

August 4, 2008
Provider Bulletin

Transition to Medicaid Preferred Drug List (PDL)

First of all, we want to thank you for providing quality services to our BlueChoice HealthPlan members in the Healthy Connections program. Second, we need to ask a favor when you are prescribing medications to our members.

We want to be sure your patients receive their full range of pharmacy benefits from us. We also want to be sure they are receiving clinically sound, safe and effective prescription medications. To reach these goals together, we need you to be aware of the drugs listed on our BlueChoice HealthPlan Preferred Drug List (PDL) and the recommended daily dosage and quantity rules for those drugs. Our PDL, along with other formulary related information, can be found on our website at:

www.BlueChoiceSCMedicaid.com/providers/resources/pharmacyinformation.aspx.

In general, we give members a 30-day transition period from the date of their enrollment during which we waive the written prior authorization requirement for initial prescription dispensing. After those 30 days, in order to be covered by us, the member's prescription needs to be on the preferred drug list. If you believe that your patients need to continue on the medication that you originally prescribed, please submit a written prior authorization request. More information about how to submit a written prior authorization request is directly below.

You may complete the general form for prior authorization to continue a patient's prescription for a non-PDL drug. This form is available on our website at:

www.BlueChoiceSCMedicaid.com/UserFiles/File/Providers/pab_nonpreferred_medications.pdf.

For your convenience, we have specific forms for some drugs to help ensure we receive complete information and to expedite the prior authorization process. You will find these forms on the following formulary website:

www.BlueChoiceSCMedicaid.com/providers/resources/pharmacyinformation/pabfaxformsforspecificconditionsmedications.aspx.

To continue a patient on a non-PDL prescription, please fill out the Prior Authorization Form and fax it to the WellPoint NextRx (NextRx) Prior Authorization Center at **1-866-807-6241** for review.

Questions?

To learn more about our pharmacy prior authorization programs, call the NextRx Prior Authorization Center at **1-800-470-0933** from 8 a.m. to 9 p.m., Monday through Friday. Or you can visit our website at **www.BlueChoiceSCMedicaid.com**. This information is being provided for general information purposes only and is not intended as a substitute for the independent medical judgment of a physician.