FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* BATTISTE JOSEPHINE M						2. Issuer Name and Ticker or Trading Symbol MOLINA HEALTHCARE INC [MOH]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title V Other (specify				
(Last) (First) (Middle) 2277 FAIR OAKS BOULEVARD SUITE 440					3. Date of Earliest Transaction (Month/Day/Year) 03/15/2007											belov	v) `	X below	v)`
(Street) SACRAMENTO CA 95825 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				ay/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa	action	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				l and Secu Bene Own		ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	` .	Repor Transa (Instr.	ted action(s) 3 and 4)		(Instr. 4)
Common Stock ⁽¹⁾				03/15/2007					J ⁽²⁾		374,426		D	\$0) (2)	44,856		D	
Common Stock ⁽¹⁾				03/15	03/15/2007				J ⁽²⁾		374,426		A	\$0) (2)	428,845		I	Interest in Trust ⁽³⁾
Common	Stock ⁽¹⁾															4	1,956	I	Interest in Trust ⁽⁴⁾
Common Stock ⁽¹⁾															1!	54,652	I	Interest in Trust ⁽⁵⁾	
Common Stock ⁽¹⁾														14,681		D ⁽⁶⁾			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any	cution Date, TO Conth Property Service 19 Conth/Day/Year) 8		nsaction de (Instr.		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exercis on Date Day/Ye	sable and	7. T Am Sec Und Der Sec and	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4) Amount or Numbor Title Shares		8. Prio Derive Secur (Instr.	ative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- 1. The reporting person, Josephine M. Battiste, formerly reported under the name Josephine M. Molina.
- $2. \ The shares were transferred without consideration from Josephine M. \ Molina (a/k/a \ Battiste) to the Josephine M. \ Battiste Separate Property Trust.$
- 3. The shares are owned by the Josephine M. Battiste Separate Property Trust, of which Ms. Battiste is trustee and beneficiary.
- 4. The shares are owned by the Molina Children's Trust for Josephine M. Molina (1997), of which Ms. Molina is a co-trustee and beneficiary.
- 5. The shares are owned by the Josephine M. Molina Trust (1995), of which Ms. Molina is a co-trustee and beneficiary.
- 6. The shares are owned by Josephine M. Molina and her spouse as community property.

Remarks:

/s/ Josephine M. Battiste, by Karen Calhoun, Attornev-in-

03/15/2007

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.