

Pharmacy Prior Authorization Requirements

Effective Aug. 1, 2020

Starting Aug. 1, 2020, prior authorization will be required for some drugs used to treat hallucinations and some Fentanyl agents used to treat pain when prescribed to UnitedHealthcare Community Plan members. The drugs requiring prior authorization are listed in the following chart.

Drug	Clinical Criteria Name	Clinical Criteria
NUPLAZID 10 MG TABLET	Nuplazid	txvendordrug.com > Formulary > Prior Authorization > Managed Care Clinical Prior Authorization
NUPLAZID 17 MG TABLET		
NUPLAZID 34 MG CAPSULE		
ABSTRAL 200 MCG SUBLINGUAL TABLETS	Fentanyl Agents	txvendordrug.com > Formulary > Prior Authorization > Managed Care Clinical Prior Authorization
ABSTRAL 300 MCG SUBLINGUAL TABLETS		
ABSTRAL 400 MCG SUBLINGUAL TABLETS		
ABSTRAL 600 MCG SUBLINGUAL TABLETS		
ABSTRAL 800 MCG SUBLINGUAL TABLETS		
LAZANDA 100 MCG NASAL SPRAY		
LAZANDA 400 MCG NASAL SPRAY		
SUBSYS 1,200 MCG SPRAY		
SUBSYS 1,600 MCG SPRAY		
SUBSYS 100 MCG SPRAY		
SUBSYS 200 MCG SPRAY		
SUBSYS 400 MCG SPRAY		
SUBSYS 600 MCG SPRAY		
SUBSYS 800 MCG SPRAY		
ACTIQ 1,200 MCG LOZENGE		
ACTIQ 1,600 MCG LOZENGE		
ACTIQ 200 MCG LOZENGE		
ACTIQ 400 MCG LOZENGE		
ACTIQ 600 MCG LOZENGE		
ACTIQ 800 MCG LOZENGE		
FENTANYL CITRATE OTFC (oral transmucosal fentanyl citrate) 1,200 MCG		
FENTANYL CIT 1,600 MCG		
FENTANYL CITRATE OTFC 200 MCG		
FENTANYL CITRATE OTFC 400 MCG		
FENTANYL CITRATE OTFC 600 MCG		
FENTANYL CITRATE OTFC 800 MCG		
FENTORA 100 MCG BUCCAL TABLET		
FENTORA 200 MCG BUCCAL TABLET		
FENTORA 400 MCG BUCCAL TABLET		
FENTORA 600 MCG BUCCAL TABLET		
FENTORA 800 MCG BUCCAL TABLET		

How to Request Prior Authorization

You can submit your prior authorization requests in several ways.

- **Online:** UHCprovider.com/TXcommunityplan > [Pharmacy Resources and Physician Administered Drugs](#) > Pharmacy Prior Authorization > PreCheck MyScript®
- **Phone:** 800-310-6826
- **Fax** 866-940-7328

Please send a completed prior authorization form with your request. You can access the form at UHCprovider.com/TXcommunityplan > Pharmacy Resources and Physician Administered Drugs > [Texas Standard Prior Authorization Request Form for Prescription Drug Benefits](#).

We're Here to Help

If you have questions, please contact your Physician Advocate or call Member Services at **888-887-9003**. Thank you.