FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

OMB APPROVAL							
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1. Name and Address of Reporting Person* Barlow Jeff D. (Last) (First) (Middle) 300 UNIVERSITY AVENUE SUITE 100		'n*	2. Issuer Name and Ticker or Trading Symbol <u>MOLINA HEALTHCARE INC</u> [MOH]		tionship of Reporting Per all applicable) Director	on(s) to Issuer 10% Owner	
		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 11/13/2017	X	Officer (give title below) Chief Legal C	Other (specify below) Officer	
(Street) SACRAMENTC (City)	CA (State)	95825 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	ridual or Joint/Group Filin Form filed by One Rep Form filed by More tha Person	orting Person	

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock	11/13/2017		S ⁽¹⁾		5,000	D	\$76.8178 ⁽²⁾	50,220 ⁽³⁾⁽⁴⁾	D	

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. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		Secu Acqu (A) or Dispo of (D)	Expiration Date (Month/Day/Year) uired or iosed)) , 3, 4		Amount of			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The sale was made pursuant to Reporting Person's Rule 10b5-1 Trading Plan that was established on September 5, 2017.

2. Represents the weighted average selling price with a selling price range between \$76.59 to \$77.02.

3. The shares vest as follows: (i) 9,474 shares shall vest in one-third increments over three years, on each of March 1, 2018, March 1, 2019, and March 1, 2020; (ii) 3,132 shares shall vest based on the Company's 2017 after tax profit margin; (iii) 3,132 shares shall vest based on the Company's 2018 after tax profit margin; (iv) 3,132 shares shall vest based upon the Company's 2017 STARS ratings; (v) 4,698 shares shall vest upon the Company's achievement of certain business development targets; (vi) 6,263 shares shall vest in two increments on each of March 7, 2018 and March 7, 2019; continued

4. (vii) 1,885 shares shall vest based on the Company's 2017 annual premium revenue achievement; (viii) 1,885 shares shall vest based on the Company's 2017 net profit margin achievement; (ix) 1,885 shares shall vest based on pre-tax income in fiscal year 2017; (x) 1,885 shares shall vest upon the Company's achieving a three-year Total Stockholder Return (TSR) for the three-year period ending December 31, 2017 as determined by ISS calculations that is greater than the median TSR achieved by the Company's 2015 ISS peer group; and (xi) 1,885 shares shall vest on April 1, 2018; the remainder of the shares are vested.

Remarks:

Jeff D. Barlow

11/13/2017

** 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.