

Molina Healthcare of Nebraska, Provider Notice

Medicaid Prior Authorization (PA) Code Changes

Effective October 1, 2025

Molina Healthcare of Nebraska, Inc. is updating the Prior Authorization (PA) Code requirements for October 1, 2025. This notice is for informational purposes only and does not determine if the benefit is covered under the member's plan.

The following codes are being updated:

Behavioral/Mental Health, Alcohol-Chemical Dependency	
PA Required	
H2015, H2017, H2033, H2034, T2033	
Cosmetic, Plastic & Reconstructive Procedures	
PA Required	
11950, 11951, 11952, 11954, 15772, 15774, 21208, 21209, 21210, 27656, 31750, 57295	
Durable Medical Equipment (DME) and Orthotics/Prosthetics	
PA Required	
B9002, E0170, E0221, E0250, E0290, E0445, E0482, E0500, E0550, E0575, E0617, E0635, E0636, E0745, E0781, E0791, E0912, E1037, E1050, E1060, E1070, E1083, E1084, E1087, E1088, E1092, E1093, E1100, E1110, E1150, E1170, E1171, E1172, E1180, E1190, E1195, E1200, E1223, E1224, E1240, E1240, E1270, E1280, E1295, E1406, E1800, E1801, E1802, E1805, E1806, E1810, E1811, E1812, E1815, E1816, E1825, E1830, E1840, E1841, E2100, E2228, K0003, E0006, K0007, L0112, L0456, L0457, L0458, L0460, L0464, L0488, L0491, L0631, L0635, L0638, L0639, L0648, L0651, L0810, L0820, L0830, L0859, L1300, L1310, L1686, L1690, L1843, L1845, L1932, L1951, L2132, L2134, L2136, L2510, L3201, L3202, L3203, L3204, L3206, L3207, L3671, L3730, L3740, L3765, L3766, L3905, L3960, L3961, L3962, L3967, L3971, L3973, L3975, L3976, L3977, L3978, L4000, L4020, L5010, L5020, L5400, L5645, L5647, L5673, L5716, L5790, L5811, L5818, L5950, L5960, L5962, L6350, L6380, L6382, L6384, L6694, L6714, L6915, L8035, L8040, L8041, L8042, L8043, L8044, L8045, L8046, L8047, L8619, L8683, L8684, L8691, S9001, T4521, T4522, T4523, T4524, T4525, T4526, T4527, T4528, T4529, T4530, T4531, T4532, T4533, T4534, T4535, T4541, T4542, T4543, T4544, T4545, V2629	
L8600 (No PA required when associated with breast cancer diagnosis)	
Health Care Administered Drugs	
PA Required	
PA required for members under 19 years of age—J1000, J1071, J1072, J1380, J1435, J3121, J9217	
PA required for off-label use only—J1050	
Home Health Care Services	
PA Required	
PA required after 12 visits per calendar year for PT/OT/ST – G0151, G0152, G0153	
PA required after initial 6 visits per calendar year for home health—G0156, G0299, G0300, S9122, S9123,	

S9124

Outpatient Hospital/Ambulatory Surgery Center (ASC) Procedures

PA Required

54660

PA required except in the case of fetal demise—59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857, 59866

Physical, Occupational, and Speech Therapy

PA Required

92526—PA required at first visit for Intensive Day Treatment and Outpatient Therapy rendered in pediatric feeding clinics. Otherwise, PA required after evaluation plus first 12 visits of speech therapy per calendar year.

Transportation Services

PA Required

A0888

Advanced imaging authorization requests

Providers are encouraged to submit all requests through the Availity Essentials Portal. Using the portal allows for faster processing, real-time status updates, and reduced administrative burden. If you are unable to use Availity, you may submit a request by fax to (877) 731-7218. **Note:** Obtaining authorization does not guarantee payment. Molina retains the right to review benefit limitations and exclusions, eligibility on the date of the service, correct coding, billing practices, and whether the service was provided in the most appropriate and cost-effective setting of care.

PA process

The process for obtaining PA has **not** changed. Please use the [Availity Essentials Portal](#) (preferred) or complete the Prior Authorization Request Form with all pertinent information and medical notes as applicable. Providers are encouraged to use the [Availity Essentials Portal](#) to submit authorization requests electronically. The standard [PA form](#) is also available on the Molina website and may be submitted by fax to (877) 731-7218.

Convenient tool for PA codes

Providers are encouraged to use Molina's online [PA LookUp Tool](#) to help find the correct codes. It is intended for searches only and should not be used to make determinations about coverage.

The PA Tool is for outpatient services only. All elective inpatient admissions to acute hospitals, Skilled Nursing Facilities (SNF), rehabilitation facilities, or Long-Term Acute Care Hospitals (LTACH) must follow standard Molina Utilization Management (UM) notification and review procedures.

Molina Clinical Policies

Molina's Clinical Policies (MCPs) are accessible at [MolinaClinicalPolicy.com](#).

MCG for cite guideline transparency

Reminder on **the current process** for Advanced Imaging Authorizations: Molina has partnered with MCG Health to implement Cite for Care Guideline Transparency. **You can access this feature through the [Availity Essentials Portal](#).** With MCG for Cite Guideline Transparency, Molina can share clinical indications with providers. The tool operates as a secure extension of Molina's existing MCG investment and helps meet regulations around transparency for care delivery.

Questions?

We're here to help. Contact your dedicated Provider Relations Representative or email the Provider Relations team at NEProviderRelations@MolinaHealthcare.com. To help identify your dedicated Provider Relations Manager, visit the [Contact Us](#) page for Nebraska.