

# Marketplace Prior Authorization (PA) Code Changes

Effective July 1, 2025

Molina Healthcare of Ohio, Inc., is updating the PA Code requirements for July 1, 2025. This is for notification only and does not determine if the benefit is covered by the member's plan.

The following codes are being updated:

|  | Hyper | baric | & W | ound | Care |
|--|-------|-------|-----|------|------|
|--|-------|-------|-----|------|------|

Add PA

15271, 15275, 15273, 15274, 15277, 15278, 15272, 15276 Q4238, Q4180, A2005, Q4164, Q4194, Q4204, Q4151

#### Durable Medical Equipment (DME)

Add PA

L7406, L6700, L0720, L5827

## Transplant/Gene Therapy

Non-Covered

J3391 - New code for Lenmeldy (gene therapy)

### Healthcare Administered Drugs

Deleted/Invalid Codes & Replacement Codes

Delete C9301 - Replace with Q2058

Delete C9302 - Replace with J9276

Delete C9303 - Replace with J1326

Delete C9304 - Replace with J7172

Delete J9340

# Healthcare Administered Drugs

Add PA

Q5153, J7356, Q5098, Q5100, Q5099

#### Behavioral/Mental Health, Alcohol-Chemical Dependency

Add PA

H0010, H0011

Note: The process for obtaining PA has not changed. Please complete the Molina Healthcare PA Request Form with all pertinent information and medical notes as applicable. The form is available on the Molina Provider Website.

Molina posts new PA Code Change documents to our website quarterly. However, changes can be made between the quarterly updates. Providers should always use our PA Lookup Tool to view the most up-to-date information.