



Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

Prior Authorization Change Effective October 1, 2022 (Medicaid)

Effective October 1, 2022, requirements for Prior Authorization (PA) with Molina Healthcare of Washington will change for the below CPT and HCPCS codes. This change affects our **Apple Health and IMC line of business and does not apply to Marketplace members**. A separate blast fax will be sent that details changes to the Marketplace line of business. Below is a list of codes that will be changing from No PA Required to PA Required.

MEDICAID CODES REQUIRING PA 10/1/2022										
K0013	E2402	Q4166	Q4167	Q4168	Q4169	Q4170	Q4171	Q4173	Q4174	Q4175
Q4205	Q4206	Q4208	Q4209	Q4210	Q4211	Q4212	Q4213	Q4214	Q4215	Q4216
Q4217	Q4218	Q4219	Q4220	Q4221	Q4222	Q4229	Q4232	Q4237	Q4238	Q4239
Q4247	Q4248	Q4100	Q4101	Q4102	Q4103	Q4104	Q4105	Q4106	Q4107	Q4108
Q4110	Q4111	Q4115	Q4116	Q4117	Q4121	Q4122	Q4123	Q4124	Q4126	Q4127
Q4128	Q4132	Q4133	Q4134	Q4135	Q4136	Q4137	Q4138	Q4139	Q4140	Q4141
Q4143	Q4146	Q4147	Q4148	Q4149	Q4150	Q4151	Q4152	Q4153	Q4154	Q4156
Q4157	Q4158	Q4159	Q4160							

Molina will require a PA for both participating and non-participating providers for claims submitted for services rendered in all settings.

Clinical notes are required for review and approval of your authorization request. Submitting clinical notes along with the PA is recommended to receive a timely and accurate decision. If a PA is required for a requested service, please fax your authorization request to Molina at (800) 767-7188.

PA forms can be found on our provider website at MolinaHealthcare.com/providers/wa/Medicaid/forms/fuf.aspx

Our goal is to provide you with excellent customer service. If you have any questions or concerns, please contact your Provider Services Representative at (855) 322-4082, Monday through Friday, between 8 a.m. and 5 p.m.

Thank you for your continued service to your Molina members.