## **Provider Bulletin**

Molina Healthcare of Washington, Inc.

May 2025

## Prior Authorization Code Matrix Update Effective July 1, 2025 (Marketplace)

Molina is updating the Prior Authorization (PA) Code Matrix effective July 1, 2025. This is notification only and does not determine if the benefit is covered by the member's plan. The following codes are being updated:

Hyperbaric & Wound Care
Add Prior Authorization
15271, 15275, 15273, 15274, 15277, 15278, 15272, 15276, Q4238, Q4180, A2005, Q4164, Q4194, Q4204, Q4151
Durable Medical Equipment (DME)
Add Prior Authorization
L7406, L6700, L0720, L5827
Transplants/Gene Therapy
Non-Covered
J3391 – New code for Lenmeldy (gene therapy)
Healthcare Administered Drugs
Deleted/Invalid Codes & Replacement Codes
Delete C9301 – Replace with Q2058 Delete C9302 – Replace with J9276 Delete C9303 – Replace with J1326 Delete C9304 – Replace with J7172 Delete J9340
Healthcare Administered Drugs
Add Prior Authorization
Q5153, J7356, Q5098, Q5100, Q5099
Healthcare Administered Drugs – Reviewed by Evolent Vendor
Add Prior Authorization
J9382, J9275, J9289

The process for obtaining prior authorization <u>has not</u> changed. Please complete the Prior Authorization/Service Request Form with all pertinent information and medical notes as applicable. Service Request Form is available on the Molina Healthcare website under Provider/Forms.

