

Provider Memorandum

In an effort to provide superior service, Molina Healthcare of Illinois (Molina) has revised its prior authorization guidelines. The 2016 Prior Authorization Codification List has updates effective immediately. Another set of updates take **effect July 1, 2016**.

Effective April 1, 2016, a new Prior Authorization Request Form will be used for Molina. An instruction sheet is available to help guide providers and/or staff. Providers may visit the Molina provider website under the Frequently Used Forms section to download the document and instructions.

Please note that in the Home Health Section of the updated Codification List, G0154, now an expired code, has been removed and replaced with G0299 (Direct Skilled Nursing Services of a Registered Nurse), and G0300 (Direct Skilled Nursing Services of a Licensed Practical Nurse). A prior authorization will be required.

Additionally, the following sections have updates that include codes removed effective April 1, 2016.

Code Category	Select Changes Effective April 1, 2016
Home Health	G0154 has been replaced with G0299 and G0300. HFS Fee Schedule has been updated to reflect this change
Specialty Pharmacy Drugs	Molina of Illinois is removing 36 codes from this section. The codes are in relation to various therapeutic classes such as anti-viral and antibodies
Experimental/Investigational	Molina will remove 14 codes from this section
Transplant	Code 47136 removed
DME	Molina will remove the following codes: E0450, E0460, E0461, E0463, E0464
Genetic Testing/Counseling	Molina removed S3854, 81170, 81276, 81288, 81407, S3845, S3846
Unlisted/Miscellaneous	Codes G6021, 20985 removed
Outpatient Hospital/ASC Procedures	Molina is removing 10 codes from this section. The codes are in relation to D&C procedures
Advanced Imaging	Molina is removing 8 codes from this section. These codes will be in relation to MRIs and CT Scans



Prior authorization will not be required for Urgent Care services, whether services are rendered at a Par or Non-Par Urgent Care. The Non-Par section within the Prior Authorization Pre-Service Review Guide also has been updated.

Separately, the Prior Authorization Codification List will be updated on July 1, 2016 to reflect changes to the categories listed in the following chart. These categories will have additional codes that will require a prior authorization, beginning July 1, 2016.

Code Category	Select Changes Effective July 1, 2016
DME	Molina will require authorization for codes being added to this section (these codes will be in relation to hearing aids and home ventilators)
Pain Management	27279, 64461, 64462, 64463 will require authorization
Advanced Imaging	74712, 74713, G0297 will require an authorization
Genetic Counseling	Molina will require authorization for certain codes in relation to Molecular Pathology/Laboratory Procedures
Unlisted Miscellaneous Codes	Additional codes: 36299, 99199, V2797
Specialty Pharmacy Drug Codes	Molina will require an authorization for 45 specialty pharmacy drugs such as Hematological Agents, Metabolic Agents, Passive Immunizing Agents, etc.

If you have questions, please contact the Provider Services department at (630) 203-3965 or at Illinoisproviders@MolinaHealthcare.com.