



**GEORGIA MEDICAID FEE-FOR-SERVICE
ANTIMYCOBACTERIUM AGENTS PA SUMMARY**

Preferred	Non-Preferred
Cycloserine generic Ethambutol generic Isoniazid generic Pretomanid (pretomanid)* Priftin (rifapentine) Pyrazinamide generic Rifabutin generic Rifamate (isoniazid/rifampin) Rifampin generic Rifater (isoniazid/rifampin/pyrazinamide) Sirturo (bedaquiline)* Treacator (ethionamide)	n/a

*preferred but requires PA

LENGTH OF AUTHORIZATION: Varies

NOTE: Pretomanid and Sirturo are preferred but require prior authorization (PA).

PA CRITERIA:

Pretomanid

- ❖ Approvable for members 18 years of age and older with a diagnosis of active, pulmonary extensively drug resistant (XDR) or treatment intolerant or multidrug resistant (MDR) tuberculosis (TB) who are resistant to isoniazid and rifampin or Rifamate or Rifater.
- ❖ Must be used in combination with bedaquiline (Sirturo) and linezolid and therapy must be administered under directly-observed therapy (DOT) by a healthcare professional.

Sirturo

- ❖ Approvable for members 5 years of age and older who weigh 15 kilograms or more with a diagnosis of active, pulmonary multidrug resistant tuberculosis (MDR-TB) who are resistant to isoniazid and rifampin or Rifamate or Rifater.
- ❖ Must be used in combination with other therapy for MDR-TB and must be administered under directly-observed therapy (DOT).
- ❖ In addition for the 20 mg strength, member must be unable to swallow solid oral dosage formulations.

EXCEPTIONS:

- ❖ Exceptions to these conditions of coverage are considered through the prior authorization process.
- ❖ The Prior Authorization process may be initiated by calling **OptumRx at 1-866-525-5827**.



PREFERRED DRUG LIST:

- ❖ For online access to the Preferred Drug List (PDL), please go to <http://dch.georgia.gov/preferred-drug-lists>.

PA and APPEAL PROCESS:

- ❖ For online access to the PA process, please go to www.dch.georgia.gov/prior-authorization-process-and-criteria and click on Prior Authorization (PA) Request Process Guide.

QUANTITY LEVEL LIMITATIONS:

- ❖ For online access to the current Quantity Level Limits (QLL), please go to www.mmis.georgia.gov/portal, highlight Provider Information and click on Provider Manuals. Scroll to the page with Pharmacy Services and select that manual.