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 pharmcy providers are required to retain a completed copy of the PA form(s).

				June 1, 201
Therapeutic Class	Generic Name	Brand Name	Diagnosis Ranges	Description
Analgesics, Narcotics				
Agonist-Antagonist.				
(Requires PA)	Buprenorphine	Subutex	30400> 30403	Opioid Type Dependence
	Buprenorphine/Naloxone	Bunavail (7/1/2014)		
		Suboxone		
(Non-Covered Service		Zubsolv		
for codes not listed)				
<u>Anticonvulsants</u>	Clobazam	Onfi	34510	Generalized convulsive epilepsy without intractable epilepsy
			34511	Generalized convulsive epilepsy with intractable epilepsy
<u>Antiemetics</u>	Ondansetron solution	Zofran	V441	Gastrostomy
	For members 0-3 years old		Or	
			78701 Both	Nausea and Vomiting
			V5811	Encounter for antineoplastic chemotherapy
	Ondansetron solution	Zofran	V441	Gastrostomy
	For members 4 years old and up			

				June 1, 2015
Therapeutic Class	Generic Name	Brand Name	Diagnosis Ranges	Description
Antifungals, Oral	Itraconazole	Onmel	1101	Dermatophytosis of nail (Onychomycosis)
				(Non-Covered Service for code not listed)
	Terbinafine	Lamisil Granules	1100	Dermatophytosis of scalp and beard
Antiparkinson's Agents	Pramipexole er	Mirapex ER	3320	Paralysis Agitans-Parkinsonism or Parkinson's disease
	Ropinirole er	Requip XL	3321	Secondary Parkinsonism
Antiviral Agents	Cidofovir	Vistide	0785	Cytomegaloviral disease
Central Nervous System	Riluzole	Rilutek	33520	Amyotrophic lateral sclerosis (ALS)
Agents, Miscellaneous				
	Dextromethorphan/quinidine	Nuedexta	31081	Pseudobulbar affect
COPD Agents	Roflumilast	Daliresp	4910	Simple chronic bronchitis
			4911	Mucopurulent chronic bronchitis
			49120	Obstructive chronic bronchitis without exacerbation
			49121	Obstructive chronic bronchitis with (acute) exacerbation
			49122	Obstructive chronic bronchitis with acute bronchitis
			4918	Other chronic bronchitis
			4919	Unspecified chronic bronchitis
			496	Chronic airway obstruction not elsewhere classified
Endocrine	Eliglustat	Cerdelga	2727	Gaucher's Disease
Agents/Enzymes	Miglustat	Zavesca		
Gamma Aminobutyric	Gabapentin	Horizant (only)	33394	Restless Legs Syndrom (RLS)
Acid Class	,	· ,,		
			05319	Herpes Zoster with Other Nervous System Complications
	Gabapentin	Gralise (only)	05319	Herpes Zoster with Other Nervous System Complications
(Non-Covered Service		(-),		
for codes not listed)				
Hypoglycemic Symlin	Pramlintide	Symlin	25000	Diabetes uncomplicated Type II
(Requires PA regardless		-,	25001	Diabetes Uncomplicated Type I
(71
of Dx)			25002	Diabetes uncomplicated Type II uncontrolled
•			25003	Diabetes uncomplicated Type I uncontrolled
Leptin Hormone Analog	Metreleptin	Myalept	2726	Lipodystrophy
Lipdystrophy	Tesamorelin	Egrifta		
(Non-Covered Service	Two diagnosis codes are re	3	042	HIV Disease
for diagnosis code not	on claim-Member must have	•	2726	Lipodystrophy
listed)	diagnosis of HIV Disease or		or	
iisteu <i>)</i>	HIV-2 Disease plus Lipodystrophy		07953	Human Immunodeficiency Virus Type 2 [HIV-2]
	in 2 Diocaso piae Lipeaye	0 ,	2726	Lipodystrophy
Lipotropics, Other	Lomitapide	Juxtapid	2720	Pure hypercholesterolemia
	Mipomersen	Kynamro	12.20	1 are ripportational and ripportation an
Narcotic Antagonists	Naltrexone	Revia	30390 - 30393	Other and unspecified alcohol dependence
Narcolic Afflagonists	Tallio Aorio	Vivitrol	30400 - 30403	Opioid type dependence
		Added End Range	30500 - 30503	Nondependent alcohol abuse unspecified drinking behavior
		Adda Ena Mango		· · · · · · · · · · · · · · · · · · ·
			30550 - 30553	Nondependent opioid abuse

				June 1, 201
Therapeutic Class	Generic Name	Brand Name	Diagnosis Ranges	Description
Pulmonary Anti-	Sildenafil	Revatio	4160	Primary pulmonary hypertension
Hypertensive Agents	Tadalafil	Adcirca	4168	Chronic pulmonary heart disease other
Smoking Cessation	Bupropion	Zyban	3051	Tobacco use disorder
	Nicotine	Nicoderm		
		Nicorette		
		Nicotrol		
	Varenicline Tartrate	Chantix		
Stimulants and Related	Amphetamine	Evekeo	31400 - 3149	Hyperkinetic syndrome/Attention deficit disorder of childhood
<u>Agents</u>	Amphetamine Salts	Adderall	34700	Narcolepsy without cataplexy
		Adderall XR	34701	Narcolepsy with cataplexy
	Dexmethylphenidate	Focalin	34710	Narcolepsy in conditions classified elsewhere without cataplexy
		Focalin XR	34711	Narcolepsy in conditions classified elsewhere with cataplexy
	Dextroamphetamine	Dexedrine Spansule		
		Dextroamphetamine		
		Procentra		
	Lisdexamfetamine	Vyvanse		
	Methamphetamine	Desoxyn		
		Quillivant XR		
	Methylphenidate	Aptensio XR		
		Concerta ER		
		Daytrana		
		Metadate CD		
		Metadate ER		
		Methylin		
		Methylin ER		
		Ritalin		
		Ritalin LA		
		Ritalin SR		
	Atomoxetine	Strattera	31400 - 3149	Hyperkinetic syndrome/Attention deficit disorder of childhood
Topical, Anti-Infectives	Retapamulin	Altabax	684	Impetigo
<u>Vitamins</u>	Renal Care	Dialyvite	28521	Anemia in end-stage renal disease
(Non-Covered Service		Diatx	585> 5859	Chronic Kidney Disease
for codes not listed)		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		