reviews requested by CMS or their contractors will identify specific Medicare beneficiaries, time periods, and encounters or prescription drug event records involved. These requests also provide ample time (typically 30- 45 days) for response.

Medicare medical reviews are requested through an Additional Documentation Request (ADR) and are outlined in Title 42 of the Code of Federal Regulations (CFR), Part 405, Subpart I.

Provider Action

No provider action required.



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 Elias Gomez Anita White	562-233-1753 562-723-9760 310-654-4832	Clemente.Arias@molinahealthcare.com Elias.Gomez@molinahealthcare.com Princess.White@molinahealthcare.com
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San Diego / Imperial County	Tan Do Rita Weldy Brigitte Maldonado	858-287-4869 619-403-7773 760-421-1466	Tan.Do@molinahealthcare.com Rita.Weldy@molinahealthcare.com Brigitte.Maldonado@MolinaHealthcare.com

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

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