

Prior Authorizations, Step Therapy and Quantity Limits

Summary of options requesting authorization for prescriptions requiring prior authorization, step therapy, or quantity limits:

- 1) For all initial requests SHS/CAPS providers are strongly encouraged to pre-register and regularly use PreCheck MyScript – go to <https://provider.linkhealth.com/#/>
- 2) For phone inquiries, call the Optum PA/Clinical team for prior authorizations and appeals @ 1-800-626-0072
- 3) If there needs to be an override or exception based on clinical needs, Optum will need to know the specific clinical information that supports the override request. Please also include the contact name, email, and phone number of the requester, and contact information for the treating provider, so that additional supporting information can be solicited if necessary. These requests can be most efficiently escalated to:
 - a. Jason Pettaway @ 630-335-5823 Jason.Pettaway@optum.com<mailto:Jason.Pettaway@optum.com> OR
 - b. Kindal DeFranco @ 602-295-1877 Kindal.DeFranco@optum.com<mailto:Kindal.DeFranco@optum.com>
 - c. If Optum is unable to process without UC SHIP approval, Optum will contact:
 - i. Brad Buchman MD @ desk 510-287-3398, cell 510-289-0170
brad.buchman@ucop.edu<mailto:brad.buchman@ucop.edu> OR
 - ii. Diane Lamotte RPh @ 831-459-1407 dmlamott@ucsc.edu<mailto:dmlamott@ucsc.edu>

QUANTITY LIMITS (Common products for UCSC)

Stimulants

Adderall immediate release (generic)	3/d, but 2/d for 30mg
Adderall XR (generic)	1/d
Ritalin immediate release (methylphenidate)	3/d
Strattera (atomoxetine)	1/d 60/80/100mg, but 2/d 10/40mg
Vyvanse	1/d

Antipsychotics

Abilify (aripiprazole)	1/d
Latuda (lurasidone)	1/d for 20/40/60/120mg but 2/d for 80mg

Migraine

Imitrex (sumatriptan)	9/30d
Maxalt (rizatriptan)	18/30d

Sedatives

Zolpidem (Ambien)	1/d
-------------------	-----

Anti-Emetics

Zofran (ondansetron)	15/30d (4 or 8mg)
----------------------	-------------------

Proton Pump Inhibitors (PPI)

Omeprazole (Prilosec)	1/d
Pantoprazole (Protonix)	1/d

Diabetic Supplies

Test Strips	300/30d
-------------	---------

Asthma

Albuterol Inh	2/30d
Flovent Inh	2/30d

Erectile Dysfunction

Cialis	6/30d
Viagra	6/30d

Opioids

Hydrocodone/APAP 5-325mg	9 tabs/day up to 7 days for treatment naïve, 12 tabs/day for experienced
Hydrocodone/APAP 10-325mg	4 tabs/day up to 7 days for treatment naïve, 9 tabs/day for experienced

REGULAR PRIOR AUTHORIZATIONS

- Testosterone products
- Isotretinoin
- Tretinoin (for students over age 25 – not for cosmetic purposes)
- Levalbuterol
- Pantoprazole (more than quantity limit)
- Adapalene
- Migraine meds (more than quantity limit)