



Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

Prior Authorization Change - Effective August 1, 2020 (Medicaid and Marketplace)

Effective August 1, 2020, requirements for Prior Authorization with Molina Healthcare of Washington will change for CPT Codes 95705, 95706, 95707 as well as HCPCS Codes C9053, C9056, C9058. Changes will affect Medicaid and Marketplace lines of business. Currently, these codes do not require prior authorization. Molina will require submission of a request for both participating and non-participating providers for claims submitted for any place of service (except the emergency room setting). This change applies to dates of service August 1, 2020 and ongoing.

As always, clinical notes are required for review and approval of your authorization request. Submitting the clinical notes along with the prior authorization request is recommended to receive a timely and accurate decision.

If prior authorization is required for a requested service, please fax your authorization requests to Molina at (800) 767-7188.

Forms:

- For our prior authorization forms, please see our provider website at:
https://www.molinahealthcare.com/providers/wa/medicaid/forms/PDF/1324-1912_MHWA_2020_PA_Guide-Request_Form-MEDICAID_508.pdf

Our continued 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 8:00 a.m. and 5:00 p.m.

Thank you for your dedicated service to Molina members.