



**GEORGIA MEDICAID-FEE-FOR-SERVICE  
AUGMENTIN PRODUCTS PA SUMMARY**

<b>Preferred</b>	<b>Non-Preferred</b>
Amoxicillin/clavulanate IR tablets and suspension generics unless otherwise listed	Amoxicillin/clavulanate chewable tablets generic Amoxicillin/clavulanate 250/125 mg IR tablets generic Amoxicillin/clavulanate ER tablets generic Amoxicillin/clavulanate 250-62.5 mg/5 ml suspension generic (amoxicillin/clavulanate) Augmentin Suspension 125-31.25 mg/5 ml (amoxicillin/clavulanate)

IR=immediate-release; ER=extended-release

**LENGTH OF AUTHORIZATION:** 1 Month

**PA CRITERIA:**

*Amoxicillin/clavulanate chewable tablets generic and Amoxicillin/Clavulanate 250-125mg IR Tablets Generic*

- ❖ Prescriber must submit a written letter of medical necessity stating the reasons the preferred strengths of preferred strengths of generic amoxicillin/clavulanate immediate-release tablets and suspension are not appropriate for the member.

*Amoxicillin/Clavulanate ER Tablets Generic*

- ❖ Prescriber must submit a written letter of medical necessity stating the reasons the preferred strengths of generic amoxicillin/clavulanate IR tablets are not appropriate for the member.

*Amoxicillin/Clavulanate Suspension 250-62.5mg/5ml Generic and Augmentin Suspension 125-31.25 mg/5 mL*

- ❖ Prescriber must submit a written letter of medical necessity stating the reasons the preferred strengths of generic amoxicillin/clavulanate suspension are not appropriate for the member.

**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](http://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](http://www.mmis.georgia.gov/portal), highlight Provider Information and click on Provider Manuals. Scroll to the page with Pharmacy Services and select that manual.