IHCP *bulletin*

IHCP to implement PreCheck MyScript® for FFS pharmacy benefit

The Indiana Health Coverage Programs (IHCP) announces implementation of PreCheck MyScript® (PCMS) for the fee-for-service (FFS) pharmacy benefit on Sept. 1, 2021. PCMS is a real-time benefit check tool embedded in the electronic health record (EHR) system. Prescribers can find patient-specific medication coverage information, compare alternative medications based on the patient's FFS pharmacy benefit, and receive alerts when a prior authorization (PA) is needed.

When a prescriber prescribes a medication through the patient's EHR, the OptumRx tool will run a trial claim through the pharmacy claims system to determine the drug's benefit status, alternatives, and if any PA is required. The PCMS tool will provide additional transparency to the FFS pharmacy benefit status, allow for streamlined prescribing and potentially less administrative tasks, and may enable patients to receive their medications faster (when compared to completing a PA if a preferred alternative is appropriate). The PCMS program is automatically integrated in the prescriber's EHR through OptumRx.

The PDL, PA criteria and SilentAuth criteria can be found on the OptumRx Indiana Medicaid website, accessible via the *Pharmacy Services* page at in.gov/medicaid/providers.

Please direct FFS PA requests and questions about the FFS Preferred Drug List (PDL) or this bulletin to the OptumRx Clinical and Technical Help Desk by calling toll-free 855-577-6317. Questions regarding pharmacy benefits for members in the Healthy Indiana Plan (HIP), Hoosier Care Connect and Hoosier Healthwise should be referred to the managed care entity (MCE) with which the member is enrolled.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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