

NEVADA MEDICAID ANTIBIOTICS POLICY



In 2019, Nevada Medicaid will require prior authorization for 3rd generation cephalosporins, fluoroquinolones and oxazolidinones prescribed in outpatient settings.

Antibiotic Policy

Prior Authorization (PA) approval will be provided if:

1. Current Infectious Disease Society of America (or equivalent organization) guidelines support its use; or
2. Culture and sensitivity-proven susceptibilities and resistance to other agents suggest the requested antibiotic is necessary.

Approval will be for a single course.

Exception Criteria

- If prescribed by an infectious disease specialist or by an emergency department provider
- If Cefixime is prescribed for gonococcal infection where Ceftriaxone is unavailable
- If the recipient resides in acute care, long-term acute care, or a skilled nursing facility

Resources

Nevada Medicaid:

<https://www.medicaid.nv.gov/providers/rx/rxinfo.aspx>

IDSA Guidelines: <https://www.idsociety.org/practice-guidelines/#/score/DESC/0+/>

CDC Antibiotic/Antimicrobial Resistance:

<https://www.cdc.gov/drugresistance/about.html>

Help us to increase awareness of the importance of appropriate antibiotic prescribing

Our overall goal is that together, we can preserve our ability to save lives with antibiotics and begin to turn the tide of antibiotic resistance for Medicaid recipients.

FFS Prior Authorization

CMS Rules dictate a 24-hour turn-around requirement for all PA requests

FFS average turn-around time is about 5 hours

FFS Prior Authorization Process

1. Prescription is written by a Prescriber
2. Prescription taken to Pharmacy, and if the claim is denied for requiring a PA, then
3. Pharmacy will fax/call the Prescriber for a PA request to be submitted
4. Prescriber's office submits the PA request to OptumRx via fax, phone or portal
5. OptumRx Call Center receives PA request, determines eligibility and PA requirement

- If eligible and PA required, then OptumRx will initiate a PA Review based on Medicaid Services Manual Ch. 1200 criteria

6. If request is approved, the PA is placed in the pharmacy system for claim processing and notification is faxed to the Prescriber.
7. If request is denied, the notice of decision (NOD) is mailed to the Prescriber and to the Member.