

**An Important Message from
The Texas Health and Human Services Commission (HHSC)**

Correction to Synagis Standard Prior Authorization Addendum Form

Background:

HHSC will modify a section of the Synagis Standard Prior Authorization Addendum for Medicaid (HHS Form 1321) and clarify instructions for subsequent dosing.

Key Details:

HHSC modified Section III. Step 12-4 of the Standard Prior Authorization Addendum for Medicaid (HHS Form 1321) to match the previous version which did not require consultation from a pediatric cardiologist when selecting cyanotic heart disease. Additionally, the language in the instructions for subsequent dosing will be modified. For details, please refer to the attachment.

The Synagis clinical prior authorization criteria and policies are mandatory for managed care organizations (MCOs). As a reminder, MCOs must incorporate the subsequent dosing changes into the [Synagis clinical prior authorization](#) criteria with the start of the 2022 Fall/Winter traditional RSV season. HHSC bases prior authorization effective dates on the patient's county of residence at the start of the season.