September 15, 2016

Dear Provider

Please review the formulary changes which pertain to the Pharmacy Benefit unless denoted otherwise. If you have questions, contact Affinity Health Plan’s Provider line by line of business below

- Medicaid and HARP Provider line Monday-Friday 9am-7pm at 1-877-432-6793
- QHP and EP Provider line 7 days a week, 24 hours a day at 1-855-582-2022
- Medicare Provider line 7 days a week, 24 hours a day at 1-855-344-0930

As a result of the enactment of Social Services Law section 364-j(26-a), effective October 1, 2016, Medicaid Managed Care Plans must require a prior authorization for prescriptions of opioid analgesics in excess of four prescriptions in a thirty-day period, this is regardless of formulary status. If a Medication require a prior authorization or formulary exception this is outside of the new thirty-day requirement. Prior authorization will not apply to formulary prescriptions for patients receiving hospice care, prescriptions for patients with a diagnosis of cancer or sickle cell disease, or any other condition or diagnosis for which the Commissioner of Health determines prior authorization is not required.

Affinity’s exclusions to the new criteria requirement:

- History of 1 prior therapy of an antineoplastic or sickle cell product for at least 30 days in the last 365 days
- Diagnosis of cancer or sickle cell disease in the last 730 days
- History of less than or equal to 3 opioid products in the last 30 days