MCCofAZ.com

Re: Changes to prior authorization requirements

May 26, 2022

Dear Valued Provider:

As part of our effort to ease provider administrative work and ensure our members live healthier lives, we continue to refine our prior authorization (PA) requirements. We do this by adding and removing PA requirements for certain medications and services.

The chart below shows changes with an effective date of July 1, 2022.

Behavioral Health	PA Requirement Removed	S5150 S5151	Respite
Multiple Categories	Addition of codes/PA required	B4149 B4150 B4152 B4153 B4154 B4155 B4157 B4158 B4159 B4160 B4161 B4162 B4164 B4168 B4172 B4176 B4178 B4180 B4185 B4189 B4216 B5000 B5100 B5200 S9433 S9434 S9435	Metabolic Nutrition and Commercial Oral Nutrition

Multiple Categories	Addition of Codes/PA Required	Q5124	New skin substitute codes
Healthcare Administered Drugs	Addition of Codes/PA Required	C9085	
Multiple Categories	Addition of Codes/PA Required	Q5124 J9071	DUR Board Approval
Multiple Categories	NC Codes	A9291, C9090, C9091, C9092, C9093, C9085, C9086, Q4224, Q4225, Q4256, Q4257, Q4258, A2011, A2012, A2013, A4100	Digital behavioral therapy and multiple new skin substitute codes
Healthcare Administered Drugs	Addition of Codes/PA Required	J0219, J0248, J0491, J0879, J9273, J9359	CMS new codes
Unlisted and miscellaneous	PA Update	99202 99203 99204 99205 99211 99212 99213 99214 99215 99217 99218	These CODES REQUIRE PA ONLY WHEN: PROVIDER IS NON PAR and it is not in one of the following POS: 21, 22, 23, 31, 32, 33, 51, 52, 61

		99219	
		99220	
		99221	
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		99226	
		99231	
		99232	
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		99281	
		99282	
		99283	
		99284	
		99285	
		99288	
		99291	
		99292	
Experimental/Investigational	Addition of Codes/PA Required	C9782, C9783	

If you have members on medications or needing services that have been added to this list, please submit a prior authorization request before the member's next appointment or prior to initiating therapy/service. Submit requests to Molina Complete Care (MCC) by faxing a completed prior authorization form to the applicable fax number listed below. You can access the form on the provider pages of our website at www.mccofaz.com.

Service Type	Fax number
Outpatient Medicaid	888-656-7501
Inpatient Medicaid	888-656-2201
Advanced Imaging	877-731-7218
Pharmacy (both Medical and Pharmacy benefit)	844-271-6887
Dental (non-hospital)	262-241-7150
Dental (hospital and SPU)	262-834-3575
Transplant	877-813-1206

You can also access the PA LookUp Tool on MCCofAZ.com to determine if a service requires prior authorization.

We will notify you of any further changes.

If you have any questions, comments or concerns about these changes and/or this process, please call us at (800) 424-5891 Monday-Friday 8 AM to 6 PM.

If you also treat DSNP members, please refer to the authorization list located at www.mccofaz.com/dsnp. If you have questions or need prior authorization for a DSNP member, call (800) 424-4509.

Sincerely,

Molina Complete Care of Arizona