

Greetings,

In efforts to continue to refine our Utilization Management processes, Molina Healthcare of Iowa, Inc. has made the decision to limit the number of times we ask for clinical information to one time. We will wait twenty-four (24) hours after receipt of the authorization request and initial clinical. Our request for clinical information will include the information we are still needing to complete the review of the request. Should the clinical information we need for review not be received, we will have a Medical Director complete the review. This will likely result in a denial of the requested services. This change will begin 10/1/2024. You can access Molina's Prior Authorization Look Up Tool [here](#).

Currently, for a standard authorization request, Molina makes the determination and provides notification no later than 14 calendar days from the receipt of complete request. Beginning 10/01/2024, Molina will make the determination and provide notification no later than 7 calendar days from the receipt of complete request.

Reminders:

- Please include all clinical information needed when you submit your prior authorization request.
- Prior Authorization Requests that do not include all the clinical information needed to efficiently and effectively make a decision may be denied.
- No Prior Authorization is required when Molina is secondary.

You may reach out to the UM team through our Provider Relations Contact Center by calling (844) 236-1464, 7:30am-6:00pm CST Monday through Friday to assist with:

- Answering your questions
- Provide guidance
- Help schedule a peer-to-peer conversation
- Assist clinical providers navigate our Prior Authorization process

Thank you for your partnership with Molina!

Sincerely,

Molina Healthcare of Iowa, Inc.

www.MolinaHealthcare.com