



Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

Drug Policies Effective June 1, 2025 (Medicaid)

In partnership with the Washington State Health Care Authority (HCA), beginning June 1, 2025, Molina Healthcare will be required to implement **5 new drug policies, 1 revised policy, 5 new and 1 revised corresponding prior authorization forms:**

30.04.40- Parathyroid Hormone Derivatives

30.04.45- RANKL Inhibitors

30.04.48- Sclerostin Inhibitors

67.70.10 Migraine Agents: Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonists

21.53.10 Oncology Agents- Cyclin Dependent Kinase Inhibitors

30.04.30 Bone Density Regulators- Calcitonins

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.