

Provider Update

Amerigroup* prior authorization and claim billing changes for 17 alpha-hydroxyprogesterone caproate

Summary: Effective September 1, 2015, there will be several changes made to the prior authorization (PA) and claim billing processes for 17 alpha-hydroxyprogesterone caproate (17P) therapy.

★ **What this means to you:** Medical claims billed for both compounded 17P and Makena™ continue to require CPT Code J1725. For the compounded version of 17P medical claims must now be billed using modifier U1. Makena™ medical claims should no longer be billed with a modifier. In addition, as a medical benefit, PA will not be required for compounded 17P or Makena™.

Additional information on 17P therapy

For women who have had at least one prior idiopathic spontaneous preterm delivery, studies have shown that weekly administration of 17P beginning in the window of 16 0/7 weeks to 20 6/7 weeks, and continuing through 36 6/7 weeks, reduces the chance of preterm delivery by as much as 33 percent. The rates of several additional complications of prematurity (e.g., necrotizing enterocolitis, intraventricular hemorrhage and need for supplemental oxygen) were also decreased among the infants of women in this study treated with 17P. As with any drug, there are risks that may outweigh these benefits.

What're the options for prescribing 17P to an Amerigroup member?

After reviewing a member's obstetrical history and drug indications, should you wish to prescribe this medication for your patient please note the following options:

Location	Benefit	17P Medication options	Contact number	Medication prior authorization required?
Member home	Medical	Alere Home Health Services can provide compounded 17P and administer weekly	Alere Home Health Services 1-800-365-2151	NO
Provider office	Medical	Compounded 17P	For assistance locating a compounding pharmacy call Provider Services at 1-800-454-3730	NO
Provider office or *member home <i>*Verify drug approved before requesting Alere Home Health</i>	Pharmacy	Trademarked 17P Makena™	Express Scripts 1-855-215-4496	YES Providers may use the State Makena Prior Authorization Request form: https://paxpress.txpa.hidinc.com/makena.pdf Fax request to: Express Scripts at 1-800-601-4829
Provider office	Medical	Trademarked 17P Makena™	Buy and bill	NO

**Amerigroup members in the Medicaid Rural Service Area are served by Amerigroup Insurance Company; all other Amerigroup members in Texas are served by Amerigroup Texas, Inc.*

As a reminder, clinician-administered drugs must be submitted with the appropriate national drug code (NDC), as published on the Texas NDC-to-HCPCS Crosswalk found on the Vendor Drug Website at <http://www.txvendordrug.com/formulary/clinician-administered-drugs.shtml>.

What if I need assistance?

If you have questions about this communication, received this fax in error or need assistance with any other item, contact your local Provider Relations representative or call Provider Services at 1-800-454-3730.