



State of Vermont

Department of Vermont Health Access

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Submission Process for Prior Authorization of Physician Administered Drugs (J-Codes) During Change Healthcare Outage

<u>Background</u>

On Wednesday February 21st Change Healthcare, the Pharmacy Benefits Manager for Vermont Medicaid which operates point of sale claims processing and prior authorization review, reported issues related to a cyber security incident. Change Healthcare took immediate action to disconnect Change Healthcare's systems to prevent further impact.

As a temporary process to continue to review prior authorization requests for physician administered drugs through the medical benefit, please follow the prior authorization request submission steps below in place of the normal fax submission process, as noted on the request forms.

Instructions for prescribers:

Please refer to the posted physician fee schedules for HCPCS codes coverage information and prior authorization requirements Codes/Fee Schedules | Department of Vermont Health Access. If prior authorization is required, see the Preferred Drug List for current coverage criteria | Preferred Drug List (PDL) & Clinical Criteria | Department of Vermont Health Access and prior authorization forms.

- 1. If the member has primary insurance (other than Vermont Medicaid), submit prior authorization request to other insurance first.
- 2. If the member has Vermont Medicaid as primary insurance, please submit prior authorization request and clinical office notes.
 - a. Department of Vermont Health Access (DVHA) requests additional information be provided if possible, including:
 - i. Is the request a continuation physician administered drug therapy?
 - ii. Dates that member tried preferred products.
- 3. A temporary email address has been created to allow for physician administered drug prior authorization submission during the Change Healthcare systemwide outage. Email prior authorization requests to AHS.DVHAJcodePArequest@vermont.gov.
- 4. The Notice of Decision will be generated from Gainwell once the review process is complete.
- 5. Providers may call Gainwell, 1-800-925-1706, to follow up on the status of their prior authorization request.

Please re-send any Prior Authorization requests beginning from **Wednesday 02/21/2024** that may not have been received.

What is the impact?

Unfortunately, the outage is not limited to Vermont Medicaid members and providers. The outage is disrupting pharmacy services nationwide.

How long will this system outage last?

Change Healthcare does not have an established time for resolution. Please follow this process until further notice.

Thank you for your patience as we develop/refine this new process.