

ForwardHealth Pharmacy Data Table

Diagnosis Restrictions

Note: Prescribers are required to indicate the diagnosis code or description on prescriptions for diagnosis-restricted drugs. If a diagnosis code is not indicated on the prescription, pharmacy providers should contact the prescriber to obtain the diagnosis code or description. *It is not acceptable for pharmacy providers to obtain the diagnosis code or description from the member.*

All diagnosis codes indicated on claims (and PA requests when applicable).

Preferred Diagnosis-Restricted Drugs

Pharmacy providers should submit the most specific ICD-9-CM diagnosis code on claims for preferred drugs.

Non-preferred Diagnosis-Restricted Drugs

Prescribers should indicate the most specific ICD-9-CM diagnosis code for non-preferred drugs on the Prior Authorization/Preferred Drug List (PA/PDL) Exemption Request.

Diagnosis Outside the Allowed Diagnoses

BadgerCare Plus Standard Plan, Medicaid, and Senior Care

If the prescriber writes a prescription with a diagnosis outside the ForwardHealth-allowed diagnoses for a drug, the prescriber is required to submit peer-reviewed medical literature to support the proven efficacy and safety of the requested use of the drug. Documentation of previous treatments and detailed reasons why other covered drug treatments were discontinued or not utilized are required. Medical records should be provided as necessary to support the PA request. This information should be documented on the PA/DGA in Section V (Clinical Information for Diagnosis-Restricted Drug Requests).

When completing the PA/DGA, prescribers should provide the diagnosis code and description, complete Section V, and use Section VIII (Additional Information), if needed. Prescribers are reminded to **provide a handwritten signature** and date on the form before submitting it to the pharmacy provider where the prescription will be filled. The pharmacy provider is required to complete a PA/RF before submitting the forms and supporting documentation to ForwardHealth. Prescribers should not submit PA forms to ForwardHealth.

As a reminder, prescribers and pharmacy providers are required to retain a completed copy of the PA form(s).

May 1, 2014

Therapeutic Class	Generic Name	Brand Name	Diagnosis Ranges	Description
<u>Analgesics, Narcotics Agonist-Antagonist. (Requires PA)</u> (Non-Covered Service for codes not listed)	Buprenorphine Buprenorphine/Naloxone	Subutex Suboxone Zubsolv	30400 --> 30403	Opioid Type Dependence
<u>Anticoagulants</u>	Apixaban	Eliquis	42734	Atrial Fibrillation
<u>Anticonvulsants</u>	Clobazam	Onfi	34510 34511	Generalized convulsive epilepsy without intractable epilepsy Generalized convulsive epilepsy with intractable epilepsy
<u>Antiemetics</u>	Ondansetron solution	Zofran	V441	Gastrostomy
	For members 0-3 years old		Or 78701 V5811	Nausea and Vomiting Encounter for antineoplastic chemotherapy
	For members 4 years old and up	Ondansetron solution	Zofran	V441

Therapeutic Class	Generic Name	Brand Name	Diagnosis Ranges	Description
<u>Antifungals, Oral</u>	Itraconazole	Onmel	1101	Dermatophytosis of nail (Onychomycosis) (Non-Covered Service for code not listed)
	Terbinafine	Lamisil Granules	1100	Dermatophytosis of scalp and beard
<u>Antiparkinson's Agents</u>	Pramipexole	Mirapex ER	3320	Paralysis Agitans-Parkinsonism or Parkinson's disease
	Ropinirole	Requip XL	3321	Secondary Parkinsonism
<u>Anti-Ulcer Agents</u> (Non-Covered Service for code not listed)	Misoprostol	Cytotec	E9356 53100 --> 53101 53110 --> 53111 53120 --> 53121 53130 --> 53131 53140 --> 53141 53150 --> 53151 53160 --> 53161 53170 --> 53171 53190 --> 53191 53200 --> 53201 53210 --> 53211 53220 --> 53221 53230 --> 53231 53240 --> 53241 53250 --> 53251 53260 --> 53261 53270 --> 53271 53290 --> 53291	NSAID induced gastric/duodenal ulcer Acute gastric ulcer with hemorrhage with/without obstruction Acute gastric ulcer with perforation with/without obstruction Acute gastric ulcer with hemorrhage and perforation with/without obstruction Acute gastric ulcer without hemorrhage or perforation with/without obstruction Chronic or unspecified gastric ulcer with hemorrhage with/without obstruction Chronic or unspecified gastric ulcer with perforation with/without obstruction Chronic or unspecified gastric ulcer with hemorrhage and perforation with/without obstruction Chronic gastric ulcer without hemorrhage or perforation with/without obstruction Gastric ulcer unspecified as acute or chronic without hemorrhage or perforation with/without obstruction Acute duodenal ulcer with hemorrhage with/without obstruction Acute duodenal ulcer with perforation with/without obstruction Acute duodenal ulcer with hemorrhage and perforation with/without obstruction Acute duodenal ulcer without hemorrhage or perforation with/without obstruction Chronic or unspecified duodenal ulcer with hemorrhage with/without obstruction Chronic or unspecified duodenal ulcer with perforation with/without obstruction Chronic or unspecified duodenal ulcer with hemorrhage and perforation with/without obstruction Chronic duodenal ulcer without hemorrhage or perforation with/without obstruction Duodenal ulcer unspecified as acute or chronic without hemorrhage or perforation with/without obstruction
<u>Antiviral Agents</u>	Cidofovir	Vistide	0785	Cytomegaloviral disease
<u>Central Nervous System Agents, Miscellaneous</u>	Riluzole	Rilutek	33520	Amyotrophic lateral sclerosis (ALS)
	Dextromethorphan/quinidine	Nuedexta	31081	Pseudobulbar affect
<u>COPD Agents</u>	Roflumilast	Daliresp	4910 4911 49120 49121 49122 4918 4919 496	Simple chronic bronchitis Mucopurulent chronic bronchitis Obstructive chronic bronchitis without exacerbation Obstructive chronic bronchitis with (acute) exacerbation Obstructive chronic bronchitis with acute bronchitis Other chronic bronchitis Unspecified chronic bronchitis Chronic airway obstruction not elsewhere classified

