

Provider Memorandum

Prior Authorizations Transitioning Back to Molina September 1

Effective September 1, 2021, Prior Authorization (PA) requests and medical coverage appeals that are currently being submitted through eviCore will transition back to Molina Healthcare. This change will apply to all Molina lines of business.

This will impact Prior Authorizations and appeals for the specialized services listed in the table below. Also with this transition, certain codes will no longer require Prior Authorization. Providers should **always** check Molina's online tools to verify PA requirements (see page 2).

Where To Send Authorizations for Services On/After September 1

Prior Authorization requests should be submitted though the <u>Provider Portal</u> or by using the appropriate fax number for the request type, as listed in the <u>Prior Authorization Pre-Service Review Guide</u>. The <u>Portal</u> is the **preferred method**.

Impacted Specialized Service	Molina PA Submission Method	Appeal Submission Method
 Imaging and Special Tests: Advanced Imaging (MRI, CT, PET, Selected Ultrasounds). Cardiac Imaging. 	Provider Portal (Preferred)	Pre-Service* Provider Portal (Preferred)
	Medicaid and MMP Fax (877) 731-7218	Post-Service Provider Portal (Preferred) Fax (855) 502-4962
 Radiation Therapy. Sleep Covered Services and Related Equipment. Molecular and Genomic Testing. 	Provider Portal (Preferred)	Pre-Service* Provider Portal (Preferred)
	Medicaid Fax (877) 731-7218	Fax (855) 502-5128
	MMP Fax (844) 251-1451	Post-Service Provider Portal (Preferred) Fax (855) 502-4962

^{*} Mail (paper) submissions from providers are permitted on behalf of the member for **pre-service requests only**. If using this method, the provider **must** fill out and submit an <u>Authorized Representative form</u>, which can be accessed on the <u>Frequently Used Forms page</u> under the heading <u>Contracting & Provider Forms</u>. Mail to:

Molina Healthcare of Illinois Appeals Coordinator 1520 Kensington Road, Suite 212 Oak Brook, IL 60523 All faxed requests **must** include a completed Prior Authorization Request form found on the <u>Frequently Used Forms page</u> under the heading <u>Authorization Requests</u>.

Molina's Prior Authorization Tools

Learn more about Molina's Prior Authorization requirements, including where to submit PA requests, at MolinaHealthcare.com. The Molina provider website includes the Prior Authorization Pre-Service Review Guide, the downloadable Prior Authorization Codification List for services that require Prior Authorization, and Molina's convenient Prior Authorization LookUp Tool.

Important: Benefits will vary based on the member's coverage and the service being rendered. **Always** check the member's eligibility through the <u>Provider Portal</u> or by calling the Molina Member Services team at **(855) 687-7861**.

Thank you for your ongoing care of Molina members. Questions regarding this transition or Prior Authorization requirements can be directed to your Provider Network Manager or the Provider Network Management team at MHILProviderNetworkManagement@MolinaHealthcare.com.

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? <u>Click here</u> to get started.

Get Critical Updates

Receive news and updates about Molina services and plan requirements delivered straight to your inbox. Join Molina's provider email list. <u>Click here</u> to get started.

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