



Pharmacy Pre-Authorization And Notification Requirements

Below is a list of medications that require pre-authorization.

Pharmacy

To pre-authorize, call 1.800.624.6961, ext. 7914 or fax 1.888.329.8471 Attn: Pharmacy.

Prior Authorization Forms are found on The Health Plan website at: <https://www.healthplan.org>

Traditional pharmacy – Drugs that require step therapy, exceed quantity limits, have criteria for coverage or are not on the formulary require prior authorization.

Specialty pharmacy – All specialty medications, oral and injectable, require prior authorization. These include, but are not limited to, medications for enzyme replacement therapy, growth hormone deficiency, hemophilia, hepatitis C, idiopathic pulmonary fibrosis, multiple sclerosis, oncology, psoriasis, pulmonary arterial hypertension, rheumatoid arthritis, and other relatively rare conditions. Dispensing of these medications may be limited to preferred providers.

Specialty pharmacy network - The Health Plan Pharmacy Services has a preferred specialty pharmacy network, and will direct you to the preferred specialty pharmacy in the approval letter. For a list of specialty medications and prior authorization forms visit us on the web at <https://www.healthplan.org> or call 1.800.624.6961, ext. 7914, option 4.

Note: Specialty pharmacy drugs are covered under the member's drug rider. Members without an Rx rider do not have coverage for specialty medications. Members with Rx coverage with another carrier must seek coverage for specialty drugs with that carrier.

Office administered drugs –Dispensing of medications may be limited to preferred providers and all require prior authorization. This is not a comprehensive list:

- Iron replacement therapy – parenteral (i.e. Ferrlecit, Infed, Venofer)
- Ophthalmic injections for macular degeneration and macular edema (i.e., Avastin, Eylea)
- Osteoporosis treatment – parenteral (i.e. Prolia, Zolendronic Acid)
- RSV prophylaxis in high risk infants (i.e. Synagis)
- Viscosupplementation (i.e. Synvisc, Synvisc One)
- Injections to maintain high risk pregnancy (i.e. Makena)

Also requiring pre-authorization: Newly approved, off-label, and/or high-cost infusion drugs