



# Louisiana Health Access Program (LA HAP) For Uninsured LA HAP Members Prior Authorization for Hepatitis C Treatment Regimens

RAMSELL TELEPHONE: 1-888-311-7632 RAMSELL FAX: 1-800-848-4241

### **APPLICATION INFORMATION**

Ramsell is the contracted PBM service provider for Louisiana Health Access Program (LA HAP). Requests for prior authorization of Hepatitis C therapy in uninsured clients will be reviewed for the appropriateness of treatment by Clinical Pharmacists in the Ramsell Clinical Department.

Please complete the attached supplemental Prior Authorization Form for Hepatitis C Treatment Regimens and fax it to Ramsell Corporation at **1-800-848-4241**.

The request must include all supporting lab results and chart documentation for approval.

Questions should be directed to Ramsell's Helpdesk at 1-888-311-7632. A response will be provided to the pharmacy or prescriber within 24-48 business hours.

## **FINANCIAL ELIGIBILITY**

Patients must have current, non-temporary eligibility for the Louisiana Health Access Program for uninsured patients. They must maintain program coverage throughout the course of Hepatitis C treatment.

<u>Treatment Approval</u>: Authorization to receive Hepatitis C treatments is dependent upon the genotype, Hepatitis C viral load, prior treatment regimens, and a history of advanced liver disease (cirrhosis).

<u>Limits</u>: Treatment for Hepatitis C regimens are limited by program funding. Approval of this application is dependent on the availability of LA HAP funding.

<u>Approval notification</u>: Pharmacies will be notified of the approval decision via fax within 24 - 48 business hours. Denied claims will be required to provide additional documentation for review.

### CLINICAL SCREENING

All supporting laboratory results and chart notes are <b>REQUIR</b>
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Hepatitis C Genotype
Baseline Hepatitis C RNA viral load (within the last 12 months)
Prior treatment regimens
History of Advanced liver disease (cirrhosis)





<u>Additional information:</u> For the latest Hepatitis C treatment recommendations, consult the American Association for the Study of Liver Diseases (AASLD)/Infectious Diseases Society of America (IDSA) Hepatitis C Treatment Guidelines at <a href="https://www.hcvguidelines.org">www.hcvguidelines.org</a>.

## **Link to Pharmacy Locator**

Pharmacy Name	Pharmacy Address	City	State	Zip Code	Phone Number	Fax Number
LALLIE KEMP HOSPITAL <sup>1</sup>	52579 HWY 51 SOUTH	INDEPENDENCE	LA	70443	985-878-1317	985-878-1548
UNIVERSITY HOSPITAL & CLINICS OUTPATIENT PHARMACY <sup>1</sup>	2390 WEST CONGRESS ST	LAFAYETTE	LA	70506	337-266-4869	337-261-6263
MOSS MEMORIAL CLINIC PHARMACY	1000 WALTERS	LAKE CHARLES	LA	70607	337-480-8085	337-480-8216
AVITA DRUGS, LLC DBA AVITA PHARMACY (#2) 1040*	5551 CORPORATE BLVD, SUITE 102	BATON ROUGE	LA	70808	225-924-1930	225-924-2620
WINN DIXIE #1577	13002 COURSEY BLVD.	BATON ROUGE	LA	70816	225-756-7110	225-756-7109
RELIANT HEALTHCARE*	1004 NORTH 19 <sup>TH</sup> STREET	MONROE	LA	71201	318-322-8326	318-322-0998
AVITA DRUGS LLC DBA AVITA PHARMACY 1039*	1631 ELYSIAN FIELDS AVE., STE 200	NEW ORLEANS	LA	70117	504-620-0670	877-226-9742
AVITA DRUG, LLC DBA AVITA (#1) PHARMACY 1037*	2601 TULANE AVE. STE. 445	NEW ORLEANS	LA	70119	504-822-8013	504-822-8141
AVITA DRUG, LLC DBA AVITA PHARMACY 1038* Crescent Care	3308 TULANE AVE. STE 102	NEW ORLEANS	LA	70119	504-309-2557	225-663-2158
KINGS PHARMACY (PARISH PHARMACY DBA KINGS PHARMACY)	3102 LINWOOD AVE.	SHREVEPORT	LA	71103	318-635-8159	318-631-7688

<sup>1 =</sup> Pharmacy only able to service patients of the facility's hospital clinics for LA HAP

<sup>\* =</sup> Pharmacy provides mail service