

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201610 MARCH 1, 2016

Pharmacy update approved by Drug Utilization Review Board February 2016

The Indiana Health Coverage Programs (IHCP) announces changes to prior authorization (PA) criteria, enhancements to its SilentAuth automated PA system, updates to the mental health utilization edits, and changes to the Preferred Drug List (PDL) as approved by the Drug Utilization Review (DUR) Board at its February 19, 2016, meeting. These changes apply to the fee-for-service (FFS) pharmacy benefit.

PA Changes

PA criteria for pulmonary antihypertensives, Hepatitis C agents, PCSK9 inhibitors, and Galise and Horizant were established and approved by the DUR Board. The criteria will be effective for PA requests submitted on or after April 1, 2016. The PA criteria are posted on the *Pharmacy Prior Authorization Criteria and Forms* page (Preferred Products > Pharmacy Criteria and Forms) using the [Pharmacy Services](#) quick link at indianamedicaid.com.

SilentAuth PA enhancement

The IHCP has enhanced its automated PA system to update the criteria for the monoclonal antibodies for the treatment of respiratory conditions, Solaraze, and targeted immunomodulators. The goal is to ensure appropriate utilization for IHCP members. These enhancements will be implemented in the IHCP pharmacy claims processing system for claims with dates of service (DOS) on or after April 1, 2016.

Mental health utilization edits

Utilization edits for mental health medications are reviewed quarterly by the Mental Health Quality Advisory Committee (MHQAC). The DUR Board approved updates to the utilization edits, as recommended by the MHQAC and listed in Table 1. These updates are effective for DOS on or after April 1, 2016.

Table 1 – Updates to utilization edits effective for DOS on or after April 1, 2016

Name and strength of medication	Utilization edit
Clozapine (all strengths/dosage forms)	Add AGE – 18 years of age and older
Evekeo 5mg tabs	1/day
Evekeo 10mg tabs	6/day



Table 1 – Updates to utilization edits effective for DOS on or after April 1, 2016 (continued)

Name and strength of medication	Utilization edit
Fanapt (all strengths/dosage forms)	Add AGE – 18 years of age and older
Fluphenazine (all strengths/dosage forms)	Add AGE – 18 years of age and older
Latuda (all strengths/dosage forms)	Add AGE – 18 years of age and older
Loxapine (all strengths/dosage forms)	Add AGE – 18 years of age and older
Perphenazine (all strengths/dosage forms)	Add AGE – 18 years of age and older
Rexulti (all strengths/dosage forms)	Add AGE – 18 years of age and older
Vraylar (all strengths/dosage forms)	Add AGE – 18 years of age and older
Ziprasidone (all strengths/dosage forms)	Add AGE – 18 years of age and older

Changes to the PDL

Changes to the PDL were made at the February 19, 2016, DUR Board meeting. See Table 2 for a summary of PDL changes. Changes are effective for DOS on or after April 1, 2016, unless otherwise noted.

Table 2 - Approved changes to the PDL effective for DOS on or after April 1, 2016

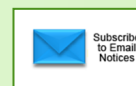
Drug class	Drug	PDL status
Bronchodilator agents – beta adrenergic and anticholinergic combinations	Stiolto Respimat	Maintain as preferred; add quantity limit – 1 box (60 inhalations)/30 days
	Seebri Neohaler	Nonpreferred; add quantity limit – 1 box (60 capsules)/30 days
	Utibron Neohaler	Nonpreferred; add quantity limit – 1 box (60 capsules)/30 days
Monoclonal antibodies to immunoglobulin E		Rename drug class to monoclonal antibodies for the treatment of respiratory conditions
	Nucala	Nonpreferred
Pulmonary antihypertensives	Uptravi	Nonpreferred
Hepatitis C agents	Zepatier	Nonpreferred
Lipotropics	Repatha	Nonpreferred
Antimigraine agents	Zecuity	Nonpreferred; add quantity limit – 4 patches/30 days
Electrolyte depleters	Veltassa	Nonpreferred
Anaphylaxis agents	Epinephrine auto-injector	Preferred (previously nonpreferred)

The PDL, OTC Drug Formulary, SilentAuth, mental health drug utilization edits, and PA criteria can be accessed under the [Pharmacy Services](#) link at indianamedicaid.com. 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 FFS PDL, the FFS OTC Drug Formulary, or this bulletin to the OptumRx 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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