

# IHCP *bulletin*

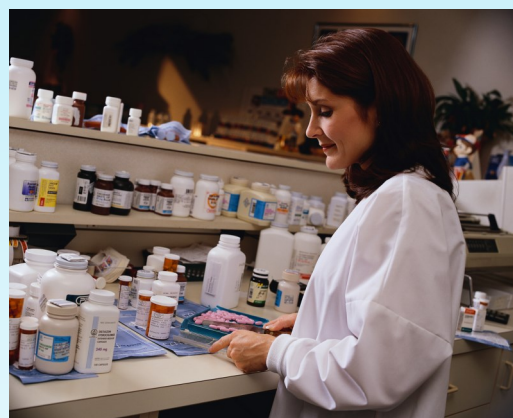
INDIANA HEALTH COVERAGE PROGRAMS    BT202294    NOVEMBER 1, 2022

## Pharmacy updates approved by Drug Utilization Review Board October 2022

The Indiana Health Coverage Programs (IHCP) announces updates to the SilentAuth automated prior authorization (PA) system, PA criteria, the Preferred Drug List (PDL), and vaccine coverage and utilization edits as approved by the Drug Utilization Review (DUR) Board at its Oct. 21, 2022, meeting. These updates apply to the fee-for-service (FFS) pharmacy benefit.

### SilentAuth PA enhancement

The IHCP has enhanced its automated PA system to update the criteria for the Respiratory and Allergy Biologics. These PA changes will be effective for PA requests submitted on or after Dec. 1, 2022. The PA criteria are posted on the *Pharmacy Prior Authorization Criteria and Forms* page on the OptumRx Indiana Medicaid website, accessible from the [Pharmacy Services](#) page at [in.gov/medicaid/providers](http://in.gov/medicaid/providers).



### PA changes

PA criteria for Cystic Fibrosis Agents were established and approved by the DUR Board. These PA changes will be effective for PA requests submitted on or after Dec. 1, 2022. The PA criteria are posted on the *Pharmacy Prior Authorization Criteria and Forms* page on the [OptumRx Indiana Medicaid website](#).

### Changes to the PDL

Changes to the PDL were made at the Oct. 21, 2022, DUR Board meeting. See Table 1 for a summary of PDL changes. Changes are effective for dates of service (DOS) on or after Dec. 1, 2022, unless otherwise noted.

*Table 1 – PDL changes effective for DOS on or after Dec. 1, 2022*

Drug class	Drug	PDL status
Beta Agonists – Short Acting	Proventil HFA	Preferred (previously nonpreferred)
	Ventolin HFA	Preferred (previously nonpreferred)
	Albuterol HFA	Preferred (previously nonpreferred)

### Vaccine coverage and utilization edit updates

At its Oct. 21, 2022, meeting, the DUR Board approved updates to coverage and utilization edits for vaccines billed through the pharmacy point-of-sale system as listed in [Table 2](#). These updates are effective for DOS on or after Dec. 1, 2022.

*Table 2 – Vaccine utilization edit changes effective for DOS on or after Dec. 1, 2022*

Product name	Age restriction	Quantity limit
Vaxneuvance (pneumococcal 15-valent conjugate vaccine)	Update age restriction to 19 years of age and older	Maintain current quantity limit

**For more information**

The SilentAuth criteria, PA criteria, PDL, and vaccine coverage and utilization edits can be found on the [OptumRx Indiana Medicaid website](#). Notices of the DUR Board meetings and agendas are posted on the [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 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.

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