

As of Sept. 1, 2021, prior authorization requests and medical coverage appeals for Molina Healthcare members previously submitted through eviCore have transitioned back to Molina. This change applies to all Molina lines of business.

In conjunction with the change noted above, please note that many services no longer require prior authorization. This also applies to all Molina lines of business. Additionally, OB ultrasounds did not previously and do not now require prior authorization. Please refer to the Molina website for a full listing of services requiring authorization.

Service Category	Change/Update for all Molina lines of business
Genetic Counseling & Testing	Removed/No PA Required: 81202 81252 81253 81257 81275 81276 81293 81296 81299 81302 81303 81304 81318 81322 81326 81327 81350 81490 81500 81539
Imaging & Special Tests	Removed/No PA Required: 77021 77022 77078 78012 78013 78014 78015 78016 78018 78070 78071 78072 78075 78102 78103 78104 78140 78185 78195 78201 78202 78215 78216 78226 78227 78230 78231 78232 78258 78261 78262 78264 78265 78266 78278 78290 78291 78300 78305 78306 78315 78414 78428 78445 78456 78457 78458 78579 78580 78582 78597 78598 78600 78601 78605 78606 78610 78630 78635 78645 78650 78660 78700 78701 78707 78708 78709 78725 78740 78761 78800 78801 78802 78803 78804 78830 78831 78832 93303 93304 93306 93307 93308 93312 93313 93314 93315 93316 93317 93350 93351 93451 93452 93453 93454 93455 93456 93457 93458 93459 93460 93461 93530 93531 93532 93533 0501T 0502T 0503T 0504T C8921 C8922 C8923 C8924 C8925 C8926 C8928 C8929 C8930 S8085
Radiation Therapy & Radiosurgery	Removed/No PA Required: 77014 77371 77372 77373 77385 77386 77387 77401 77402 77412 77423 77424 77425 77600 77605 77610 77615 77620 77750 77761 77762 77763 77767 77768 77770 77771 77772 77778 79101 79403 G6001 G6002 G6003 G6004 G6005 G6006 G6007 G6008 G6009 G6010 G6011 G6012 G6013
Sleep Studies	Removed/No PA Required: 95782 95783 A4604 A7027 A7028 A7029 A7030 A7031 A7032 A7033 A7034 A7035 A7036 A7038 A7039 A7044 A7045 A7046 G0398 G0399 G0400

Q3 - Effective 7/1/21 Changes		
Matrix Service Category	Change/Update	LOB
Cardiopulmonary Rehabilitation	PA Required: 93797, 93798, G0422, G0423, G0424, S9472, S9473	Marketplace
Durable Medical Equipment	PA Required: K1014, K1015, K1017, K1018, K1019, K1020	Medicare, Marketplace
Experimental/Investigational	PA Required: 0640T, 0641T, 0642T, 0643T, 0644T, 0645T, 0646T, 0647T, 0648T, 0649T, 0650T, 0651T, 0652T, 0653T, 0654T, 0655T, 0656T, 0657T, 0658T, 0660T, 0661T, 0662T, 0663T, 0664T, 0665T, 0666T, 0667T, 0668T, 0669T, 0670T	Medicare, Marketplace
Healthcare Administered Drugs	PA Required: J1427, J1554, J7402, J9037, J9349	ALL
	PA Required: Q2053, S1091	Medicare, Marketplace
	Remove PA: J3240, J2315, J2354, J2597, J7340, J8498, J1943, J8700, J8520, J7527	ALL

	Remove/Deleted Codes: C9068, C9069, C9070, C9071, C9072, C9073, C9122, J7333, C7401	ALL
Unlisted/Miscellaneous	PA Required: 33999, C1849	ALL

Q4 - Effective 10/1/21 Changes		
Matrix Service Category	Change/Update	LOB
Behavioral/Mental Health/Alcohol-Dependency	PA Required: 80321, 80322, 80325, 80326, 80327, 80328, 80347, 80363, 80364, 80367, 80368, 80369, 80374, 80375, 80376, 80377, 83992, G0659	Medicare/Marketplace
	Update: 0737T, H0046	Medicare
	Update: 90867, 90868, 90869	Medicaid
Durable Medical Equipment	PA Required: E0470, E0471, E0601, E1390, E1391, E0431, E0424, E0443, E0434, E0439, E0441	Medicaid