

# New Prior Authorization Requirements for Certain Prescriptions

We're making some updates to our requirements for certain specialty medications for UnitedHealthcare Community Plan members. These requirements are important to us to provide our members access to care that's medically appropriate as we work toward the Triple Aim of improving health care services, health outcomes, and overall cost of care. These requirements will apply whether members are new to therapy or have already been receiving these medications.

For dates of service on or after Sept. 1, 2019, we'll require prior authorization for the following drugs for UnitedHealthcare Community Plan members:

- Ilumya™
- Actemra® ACTPen®

You can find prior authorization requirements, preferred drug lists and formulary search tools at [UHCprovider.com/TXcommunityplan](https://UHCprovider.com/TXcommunityplan) > [Pharmacy Resources and Physician Administered Drugs](#).

## Submitting a Prior Authorization Request

You can submit your prior authorization request in several ways:

- **Online:** Log onto Link at [UHCprovider.com](https://UHCprovider.com) and select the Prior Authorization and Notification tool. Please include any information you'd like us to review as part of your request.
- **Phone:** Call **800-310-6826**.
- **Fax:** Complete a prior authorization form and fax it to **866-940-7328**. You can find this form at [UHCprovider.com/TXcommunityplan](https://UHCprovider.com/TXcommunityplan) > [Pharmacy Resources and Physician Administered Drugs](#) > Pharmacy Prior Authorization > Texas Standard Prior Authorization Request Form for Prescription Drug Benefits

## Coverage Determination

After you submit a request for prior authorization, we'll conduct a clinical coverage review to evaluate whether the drug is appropriate for that member. These reviews consider:

- The terms of the member's benefit plan
- Our drug coverage policy
- The member's treatment history
- Dosage recommendations from the U.S. Food and Drug Administration (FDA) approved labeling
- Other criteria, when applicable

We'll inform you and the member of our coverage determination. If an adverse determination is made, we'll explain your appeal options.

## We're Here to Help

If you have questions, please contact Customer Service at **888-887-9003**, 8 a.m. – 6 p.m., Monday – Friday. Thank you.