

# Specialty pharmacy programs - medical benefit

## Frequently asked questions

### Overview

This document can be used to help answer frequently asked questions related to UnitedHealthcare's specialty pharmacy programs for drugs covered under the medical benefit for commercial plans – including:

- Review at Launch
- Notification and Prior Authorization
- Site of Care
- Preferred Product
- Medical Benefit Therapeutic Equivalent Medications – Excluded Drugs Policy
- Medication Sourcing

### Review at Launch

#### What is Review at Launch?

The Review at Launch (RAL) program for the medical benefit allows UnitedHealthcare to proactively respond to new drug launches, while minimizing member disruption. The program helps ensure coverage for clinically appropriate medications, while enabling providers to better serve patients as new therapies become available.

Exclude at Launch (EAL) builds on RAL – by excluding drugs on the RAL medication list from coverage until clinical criteria are fully developed and implemented and other strategies are evaluated. This process generally takes up to 6 months and allows us to develop comprehensive clinical management strategies prior to covering the drug.

#### What does it mean if a drug is on the RAL medication list?

If providers wish to prescribe medications on the RAL medication list, UnitedHealthcare encourages pre-determination reviews. Coverage reviews take into consideration the terms of the benefit plan, FDA-approved labeling, available clinical evidence, and applicable medical drug policy (if available).

#### What if a provider does not request a pre-determination review?

Submitted claims are reviewed against the medical drug policy. They could be denied if services are not consistent with clinical guidelines or if the member's benefit plan does not allow for coverage.

#### What medications are on the RAL drug list?

The RAL drug list is posted at [UHCprovider.com](https://UHCprovider.com) > Resources > Plans, policies, protocols and guides > For Commercial Plans > Medical & Drug Policies and Coverage Determination Guidelines for UnitedHealthcare Commercial Plans > Review at Launch for New to Market Medications – Commercial Medical Benefit Drug Policy.



# Notification and Prior Authorization

## What is Notification and Prior Authorization?

United Healthcare requires notification or prior authorization for certain specialty drugs to help ensure our members have coverage for medically appropriate care. Coverage review requirements and effective dates vary by plan and are announced in the Network News Brief and/or via letters to providers.

To view what drugs and services require notification or prior authorization for a specific plan, go to [UHCprovider.com/priorauth](https://UHCprovider.com/priorauth). Login and click Plan Requirements for Advance Notification/Prior Authorization.

## Where can I view the coverage policies for a specific medication?

To view the coverage policy for a specific medication, go to [UHCprovider.com/policies](https://UHCprovider.com/policies) > For Commercial Plans > Medical & Drug Policies and Coverage Determination Guidelines for UnitedHealthcare Commercial Plans.

## How does the notification or prior authorization process work for specialty drugs?

When we receive notification for the drug, we'll determine if the member's benefit plan includes coverage for it and whether the plan requires covered services to be medically necessary. If so, we'll conduct a clinical coverage review as part of our prior authorization process.

Clinical coverage reviews evaluate whether the drug is appropriate for the individual member, considering:

- The terms of the member's benefit plan
- Our drug coverage policy
- Applicable state and federal regulatory requirements

Additional criteria may also be considered. We encourage you to submit any information you would like to be reviewed as part of your prior authorization request.

## How can I submit a notification or prior authorization request for these drugs?

You have 2 options for requesting pre-service coverage reviews and submitting prior authorization and notification requests:

- Online: Use the Prior Authorization and Notification tool on the UnitedHealthcare Provider Portal at [UHCprovider.com/paan](https://UHCprovider.com/paan)
- Phone: Call the Optum Intake Team at 888-397-8129

## Can I appeal an adverse determination?

Once a coverage determination is made, we'll inform you and the member of the decision. If an adverse determination is made, we'll provide appeal information in the determination notice.

# Site of Care

## What is Site of Care?

We're focused on achieving better health outcomes and lowering the cost of care. To continue this important work, we evaluate the site of care for the administration of certain specialty drugs and whether the patient needs more intensive services or can be moved to a lower-cost alternate site of care.

Under the medical benefit, certain specialty drugs may not need to be monitored at an outpatient hospital level. For those drugs, we require you to use an alternative site of care. By changing to an alternative location, providers can help our members receive effective and convenient care, while also lowering costs.



