IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

BT202246 JUNE 28, 2022

Pharmacy updates approved by Drug Utilization **Review Board June 2022**

The Indiana Health Coverage Programs (IHCP) announces updates to the SilentAuth automated prior authorization (PA) system and PA criteria as approved by the Drug Utilization Review (DUR) Board at its June 17, 2022, meeting.

These updates apply to the fee-for-service (FFS) pharmacy benefit.

SilentAuth PA enhancement

The IHCP has enhanced its automated PA system to update the criteria for the Antimigraine Agents and Monoclonal Antibodies for Respiratory Conditions. In addition, buprenorphine containing products will no longer be included in morphine milligram equivalent (MME) calculations within the Opiate Overutilization PA Criteria with QL. However, buprenorphine product quantity limits will still apply. These PA changes will be effective for PA requests submitted on or after Aug. 1, 2022. 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.



PA changes

PA criteria for the Spinal Muscular Atrophy (SMA) Agents were established and approved by the DUR Board. These PA changes will be effective for PA requests submitted on or after Aug. 1, 2022. The PA criteria are posted on the Pharmacy Prior Authorization Criteria and Forms page on the OptumRx Indiana Medicaid website.

For more information

The PA criteria and SilentAuth criteria can be found on the OptumRx Indiana Medicaid website. Notices of the DUR Board meetings and agendas are posted on the FSSA website at 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 (PDL) 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 Care Connect and Hoosier Healthwise should be referred to the managed care entity (MCE) with which the member is enrolled.

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