

Medicaid Pharmacy Prior Authorization & Preferred Drug List



About

- People enrolled in either traditional Medicaid or Medicaid managed care adhere to the same formulary. Some drugs on the formulary may require prior authorization, either **non-preferred**, **clinical**, or **both**.
 - Pharmacy prior authorization services for people enrolled in Medicaid managed care are administered by the person's managed care organization
 - Traditional Medicaid prior authorizations are administered by the Texas Prior Authorization Call Center.

Formulary

- The **Medicaid formulary** includes legend and over-the-counter drugs. In addition certain supplies and select vitamin and mineral products are also available as a pharmacy benefit. Some drugs are subject to one or both types of prior authorization, clinical and non-preferred.
- The Formulary Search identifies the list of covered Medicaid and CHIP drugs and whether a drug requires a preferred and/or a clinical prior authorization.
 - txvendordrug.com/formulary/formulary-search.

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Preferred Drug List

- The **preferred drug list** is arranged by drug therapeutic class and contains a subset of many, but not all, drugs that are on the Medicaid formulary. Most drugs are identified as “preferred” or “non-preferred”. Drugs listed on the list as “preferred” or not listed at all are available to all people without prior authorization unless there is a clinical prior authorization associated with that drug. (CHIP drugs are not subject to PDL requirements.)
 - txvendordrug.com/formulary/prior-authorization/preferred-drugs
- The **PDL Prior Authorization Criteria Guide** explains the criteria used to evaluate prior authorization requests
 - paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
- Drugs that require clinical prior authorization are hyperlinked within the list, as shown in the example entry below. Links will take the user to the specific clinical prior authorization document with a narrative that explains the purpose and requirements.

<i>THERAPEUTIC CLASS NAME</i>		
Preferred Agents	Non-Preferred Agents	Prior Authorization Criteria
bacitracin ointment BACTROBAN (mupirocin) cream	bacitracin packet BACTROBAN (mupirocin) ointment	<ul style="list-style-type: none"> • Treatment failure with preferred drugs within any subclass • Contraindication to preferred drugs • Allergic reaction to preferred drugs • Clinical Prior Authorization applies

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Clinical Prior Authorization

- **Clinical prior authorizations** may apply to any individual drug or an entire drug class on the formulary, including some preferred and non-preferred drugs. There are certain clinical prior authorizations that all managed care health plans are required to perform. Usage of all other clinical prior authorizations will vary between health plans at the discretion of each health plan.
- All are approved by the Texas Medicaid Drug Utilization Board.
- For Medicaid managed care:
 - txvendordrug.com/formulary/prior-authorization/mco-clinical-pa
- Traditional Medicaid:
 - txvendordrug.com/formulary/prior-authorization/ffs-clinical-pa
- The Clinical Prior Authorization Assistance Chart identifies which clinical prior authorizations are utilized by each health plan:
 - txvendordrug.com/sites/txvendordrug/files/docs/prior-authorization/cpa-assistance-chart.pdf

PDL Prior Authorization

- Drugs identified as “non-preferred” require a PDL prior authorization. The PDL Prior Authorization Criteria Guide explains the criteria used to evaluate the preferred drug list prior authorization requests.

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Obtaining Prior Authorization

As a prescribing provider you can help people enrolled in Medicaid receive medications quickly and conveniently with a few simple steps. Prescribing providers or their representatives should contact one of the following authorization authorities:

Medicaid Managed Care

- Pharmacy prior authorization call centers vary by health plan. The **Prescriber Assistance Chart** identifies each health plan and its prior authorization and member call center phone numbers.
 - txvendordrug.com/sites/txvendordrug/files/docs/managed-care/prescriber-assistance-chart.pdf

Traditional Medicaid

- The **Texas Prior Authorization Call Center** accepts prior authorization requests by phone at 1-877-PA-TEXAS (1-877-728-3927) or online. Please note online submission is only available for PDL prior authorization requests.
 - Texas Prior Authorization Call Center: txvendordrug.com/about/contact-us/prior-authorization
 - Account Registration Instructions: paxpress.txpa.hidinc.com/Account_Reg_Instructions.pdf
 - Provider Quick Reference: paxpress.txpa.hidinc.com/Provider_Quick_Ref_Guide.pdf
- Xenical and enzyme replacement therapy products require prior authorization but are reviewed internally by HHS staff.
- Download forms from txvendordrug.com/formulary/prior-authorization/medicaid-ffs-forms

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Texas Medicaid Drug Utilization Review Board

- The board makes recommendations for the preferred drug list and clinical prior authorizations four times a year.
- Close to 75 therapeutic classes are reviewed each year with approximately one-quarter of the classes reviewed at each meeting:
 - Decisions made at January and April meetings are included on the July release of the preferred drug list.
 - Decisions made at July and October meetings are included on the January release of the preferred drug list.

Education

- The pharmacy continuing education training module includes requirements related to pharmacy enrollment, using the online formulary and preferred drug list, and obtaining prior authorization:
 - txhealthsteps.com/cms/?q=catalog/course/2388
- Prescriber's Guide to Texas Medicaid Outpatient Pharmacy Prior Authorization quick course:
 - casestudies.txhealthsteps.com/stepsQuickCourses/prescribers/index.html

Updates

- Both the formulary and preferred drug list are available for free on mobile devices using the Epocrates drug information system:
 - txvendordrug.com/formulary/epocrates
- Texas Medicaid Email Notification Service
 - txvendordrug.com/about/news/notices

For questions or comments about the Medicaid formulary or preferred drug list please email vdv_formulary@hhsc.state.tx.us.