Molina Healthcare / Molina Medicare of California
Prior Authorization/Pre-Service Review Guide
Effective: 04/01/2013

This Prior Authorization/Pre-Service Guide applies to all Molina Healthcare/Molina Medicare Members (excluding LIHP Members)

*****Referrals to Network Specialists do not require Prior Authorization*****

Authorization required for services listed below.
Pre-Service Review is required for elective services.

Only covered services will be paid

New 2013 Prior Authorization Requirements for Medi-Cal (excluding LIHP) and Medicare

- **All Non-Par providers/services:** services, including office visits, provided by non-participating providers, facilities and labs, except professional services for ER visit, approved Ambulatory Surgical Center or inpatient stay (except for Women's health/OB services in CA, WA, and MI). ER visits do not require PA
- **All Inpatient Admissions:** Acute hospital, SNF, Rehab, LTACS, Hospice requires notification only
- **Behavioral Health: Mental Health, Alcohol and Chemical Dependency Services: -** Inpatient, Partial hospitalization, Day Treatment, Intensive Outpatient Programs (IOP), ECT, and > 20 Office Visits/year for adults and children
- **Cardiac Rehabilitation, Pulmonary Rehabilitation, and CORF (Comprehensive Outpatient Rehab Facility services for Medicare only)**
- **CBAS Services**
- **Chiropractic Services**
- **Cosmetic, Plastic and Reconstructive Procedures in any setting:** which are not usually covered benefits include but are not limited to tattoo removal, collagen injections, rhinoplasty, otoplasty, scar revision, keloid treatments, and surgical repair of gynecomastia, pectus deformity, mammoplasty, abdominoplasty, venous injections, vein ligation, venous ablation or dermabrasion, botox injections, etc.
- **Dental General Anesthesia:** > 7 years old or per state benefit (Not a Medicare covered benefit)
- **Dialysis:** notification only
- **Diapers (not a Medicare covered benefit), Incontinence products**
- **Imaging:** CT, MRI, MRA, PET, SPECT, Cardiac Nuclear Studies, CT Angiograms, intimal media thickness testing, three dimensional imaging
- **LTC Services – (Currently Not a CA State Benefit) e.g., Personal Attendant Services (PAS), Personal Care Services. Not a Medicare covered benefit**
- **Neuropsychological and Psychological Testing and Therapy**
- **Occupational Therapy after initial eval plus 6 visits for outpatient setting and initial eval plus 3 visits for home setting.**
- **Office-Based Surgical Procedures do not require auth except for Podiatry Surgical Procedures** (Routine Foot Care may be covered on members with systemic illnesses causing peripheral neuropathy).
- **Outpatient Hospital/Ambulatory Surgery Center (ASC) Procedures:** refer to the attached Prior Authorization exceptions listing**
- **Pain Management Procedures:** including sympathectomies, neurotomies, injections, infusions, blocks, pumps or implants, and acupuncture (Not a Medicare covered benefit)
- **Physical Therapy after initial eval plus 6 visits for outpatient setting and initial eval plus 3 visits for home setting**
- **Pregnancy and Delivery:** notification only
- **Sleep Studies**
- **Speech Therapy**
- **All Specialty Pharmacy including, but not**

- **Durable Medical Equipment/Orthotics/Prosthetics:**
  - >$500 allowed amount per line item
  - All C-PAP and Bi-PAP
  - All Orthopedic footwear/orthotics/foot inserts
  - All customized orthotics, prosthetics, wheelchairs and braces
  - Hearing Aids – including anchored hearing aids
    Medicare Hearing Supplemental benefit: Contact Avesis at 800-327-4462
- **Enteral Formulas & Nutritional Supplements**
- **Experimental/Investigational Procedures**
- **Genetic Counseling and Testing NOT related to pregnancy**
- **Home Healthcare: after 3 skilled nursing visits**
- **Home Infusion**
- **Outpatient Hospice and Palliative Care:** notification only (Not a Medicare benefit)

limited to: Hemophilia drugs, Enbrel, Lupron, Remicade, Avonex, Interferon, Xolair, Humira, Raptiva, Amevive, Synagis, Synvisc, growth hormone, monoclonal antibody, genomic preparations, etc. (except for specific state regulatory requirements)