Therapeutic Class	Generic Name	Brand Name	Diagnosis Ranges	Description
<u>Endocrine Agents/Enzymes</u>	Miglustat	Zavesca	2727	Gaucher's Disease
<u>Gamma Aminobutyric Acid Class</u>	Gabapentin	Horizant (only)	33394	Restless Legs Syndrom (RLS)
	Gabapentin	Gralise (only)	05319	Herpes Zoster with Other Nervous System Complications
05319			Herpes Zoster with Other Nervous System Complications	
(Non-Covered Service for codes not listed)				
<u>Hypoglycemics, GLP 1 (Requires PA) (Non-Covered Service for codes not listed)</u>	Exenatide	Bydureon	25000	Diabetes uncomplicated Type II
		Byetta	25002	Diabetes uncomplicated Type II uncontrolled
<u>Hypoglycemic Symlin (Requires PA regardless of Dx)</u>	Liraglutide	Victoza		
	Pramlintide	Symlin	25000	Diabetes uncomplicated Type II
25001			Diabetes Uncomplicated Type I	
25002			Diabetes uncomplicated Type II uncontrolled	
25003			Diabetes uncomplicated Type I uncontrolled	
Leptin Hormone Analog	Metreleptin	Myalept	2726	Lipodystrophy
<u>Lipdystrophy (Non-Covered Service for diagnosis code not listed)</u>	Tesamorelin	Egrifta	042	HIV Disease
			2726	Lipodystrophy
			or	
			07953	Human Immunodeficiency Virus Type 2 [HIV-2]
			2726	Lipodystrophy
<u>Multiple Sclerosis Agents, Other</u>	Dalfampridine	Ampyra	340	Multiple sclerosis
	Clinical PA required. Submit the PA/RF and PA/DGA with supporting clinical documentation.			
<u>Oncology Agents, Oral</u>	Cabozantinib	Cometriq	193	Malignant Neoplasm of thyroid
	Pomalidomide	Pomalyst	20300 20302	Multiple Myeloma without mention of having achieved remission Multiple Myeloma in relapse
<u>Progestin Agent (Requires PA)</u>	Progesterone, micronized gel	Crinone		
<u>Pulmonary Anti-Hypertensive Agents</u>	Sildenafil	Revatio	4160	Primary pulmonary hypertension
	Tadalafil	Adcirca	4168	Chronic pulmonary heart disease other
<u>Smoking Cessation</u>	Bupropion	Zyban	3051	Tobacco use disorder
	Nicotine	Nicoderm		
		Nicorette		
		Nicotrol		
	Varenicline Tartrate	Chantix		

Therapeutic Class	Generic Name	Brand Name	Diagnosis Ranges	Description
Stimulants and Related Agents	Amphetamine Salts	Adderall	31400 - 3149	Hyperkinetic syndrome/Attention deficit disorder of childhood
		Adderall XR	34700	Narcolepsy without cataplexy
	Dexmethylphenidate	Focalin	34701	Narcolepsy with cataplexy
		Focalin XR	34710	Narcolepsy in conditions classified elsewhere without cataplexy
	Dextroamphetamine	Dexedrine Spansule	34711	Narcolepsy in conditions classified elsewhere with cataplexy
		Dextroamphetamine		
		Procentra		
	Lisdexamfetamine	Vyvanse		
	Methamphetamine	Desoxyn		
	Methylphenidate	Quillivant XR		
		Concerta ER		
		Daytrana		
		Metadate CD		
Metadate ER				
Methylin				
Methylin ER				
Stimulants and Related Agents (cont)		Ritalin		
		Ritalin LA		
		Ritalin SR		
Stimulants and Related Agents (cont)	Atomoxetine	Strattera	31400 - 3149	Hyperkinetic syndrome/Attention deficit disorder of childhood
	Sodium oxybate*	Xyrem*	34700	Narcolepsy without Cataplexy
	*Clinical PA required. Submit the PA/RF and PA/DGA with supporting clinical documentation.		34701	Narcolepsy with cataplexy
Topical, Anti-Infectives	Retapamulin	Altabax	684	Impetigo
Vitamins (Non-Covered Service for codes not listed)	Prenatal		V22 --> V222	Normal pregnancy
			V23 --> V239	High risk pregnancy
			V241	Lactating
	Renal Care	Dialyvite	28521	Anemia in end-stage renal disease
		Diatx	585 --> 5859	Chronic Kidney Disease
		Diatx FE	588 --> 588	Disorders resulting from impaired renal function
		Folbee	5889 --> 5889	Unspecified disorder resulting from impaired renal function
		Nephro-Vite		
		Nephro-Vite +FE		
		Renax		
Renax 5.5				
Renax 5.6				
Renax 5.7				
Renax 5.8				