

South Carolina
DEPARTMENT OF HEALTH AND HUMAN SERVICES
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April 25, 2011

ALL

MEDICAID BULLETIN

TO: Providers Indicated

SUBJECT: Management of Mental Health, HIV/AIDS and Oncology Medications

On April 6, 2011, the General Assembly approved Joint Resolution S.434 which now allows the South Carolina Department of Health and Human Services (SCDHHS) to require prior authorization (PA) on medications used to treat major depression, schizophrenia, bipolar disorder, HIV/AIDS and cancer.

Efforts to ensure continuity of care, patient stability and access to necessary medications will include:

- Patients currently stable on a medication in one of these classes may continue on their current therapy without interruption. This effort, known as “grandfathering”, will be automated thus allowing pharmacy claims to continue to be paid for any agent that a beneficiary is taking without any prescriber intervention.
- Physician-administered injectable antipsychotics will be exempt from PA requirements.
- Management and guidelines will be discussed with the SC Medicaid Pharmacy and Therapeutics (P&T) Committee prior to implementation to ensure that preferred product selection and PA criteria are clinically appropriate and cost effective.
- PA criteria will be consistent with evidence-based clinical guidelines allowing beneficiaries to have access to any of these medications when medically necessary for treatment.
- As with other medication classes included on the Preferred Drug List (PDL), PA request for these medications may be submitted via WebPA, telephone or fax.

This bulletin applies only to prescriptions paid by the Medicaid fee-for-service pharmacy program, including prescriptions for patients in the medical home networks. Prescribers should contact their individual managed care organizations for information regarding coverage of these medications for their members.

Questions regarding this bulletin should be directed to the Department of Pharmacy Services at (803) 898-2876.

/S/
Anthony E. Keck
Director

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