

Texas Medicaid/CHIP Prior Authorization Criteria Information

Drug Class/PA Criteria Name	Effective Date	Documentation Requirement	Clinical Criteria Utilized	Link to Criteria Logic
ADD/ADHD Agents	11/4/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Clonidine ER • ER Formulations • IR Formulations • Guanfacine • Atomoxetine • Qelbree https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/add_adhd_agents_pending_pdf.pdf
Aliskiren-Containing Agents (Except Valturna)	9/16/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• 150mg Aliskiren-Containing Agents • 300mg Aliskiren-Containing Agents https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/aliskiren_pend.pdf
Allergen Extracts	7/31/2015	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Grastek (Timothy Grass Pollen Allergen Extract) • Oralair (Mixed Grass Pollens Allergen Extract) • Palforzia (Peanut Allergen Powder) • Ragwitek (Short Ragweed Pollen Allergen Extract) https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/allergen_extractpdg.pdf
ALS Agents	9/8/2023	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Relyvrio (Sodium phenylbutyrate/Taurasodiol) https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/als.pdf
Amantadine ER	5/14/2021	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Amantadine Extended-Release Agents https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Amantadine_ER_Clin_Edit_Criteria.pdf
Androgenic Agents	1/29/2015	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Androgenic Agents https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/androgenic_agents.pdf
Antiemetic Agents	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Antiemetics https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/antiemetics.pdf
Antifungal Agents, Topical	1/16/2022	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Topical Antifungals for Onychomycosis https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/anf.pdf
Antipsychotic Agents	1/29/2015	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Antipsychotics https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/antipsychotics.pdf
Antiseizure Agents	10/1/2022	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Diacomit (Stiripentol) • Epidiolex (Cannabidiol) • Fintepla (Fenfluramine) https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/antiseizurepdg.pdf
Anxiolytics and Sedative-Hypnotics	3/25/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	Anxiolytics: • Alprazolam • Chlordiazepoxide, Meprobamate & Oxazepam • Clonazepam & Diazepam • Clorazepate • Lorazepam Sedatives/Hypnotics: • Adults • Chloral Hydrate & Butabarbital • Flurazepam • Ramelteon • Tasimelteon https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/ashpdg.pdf
Appetite Suppressant Agents	4/8/2024	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Adipex-P • Lomaira • Phendimetrazine • Phentermine https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/appetite.pdf

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Arikayce	5/21/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Arikayce (Amikacin liposome inhalation suspension) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/arikayce.pdf
Binge Eating Disorder (BED) Agents	1/6/2021	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Vyvanse (lisdexamfetamine) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/bed.pdf
Buprenorphine Agents	1/15/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Buprenorphine/Naloxone • Buprenorphine Oral/Sublingual https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/buprenorphine_agents.pdf
Carisoprodol-Containing Agents	3/25/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Carisoprodol-Containing Agents https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Carisoprodol-Containing_Agents.pdf
CGRP Antagonist, Acute	1/6/2021	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Calcitonin Gene-Related Peptide Receptor (CGRP) Antagonists (Acute Treatment) • Nurtec ODT (Rimegepant) • Ubrovelvy (Ubrogepant) • Zavzpret (Zavegepant) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/cgrpacute.pdf
CGRP Antagonist, Prophylaxis	9/9/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Calcitonin Gene-Related Peptide Receptor (CGRP) Antagonists, Prophylaxis https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/cgrpchronic.pdf
CNS Stimulants	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Provigil (Modafinil) • Nuvigil (Armodafinil) • Sunosi (Solriamfetol) • Wakix (Pitolisant) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/cnsstimdg.pdf
Colchicine	1/4/2016	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Colchicine Agents https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Colcrys.pdf
Cortisol Receptor Antagonists	5/13/2024	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Korlym (Mifepristone) • Recorlev (Levoketoconazole) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/recorev.pdf
Compounded Medications	3/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Compounded Medications https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://www.hhs.texas.gov/sites/default/files/documents/services/health/medicaid-chip/programs/contracts/uniform-managed-care-contract.pdf
Contraceptives (CHIP)	2/1/2015	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Contraceptives (CHIP) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://www.bxvendordrug.com/about/manuals/pharmacy-provider-procedure-manual/p-9-formulary-coverage/family-planning-products
Cough/Cold Medications	7/7/2017	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Ages 2-4 • Ages 2-6 • Ages 2-10 • Ages 2-12 • Products Containing Opioids • Products Containing Acetaminophen or Ibuprofen https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Cough%20&%20Cold.pdf
COX-2 Inhibitors	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Celebrex • Meloxicam https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/cox2.pdf

