

FERRIPROX PA SUMMARY

STATUS: Non-Preferred

LENGTH OF AUTHORIZATION: 3 months

PA CRITERIA:

- ❖ Approvable for transfusional iron overload due to thalassemia syndromes who have tried and failed another chelating agent
- ❖ Faxed documentation of serum ferritin level and absolute neutrophil count (ANC) will be required prior to approval and for renewal requests.

EXCEPTIONS:

- ❖ Exceptions to these conditions of coverage are considered through the prior authorization process.
- ❖ The Prior Authorization process may be initiated by calling **SXC Health Solutions at 1-866-525-5827**.

PA and APPEAL PROCESS:

- ❖ For online access to the PA process please go to www.mmis.georgia.gov/portal, highlight the pharmacy link on the top right side of the page, and click on “prior approval process”.

QUANTITY LEVEL LIMITATIONS:

- ❖ For online access to the current Quantity Level Limits please go to www.mmis.georgia.gov/portal, highlight Provider Information and click on Provider Manuals. Scroll to the page with Pharmacy Services Part II and select that manual.