



Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

Prior Authorization Change Effective July 1, 2022 (Medicaid)

Effective July 1, 2022 requirements for Prior Authorization (PA) with Molina Healthcare of Washington will change for the below CPT and HCPCS codes. This change affects our **Apple Health and IMC line of business and does not apply to Marketplace members**. A separate blast fax will be sent that details changes to the Marketplace line of business. Below is a list of codes that will be changing from No PA Required, to PA Required.

MEDICAID CODES REQUIRING PA 7/1/22				
J9071	C9090	C9091	C9092	C9093
J9359	J0219	J0491	J0879	J9273

Molina will require a PA for both participating and non-participating providers for claims submitted for services rendered in all settings.

Clinical notes are required for review and approval of your authorization request. Submitting clinical notes along with the PA request is recommended to receive a timely and accurate decision. If a PA is required for a requested service, please fax your authorization request to Molina at (800) 767-7188.

PA forms can be found on our provider website at:

- Medicaid: [MolinaHealthcare.com/providers/wa/Medicaid/forms/fuf.aspx](https://www.molinahealthcare.com/providers/wa/Medicaid/forms/fuf.aspx)

Our goal is to provide you with excellent customer service. If you have any questions or concerns, please contact your Provider Services Representative at (855) 322-4082, Monday through Friday, between 8 a.m. and 5 p.m. Thank you for your continued service to Molina members.