

Senior Whole Health Provider Notice

Re: Changes to prior authorization requirements

May 1, 2021

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, 2021.

IP/OP*	OP UM Type	Proc/HCPCS Code	Code Description	PA Change Type (Add/Remove)
OP	N/A	J9035	Injection, bevacizumab, 10 mg	Remove
OP	N/A	J0178	Injection, aflibercept, 1 mg	Remove
OP	N/A	J2778	Injection, ranibizumab, 0.1 mg	Remove
OP	N/A	J0897	Injection, denosumab, 1 mg	Remove

*OP includes HCPCS codes for procedures, services, medications or supplies

If you have members on medications or needing services that have been added to this list, please submit a prior authorization form before the member’s next appointment or prior to initiating therapy. Submit requests to the Clinical Utilization Management team via fax at 1-855-838-7998. You can access the form on the provider pages of our website at <https://www.molinahealthcare.com/providers/ma/swh/home.aspx>.

We’ll notify you of any further changes. If you have any questions, please contact the UM team at 855-838-7999.

Please visit <https://www.molinahealthcare.com/providers/ma/swh/home.aspx> to view the full prior authorization list.