



Pregnancy Notification

Molina Healthcare of Illinois (Molina) offers many programs to supplement the care you provide to your patients.

Please help your patients take advantage of all the incentives and resources we have to offer by notifying us as soon as possible when you have diagnosed a pregnancy.

Contact options include:

- Phone (855) 687-7861
- Fax this form OR an office equivalent form with required information to (844) 479-5341;
- Email required information to us [secure] at Quality-HealthCampaigns@MolinaHealthcare.com.

Member's Name*:

Member's DOB*:

Phone #*: ()

Address*:

City*:

State:

Zip*:

Estimated Date of Delivery (EDD):

Provider's Name:

Provider's Address:

Provider City:

Provider State:

Provider Zip:

Provider's Phone Number: ()

*Required information