- **Solid Organ and Bone Marrow Transplant Services:** including the evaluation (except Cornea transplants)
- **Transportation:** non-emergent ground and air ambulance
- **Unlisted CPT and miscellaneous codes >$500 billed charges per line item**
- **Wound Therapy including Wound Vacs and Hyperbaric Wound Therapy**

Please do not send request for Prior Authorization to Molina that do not require our review and approval.

IMPORTANT INFORMATION FOR MOLINA HEALTHCARE/MOLINA MEDICARE

Information generally required to support authorization decision making includes:

- Current (up to 6 months), adequate patient history related to the requested services.
- Relevant physical examination that addresses the problem.
- Relevant lab or radiology results to support the request (including previous MRI, CT Lab or X-ray report/results)
- Relevant specialty consultation notes.
- Any other information or data specific to the request.

***Please note that all of your referrals must be pointed to contracted / participating practitioners and providers and in accordance with your contract, Provider Manual, notices, and Molina policies and procedures. All claims received for non-contracted / non-participating providers or practitioners without an authorization will be denied**

The Urgent / Expedited service request designation should only be used if the treatment is required to prevent serious deterioration in the member's health or could jeopardize the enrollee's ability to regain maximum function. Requests outside of this definition will be handled as routine / non-urgent.

All member cases with a potential CCS diagnosis must be referred to CCS paneled practioners and / or facilities. Referrals to non-CCS paneled providers may result in delays in claim payment.

- If a request for services is denied, the requesting provider and the member will receive a letter explaining the reason for the denial and additional information regarding the grievance and appeals process. Denials also are communicated to the provider by telephone or fax. Verbal and fax denials are given within one business day of making the denial decision, or sooner if required by the member's condition. Providers can request a copy of the criteria used to review requests for medical services.
- MHC has a full-time Medical Director available to discuss medical necessity decisions with the requesting physician at (800) 526-8196

Important Molina Healthcare/Molina Medicare Information	
Medi-Cal Prior Authorizations: 8:30 a.m. – 5:30 p.m. **Phone: 800-526-8196 PA Queue X126400** **Fax: 800-811-4804**	**Medicare - Member Customer Service:** **Phone: 800-665-0898** **TTY/TDD: 711**
Medicare Prior Authorization: **Phone: 800-526-8196 PA Queue X129105** **Fax: 866-472-0596**	**Provider Customer Service: 7:00 a.m. – 7:00 p.m.** **Monday – Friday Phone: 888-665-4621** **Fax: 562-901-9632**
Radiology (Imaging) Authorizations – All products: **Phone: 800-526-8196 X150841** **Fax Number: 877-731-7218** **Peer to Peer Line: 877-901-8180**	**24 Hour Nurse Advice Line** **English: 1 (888) 275-8750 [TTY: 1-866/735-2929]** **Spanish: 1 (866) 648-3537 [TTY: 1-866/833-4703]**
Medi-Cal Pharmacy Authorizations: 8:30 a.m. – 5:00p.m. **Phone: 888-665-4621 Fax: 866-508-6445**	**Medi-Cal Vision Care: March Vision Services** **Phone: (888) 493-4070**
Medicare Pharmacy Authorizations: **Phone: 800-665-0898 Fax: 866-290-1309** **OTC - Caremark**	**Medi-Cal Dental Care: Denti-Cal** **Phone: (800) 322-6384** **Hearing Impaired (TTY): (800) 735-2922**
Behavioral Health Authorizations – All products: **Phone: 800-526-8196 X 126400 Fax: 866-472-0596**	**Medicare Vision: Avesis C.S.** **Phone: 800-327-4462 TTY / TDD: 711**
Transplant Authorizations – All products: **Phone: 888-562-5442 X150841 Fax: 877- 731- 7218**	**Medicare Dental: Avesis Phone: 855-214-6779**
Medi-Cal Member Customer Service Benefits / Eligibility: **Phone: 888-665-4621** **Fax: 562-901-9632** **TTY/TDD: 800-479-3310**	**Medicare Hearing Coverage: Avesis** **Phone: 800-327-4462 TTY / TDD: 711** **Medicare Non-emergency transportation coverage:** **Logisticare Solutions, LLC Phone: 866-475-5423** **Facility Provider Line: 866-383-4152** **Provider Fax: 888-589-6164**

