



# Provider Newsflash



A fax bulletin for the Molina Healthcare of Washington Provider Network

## **New Drug Policies Effective October 1, 2024 (Medicaid)**

In partnership with the Washington State Health Care Authority (HCA), beginning October 1, 2024, Molina Healthcare will be required to implement **two new drug policies**, and **two new corresponding prior authorization forms**:

- ***62.38.00.AA Movement Disorder Agents: Valbenazine (Ingrezza)***
- ***99.39.20 Immune Modulators - Thalidomide analogs***

To assist in the prior authorization process, criteria-specific forms for our drug policies are available for use. To ensure timely processing of your request, please fill out each form completely as needed, and attach supporting documentation.

The new prior authorization forms and our Preferred Drug List can be found here:

[MolinaHealthcare.com/providers/wa/medicaid/drug/Pages/formulary.aspx](https://MolinaHealthcare.com/providers/wa/medicaid/drug/Pages/formulary.aspx).

If you would like more information on the HCA's policies, please visit the policy

Webpage at: <https://www.hca.wa.gov/billers-providers-partners/program-information-providers/apple-health-medicare-drug-coverage-criteria>

Thank you for your continued service to Molina members.