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Inland Empire Health Plan

PHARMACY TIMES

BY IEHP PHARMACEUTICAL SERVICES DEPARTMENT

November 18, 2014

New Prescription Drug Prior Authorization Form

Dear IEHP Provider,

As of **November 3, 2014**, IEHP will require all IEHP Providers to use the new standardized two-page Prescription Drug Prior Authorization Request form, Form 61-211, for Medi-Cal and Healthy Kids members. (This change does not affect Medicare members who are enrolled in IEHP DualChoice Cal MediConnect Plan and Medicare DualChoice (HMO SNP) Plan.)

What Does This Mean For You?

- **Physicians should respond to pharmacy requests in a timely manner to change to formulary medications.**
- Physicians should refer to the Provider website and Formulary tool online for reference and prescribe formulary drugs where possible.
- We encourage physicians to utilize e-prescribing software.
- Physicians **MUST** use the new Prescription Drug Prior Authorization Request form for prior authorization requests. Other forms will not be accepted or processed. Please visit our website to download forms.
- Physicians **MUST** complete the form in its entirety **providing all pertinent information in the designated fields**; otherwise the request will be disapproved.

For more information and resources, please visit our secure Provider website: www.iehp.org

Sincerely,

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