

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT202162    JULY 27, 2021

## Pharmacy updates approved by Drug Utilization Review Board July 2021

The Indiana Health Coverage Programs (IHCP) announces updates to prior authorization (PA) criteria as approved by the Drug Utilization Review (DUR) Board at its July 16, 2021, meeting. These updates apply to the fee-for-service (FFS) pharmacy benefit.

### PA changes

PA criteria for Compounded Prescription Claims for Submitted Charges  $\geq$ \$500 were established and approved by the DUR Board. These PA changes will be effective for PA requests submitted on or after Sept. 1, 2021. The PA criteria are posted on the Pharmacy Prior Authorization Criteria and Forms page on the OptumRx Indiana Medicaid website, accessible from the [Pharmacy Services](#) page at [in.gov/medicaid/providers](http://in.gov/medicaid/providers).



### For more information

The PA criteria and SilentAuth criteria can be found on the OptumRx Indiana Medicaid website, accessible via the [Pharmacy Services](#) page at [in.gov/medicaid/providers](http://in.gov/medicaid/providers). Notices of the DUR Board meetings and agendas are posted on the [FSSA website](#) at [in.gov/fssa](http://in.gov/fssa). Click FSSA Calendar on the left side of the page to access the events calendar.

Please direct FFS PA requests and questions about the FFS Preferred Drug List or this bulletin to the OptumRx Clinical and Technical Help Desk by calling toll-free 855-577-6317. Questions regarding pharmacy benefits for members in the Healthy Indiana Plan (HIP), Hoosier Healthwise and Hoosier Care Connect should be referred to the managed care entity (MCE) with which the member is enrolled.

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