

LOVAZA PA SUMMARY

STATUS: Non-Preferred

LENGTH OF AUTHORIZATION: 1 year

PA CRITERIA:

- ❖ Approvable for the diagnosis of hypertriglyceridemia in transplant patients or in members who are unable to take fibric acid derivatives and niacin. Providers need to be prepared to submit documentation of:
 - triglyceride levels and
 - For non-transplant patients, submit documentation of allergies, contraindications, drug-drug interactions, or show a history of intolerable side effects to a fibric acid product and a prescription niacin product.

EXCEPTIONS:

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

PA and Appeal Process:

- ❖ For online access to the PA process please go to www.mmis.georgia.gov/portal, highlight the pharmacy link on the top right side of the page, and click on “prior approval process”.

Quantity Level Limitations:

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