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Cyclobenzaprine	4/17/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Cyclobenzaprine https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/cyclobenzaprine.pdf
Cymbalta	10/13/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Cymbalta (Duloxetine) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/cymbalta.pdf
Cystic Fibrosis Agents	7/18/2013	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Kalydeco (Ivacaftor) • Orkambi (Lumacaftor/Ivacaftor) • Symdeko (Tezacaftor/Ivacaftor/Ivacaftor) • Trikafta (Elexacaftor/Tezacaftor/Ivacaftor) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/cystic_fibrosis_agents.pdf
Cytokine and CAM Antagonists	11/25/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Actemra • Arcalyst • Cibinquo • Cimzia • Cosentyx • Enbrel • Enspryng • Humira • Ilaris • Ilumya • Kevzara • Kineret • Olumiant • Orenzia • Otesla • Rinvoq • Siliq • Simponi • Skyrizi • Sotyktu • Stelara • Taltz • Tremfya • Xeljanz https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/cytokine.pdf
Daybue	9/8/2023	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Daybue (Trofinetide) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/daybue.pdf
Desmopressin	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Desmopressin - Oral • Desmopressin - Injectible https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/desmopressin.pdf
Dextromethorphan Overutilization	9/16/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Dextromethorphan Overutilization https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/dextro.pdf
Diabetic Supplies (Medicaid and CHIP)	6/23/2020	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Diabetic Supplies (Medicaid and CHIP) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	
Diabetic Test Strips	2/2/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Diabetic Test Strips and Meters https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Diabetic_Test_Strip_Clinical%20Edit_Criteria.pdf
Diclofenac Gel and Topical Solution	6/27/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Diclofenac 3% Topical Gel • Diclofenac 1.5% and 2% Topical Solution https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/diclofenac.pdf
Dopamine Agonists	7/1/2021	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Dopamine Agonists https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/DA_Clin_Edit_Criteria.pdf

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Dipeptidyl Peptidase-4 (DPP-4) Inhibitors	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• DPP-4 Inhibitors https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/dpp4_inhibitor.pdf
Doxylamine/Pyridoxine	2/12/2020	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Doxylamine / Pyridoxine https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/doxylaminepyridoxine.pdf
Emflaza	4/10/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Emflaza (deflazacort) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/emflaza.pdf
Enzymes	9/16/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Aldurazyme • Revcovi • Ceprotrin • Elaprase • Fabrazyme • Galafold • Lumizyme • Naglazyme • Nityr / Orfadin • Strensiq • Vimizim https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/enzymes_pending.pdf
Erythropoiesis-Stimulating Agents	9/16/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Aranesp • Epogen, Procrit or Retacrit • Mircera • Reblozyl https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/esapdg.pdf
Evrysdi	5/14/2021	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Evrysdi (Risdiplam) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Evrysdi_Clin_Edit_Criteria.pdf
Fentanyl Agents	3/1/2015	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Actiq • Duragesic • Fentora https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/fentanyl.pdf
Filspari	11/28/2023	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Filspari (Sparsentan) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/filspari.pdf
FMT Agents	9/8/2023	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Vowst (Fecal microbiota spores, live-brpk) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/fmt.pdf
Forte	3/21/2016	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Forteo (Teriparatide) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Forteo.pdf
Gabapentin Agents	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Gabapentin • Gralise • Horizant https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/neurontin.pdf
Gattex	6/6/2023	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Gattex (teduglutide) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/gattex.pdf
Gaucher's Disease Agents	9/16/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history	• Agents for Gaucher's Disease https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/gauchers.pdf

