



Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

Prior Authorization Change Effective April 1, 2020 Marketplace

Effective April 1, 2020, requirements for Prior Authorization with Molina Healthcare of Washington will change for several HCPCS codes. Changes will affect our Marketplace line of business. A separate Blast Fax will be sent regarding Medicaid changes to Prior Authorization requirements.

Currently, the codes noted below 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 April 1, 2020, and ongoing.

MARKETPLACE LINES OF BUSINESS											
PROFESSIONAL-ADMINISTERED MEDICATIONS						RADIATION					
J2085	J0712	J0887	J2407	J2770	J7336	A9606					
DIALYSIS MEDICATIONS						HOME HEALTH					
Q5105	Q5106					S5116					

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/marketplace/forms/PDF/1330-1912_MHWA_2020_PA_Guide-RequestForm-MKTPL_508.pdf

As always, our goal is to provide you with excellent customer service. We will continue our commitment to provide high quality support and services to our provider partners.

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 continued service to Molina Healthcare members.