



State of Vermont
Department of Vermont Health Access
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Notice: Vermont Medicaid – Prior Authorization

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| Effective Date: 07/18/2024 | |
| BIN: 017795 | PCN: VTPOP |
| BIN: 017795 | PCN: VTPARTD |

The Department of Vermont Health Access (DVHA) previously reported that Optum/Change Healthcare (CHC), which operates Vermont's Medicaid pharmacy claims system, experienced a significant cybersecurity issue in February 2024. There have been continued efforts to restore processes and applications that were affected by the cybersecurity event.

Beginning **7/18/24**, prescription claim edits for **Reject Code 76 – “Plan Limits Exceeded”** will return to normal functionality in the pharmacy claims system. Prescription claims that have been exceeding days' supply, daily dosage, and frequency per day limits will be rejected at point of sale. If required prior authorizations may be submitted via fax for review. The standard prior authorization forms can be found at <https://dvha.vermont.gov/forms-manuals/forms/pharmacy-prior-authorization-request-forms-and-order-forms> and completed forms should be faxed to 1-844-679-5366.

Please continue to refer to the Preferred Drug List (<https://dvha.vermont.gov/providers/pharmacy/preferred-drug-list-pdl-clinical-criteria>) to review preferred and non-preferred medications and limits associated with those medications (For example: eletriptan quantity limit =12 tablets/30 days).

Providers requiring assistance with submitting a prior authorization may contact the Optum Pharmacy Helpdesk at VermontHD@Optum.com, the Prescriber Helpdesk at (1-844-679-5363) or the Pharmacy Helpdesk at (1-844-679-5362).

More information regarding claim edits and prior authorization requirements will be provided as soon as available.

Thank you for your continued efforts and support to serve the Vermont Medicaid Pharmacy Program and its members.