

Prior authorization requirements for Cabazitaxel (Jevtana)

Effective September 1, 2018, prior authorization (PA) requirements will change for injectable drug Cabazitaxel (Jevtana) to be covered by UniCare Health Plan of West Virginia, Inc. Federal and state law, as well as state contract language and Centers for Medicare & Medicaid Services guidelines, including definitions and specific contract provisions/exclusions take precedence over these PA rules and must be considered first when determining coverage. **Noncompliance with new requirements may result in denied claims.**

PA requirements will be added to the following:

- Cabazitaxel (Jevtana) — injection, 1 mg (J9043)

To request PA, you may use one of the following methods:

- **Pharmacy Fax: 1-844-487-9290**
- **Pharmacy Phone: 1-877-375-6182**

Not all PA requirements are listed here. Detailed PA requirements are available to contracted and noncontracted providers on our provider website (www.unicare.com > Providers > State Sponsored Plan providers > West Virginia - Medicaid Managed Care > Authorization and Preservice Review > **Precertification Look UP Tool [PLUTO]**). Providers may also call us at **1-866-655-7423** for PA requirements.