

Prior authorization requirements for Part B Drug: Trelstar (triptorelin)

On **August 1, 2018**, Amerigroup prior authorization (PA) requirements will change for the Part B Injectable/Infusible drug Trelstar (triptorelin) covered by Amerigroup. Federal and state law, as well as state contract language and CMS guidelines, including definitions and specific contract provisions/exclusions take precedence over these precertification rules and must be considered first when determining coverage. Non-compliance with new requirements may result in denied claims.

Prior authorization requirements will be added to the following Part B drug:

- Trelstar (triptorelin): for the palliative treatment of advanced prostate cancer and the treatment of central precocious puberty. (J3315)

Not all prior authorization requirements are listed here. Detailed prior authorization requirements are available to contracted providers by accessing the Provider Self-Service Tool at www.Availity.com. Contracted and non-contracted providers who are unable to access Availity may call our Provider Services at the number on the back of the member's ID card for prior authorization requirements.

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Coverage provided by Amerigroup Inc.

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