

PLAN B ONE-STEP PA SUMMARY

PREFERRED	Next Choice generic, Plan B
NON-PREFERRED	Ella, Plan B One-Step

LENGTH OF AUTHORIZATION: One time only

PA CRITERIA:

Criteria for ella

- ❖ If time since unprotected sexual intercourse or known or suspected contraceptive failure is 72-120 hours, request will be approved.
- ❖ If time is less than 72 hours, physician should submit documentation of allergies, contraindications, drug-drug interactions, or show a history of intolerable side effects to Next Choice or Plan B.

Criteria for Plan B One-Step

- ❖ Approvable for members 17 years of age or younger

AND

- ❖ Time since unprotected sexual intercourse or known or suspected contraceptive failure must be 72 hours or less

AND

- ❖ Submit documentation of allergies, contraindications, drug-drug interactions, or show a history of intolerable side effects to the inactive ingredients in Next Choice or Plan B.

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 Limit 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.