



**** Fee-For-Service Pharmacy Provider Notice #187 – September Pharmacy Updates ****

October 15, 2014

Dear Kentucky Medicaid Provider:

Please be advised that the Department for Medicaid Services has made the following changes to the **Kentucky Medicaid Fee-For-Service (FFS) Pharmacy Program.**

Kentucky Medicaid will prefer brand over generic for the following products.

Beginning:	Preferred Product:	Non – Preferred Products:
09/12/2014	Astepro®	Astelin® azelastine Patanase™
09/12/2014	Baraclude™	adefovir entecavir lamivudine HBV

Kentucky Medicaid will require prior authorization (PA) on the following **new products to market** pending review for placement on the Preferred Drug List (PDL):

Beginning:	New Product requiring PA:	Preferred Products:
10/08/2014	Tanzeum™	Byetta™

Kentucky Medicaid will no longer prefer brand over generic for the following products:

Beginning:	Drugs Requiring PA:	Therapeutic Class Preferred Products:
10/08/2014	Lovenox®	Enoxaparin Eliquis® Fragmin® fondaparinux Jantoven® Pradaxa® warfarin Xarelto®

Kentucky Medicaid has made the following changes to the **Maximum Quantity List:**

Beginning:	Drug Name:	Quantity Limit:
10/08/2014	Copaxone® 20 mg/ml	1 mL per day
10/08/2014	Copaxone® 40 mg/ml	3 mL per week
10/08/2014	Synagis® 50 mg Synagis® 100 mg	1 RX per month



* Please note: All dates are subject to change.

You can find the full Maximum Quantity List at <https://kyportal.magellanmedicaid.com/provider/public/documents.xhtml> under the Drug Info/General Drug Info tab.

Thank you for helping Kentucky Medicaid members maintain access to prescription coverage by selecting drugs on the preferred drug list whenever possible.

Sincerely,

Michael Price
Provider Relations Manager
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Kentucky Medicaid Fee-For-Service Pharmacy Program’s Contact Information		
Clinical Support Center	1-800-477-3071 Sunday – Saturday 24 hours a day	Please contact the Clinical Support Center to request a prior authorization (PA) or to check the status of a request. NOTE: The only drugs that are now required to be submitted via fax are Brand Medically Necessary, Buprenorphine Products, Synagis®, and Zyvox®.
Pharmacy Support Center	1-800-432-7005 Sunday – Saturday 24 hours a day	Please contact the Pharmacy Support Center when claims assistance is required. Timely filing, lock-in, and early refill (ER) overrides can be obtained through this call center.
Provider Services	1-877-838-5085 Monday – Friday 8:00 am – 4:30 pm	Please contact Provider Services if you have questions about enrollment or when updating your license or bank information.
Member Services	1-800-635-2570	Please contact Member Services if you are a member or if you as the provider have questions regarding the member’s benefits or eligibility coverage dates.