

PROVIDER MEMO

To: Santa Clara Family Health Plan Providers

From: Utilization Management

Date: December 30, 2022

Subject: 2023 Medical Benefit Drug Prior Authorization Grid

Dear Providers,

Please see attached for Santa Clara Family Health Plan's (SCFHP) Medical Benefit Drug Prior Authorization Grid for Medi-Cal and DualConnect lines of business, **effective January 1, 2023**.

The Medical Benefit Drug Prior Authorization Grid indicates drugs that require prior authorization to determine medical benefit coverage for all SCFHP members, except members delegated to Valley Health Plan or Kaiser. This grid does not reflect or apply to members' pharmacy benefit. This grid is reviewed and approved by SCFHP's Pharmacy and Therapeutics Committee.

SCFHP uses clinical guidelines and nationally recognized compendia, including CMS Noridian National/Local Coverage Determination (NCD/LCD) policies, MCG, Medi-Cal Provider Manual, and National Comprehensive Cancer Network (NCCN) treatment guidelines for coverage determination as appropriate.

The 2023 Medical Benefit Drug Prior Authorization Grid is also available on the SCFHP Provider Forms & Documents webpage at www.scfhp.com/for-providers/forms.

If you have any questions regarding this information, please contact the SCFHP Utilization Management department at 1-408-874-1821.

Thank you for your continued partnership in providing care to SCFHP members.

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