



Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

Prior Authorization Change Effective July 1, 2023 (Medicaid)

Effective July 1, 2023, 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.

DME Codes Going to PA Required:

E0470 E0471 E0472 K0005

Code Going to NO PA Required ****Please Follow HCA Guidelines****:

95165

Genetic Counseling & Testing Codes Going to NO PA Required ****Please Follow HCA Guidelines****:

81105	81106	81107	81108	81109	81110	81111	81112	81178
81179	81180	81181	81183	81192	81221	81284	81343	81344
81347	81363	83006	88373					

When Prior Authorization is required, 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 request 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:

- Medicaid: 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.