



Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

Prior Authorization Change Effective July 10, 2024 (Medicaid)

Effective July 10, 2024, requirements for Prior Authorization (PA) with Molina Healthcare of Washington will change for the below code. This change affects our **Apple Health and IMC line of business and does not apply to Marketplace members.**

L8614 – COCHLEAR DEVICE INCLUDES ALL INT AND EXT COMPONENTS

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 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

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 8:00 a.m. and 5:00 p.m.

Thank you for your continued service to your Molina members.