

MEDICAL ASSISTANCE HANDBOOK
PRIOR AUTHORIZATION OF PHARMACEUTICAL SERVICES

V. **Requirements for Prior Authorization of Prescriptions for Drugs that Exceed the Established Quantity Limits/Daily Dose Limits**

A. Prescriptions That Require Prior Authorization

Prescriptions for drugs included in the Quantity Limits/Daily Dose Limits List that exceed the established quantity limits/daily dose limits must be prior authorized. For the list of drugs with quantity limits/daily dose limits and the established quantity limits, see:

<http://www.dpw.state.pa.us/provider/doingbusinesswithdpw/pharmacyservices/quantitylimitslist/index.htm>

B. Review of Documentation for Medical Necessity

In evaluating a request for prior authorization of a prescription with a quantity that exceeds the established quantity limit/daily dose limit, the determination of whether the requested prescription is medically necessary will take into account the following:

1. Whether the recipient requires a dose that includes half tablets

OR

2. Whether the recipient's dose is being titrated by the prescriber (3 month limit)

OR

3. Whether the recipient has a history of intolerance of a drug administered as a single daily dose

OR

4. **Whether the quantity prescribed is consistent with medically accepted prescribing practices and standards of care, including support from peer-reviewed literature or national treatment guidelines that corroborate use of the quantity of medication being prescribed**

OR

5. Whether the recipient does not meet the clinical review guidelines listed above, but, in the professional judgment of the

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physician reviewer, the services are medically necessary to meet the medical needs of the recipient

C. Clinical Review Process

Prior authorization personnel will review the request for prior authorization and apply the clinical review criteria in Section B to assess the medical necessity of the request for a prescription that exceeds the established quantity/daily dose limits. If any of the applicable guidelines in Section B. are met, the reviewer will prior authorize the prescription. If none of the applicable guidelines are met, the prior authorization request will be referred to a physician reviewer for a medical necessity determination. Such requests for service may be approved when, in the professional judgment of the physician reviewer, the services are medically necessary to meet the medical needs of the recipient.