

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201555 AUGUST 11, 2015

Pharmacy update approved by Drug Utilization Review Board July 2015

The Indiana Health Coverage Programs (IHCP) announces changes to prior authorization (PA) criteria, as approved by the Drug Utilization Review (DUR) Board at its July 17, 2015, meeting. These changes apply to the fee-for-service (FFS) pharmacy benefit.

PA changes

PA criteria for gonadotropin-releasing hormone (GnRH) analogs were established and approved by the DUR Board. The criteria will be effective for PA requests submitted on or after September 15, 2015. The PA criteria are posted on the *Pharmacy Prior Authorization Criteria and Forms* page under the [Pharmacy Services](#) quick link at indianamedicaid.com.



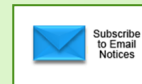
For more information

Notices of the DUR Board meetings and agendas are posted on the [Family and Social Services Administration \(FSSA\) 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 FSS Preferred Drug List (PDL), FFS Over-the-Counter (OTC) Drug Formulary, or this bulletin to the OptumRx (formerly Catamaran) Clinical and Technical Help Desk by calling toll-free 1-855-577-6317. Questions regarding pharmacy benefits for members in the Healthy Indiana Plan (HIP) and Hoosier Care Connect should be referred to the managed care entity with which the member is enrolled.

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