

STATE OF NEW YORK DEPARTMENT OF HEALTH

Corning Tower The Governor Nelson A. Rockefeller Empire State Plaza Albany, New York 12237

Richard F. Daines, M.D.
Commissioner

Wendy E. Saunders
Executive Deputy Commissioner

August 14, 2009

Dear Pharmacy Provider:

The New York State Medicaid Clinical Drug Review Program (CDRP) is expanding to include palivizumab (Synagis®). This policy pertains to situations when Synagis® is ordered by prescription and dispensed and billed by pharmacies. It does not affect physician or nurse practitioner billing of Synagis®. The goal of the program is to ensure that utilization of Synagis® occurs within the respiratory syncytial virus (RSV) season and in children less than two (2) years of age at the onset of the RSV season.

Therefore, effective September 15, 2009:

- Prescriptions for Synagis® for children less than two (2) years of age that are submitted between October 16th and March 31st will **NOT** require prior authorization.
- Prescriptions for Synagis® dispensed between April 1st and October 15th will require prior authorization.
- Prescriptions for Synagis® for children two years of age and over at the onset of the RSV season will require prior authorization.

To obtain prior authorization (PA) for Synagis®, the prescriber will contact the Medicaid Pharmacy Prior Authorization Clinical Call Center.

- Prescriptions for Synagis® between April 1st and October 15th for children under two years of age will carry a PA number ending in W. Pharmacists are required to validate the prior authorization number prior to dispensing. To validate a prior authorization ending in W, please call the prior authorization Interactive Voice Response (IVR) system at 1-877-309-9493. **Be sure to listen for the appropriate prompts.** The clinical call center is available 24 hours per day, 7 days per week.
- Prescriptions for Synagis® for children two years of age and over at the onset of the RSV season will require that Department of Health (DOH) staff contact you directly to assist in processing the claim. If it is determined by the clinical call center representative during the conversation with the prescriber that the prescription does not represent an emergent need, you may not be contacted until the following business day.

Remember, prescriptions for Synagis® for children less than two (2) years of age that are submitted between October 16th and March 31st will NOT require prior authorization.

You will be contacted by a pharmacist from the First Health Services clinical education team to provide further information regarding the inclusion of Synagis® into the CDRP and the Synagis® PA process. The clinical education team may be reached at 518-951-2051.

For Clinical Drug Review Program questions or concerns, visit www.nyhealth.gov and <http://newyork.fhsc.com> or call the clinical call center at 1-877-309-9493. For Medicaid pharmacy policy and operations questions, call 518-486-3209. Thank you for your continued support of our efforts to provide a quality pharmacy program for Medicaid and Family Health Plus enrollees.

Sincerely,



Linda J. Jones, R.N.
Director, Medicaid Pharmacy Program
Office of Health Insurance Programs