



I M P O R T A N T I N F O R M A T I O N

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To All Pharmacy Providers:

Note: The information referenced below is not directed to those providers rendering services in the risk based managed care (RBMC) delivery system.

- Effective September 17, 2002, Phase II of the Preferred Drug List (PDL) is being implemented for the Indiana Health Coverage Programs (IHCP). Phase II adds ACE inhibitors and proton pump inhibitors (PPI) to the PDL. These additions to the PDL are further described in IHCP provider bulletin *BT200243*. In addition to the ACE inhibitors and PPIs listed in the bulletin, all generic strengths of lisinopril are now included on the PDL. Captopril 12.5 milligrams (for children 12 years and younger) should be added to the PDL of ACE inhibitors. Prescription claims submitted for products not on the PDL will deny for explanation of benefits (EOB) 3017 – *This NDC is not on the IHCP Preferred Drug List. Prior authorization is required. Please have the prescriber contact ACS at 1-866-879-0106 for prior authorization.*

To All Physicians, Hospitals, Clinics, Mental Health, and Pharmacy Providers:

- Effective immediately, prior authorization (PA) for Respigam® and Synagis® has been revised. The following criteria are to be used for Respigam and Synagis:

The following medication administration site criteria needs to be met before Respigam is approved:

- The Indiana Rational Drug Therapy Program does not permit home administration.
- Administration can be performed in a clinic, physician's office, or a hospital.

Synagis is the preferred product for prophylaxis. Respigam requires PA using the same criteria as listed below for the use of Synagis. **The PA form for Synagis is available for download at the www.indianamedicaid.com Web site and can be used for Respigam.**

Synagis can be administered in any setting where intramuscular (IM) injections are appropriate. At least one of the following criteria must be met before the patient is considered "at risk" for respiratory syncytial virus (RSV):

- Patient is less than 24 months old at the start of therapy and has chronic lung disease, especially if on oxygen chronically or if only off oxygen less than 3 to 6 months.
- Patient is younger than one year old at the start of therapy with a gestational age of 28 weeks or less than one year and has a history of accompanying medical problems. For example, caffeine administration for respiratory stimulation within the last year.
- Patient is younger than six months old at the start of therapy with a gestational age of 29 to 32 weeks.

- Patient is less than three months old at the start of therapy with a gestational age of 33 to 36 weeks and accompanying medical problems.
- Patient is six months old at the start of therapy with a gestational age of 33 to 36 weeks and has one of the following risk factors: school age siblings, crowding in the home, daycare attendance, exposure to tobacco smoke in the home, multiple births, neurologic disease, anticipated cardiac surgery, distance to or availability of hospital care.
- Patient cannot be approved if he or she is currently receiving immunoglobulin infusions. Immunity should be acquired through those infusions.

Treatment can only be approved for the RSV season. Therefore, the approval period will be October 1, 2002, through April 30, 2003. Approval will be for a total of six doses.

Administration of the seventh dose will require a separate PA.

To All Ophthalmology Providers:

- This provides clarification about the benefit limits for **replacement eyeglasses** dispensed to IHCP members. The IHCP policy states members 18 years old or younger are limited to one pair of eyeglasses per year. Members 19 years old or older are limited to one pair of eyeglasses every two years. An exception to the policy is instances of loss, theft, or damage beyond repair. Modifier *XQ* should be appended to the appropriate vision service code when a member is in need of a new pair of eyeglasses due to one of these circumstances. Use of modifier *XQ* does not impact the member's benefit limit for new eyewear. For example, a member younger than 18 years old receives a pair of eyeglasses for the first time on February 15, 2001, and receives a replacement pair of eyeglasses after a theft on May 5, 2001. The member is still eligible for a new pair of eyeglasses on or after February 15, 2002. Detailed information about the IHCP vision policy is included in the *IHCP Provider Manual*, Chapter 8.

To All Providers:

- Effective September 16, 2002, the EDS Third Party Liability (TPL) phone line hours of operation change to 8 a.m. to 5 p.m., Monday through Friday. Callers can leave a message on voice mail outside of these business hours. Messages received before 8 a.m., Monday through Friday, will be returned the same day. Calls received after 5 p.m., Monday through Friday, will be returned the next business day.

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