

MEMORANDUM

TO:	Valued STAR and CHIP Providers
FROM:	El Paso Health
DATE:	10/24/2023
RE:	2023-2024 Synagis Season

2023-2024 Synagis Season is approaching and statistics indicate RSV appears earlier in some counties and remains active in others. Based on this information, the administration of Synagis injections for El Paso Health members will begin November 1, 2023 and with and ending date to be determined (TBD). Prior authorization requests may be submitted 10 days prior to start date. Please note the Synagis PA Process has changed.

STAR and CHIP Members: Navitus, El Paso Health's pharmacy benefit manager, is processing all Synagis prior authorization requests for Medicaid and CHIP members enrolled with the health plan. Synagis is only dispensed through the pharmacy listed below.

Lumicera Specialty Pharmacy 2601 West Beltline Highway, Suite 302 Madison, WI 53713 Synagis Phone: 855-847-3554 Synagis Fax: 855-847-3558

The Prior Authorization Process through Navitus has changed and is as follows:

- 1. <u>Initial Requests:</u> require BOTH the Texas Standard Prior Authorization form AND the Synagis request form be filled out by the prescriber, which can be found on the Navitus website:
 - a. Texas Standard Prior Authorization Form: https://txstarchip.navitus.com/pdf-documents/pa-forms/texas-standard-priorauthorization-request-form.aspx
 - b. Synagis El Paso Health Plans Form: https://txstarchip.navitus.com/pdf-documents/pa-forms/synagis-2019-2020_txmcaid 092419-(4).aspx

2. Physician faxes the "Navitus Palivizumab (Synagis) Prior Authorization Request Form" directly to selected pharmacy.



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a. Lumicera Specialty Fax # 855-847-3558

3. Pharmacy will forward completed Prior Authorization Request Forms to Navitus for final approval. Approvals are only granted for ONE dose at a time. Failure to submit both prior authorization forms will result in denial of the request.

4. <u>Subsequent Dose forms:</u> are used to request each dose after the initial approval. Members may be approved for up to five total doses during their local RSV season. The Subsequent Dose forms are filled out by the dispensing pharmacy and forwarded to Navitus for review. The dispensing pharmacy will contact the prescriber office for the information needed on this form including dates of previous Synagis doses, current weight, and if a hospitalization due to an RSV infection has occurred. Approvals are only granted for one dose at a time and outreach to the prescriber office is expected prior to each monthly dose requested.

5. Pharmacy coordinates Synagis delivery with the physician's office.

6. Physician administers Synagis and bills El Paso Health for the administration.

For additional information concerning Synagis administration for STAR and CHIP Members, please call Navitus 24 hours a day, 7 days a week at 1-877-908-6023.

Reference:

https://www.txvendordrug.com/about/news/2023/2023-24-rsv-season-schedule

https://www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/interim-guidance-for-use-of-palivizumab-prophylaxis-to-prevent-hospitalization/

https://www.dshs.texas.gov/immunization-unit/texas-vaccines-children-program-immunizations-unit

If you have any questions regarding this communication please contact our Provider Relations team at 915-532-3778 or email us at ProviderRelationsDG@elpasohealth.com