Providers may utilize Molina Healthcare's ePortal at: www.molinahealthcare.com. Available features include:

- **Authorization submission and status**
- **Claims submission and status** (EDI only)
- **Nurse Advice Line Report**
- **Download Frequently used forms**
- **Member Eligibility**
- **Provider Directory**

Outpatient Hospital/Ambulatory Surgery Center (ASC) - PA Exceptions Listing

***** The following procedure codes do NOT require PA if performed in a participating ASC or Outpatient Hospital setting:**

10021	11601	12034	15321	19112	21310	21490	23605	24675	26080	27230	27552	28003	29015
10022	11602	12035	15330	19120	21315	21495	23615	24685	26320	27232	27556	28190	29020
10040	11603	12036	15331	19125	21320	21497	23616	25040	26340	27235	27557	28192	29025
10061	11604	12037	15335	19126	21325	21501	23620	25065	26600	27236	27558	28193	29035
10080	11605	12041	15336	19290	21330	21502	23625	25066	26605	27238	27560	28400	29040
10081	11606	12042	15340	19291	21335	21510	23630	25259	26607	27240	27562	28405	29044
10120	11620	12044	15341	19295	21336	21550	23650	25500	26608	27244	27566	28406	29046
10121	11621	12045	15360	19297	21337	21555	23655	25505	26615	27245	27570	28415	29049
10140	11622	12046	15361	19298	21338	21556	23660	25515	26641	27246	27603	28420	29055
10160	11623	12047	15365	20005	21339	21750	23665	25520	26645	27248	27604	28430	29058
10180	11624	12051	15366	20100	21340	21800	23670	25525	26650	27250	27613	28435	29065
11000	11626	12052	15420	20101	21343	21805	23675	25526	26665	27252	27614	28436	29075
11001	11640	12053	15421	20102	21344	21810	23680	25530	26670	27253	27630	28445	29085
11004	11641	12054	15430	20103	21345	21820	23700	25535	26675	27254	27750	28446	29086
11005	11642	12055	15852	20150	21346	21825	23930	25545	26676	27256	27752	28450	29105
11006	11643	12056	15860	20200	21347	21920	23931	25560	26685	27257	27756	28455	29125
11008	11644	12057	16000	20205	21348	21925	23935	25565	26686	27258	27758	28456	29126
11010	11646	13100	16035	20206	21355	21930	24006	25574	26700	27259	27759	28465	29130
11011	11719	13101	16036	20220	21356	22010	24065	25575	26705	27265	27760	28470	29131
11012	11720	13102	17000	20225	21360	22015	24066	25600	26706	27266	27762	28475	29200
11045	11721	13120	17003	20240	21365	22305	24075	25605	26715	27267	27766	28476	29240
11046	11730	13121	17260	20245	21366	22310	24076	25606	26720	27268	27767	28485	29260
11047	11732	13122	17261	20250	21385	22315	24077	25607	26725	27269	27768	28490	29280
11055	11740	13131	17262	20251	21386	22318	24500	25608	26727	27275	27769	28495	29305
