



Pharmacy

Medicaid Pharmacy Prior Authorization Programs Update

In this Newsletter:

Medicaid Pharmacy Prior Authorization Programs Update

Contact Details

1-800-343-9000
emednyalert@csc.com

Medicaid Pharmacy Prior Authorization Programs Update

On June 27, 2013, the New York State Medicaid Drug Utilization Review (DUR) Board recommended changes to the Medicaid pharmacy prior authorization programs. The Commissioner of Health has reviewed the recommendations of the Board and has approved changes to the Preferred Drug Program (PDP) within the fee-for-service pharmacy program. Effective October 3, 2013, prior authorization (PA) requirements will change for some drugs in the following PDP classes:

- Alpha Reductase Inhibitors for BPH
- Anabolic Steroids - Topical
- Anticholinergics - Inhaled/COPD Agents
- Antihistamines – Second Generation
- Anticoagulants – Injectable
- Anticoagulants – Oral
- Anticonvulsants – Second Generation
- Beta Blockers
- Corticosteroids – Inhaled
- Corticosteroids – Intranasal
- Dipeptidyl Peptidase-4 (DPP-4) Inhibitors
- Growth Hormones
- Multiple Sclerosis Agents
- Selective Serotonin Reuptake Inhibitors (SSRIs)
- Tetracyclines

The PDP has also expanded to include additional drug classes. Non-preferred drugs in the following drug classes will require PA:

- Gastrointestinal Antibiotics
- Gastrointestinal Preparatory Agents
- Glucocorticoids – Oral
- Topical Anti-Infectives

For more detailed information on the above DURB recommendations, please refer to the meeting summary at:

http://www.health.ny.gov/health_care/medicaid/program/dur/meetings/2013/05/sum_062713_durb.pdf

Please note that PA requirements are not dependent on the date a prescription is written. New prescriptions and refills on existing prescriptions require PA even if the prescription was written before the date the drug was determined to require PA.

The following is a link to the most up-to-date information on the Medicaid FFS Pharmacy Prior Authorization programs. This document contains a full listing of drugs subject to PDP, Clinical Drug Review Program (CDRP), DUR program, Brand Less than Generic program (BLTG) and the Mandatory Generic Drug Program (MGDP):

https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PDL.pdf

To obtain a prior authorization (PA), please call the prior authorization Clinical Call Center at (877) 309-9493. The Clinical Call Center is available 24 hours per day, 7 days per week with pharmacy technicians and pharmacists who will work with you, or your agent, to quickly obtain PA.

Medicaid enrolled prescribers with an active e-PACES account can initiate PA requests through the web-based application PAXpress®. The website for PAXpress is <https://paxpress.nypa.hidinc.com>

The website may also be accessed through the eMedNY website at <http://www.eMedNY.org> as well as Magellan Medicaid Administration's website at <http://newyork.fhsc.com>

Message Sent 09/10/2013

If you are having problems viewing content within this newsletter, please email emednyalert@csc.com for further assistance.

The Department has attempted to ensure that the information contained in these notifications is as accurate as possible. However, no e-mail transmittals or materials provided are intended to constitute legal or medical advice.