



Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

Upcoming Drug Policy Changes Effective March 1, 2021 (Medicaid)

In partnership with the Washington State Health Care Authority (HCA), beginning March 1, 2021, Molina Healthcare will be required to implement 8 new drug policies and 7 new corresponding prior authorization forms:

- 23.10.00 – Testosterone
- 21.53.40 – TKI Policy
- 24.00.00 – Gender Dysphoria
- 59.40.00.18 – Vraylar
- 66.27.00 – Cytokine and CAM
- 67.70.10 – CGRP (Acute)
- 67.70.20 – CGRP (Treatment)
- 68.00.00 – Gout

To assist in the prior authorization process, criteria-specific forms for these policies are available for use. To ensure timely processing of your request, please fill out each form completely as needed, and attach supporting documentation.

The new prior authorization forms and our Preferred Drug List can be found here:
MolinaHealthcare.com/providers/wa/medicaid/drug/Pages/formulary.aspx

If you would like more information on the HCA's policies, please visit the policy webpage:
hca.wa.gov/billers-providers-partners/programs-and-services/apple-health-medicaid-drug-coverage-criteria

Thank you for your continued service to Molina members.