11056	11750	13132	17263	20500	21387	22319	24505	25609	26735	27301	27780	28496	29325
11057	11752	13133	17264	20501	21390	22325	24515	25622	26740	27303	27781	28505	29345
11308	11755	13150	17266	20520	21395	22326	24516	25624	26742	27323	27784	28510	29355
11313	11760	13151	17270	20525	21400	22327	24530	25628	26746	27324	27786	28515	29358
11400	11762	13152	17271	20526	21401	22328	24535	25630	26750	27372	27788	28525	29365
11401	11765	13153	17272	20527	21406	23000	24538	25635	26755	27500	27792	28530	29405
11402	11770	13160	17273	20550	21407	23030	24545	25645	26756	27501	27808	28531	29425
11403	11771	15040	17274	20551	21408	23031	24546	25650	26765	27502	27810	28540	29435
11404	11772	15110	17276	20552	21421	23065	24560	25651	26770	27503	27814	28545	29440
11406	11976	15111	17280	20553	21422	23066	24565	25652	26775	27506	27816	28546	29445
11420	11980	15115	17281	20600	21423	23075	24566	25660	26776	27507	27818	28555	29450
11421	11982	15116	17282	20605	21431	23076	24575	25670	26785	27508	27822	28570	29505
11422	12001	15130	17283	20610	21432	23330	24576	25671	27040	27509	27823	28575	29515
11423	12002	15131	17284	20612	21433	23331	24577	25675	27041	27510	27824	28576	29520
11424	12004	15135	17286	20615	21435	23500	24579	25676	27086	27511	27825	28585	29530
11426	12005	15136	17311	20650	21436	23505	24582	25680	27087	27513	27826	28600	29540
11440	12006	15150	17312	20660	21440	23515	24586	25685	27193	27514	27827	28605	29550
11441	12007	15151	17313	20661	21445	23520	24587	25690	27194	27516	27828	28606	29580
11442	12011	15152	17314	20662	21450	23525	24600	25695	27200	27517	27829	28615	29581
11443	12013	15155	17315	20663	21451	23530	24605	26010	27202	27519	27830	28630	29590
11444	12014	15156	19000	20664	21452	23532	24615	26011	27215	27520	27831	28635	29700
11446	12015	15157	19001	20665	21453	23540	24620	26020	27216	27524	27832	28636	29705
11450	12016	15170	19020	20670	21454	23545	24635	26025	27217	27530	27840	28645	29710
11451	12017	15171	19030	20680	21461	23550	24640	26030	27218	27532	27842	28660	29715
11462	12018	15175	19100	20690	21462	23552	24650	26034	27220	27535	27846	28665	29720
11463	12020	15176	19101	20692	21465	23570	24655	26035	27222	27536	27848	28666	29730
11470	12021	15300	19102	20693	21470	23575	24665	26037	27226	27538	27860	28675	29740
11471	12031	15301	19103	20694	21480	23585	24666	26070	27227	27540	28001	29000	29750
11600	12032	15320	19110	21073	21485	23600	24670	26075	27228	27550	28002	29010	30000
30020	31529	32561	36556	38300	42320	43232	44373	45335	46930	49525	51100	52330	54640

