Provider Bulletin

Molina Healthcare of California

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March 29, 2024

⊠ Riverside

Emergency Department Support Unit (EDSU) Post Stabilization 24/7 Fax and Telephonic Process EDSU fax number (877) 665-4625 EDSU telephone number (844) 966-5462

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

What you need to know:

WHAT'S NEW:

- For FAX and TELEPHONIC 30-MINUTE POST STABILIZATION REQUESTS ONLY, the EDSU fax number (877) 665-4625 and telephone number (844) 966-5462 MUST be utilized for ED admissions requiring an inpatient determination within 30 minutes.
- All clinical information necessary to make an inpatient determination must to be available at the time the facility contacts Molina's EDSU either by fax or telephonically requesting a 30-Minute Post Stabilization clinical review for an Inpatient Level of Care Admission.

WHAT'S NOT CHANGING:

- The Standard Admission notifications process- Inpatient Fax Number: (866) 553-9263.
- Molina's UM response to Standard Inpatient Admission notifications received by fax will be processed within 24 hours.
- The Non-Par Admission process will remain unchanged.

Provider Action

For any questions, please contact the EDSU at: (844) 966-5462.

FAQ:

- What do I have to do differently if my facility doesn't expect a response & determination within 30 minutes:
 - Nothing Fax the admission request to the Inpatient Fax Line.
 - Inpatient Fax Line: (866) 553-9263
 - Admissions will be processed within
 24 hours as per current Molina
 process.
- What if a response and determination is needed within 30 minutes?
 - Fax or contact the EDSU telephonically:

Fax: (877) 665-4625

Telephone: (844) 966-5462

- All clinical information available to support an inpatient admission determination must be included in the fax or on hand at the time of contacting the EDSU telephonically.
- Faxed or telephonic requests without sufficient clinical information to support medical necessity for inpatient may be subject to nonapproval.



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
California Hospital Systems (SNFs, LTSS, ICF/DD)	Teresa Suarez Laura Gonzalez	562-549-3782 562-549-4887	Teresa.Suarez2@molinahealthcare.com Laura.Gonzalez3@molinahealthcare.com
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