

Provider Memorandum

Prior Authorizations Will Transition Back to Molina, Away from eviCore

Effective September 1, 2021, Prior Authorization (PA) requests and medical coverage appeals that are currently being submitted through eviCore healthcare (eviCore) will transition back to Molina Healthcare. This change will apply to all Molina lines of business.

This will impact Prior Authorizations and appeals for the specialized services listed in the table below. Also with this transition, certain codes will no longer require Prior Authorization. Providers should **always** check Molina’s online tools to verify PA requirements.

Where To Send Authorizations for Services On and After September 1

Prior Authorization requests should be submitted through the [Provider Portal](#) or by using the appropriate fax number for the request type as listed in the [Prior Authorization Pre-Service Review Guide](#). The [Portal](#) is the preferred method.

Impacted Specialized Service	Molina PA Submission Method	Appeal Submission Method
Imaging and Special Tests: <ul style="list-style-type: none"> Advanced Imaging (MRI, CT, PET, Selected Ultrasounds). Cardiac Imaging. 	Provider Portal (Preferred)	<u>Pre-Service*</u> Provider Portal (Preferred) Fax (855) 502-5128
	Medicaid and MMP Fax (877) 731-7218	<u>Post-Service</u> Provider Portal (Preferred) Fax (855) 502-4962
<ul style="list-style-type: none"> Radiation Therapy. Sleep Covered Services and Related Equipment. Molecular and Genomic Testing. 	Provider Portal (Preferred)	<u>Pre-Service*</u> Provider Portal (Preferred) Fax (855) 502-5128
	Medicaid Fax (877) 731-7218	<u>Post-Service</u> Provider Portal (Preferred) Fax (855) 502-4962
	MMP Fax (844) 251-1451	

* Mail (paper) submissions from providers are permitted on behalf of the member for **pre-service requests only**. If using this method, the provider **must** fill out and submit an [Authorized Representative form](#), which can be accessed on the [Frequently Used Forms page](#) under the heading [Contracting & Provider Forms](#).

Mail to:

Molina Healthcare of Illinois
 Appeals Coordinator
 1520 Kensington Road, Suite 212
 Oak Brook, IL 60523

All faxed requests **must** include a completed Prior Authorization Request form found on the [Frequently Used Forms page](#) under the heading [Authorization Requests](#).

Molina's Prior Authorization Requirements

Learn more about Molina's Prior Authorization requirements, including where to submit PA requests, at [MolinaHealthcare.com](#). The Molina provider website includes the [Prior Authorization Pre-Service Review Guide](#), the downloadable [Prior Authorization Codification List](#) for services that require Prior Authorization, and Molina's convenient [Prior Authorization LookUp Tool](#).

Important: Benefits will vary based on the member's coverage and the service being rendered. Always check the member's eligibility through the [Provider Portal](#) or by calling the Molina Member Services team at **(855) 687-7861**.

Thank you for your ongoing care of Molina members. Questions regarding this transition or Prior Authorization requirements can be directed to your Provider Network Manager or the Provider Network Management team at MHILProviderNetworkManagement@MolinaHealthcare.com.

Questions?

We're here to help. Contact your Provider Network Manager or email the Provider Network Management team at MHILProviderNetworkManagement@MolinaHealthcare.com. For help identifying your Provider Network Manager, visit [Molina's Service Area](#) page at [MolinaHealthcare.com](#).

Get Critical Updates

Receive news and updates about Molina services and plan requirements delivered straight to your inbox. Join Molina's provider email list. [Click here](#) to get started.

Note: Molina's website and documents are best viewed in Google Chrome or Microsoft Edge.