30100	31530	32562	36557	38305	42330	43234	44376	45337	46940	49540	51101	52332	54692
30110	31531	33215	36558	38308	42335	43235	44377	45338	46942	49550	51102	52334	54700
30115	31535	33284	36560	38500	42340	43236	44378	45339	46945	49553	51600	52341	54800
30117	31536	36000	36561	38505	42400	43237	44379	45340	46946	49555	51605	52342	54830
30118	31540	36002	36563	38510	42405	43238	44380	45341	46947	49557	51610	52343	54840
30120	31541	36005	36565	38520	42408	43239	44382	45342	47000	49560	51700	52344	54860
30124	31545	36010	36566	38525	42409	43240	44383	45345	47010	49561	51701	52345	54861
30125	31546	36011	36568	38530	42410	43241	44385	45355	47011	49565	51702	52346	54865
30130	31560	36012	36569	38790	42425	43242	44386	45378	47350	49566	51703	52351	55100
30140	31561	36013	36570	38792	42550	43243	44388	45379	47360	49568	51705	52352	55110
30150	31570	36014	36571	38794	42600	43244	44389	45380	47361	49570	51710	52353	55120
30160	31571	36015	36576	38900	42650	43245	44390	45381	47362	49572	51715	52354	55150
30200	31575	36100	36578	40490	42660	43246	44391	45382	47500	49580	51720	52355	55175
30210	31576	36120	36580	40650	42665	43247	44392	45383	47505	49582	51725	52400	55180
30220	31577	36140	36581	40652	42700	43248	44393	45384	47550	49585	51726	52402	55200
30300	31578	36147	36582	40654	42720	43249	44394	45385	47552	49587	51727	52450	55250
30310	31579	36148	36584	40800	42725	43250	44397	45386	47553	49590	51728	52500	55300
30320	31603	36160	36589	40801	42800	43251	44355	45387	47554	49600	51729	52601	55450
30801	31615	36200	36590	40804	42802	43255	44378	45391	47555	49605	51736	52630	55520
30802	31620	36215	36591	40805	42804	43256	44379	45392	47556	49606	51741	52640	55700
30901	31622	36216	36592	40806	42806	43257	44380	45520	47562	49610	51784	52647	55705
30903	31623	36217	36593	40808	42808	43258	44381	45900	47563	49611	51785	52648	55706
30905	31624	36218	36595	40810	42809	43259	44382	45905	47564	49650	51792	52700	55720
30906	31625	36221	36596	40812	42810	43260	44383	45910	48102	49651	51797	53040	55725
30930	31626	36222	36597	40814	42815	43261	44384	45915	49021	49652	51798	53060	55920
31000	31627	36223	36598	40816	42820	43262	44385	45990	49041	49653	52000	53080	56405
31231	31628	36224	36600	40818	42821	43263	44386	46020	49061	49654	52001	53085	56420
31233	31629	36225	36620	40820	42825	43264	44387	46030	49080	49655	52005	53200	56440
31235	31630	36226	36625	40830	42826	43265	44391	46040	49081	49656	52007	53446	56441
31237	31631	36227	36640	40831	42830	43267	44392	46045	49320	49657	52010	53600	56442
31238	31632	36228	36660	41000	42831	43268	44500	46050	49400	50021	52204	53601	56501
31239	31633	36245	36680	41005	42835	43269	44705	46060	49411	50200	52214	53605	56515
31240	31635	36246	36831	41006	42836	43271	44900	46070	49412	50382	52224	53620	56605
31254	31636	36247	36832	41007	42842	43272	44901	46080	49418	50384	52234	53621	56606
31255	31637	36248	36833	41008	42844	43273	44950	46083	49419	50385	52235	53660	56700
31256	31638	36260	37184	41009	42845	43450	44955	46220	49422	50386	52240	53661	56740
31267	31640	36261	37185	41015	42900	43453	44960	46221	49423	50390	52250	54000	56820
31276	31641	36262	37186	41016	42960	43456	44970	46230	49424	50391	52260	54001	56821
31287	31643	36400	37187	41017	42961	43458	45000	46320	49427	50392	52265	54015	57000
31288	31645	36405	37188	41018	42962	43460	45005	46500	49440	50393	52270	54050	57010
31290	31646	36406	37195	41019	42970	43752	45020	46600	49441	50394	52275	54055	57020
31291	31656	36410	37200	41100	43020	43753	45100	46604	49442	50395	52276	54056	57022
31292	31715	36420	37201	41105	43030	43754	45300	46606	49446	50396	52277	54057	57023
31293	31717	36425	37202	41108	43045	43755	45303	46608	49450	50398	52281	54060	57061
31294	31720	36430	37203	41110	43200	43756	45305	46610	49451	50684	52282	54065	57065
31500	31725	36440	37204	41112	43201	43757	45307	46611	49452	50686	52283	54100	57100
31502	31730	36450	37205	41113	43202	43760	45308	46612	49460	50688	52285	54105	57105
31505	32400	36455	37206	41114	43204	43761	45309	46614	49465	50690	52290	54163	57130
31510	32402	36500	37207	41116	43205	44100	45315	46615	49491	50951	52300	54164	57135
31511	32405	36510	37208	41250	43215	44360	45317	46706	49492	50953	52301	54200	57150
31512	32420	36511	37209	41251	43216	44361	45320	46707	49495	50955	52305	54220	57160
31513	32421	36512	37215	41252	43217	44363	45321	46754	49496	50957	52310	54230	57170
31515	32422	36513	37216	41500	43219	44364	45327	46900	49500	50961	52315	54231	57180
31520	32550	36514	37609	41510	43220	44365	45330	46910	49501	50970	52317	54235	57200
31525	32551	36515	38200	41520	43226	44366	45331	46916	49505	50972	52318	54240	57210
31526	32552	36516	38206	42000	43227	44369	45332	46917	49507	50974	52320	54450	57220
31527	32553	36522	38220	42100	43228	44370	45333	46922	49520	50976	52325	54500	57267
31528	32560	36555	38221	42310	43231	44372	45334	46924	49521	50980	52327	54505	57310

