

Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

Drug Policies Effective July 1, 2025 (Medicaid)

In partnership with the Washington State Health Care Authority (HCA), beginning July 1, 2025, Molina Healthcare will be required to implement 1 updated drug policy, and 1 revised corresponding prior authorization form:

• 27.17.00 Antidiabetic-GLP-1 Policy

To assist in the prior authorization process, criteria-specific forms for our drug 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: https://www.molinahealthcare.com/providers/wa/medicaid/drug/formulary.aspx

If you would like more information on the HCA's policies, please visit the policy Webpage at: https://www.hca.wa.gov/billers-providers-partners/program-information-providers/apple-health-medicaid-drug-coverage-criteria

Thank you for your continued service to Molina members.

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