

Medicaid Prior Authorization (PA) Code Changes Effective July 1, 2024

Molina is updating the PA Code requirements for July 1, 2024. This is for notification only and does not determine if the benefit is covered by the member's plan.

The following codes are being updated:

Durable Medical Equipment (DME) and Orthotics/Prosthetics
PA Required
E0316, E0640, L5050, L5060, L5200, L5220, L5230, L5250, L5270, L5280, L5312, L5321, L5331, L5341, L5610, L5613, L5700, L5701, L5702, L5781, L5782, L5814, L5826, L5828, L5840, L5930, L5961, L5968, L5973, L5979, L5980, L5981, L5987, L6055, L6130, L6200, L6205, L6250, L6300, L6310, L6320, L6360, L6400, L6450, L6500, L6550, L6570, L6624, L6648, L6693, L6880, L6881, L6882, L6920, L6925, L6930, L6935, L6940, L6945, L6950, L6955, L6960, L6965, L6970, L6975, L7007, L7008, L7009, L7040, L7170, L7180, L7181, L7185, L7186, L7190, L7191, E1229, E2512, E2599, L0462, L0636, L1200, L2350, L2525, L2627, L2628, L3900, L3901, L3904, L5100, L5105, L5150, L5160, L5210, L5301, L5500, L5505, L5510, L5520, L5530, L5535, L5540, L5560, L5570, L5580, L5585, L5590, L5595, L5600, L5611, L5614, L5616, L5639, L5643, L5649, L5651, L5681, L5683, L5703, L5705, L5706, L5707, L5718, L5722, L5724, L5726, L5728, L5780, L5795, L5816, L5822, L5824, L5830, L5845, L5848, L5964, L5966, L5969, L5988, L5990, L6000, L6010, L6020, L6050, L6100, L6110, L6120, L6370, L6580, L6582, L6584, L6586, L6588, L6590, L6621, L6638, L6646, L6696, L6697, L6707, L6708, L6709, L6712, L6713, L6715, L6721, L6722, L6900, L6905, L6910, L7045, E0468, E2298, L5783, L5841
Outpatient (OP) Hospital/Ambulatory Surgery Center (ASC) procedures Delegated to Evolent (formerly New Century Health)
PA Required
33858
Healthcare Administered Drugs
PA Required
Q5137, Q5138, J3263, Q0224, J1748, J2267, J7171, J9361, J3247, J0872, J7355, J0911, C9166, C9167
Hyperbaric and Wound Care
PA Required
Q4326
Healthcare Administered Drugs
No PA Required
Q5105
Outpatient (OP) Hospital/Ambulatory Surgery Center (ASC) procedures
No PA Required
17004
Multiple Categories
Deleted/Invalid Codes

Medicaid Prior Authorization Code Changes
Effective July 1, 2024

Q4277, O204U, O353U, O416U, C9168, Q4210, J9371, K1022, K1013, G2066, C1933, C1934, C1935, C1937, C1938, C1940, C1941, A4397, K0553, K0554, J7333, G0056, C1834, C9788, C9803, K1015, K1021, K1026, M1156, M1157, M1158, E2300

Transplants/Gene Therapy

Non-Covered- Carved out to Medicaid Fee for Service

J3399, J1411, J1413, J1412, J3393, J3394

Note: The process for obtaining PA has not changed. Questions? For more information, please contact Provider Services from Monday through Friday from 7 a.m. to 8 p.m.

Molina posts new PA Code Change documents to our website quarterly. However, changes can be made between the quarterly updates. Providers should always use our PA Lookup Tool to view the most up-to-date information.