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		Any other applicable documentation		
GI Motility Agents	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Amitiza (Lubiprostone) • Ibsrela (Tenapanor) • Linzess (Linaclotide) • Lotronex (Alosetron) • Motegrity (Prucalopride) • Movantik (Naloxegol) / Symproic (Naldemedine) • Relistor (Methylnaltrexone) • Trulance (Plecanatide) • Viberzi (Eluxadoline) https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/gimotilitypdg.pdf
Glatiramer Acetate Injection	1/29/2015	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Glatiramer https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/copaxone.pdf
Glucagon-Like Peptide-1 (GLP-1) Receptor Agonists	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • GLP-1 Receptor Agonists https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/glp_1_receptor_agonists.pdf
Gonadotropin Releasing Hormone (GnRH) Receptor Antagonists	10/28/2020	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Oriahnn • Myfembree https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/gnrh.pdf
Growth Hormone Agents	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Growth Hormone Agents - Excluding Serostim / Sogroya / Zorbtive • Serostim • Sogroya • Zorbtive https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/ghpdg.pdf
Hereditary Angioedema (HAE) Agents	9/16/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Hereditary Angioedema (HAE) Agents https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/HAE.pdf
Hemady	5/14/2021	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Hemady (dexamethasone) https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Hemady_Clin_Edit_Criteria.pdf
Hormonal Therapy	12/30/2023	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Hormonal Therapy Agents https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/hormonaltherapyagents.pdf
HP Acthar	11/25/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Acthar Gel https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/hp_actharpdg.pdf
Hyperlipidemia Agents	12/15/2015	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Juxtapid (Lomitapide) • Praluent (Alirocumab) • Repatha (Evolocumab) https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/hyperlipidemia.pdf
Ileal Bile Acid Transporter (IBAT) Inhibitors	3/20/2022	Information generally required to support authorization decision making includes, but not limited to: Clinical notes Lab work Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Bylvy (Odevixibat) • Livmarli (Maralixibat) https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/CP.pdf
Imcivree	11/28/2023	Information generally required to support authorization decision making includes, but not limited to: Clinical notes Lab work Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Imcivree (Setmelanotide) https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/imcivree.pdf

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Imiquimod	7/25/2012	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Aldara 5% Cream • Zyclara 3.75% Cream https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/imiquimodpdg.pdf
Immunomodulator Agents for Dry Eye	9/10/2020	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Immunomodulator Agents for Dry Eye https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/dryeye.pdf
Increlex	4/18/2012	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Increlex (Mecasermin) https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/increlex.pdf
Inhaled Antibiotics	9/9/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Inhaled Antibiotics https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/inhaledantibiotics.pdf
Ketorolac	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Ketorolac – Oral • Ketorolac – Injectable/Nasal https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/ketorolac.pdf
Keveys	9/9/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Keveys (Dichlorphenamide) https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/keveys.pdf
Leukotriene Modifiers	7/31/2015	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Montelukast • Zafirlukast • Zileuton https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/leukotriene.pdf
Lidocaine Patches	2/1/2015	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Lidocaine Patch https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/lidoderm.pdf
Lupus Agents	1/27/2022	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Benlysta (belimumab) • Lupkynis (voclosporin) https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/lupus.pdf
Lyrica	6/16/2016	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Lyrica (Pregabalin) • Lyrica CR (Pregabalin ER) https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/lyrica.pdf
Monoclonal Antibody Agents for Asthma	9/10/2020	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Adbry (Tralokinumab-ldrm) • Dupixent (Dupilumab) • Fasena (Benralizumab) • Nucala (Mepolizumab) • Xolair (Omalizumab) https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/monoclonalabpdg.pdf
Multiple Sclerosis	11/11/2021	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Ampyra (Dalfampridine) • Aubagio (Teriflunomide) • Mavenclad (Cladribine) • Mayzent (Siponimod) • Ponvory (Ponesimod) • Mayzent (Siponimod) • Mavenclad (Cladribine) https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/ms.pdf
Nitazoxanide	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Nitazoxanide tablets https://www.molinahealthcare.com/providers/tx/mcdicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/alinia.pdf

