

Physician Administered Drug List Review Request Form

The Physician Administered Drug List is comprised of FDA approved drugs that are to be administered in physicians' offices or outpatient facilities by doctors or eligible staff. The drugs must be reasonable, necessary, and indicated for the diagnoses, or effective treatments of specific illnesses or injuries based on accepted standards of medical practice. All other program plan coverage and limitations still apply. For specific program and plan coverage information please refer to the Utah Medicaid Look up tool at: <https://health.utah.gov/stplan/lookup/CoverageLookup.php>.

The Physician Administered Drug List can be found on the Utah Medicaid website at: <https://medicaid.utah.gov/pharmacy/resource-library>. The request to consider coverage of additional drugs or changes to existing injectable drugs will be completed in the order received.

Provider Information	
* indicates required field	
*Requesting Provider Name:	*NPI:
*Address:	
*Contact Person:	*Phone #:
*Fax #:	Email:
Request	
Request consideration to: <input type="checkbox"/> Open new injectable drug <input type="checkbox"/> Change/Add new indication(s) to already approved drug	
Chemical Name:	Brand Name:
HCPCS/CPT Code(s):	Units per dose:
NDC(s):	AWP per Unit:
Does the manufacturer offer rebates on this drug currently? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Approved Indication:	Applicable ICD-10 Code(s):
FDA Approval Date:	If not, FDA approved, date the application was submitted?
Is there a specific Medicaid eligible patient pending this determination? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Briefly summarize your request in the space provided below and attach any supporting documentation you wish to be considered:	

Submit completed request electronically by faxing to 855-828-4992 or via email medicaidpharmacy@utah.gov