57311	58301	59151	61120	65290	66155	67710	68520	69400
57320	58340	59160	61140	65400	66160	67715	68525	69401
57400	58555	59200	61150	65410	66165	67810	68530	69405
57410	58558	59300	61151	65420	66170	67820	68540	69420
57415	58559	59320	61154	65426	66172	67825	68550	69421
57420	58562	59412	61156	65430	66820	67830	68705	69424
57421	58565	59414	61210	65435	66821	67835	68720	69433
57423	58600	59425	61215	65436	66830	67840	68745	69436
57452	58605	59426	61250	65450	66982	67850	68750	69440
57454	58611	59430	61253	65600	66983	67875	68760	69450
57455	58615	59812	61316	65800	66984	67880	68761	69540
57456	58670	59820	62270	65805	66990	67882	68770	69610
57460	58671	59821	62272	65810	67005	67930	68801	69620
57461	59000	59830	62273	65815	67010	67935	68810	69631
57500	59001	59870	64795	65820	67015	67938	68811	69632
57505	59012	59871	65205	65850	67025	68020	68815	69633
57510	59015	60000	65210	65855	67028	68040	68816	69635
57511	59020	60100	65220	65860	67030	68100	68840	69636
57513	59025	60300	65222	65865	67031	68110	68850	69637
57520	59030	61000	65235	65870	67036	68115	69000	69641
57522	59050	61001	65260	65875	67039	68130	69005	69642
58100	59051	61020	65265	65880	67041	68135	69020	69643
58110	59120	61026	65270	65900	67042	68200	69100	69644
58120	59121	61050	65272	65920	67043	68400	69105	69645
58300	59130	61055	65273	65930	67415	68420	69200	69646
not	59135	61070	65275	66020	67500	68440	69205	69990
covered	59136	61105	65280	66030	67505	68500	69210	
for	59140	61107	65285	66130	67515	68505	69220	
Medicare	59150	61108	65286	66150	67700	68510	69222	

NOTE: The following radiology codes are associated with Cardiovascular Intra-Arterial/Intra-Aortic Catheter surgical procedures & do not require PA. They are included for clarification. Radiology codes requiring PA are listed under the Imaging category.

75600	75733	93456
75605	75736	93457
75625	75741	93458
75630	75743	93459
75658	75746	93460
75705	75756	93461
75710	75774	93462
75716	75791	93463
75716	93451	93464
75722	93452	93530
75724	93453	93531
75726	93454	93532
75731	93455	93533