



MONTANA HEALTHCARE PROGRAMS NOTICE

January 15, 2019

Physician, Mid-Level, Outpatient Hospital, Federally Qualified Health Center, and Rural Health Clinic Providers

Effective January 16, 2019 Updated

Physician Administered Drug Update

Effective January 16, 2019 Montana Healthcare Program will require the prior authorization of Xolair® (omalizumab).

Please note that the Nucala® criteria has been updated to include the newly approved indication.

[The entire criteria information and prior authorization form can be found at https://medicaidprovider.mt.gov/priorauthorization#260627814-physician-administered-drugs.](https://medicaidprovider.mt.gov/priorauthorization#260627814-physician-administered-drugs)

Contact Information

Physician Program Officer (406) 444-3995

FQHC/RHC Program Officer (406) 444-7018

Hospital Program Officer (406) 444-4834

[For additional information, contact Montana Provider Relations at \(800\) 624-3958 or \(406\) 442-1837 or email MTPRHelpdesk@conduent.com.](mailto:MTPRHelpdesk@conduent.com)

[Visit the Montana Healthcare Programs Provider Information website at https://medicaidprovider.mt.gov.](https://medicaidprovider.mt.gov)