



ORDERED AMBULATORY

Changes to Practitioner Administered
Drugs Effective 11/19/26

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Beginning November 19, 2026, New York State (NYS) Medicaid Fee-For-Service (FFS) is implementing reimbursement changes and clinical criteria for certain practitioner administered drugs (PADs) administered in office, clinic, or outpatient settings. **These changes apply to New York Medicaid Fee-For-Service members only.**

NYS Medicaid FFS will require prior authorization (PA) for certain PADs. Prescribers will be required to obtain prior authorization **before** Medicaid will cover the cost of the drug because the Practitioner Administered Drug Program is changing from the "by report" manual pended claims process to a streamlined PA framework. These changes may reduce administrative burdens and improve claim reimbursement timelines for providers.

Details and guidance about these changes are in the special editions of the Medicaid Update:

- [Reimbursement Change for New York State Medicaid Fee-for-Service Professional Drug Claims Special Edition Volume 42 - Number 3 \(March 2026\)](#)
- [Practitioner Administered Drug Modernization - Part 2: Prior Authorization Changes for Select Drugs in New York State Medicaid Fee-for-Services Special Edition Volume 42 - Number 10 \(September 2026\)](#)

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