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Nuedexta	4/10/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Nuedexta (Dextromethorphan/Quinidine) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Nuedexta_Clin_Edit_Criteria.pdf
Nuplazid	4/10/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Nuplazid (pimavanserin) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/nuplazid.pdf
Omega-3-Acid Fatty Acids	7/25/2012	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Omega-3 Fatty Acids https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/lovaza.pdf
Opiate/Benzodiazepine/Muscle Relaxant Combinations	2/22/2017	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Opiate/Benzodiazepine/Muscle Relaxant Combinations https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/TX%20PA_Opiate_Benzo_MRv2.pdf
Opioid Policy	2/14/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Opioid Policy https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/opc.pdf
Orilissa	9/9/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Orilissa (Elagolix) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/orilissa.pdf
Oxybate Products	5/13/2024	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Lumryz • Sodium Oxybate • Xyrem • Xywav https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/xyrem.pdf
Oxervate	9/10/2020	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Oxervate (cenegermin-bkbj) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/oxervate.pdf
Oxycodone Extended-Release Agents	5/15/2012	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Oxycodone ER - Low Dose • Oxycodone ER - High Dose https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/oxycotin.pdf
PDE5-Inhibitors	5/1/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• PDE5-Inhibitors https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/revatio.pdf
PDL - 1 Day Criteria	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Antiparasitics, Topical • Epinephrine, Self-Injected https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - 3 Day Criteria	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Antimigraine Agents, Triptans • Antiemetic-Antivertigo Agents, Oral • Cough and Cold Non-Antitussive • Cough and Cold Narcotic Antitussive • Cough and Cold Non-Narcotic Antitussive https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - 5 Day Criteria	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Antibiotics, Vaginal • Cephalosporins and Related Antibiotics (Oral) • Fluoroquinolones, Oral • Ophthalmics, Antibiotic Steroid Combinations • Ophthalmics, Antibiotic • Ophthalmics, Anti-Inflammatories • Otic Antibiotics • Penicillins • Tetracyclines https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf

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PDL - 6 Day Criteria	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Analgesics, Narcotic – Long Acting • Analgesics, Narcotic – Short Acting <p>https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx</p>	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - 7 Day Criteria	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Anticoagulants • Antifungals, Topical • Otic Anti Infection/Anesthetics • Steroids, Topical <p>https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx</p>	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - 10 Day Criteria	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Antibiotics, GI (excluding Xifaxan 550mg) • Glucocorticoids, Oral • Neuropathic Pain • NSAIDS <p>https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx</p>	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - 14 Day Criteria	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Angiotensin Modulator Combinations • Antifungals, Oral • Antihypertensives, Sympatholytics • Antiparkinson's Agents • Beta Blockers • Calcium Channel Blockers (Oral) • COPD Agents • Hypoglycemics, Incretin Mimetics/Enhancers <ul style="list-style-type: none"> • Immune Globulins • Lincosamides/Oxazolidinones/Strep togramins • Sedatives and Hypnotics <p>https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx</p>	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - 30 Day Criteria	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • Acne Agents, Oral • Acne Agents, Topical • Androgenic Agents, Topical • Antihistamines, First Generation • Antihistamines, Minimally Sedating • Antihyperuricemics • Antimigraine Agents, Other • Antivirals, Oral/Nasal • Antivirals, Topical • Anxiolytics • Bile Salts • Bladder Relaxant Preparations • Bone Resorption Suppression and Related Agents • BPH Agents • Bronchodilators, Beta Agonist • Colony Stimulating Factors • Cytokine and CAM Antagonists • Glucagon Agents • Glucocorticoids, Inhaled • Hypoglycemics, Insulin • Hypoglycemics, Meglitinides • Hypoglycemics, Metformin • Intranasal Rhinitis Agents • Iron, Oral • Lipotropics, Other • Ophthalmics, Allergic Conjunctivitis • Ophthalmics, Glaucoma Agents • Opiate Dependence • Pancreatic Enzymes • Pediatric Vitamin Preparations • Phosphate Binders • Platelet Aggregation Inhibitors • Potassium Binders • Progestins for Cachexia • Sickle Cell Anemia Treatments • Skeletal Muscle Relaxants • Stimulants and Related Agents • Thrombopoiesis Stimulating Proteins • Ulcerative Colitis Agents <p>https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx</p>	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - Alzheimer's Agents	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • PDL Alzheimer's Agents <p>https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx</p>	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - Angiotensin Modulators	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • PDL Angiotensin Modulators <p>https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx</p>	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - Antibiotics, Topical	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	<ul style="list-style-type: none"> • PDL Antibiotics, Topicals <p>https://www.molinahealthcare.com/providers/tx/mexicaid/drug/priorauthorizationforms.aspx</p>	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf

