

February 23, 2015

Montana Healthcare Programs Notice

Pharmacy, Physician, and Mid-Level Providers

Effective March 23, 2015

New Restrictions Added to Hydrocodone-Chlorpheniramine Suspension (Tussionex®)

Hydrocodone-Chlorpheniramine Suspension (Tussionex®) became a CII controlled substance in October 2014 and has new Medicaid restrictions due to safety concerns. For Montana Medicaid, Hydrocodone-Chlorpheniramine Suspension is allowed for members who are 6 years of age and over. The following limitations will apply for Hydrocodone-Chlorpheniramine Suspension:

Members between 6 and 12 years of age

- Maximum of two prescriptions covered per year
- No more than 90 ml per prescription
- No more than 180 ml per year
- Maximum daily dose of 5 ml

Members 13 years of age or older

- Maximum of two prescriptions covered per year
- No more than 90 ml per prescription
- No more than 180 ml per year
- Maximum daily dose of 10 ml

Contact Information

If you have any questions regarding this provider notice, please contact Dave Campana, R.Ph., at 406-444-5951 or dcampana@mt.gov, or Katie Hawkins at 406-444-2738 or khawkins@mt.gov, or the Medicaid Drug Prior Authorization Unit at:

Drug Prior Authorization Unit
Mountain-Pacific Quality Health
3404 Cooney Drive
Helena, MT 59602
406-443-6002 or 1-800-395-7961 (Phone)
406-513-1928 or 1-800-294-1350 (Fax)

For claims questions or additional information, contact Provider Relations at 1-800-624-3958 (toll-free, in/out of state) or 406-442-1837 (Helena) or via e-mail at MTPRHelpdesk@xerox.com.

Visit the Montana Healthcare Programs Provider Information website at <http://medicaidprovider.mt.gov/>.