## How does Site of Care work?

During the prior authorization process, we review the clinical evidence submitted by the physician and consider the member's specific condition.

If, after reviewing the clinical data and medical necessity criteria, we determine that the patient's drug doesn't need to be monitored in an outpatient hospital setting, we'll require the provider to change to an alternate site of care for the medication to be covered. The alternate site of care will be a participating infusion provider (home infusions), physician office or freestanding infusion center, in place of the higher-cost location, such as an outpatient facility.

Members may be eligible for a grace period as they transition to an alternate site of care.

The Site of Care drug policy is posted at [UHCprovider.com > Resources > Plans, policies, protocols and guides > For Commercial Plans > Medical & Drug Policies and Coverage Determination Guidelines for UnitedHealthcare Commercial Plans > Provider Administered Drugs – Site of Care – Commercial Utilization Review Guideline](#).

## Preferred Product

### What is a preferred product?

We're committed to providing our members with access to high-quality products at the lowest possible costs. In some cases, we ask you to prescribe lower cost options when there are multiple drugs used to treat the same condition. As part of the prior authorization or notification review, we'll require documentation to support the clinical requirement that members must try the preferred drug(s) and fail the maximum tolerated dosage, experience an adverse reaction, or have a contraindication to receive coverage approval for the non-preferred drugs.

Our preferred product strategies are part of our Prior Authorization/Medical Necessity programs.

### Which drugs require providers to prescribe a preferred product?

You can find the preferred product strategies by searching for the individual drug policies at [UHCprovider.com > Resources > Plans, policies, protocols and guides > For Commercial Plans > Medical & Drug Policies and Coverage Determination Guidelines for UnitedHealthcare Commercial Plans](#).

For more information related to biosimilars and clinical programs, visit [UHCprovider.com > Resources > Drug lists and pharmacy > Specialty Pharmacy Program > Specialty Pharmacy – Medical Benefit Management \(Provider Administered Drugs\) > FAQ Addendum: Biosimilars](#).

## Medical benefit therapeutic equivalent medications – excluded drugs policy

### What is the Medical Benefit Therapeutic Equivalent Medications – Excluded Drugs Policy?

The Medical Benefit Therapeutic Equivalent Medications – Excluded Drugs Policy is a long-term exclusion program for certain targeted medical benefit medications administered by a health care professional. All excluded medications have a therapeutically equivalent alternative option available for coverage. Therapeutically equivalent is defined as drug medications or products that have essentially the same efficacy and adverse effect profile. This determination is made by the UnitedHealthcare Pharmacy & Therapeutics (P&T) Committee.



## What drugs are included in the Medical Benefit Therapeutic Equivalent Medications – Excluded Drugs Policy?

The Medical Benefit Therapeutic Equivalent Medications – Excluded Drugs Policy drug list and FAQ is available at [UHCprovider.com](https://UHCprovider.com) > Resources > Drug lists and pharmacy > Specialty Pharmacy Program > Specialty Pharmacy - Medical Benefit Management (Provider Administered Drugs) > Medical Benefit Therapeutic Equivalent Medications – Excluded Drugs.

## Medication sourcing

### What is medication sourcing?

Medication sourcing, otherwise known as white bagging, requires the provider (physician or facility) administering/infusing the medication to obtain it from a participating specialty pharmacy and the patient visits the physician's office or infusion facility for administration.

### How does medication sourcing work?

When the specialty drug is obtained through the participating specialty pharmacy, the pharmacy will bill UnitedHealthcare directly for the drug under the member's medical benefit. Providers can only seek reimbursement from UnitedHealthcare for administration of the drug and not for the drug itself and can't seek any reimbursement from the member for the drug.

For additional information on medication sourcing, visit [UHCprovider.com](https://UHCprovider.com) > Resources > Drug lists and pharmacy > Specialty Pharmacy – Medical Benefit Management (Provider Administered Drugs) > Medication Sourcing.

### Questions?

If you have questions, please call the Provider Services number on the member's ID card.

For additional information, please visit our Specialty Pharmacy – Medical Benefit Management site at [UHCprovider.com](https://UHCprovider.com) > Resources > Drug lists and pharmacy > Specialty Pharmacy – Medical Benefit Management (Provider Administered Drugs).

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