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PDL - Antidepressants, Other	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• PDL Antidepressants https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - Bronchodilators, Beta Agonist	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• PDL Bronchodilators, Beta Agonists https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL – H. Pylori Treatment	12/1/2021	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• PDL H. Pylori Treatment https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - Hepatitis C Agents	3/10/2022	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• PDL Hepatitis C Agents https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - Immunosuppressives, Oral	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• PDL Immunosuppressives, Oral https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - Lipotropics, Statins	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• PDL Lipotropics, Statins https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL – Macrolides, Oral	9/17/2020	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Macrolides, Oral https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - Ophthalmics, Anti-Inflammatory /Immunomodulators	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• PDL Ophthalmics, Anti-Inflammatory / Immunomodulators https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - Proton Pump Inhibitors	2/1/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• PDL Proton Pump Inhibitors https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - Rosacea Agents	5/4/2022	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• PDL Rosacea Agents https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
PDL - Smoking Cessation	5/4/2022	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• PDL Smoking Cessation https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pdl_crit_guide.pdf
Phosphate Binders	4/18/2012	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Phosphate Binders https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/phosphate_binders.pdf
Promethazine/Promethazine Containing Products	9/16/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Promethazine Containing Products https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pbenergarn.pdf
Propylthiouracil	10/22/2013	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Propylthiouracil https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/ptu.pdf

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Proton Pump Inhibitors	12/18/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Proton Pump Inhibitors https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/PPI.pdf
Pulmozyme	4/19/23	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Pulmozyme (dornase alfa) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pulmozyme.pdf
Pulmonary Hypertension Agents	11/25/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Injectable Agents • Oral/Inhaled Agents https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/pah.pdf
Ranexa	6/1/2012	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Ranexa / Ranexa ER https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/ranexa.pdf
Recurrent Vulvovaginal Candidiasis (RVVC) Agents	11/25/22	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Vivjoa https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/rvvc.pdf
Retinoids	9/9/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Topical Retinoids https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Retinoids.pdf
Rezurock	11/28/2023	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Rezurock (Belumosil) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/rezurock.pdf
Savella	1/22/2016	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Savella (Milnacipran) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Savella.pdf
SGLT2 Inhibitors	10/3/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Single Entity Agents • Combination Agents https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/sgl2pdg.pdf
Sickle Cell Agents	3/5/2020	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Oxbryta (Voxelotor) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/sicklecell.pdf
Skyclarys	11/28/2023	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Skyclarys (Omaveloxolone) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/skyclarys.pdf
Sphingosine 1-phosphate (S1P) Receptor Modulators	6/5/2024	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Velsipity (Etrasimod) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/s1p.pdf
Symlin	4/23/2012	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Symlin (Pramlintide) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/symlin.pdf
Synagis	5/15/2012	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Synagis (palivizumab) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/synagis.pdf

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Thiazolidinediones	5/15/2012	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history • Any other applicable documentation	• Pioglitazone • Rosiglitazone https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/thiazolidinediones.pdf
Topical Acne Agents	2/12/2018	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Topical Acne Agents https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Topical%20Acne%20Agents.pdf
Topical Immunomodulators	4/23/2012	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Elidel and Protopic 0.03% • Protopic 0.1% • Eucrisa • Opzelura 1.5% cream https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/immunomodulatorspdg.pdf
Transthyretin Agents	10/16/2020	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Tegsedi • Vyndamax / Vyndaqel https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/Transthyretin%20Agents.pdf
Urea Cycle Disorder Agents	5/3/2019	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Urea Cycle Disorder Agents https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/UCD.pdf
Veozah	9/8/2023	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Veozah (Fezolinetant) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/veozah.pdf
VMAT2 Inhibitors	9/16/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	Vesicular Monoamine Transporter 2 (VMAT2) Inhibitors • Austedo / Xenazine • Ingrezza https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/vmat2pdg.pdf
Voxzogo	6/10/2022	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Voxzogo (Vosoritide) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/voxzogo.pdf
Xifaxan	4/23/2012	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	Xifaxan (Rifaximin) • Xifaxan 200mg • Xifaxan 550mg https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/xifaxan.pdf
Zelboraf	9/16/2014	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Zelboraf (Vemurafenib) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/zelboraf.pdf
Ztalmly	3/1/23	Information generally required to support authorization decision making includes, but not limited to: • Clinical notes • Lab work • Medication history Any other applicable documentation	• Ztalmly (Ganaxolone) https://www.molinahealthcare.com/providers/tx/medicaid/drug/priorauthorizationforms.aspx	https://paxpress.txpa.hidinc.com/ztalmly.pdf