

Provider Memorandum

Molina's Prior Authorization (PA) Requirements—Second Quarter, 2022

The codes listed below will **require** Prior Authorization. These changes will be reflected on the Molina Healthcare of Illinois (Molina) Prior Authorization Codification List found on the [Molina provider website](#) on the [Frequently Used Forms](#) page, under Authorization Requests. The downloadable document lists the Current Procedural Terminology (CPT) and Healthcare Common Procedural Coding System (HCPCS) codes that require PA.

Important: This memo only addresses codes **added** to the Codification or Prior Authorization grid. Codes removed from the grid that no longer require Prior Authorization are **not** listed here. Providers are **strongly** encouraged to review all updates regularly and confirm whether a code requires PA.

New Updates to the PA Codes

These tables list codes that will require Prior Authorization effective **April 1, 2022**:

| Health Care Administered Drugs |
|---|
| J0248, J9218: is on codification grid; change will be the following. Update for J9218: Approved to allow one J code unit per calendar year without Prior Authorization. All units in excess of one unit per calendar year require Prior Authorization. |

Advanced Imaging Authorization Requests

Providers are strongly encouraged to submit requests in the [Provider Portal](#). If you are unable to do so, you may submit a request by fax to (877) 731-7218. Use the [Provider Portal](#) to quickly and easily check the status of a request.

Note: Obtaining authorization does **not** guarantee payment. Molina retains the right to review benefit limitations and exclusions, eligibility on the date of the service, correct coding, billing practices, and whether the service was provided in the most appropriate and cost-effective setting of care.

Convenient Tool for PA Codes

As introduced in [this October 2020 provider memorandum](#), Molina has launched a [PA LookUp Tool](#) to help you find the correct codes. It is intended for **searches only** and should **not** be used to make determinations about coverage.

The PA Tool is for outpatient services **only**. All elective inpatient admissions to acute hospitals, Skilled Nursing Facilities (SNF), rehabilitation facilities, or long-term acute care hospitals must follow standard Molina Utilization Management notification and review procedures.

MCG for Cite Guideline Transparency

Molina has partnered with MCG Health to implement Cite for Care Guideline Transparency. You can access this feature through [Molina's Availity Provider Portal](#). With MCG for Cite Guideline Transparency, Molina can share clinical indications with the providers. The tool operates as a secure extension of Molina's existing MCG investment and helps meet regulations around transparency for care delivery.

These guides will show you how to access the MCG feature:

[MCG Quick Reference Guide—Molina's Availity Provider Portal](#).

[MCG Quick Reference Guide—Molina Legacy Provider Portal](#).

Questions?

We're here to help. Contact your Provider Network Manager or email the Provider Network Management team at MHILProviderNetworkManagement@MolinaHealthcare.com. For help identifying your Provider Network Manager, visit [Molina's Service Area](#) page at MolinaHealthcare.com.

Availity Provider Portal

We continue our transition to the Molina Availity Provider Portal, a tool that streamlines your claims management, authorizations, and eligibility/benefit verification. Are you registered yet? [Click here](#).

Get Critical Updates

Receive news and updates about Molina services and plan requirements delivered straight to your inbox. [Click here](#) to join Molina's provider email list.

Note: Molina's website and documents are best viewed in Google Chrome or Microsoft Edge.