

MHIL PRIOR AUTHORIZATION/PRE-SERVICE REVIEW GUIDE

EFFECTIVE: 03/10/2021

To find specific codes that require Prior Authorization (PA), try the [Prior Authorization Code LookUp Tool](#) at provider.molinahealthcare.com or the current PA Codification Grid under Authorization Requests at [Frequently Used Forms](#).

- Providers **must be** enrolled with HFS IMPACT in order to be reimbursed for services.
- Only **covered services** are eligible for reimbursement.
- Office visits to contracted/participating (PAR) providers and referrals to network specialists **do not** require PA.
- Emergency services **do not** require PA.
- All non-par providers/facilities require PA regardless of service, **EXCEPT FOR:**
 - Emergency and urgently needed services.
 - Professional fees associated with ER visit and approved Ambulatory Surgery Center (ASC) or inpatient stay.
 - Local Health Department (LHD) services.
 - Family planning, routine women's health, and routine obstetrical services.
 - Dialysis.
 - Professional services of radiologists, anesthesiologists, and pathologists when billed for POS 19, 21, 22, 23, or 24.
 - Professional component services or services billed with Modifier 26 in any POS setting.
 - Office-based procedures, unless specifically included in another category that requires authorization (e.g., advanced imaging), even when performed in a participating provider's office.

Molina's turnaround time or response to a routine request is four (4) calendar days.

Urgent/expedited service requests should only be used when a response is needed within 48 hours to avoid **life-threatening complications**.

Requests for services that are **not** life threatening (e.g., therapy, elective procedures) **do not** meet criteria for expedited/urgent. Requests outside of this definition will be handled as routine/non-urgent.

Any plans to send members out of state for care to non-participating providers should be discussed **in advance** with one of Molina's Medical Director, available Monday through Friday, from 8 a.m. to 5 p.m. Central Time at **(855) 866-5462**.

[Download Medical Prior Authorization Form](#)

[Download BH Prior Authorization Form](#)

[Download Pharmacy Prior Authorization Form](#)

Information required to support decision-making includes but may not be limited to:

- Current, adequate patient history related to requested services.
- Relevant history and physical, plus follow-up physical exams that address the problem(s).
- Relevant lab or imaging results that support the request (e.g., MRI, CT, X-rays).

Sterilization Note: Please do not submit requests for inpatient admission for planned sterilizations with vaginal and cesarean deliveries. The inpatient admission is covered by the delivery. The 30-day consent form must be submitted with the claim.

Pregnancy and Delivery: Notification upon delivery, including delivery date and type. Admissions for induction of labor and other problems should follow regular UM notification requirements.

Denial of Services

- If a request for services is denied, the requesting provider and member will receive a letter explaining the reason for denial, in addition to information regarding the peer-to-peer, reconsideration, grievance, and appeals process. Denials to providers are also communicated by telephone, fax, or electronic notification.
- Providers and members can request a copy of the criteria used to review requests for medical services.
- Providers may access **Molina Clinical Policies and Reviews** via the Availity Essentials portal at provider.molinahealthcare.com.
- Molina has full-time Medical Directors available by appointment to discuss medical necessity decisions with the requesting provider Monday through Friday, from 8 a.m. to 5 p.m. Central at **(855) 866-5462**.

Availity Essentials provider portal gives providers the ability to:

- Access plan-specific information, such as Provider Manuals.
- Check real-time claim status.
- Check real-time eligibility and benefits of members.
- Conduct online messaging and correspondence directly with Molina.
- Submit claims online-directly to Molina.
- Submit solicited and unsolicited claims attachments.
- View real-time remittance advices and history.
- View real-time explanations of payment.
- availability.com/provider-portal-registration