

Provider Bulletin



Molina Healthcare of California & Central Health Medicare Plan

molinahealthcare.com/members/ca/en-us/health-care-professionals/home.aspx
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July 30, 2026

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Home health claims processing: Notice of admission (NOA) compliance

This is an advisory notification to Molina Healthcare of California (MHC) and Central Health Medicare Plan (CHP) network providers applicable to the Medicare line of business.

What you need to know:

Dear Provider,

This notification is to inform you that home health claims are processed in accordance with CMS guidelines outlined in MLN Matters Article MM12256, which established the notice of admission (NOA) submission requirements effective January 1, 2022.

Under these requirements:

- **A one-time NOA submission is required to establish the home health period of care and must be on file prior to billing claims.**
- **The NOA must be submitted within five (5) calendar days of the start of care date.**
- **Claims are processed for payment only after a valid NOA is received and must align with the established episode of care.**
- **Failure to submit a timely NOA may result in payment reductions or claim impact in accordance with CMS policy.**

Please be advised effective November 1, 2026, that claims submitted without a valid NOA, or outside of required timeframes, will be processed in accordance with these CMS guidelines and may be subject to denial, reduction or adjustment.

Provider action

We encourage your organization to review internal billing processes to ensure compliance with these requirements and to avoid any disruption in claims processing.

If you have questions or need assistance, please contact your Molina Provider Relations representative below.

Thank you for your continued partnership and commitment to compliant billing practices.

What if you need assistance?

If you have any questions regarding the notification, please contact your Molina Provider Relations Representative below or your CHP Provider Relations Representative at PRCalifornia@molinahealthcare.com.

Service County Area	Provider Relations Representative	Contact Number	Email Address
Los Angeles	Clemente Arias Elias Gomez Velma Castillo Anita White	562-233-1753 562-723-9760 626-721-3089 310-654-4832	Clemente.Arias@molinahealthcare.com Elias.Gomez@molinahealthcare.com Velma.Castillo@molinahealthcare.com Princess.White@molinahealthcare.com
Los Angeles / Orange	Maria Guimoye	562-783-0005	Maria.Guimoye@molinahealthcare.com
Sacramento	Johonna Eshalomi Zuleyma Neal	916-268-1418 510-421-8057	Johonna.Eshalomi@molinahealthcare.com Zuleyma.Neal@molinahealthcare.com
San Bernardino	Luana McIver	909-454-4247	Luana.Mciver@molinahealthcare.com
San Bernardino / Riverside	Vanessa Lomeli	909-419-3026	Vanessa.Lomeli2@molinahealthcare.com
Riverside	Patricia Melendez	951-447-7585	Patricia.Melendez@molinahealthcare.com
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Imperial	Cynthia Bustamante	619-693-0404	Cynthia.Bustamante@molinahealthcare.com

California Facilities (Hospitals, SNFs, CBAS, ICF/DD & ASC Providers)	Facility Representative	Contact Number	Email Address
Los Angeles	Laura Gonzalez	562-325-0368	Laura.Gonzalez3@molinahealthcare.com
San Diego	Brittney Aguilar	916-216-9882	Brittney.Aguilar@molinahealthcare.com
Imperial, Riverside, San Bernardino, Sacramento	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.

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